ANNUAL REPORT

Jul-2021 to Jun-2022

MERF

Cat-D Hospital Ghiljo, Orakzai

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

Medical Emergency Resilience Foundation (MERF)

www.merf-pakistan.org

Table of Contents

1.		Executive Summary	2				
2.		Summary of HMIS Data	3				
3.		Service Delivery Data Analysis	4				
	a)	Accident and Emergency (A&E) Unit	4				
	b)	OPD Consultations	4				
	c)	Indoor Patient Services	5				
	d)	Maternal and Neonatal Child Health Services (MNCH)	6				
	e)	Neonatal Unit	6				
	f)	Immunization	7				
	g) Surgical Services						
	h) Dental Services						
	i)	Diagnostic Services (Lab & X-Rays)	8				
	j)	Ultrasound services	9				
	k)	Electrocardiography (ECG)	9				
	I)	COVID-19 Services1	0				
	m) Vertical Programs1	.0				
4.		Pharmacy1	.0				
5.		Infection Prevention (IP) & Healthcare Waste Management (HCWM)1	.1				
6.		Monitoring and Evaluation1	.1				
7.		Trainings and Assessments1	.2				
8.		External Monitoring and Visits1	.3				
9.		Human Resource Recruitment and Deployment					
10. Problems Encountered and Actions Taken							
11	L.	Progress Report against Key Performance Indicators1	.6				



1. Executive Summary

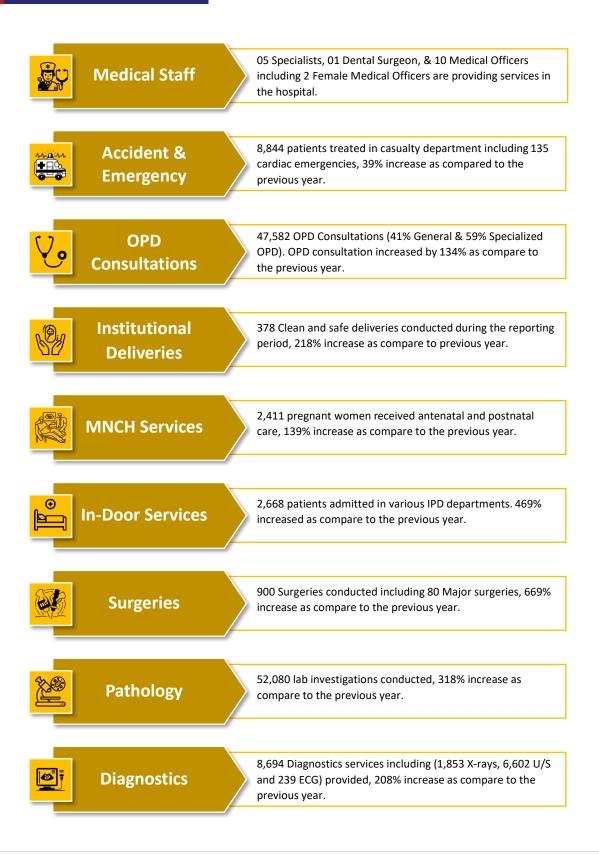
The Government of KP under its initiative to provide quality healthcare services to the public under its health policy has engaged private sector organizations in health service delivery through KP Health Foundation (HF) on Public Private Partnership Model. The KP-HF is mandated to promote and enable 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, Ghiljo 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.

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, 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, 56,426 OPDconsultations were done in various departments of the hospital. All the targets against the Key Performance indicators have been achieved, details of which have been provided in section 2. Supportive Units like Pharmacy, Laboratory, Diagnostic, Blood bank and HCWM were fully functional in the hospital.

2. Summary of HMIS Data





Service Delivery Data Analysis 3.

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 Ghiljo, to a significant level as compared to the established baseline.

a) Accident and Emergency (A&E) Unit

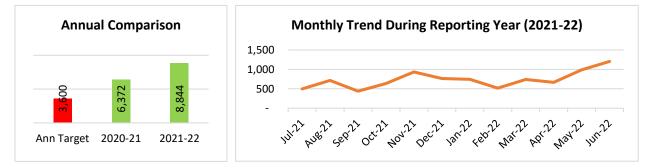
Fully equipped Accident and Emergency unit continued to provide round the clock services and managed 8,844 cases under the supervision and management of qualified and trained staff. A&E cases dealt at Cat-D hospital as compared to the assigned target. The cases presented at the hospital emergency in the reported period were comprised of fall and trauma, acute infections, dog bites, ischemic heart diseases, fractures and road traffic accidents etc.



Qualified and trained staff, working at A&E immediately Patient receiving emergency treatment in casualty of identifies and refer patients with serious complications requiring advanced investigations and management at

Cat-D hospital Ghiljo

tertiary care level hospital were referred to DHQ Mishti Mela and DHQ Kohat after stabilization.



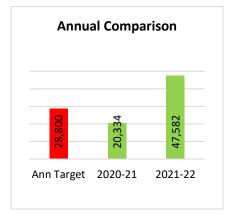
b) OPD Consultations

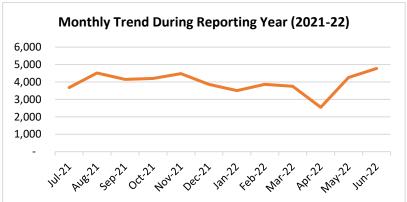
Seven clinics i.e., four specialists (medical, surgical, pediatrics and obstetrician-gynecologist), two Filter/general (male, female) and one dental clinic are providing OPD consultations. A total of 47,582 outpatient consultations were performed i.e. 19,363 (41%) by general/filter clinics and 28,219 (59%) by specialist clinics.





Following graphs shows current vs previous year progress and monthly trend of OPD consultations during the reporting period.





c) Indoor Patient Services

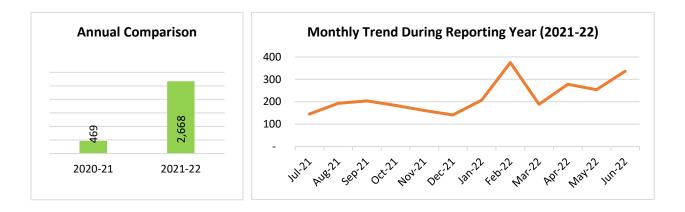
The inpatient department is fully equipped with modern medical equipment's and offering free cost service to all the patients who choose this HF for treatment.

During the reporting period, 2,668 patients were admitted in the wards who received treatment under different specialties including emergency observation ward functional at the hospital. The wards were fully equipped & staffed to provide round the clock services to the admitted patients. Consultants/Specialists conducted morning & evening rounds to closely supervise



Medical Officer attending patient in General Ward

management of the admitted patients. In face of the harsh weather conditions, proper insulation of the wards along with adequate heating system was ensured to provide a comfortable environment for admitted patients. Significant increase is observed in month of February and onwards.





d) Maternal and Neonatal Child Health Services (MNCH)

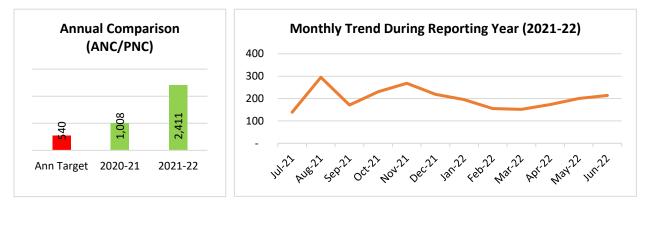
The Hospital provided uninterrupted MNCH service through trained and qualified staff including gynecologist, female medical officers, female nursing staff, LHV's and trained birth attendants. The MNCH Unit of the hospital is fully equipped and complies with MHSDP standard. Antenatal care clinic, supported by a 24/7 functional Labor Room and round-the-clock availability of obstetrical surgical team to provide Comprehensive Emergency Obstetric and Newborn Care (CEmONC) service was ensured.

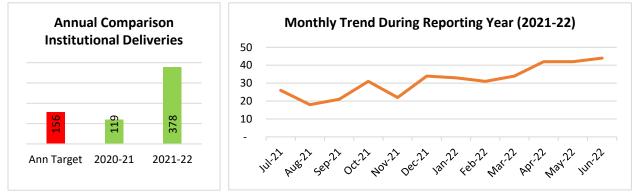


Gynaecologist attending post op patient at gynae ward

During the reporting period, HF provided antenatal

services to 2,029 pregnant women, conducted 378 clean and safe deliveries including 34 C-Sections and recorded 382 post-natal care (PNC) visits.





e) Neonatal Unit

In the reporting period, 50 neonates have been treated in neonatal unit under supervision of peads specialist and qualified nursing staff.



f) Immunization

During the reporting period, 3,079 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). 307 children have been vaccinated against BCG, 1,060 against Polio, 753 against Penta, 212 Measles and 747 women received TT vaccination as per EPI schedule in the reporting period.

g) Surgical Services

The hospital managed 900 surgeries including 80 major surgeries under various specialists like General surgery, and Obstetrics. Surgeries includes C-sections, minilaparotomy followed by BTL, (E&C's, PPIUCD, 3rd degree perineal tear repair, wound D/D and restoring while General surgeries included appendectomies, amputations, Herniotomy, renal prolapse, Hemorrhoidectomy, cyst and stitches



Gynaecologist is performing C-section at Cat-D hospital Ghiljo



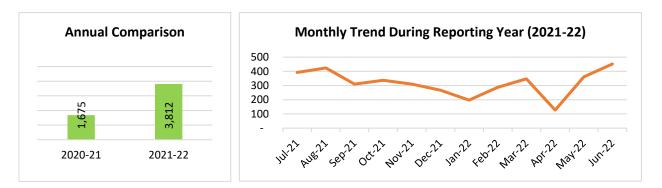
h) Dental Services

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, the unit managed 3,812 patients in which 896 tooth extractions 481 RCT's,318 fillings and 2,117others services were provided. All Patients are routinely screened for HIV, hepatitis B & C virus before dental procedures. In current year there is 128% increase in dental services as compare to previous year



Aged person receving dental treatment





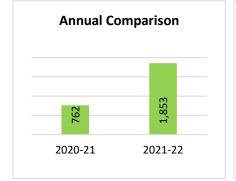
Below graphs shows annual progress and monthly trend of dental services.

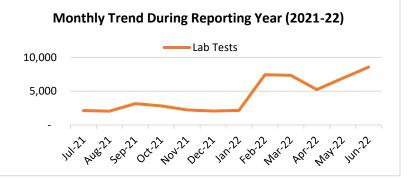
i) Diagnostic Services (Lab & X-Rays)

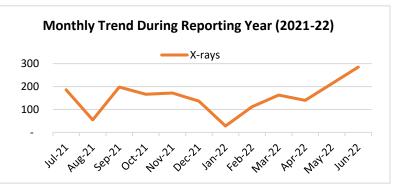
The Hospital offered round the clock Lab and X-Ray services to outdoor, indoor patients and patients attending A&E department. During the reporting period, 52,080 lab investigations and 1853 X-Rays were performed.











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j) Ultrasound services

The diagnostic unit of the Cat-D hospital Ghiljo, offered ultrasound services through qualified and well experienced staff for obstetric as well as for general patients requiring information for diagnosing and treating a variety of diseases and conditions. The unit is equipped with two up-to-date ultrasound machines and 6,602 ultrasound scans were performed in the reporting period.

Monthly trend of diagnostic services can be seen in the below graphs.

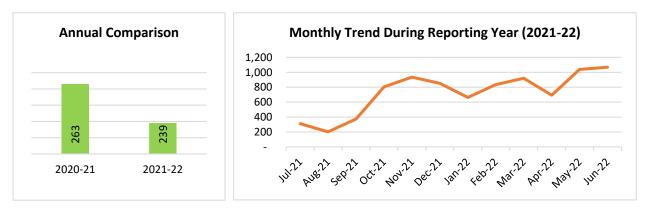


Female patient having ultrasonography by trained women medical officer at Cat-D Ghiljo



k) Electrocardiography (ECG)

During the reporting period 239 ECGs were conducted to diagnose and confirm cardiac abnormalities in the suspected patients. Cat-D Hospital Ghiljo is one the few hospitals in the newly merged districts providing cardiac emergency services, during the reporting period the HF continued to provide ECG services through qualified and trained staff to patients requiring the services.



I) COVID-19 Services

Cat-D Hospital Ghiljo has been actively providing services to Covid-19 suspected and confirmed patients since the start of the pandemic. All the suspected patients attending Cat-D hospital are entertained at a designated screening point and triage. During the reporting period 22,999 Covid samples were taken and sent to KMU Lab for testing. Also, 11,651 1st doses,10,321 2nd doses and 1027 booster doses of Covid-19 vaccines were administered to health care workers, citizens and members of the armed forces. Due to no mobile network, facing issues in registration for vaccine.

m) Vertical Programs

Malaria Program

During the reporting year, 950 suspected malaria patients visited the Hospital and among them 108 were confirmed with microscopy.

Tuberculosis Program

Among the patients visiting the Out-patients Department, 16 were suspected of tuberculosis but no patients were confirmed with microscopy.

Hepatitis Screening and Treatment

2,822 patients were screened for Hepatitis B & C and HIV and among them 51 cases of Hepatitis B and 101 cases of Hepatitis C were positive with RDTs and have been referred for confirmation by PCR method.

4. Pharmacy

Cat-D hospital Ghiljo, has a central warehouse and two satellites pharmacies, one for OPD and IPD, and other for accident & emergency unit to 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



Patient are getting free of cost medicines from satellite pharmacy established in emergency

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.



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

MERF through its detailed policies and procedures and systems in place ensures that all the hospital facilities, equipment and supplies 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, Dressing Room, Lab 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.



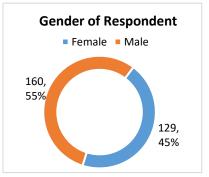
Training of cleaners on IPC and HCWM.

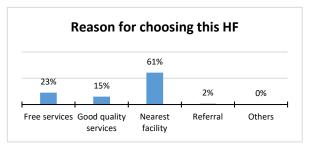
MERF implementing medical health care waste management policies that ensures hospital waste management with segregation of waste into clinical and non-clinical waste through five color coded bin system. The concerned staff are properly trained in collection, segregation of waste at source, storage, transportation and disposal.

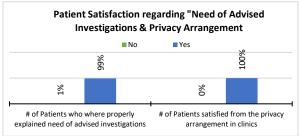
6. Monitoring and Evaluation

Patient Exit Surveys

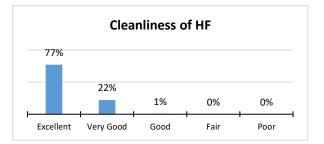
A total of 203 patients/attendant of age 15 years or above were interviewed to determine the satisfaction levels. Among them 165 were male and 38 were female respondents. The respondents showed an overall satisfaction level with 80% respondents being very satisfied from the treatment quality and 76% with staff behavior. The finding regarding other parameters is given below.











Complaint Response Mechanism

Six boxes are installed at various locations at the hospital accessible to patients. In this the reporting period two complaints registered and action taken accordingly.

7. Trainings and Assessments

During the reporting period MERF team internally arranged multiple capacity building sessions like Training on MAM, CMAM for Labor Staff, Handling of DKA and Hypertensive emergencies by medical specialist, Trauma and A&E Handling by general surgeon, orientation on organogram by HR officer, Fire safety training by Logistics Manager with collaboration of Rescue 1122, Training on EMRS for new medical officers by MIS Supervisor.



03 days basic ultrasound training



Training session on IPC & HCWM for cleaning staff





Training session on Job description and organogram for services delivery staff organized by HR



8. External Monitoring and Visits

During the reporting period, Hospital was visited by many Govt. officials as well as country office team. They appreciated hospital services & meet all on duty staff. Officials from the Country Office and Provincial Office pays monitoring visits from time to time to identify any short comings that hampers quality service delivery.















9. Human Resource Recruitment and Deployment

During the reporting period, MERF hired and deployed below staff at Cat-D Hospital Ghiljo.

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	4	4
10	WMO	2	2
11	Dental Surgeon	1	1
12	Charge Nurse	9	8
13	Clinical Technician (Radiology)	3	3
14	Clinical Technician (Dental)	1	1
15	Clinical Technician (Pathology)	3	3
16	Clinical Technician (Pathology) for Blood Transfusion	1	1
17	Clinical Technician (Surgical)	5	5
18	Clinical Technician (Anesthesia)	3	2
19	Clinical Technician (EPI)	2	2
20	Lady Health Visitor-LHV	4	3
21	Senior Pharmacist	1	1
22	Pharmacy Technician	3	3
23	Computer Operator	7	7
24	Store Keeper	1	1
25	Driver	3	2
26	Dai/Aya	4	4
27	Ward Orderly	5	4
28	Chowkidar	5	5
29	Mali	1	1
30	Washer man	2	2
31	Sweeper	12	12
	Total	90	85

10. Problems Encountered and Actions Taken

• Limited availability of electricity

Power availability from WAPDA is a major issue. The hospital electricity connection is frequently cut without any proper warning or attention. Although solar panels and batteries were installed as a backup source but due to harsh weather conditions and low sunlight during the day time the batteries doesn't get fully charge the required load demand of the hospital was met in sunny days while faced electricity in rainy season.

• Operational Challenges

Due to its remote location, there are unique operational challenges that are faced while implementing the project activities.

• Water Shortage

The current source of water is not enough to cater for the needs of the hospital and its staff. Therefore, an alternative source of water is urgently required to meet the optimal needs.



11. 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		
	Pasia	Availability of clean toilets for Male and Female staff/patients in every block/department.	Not Available	Yes (100%)	100%	Observation	Periodic		
	Basic Amenities	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		
		Ambulance Service	Not Available	Yes (100%)	100%	Observation	Periodic		
		Availability of the Drainage System	Not Available	Yes (100%)	100%	Observation	Periodic		
Facilities Management	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		
	Hygiene and Waste Management	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		



		Sharps box/container	Not available	Yes	Yes	Observation	Periodic
		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
	Staff Presence	Availability of clinical staff as per duty roaster	No	100%	100%	Staff duty Roster, biometric record	Periodic
		Availability of all support staff	No	100%	100%	Staff Payroll/Bio Metric Attendance	Monthly Attendance Record
Human Resource Management	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
Service Delivery	Medicines	Essential Medicines (Available as per MERF standard list)	Not available	100%	100%	Stock Record/LMIS system	Monthly



Management (Clinical	Lab Services	Lab tests offered (As Per MHSDP Standard)	Not available	100%	100%	EMR reports	Periodic
Services /		Lab Equipment maintenance	No	Yes	Yes	Observation	Periodic
Clinical Quality)	OT Services	All required services provided / procedures performed (Available as per MHSDP standard and as per annexure list)	Not available	Yes	Yes	Observation	Periodic
	Blood Bank Services	Availability of Blood Bank in vicinity.	Not available	Yes	Yes	Observation	Periodic
	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, catalog for complaints	Periodic
	Family Planning	Guidelines on family planning	Not available	Yes	Yes	Observation	Periodic
	Services	Space available for FP counselling	Not available	Yes	Yes	Observation	Periodic
	MNCH services EPI Services	Guidelines on MNCH	Not available	Yes	Yes	Observation	Periodic
		Space available for MNCH counselling	Not available	Yes	Yes	Observation	Periodic
Implementation of Vertical		Guidelines on EPI and Vaccines	Not available	Yes	Yes	Observation	Periodic
Program		Space available for EPI	Yes	Yes	Yes	Observation	Periodic
	Tuberculosis (TB) Services	Guidelines on TB	Not available	Yes	Yes	Observation	Periodic
		Space available for TB counselling	Not available	Yes	Yes	Observation	Periodic
	Dengue /	Guidelines on Dengue / Malaria	Not available	Yes	Yes	Observation	Periodic
	Malaria Services	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	30	100	198	OPD Register, EMR	Monthly
		Bed Occupancy Rate (monthly)	0	25%	67%	Daily Bed Statement Register, EMR	Monthly
		Average daily emergency service Utilization	5	10	24	Emergency Register, EMR	Monthly
	Clinical	Number of Surgical Procedures (minor + major) Performed (monthly)	0	25	113	OT Register, EMR	Monthly
	services	Percentage of Hospital Death Among Admitted Patients	Not available	<5%	0%	Admission File, EMR, mortality register	Monthly
		Monthly Lab Services Utilization	0	340	6,510	Lab Register, EMR	Monthly
Health	Diagnostic	Monthly Diagnostic Services Utilization (X-ray, Ultrasound, ECG)	0	300	1,087	X-Ray, ECG, Ultrasound Registers, EMR	Monthly
Management Information	EPI	Percentage of Full Immunization Coverage	0	27%	40%	EPI Register	Monthly
System (HMIS)		Penta immunization coverage	0	35%	80%	EPI Register	Monthly
	Emergency maternal Obstetrical Services (EmOC)	Number of Antenatal Care (ANC) visit (Monthly)	0	45	254	MNCH Register, EMR	Monthly
		Number of Normal Delivery Performed (Monthly)	0	12	43	Labour Room Register, EMR	Monthly
		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%	0.5%	Labour Room Register	Monthly
	Other records	DHIS/ HMIS Reporting Compliance	Not available	Yes	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting timelines	Not available	Yes	100%	Monthly DHIS Report	Monthly
		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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