

Cat-D Hospital Dogar, Kurram

PROGRESS REPORT 2020-2021



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 effected. 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 compared to the established baseline despite lockdown etc. 38082 OPD consultations (general/specialist), 1458 inpatients, 281 women delivered clean/safely, 854 ANC & PNC, 1694 surgeries (including 54 major) and 18222 investigations (15384 labs, 1592 x-ray, 1065 ultrasounds and 181 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

A snapshot of Key Performance Indicators for the year 2020-21 is given as under.

	05 Specialists and 11 Medical Officers including 02 Female Medical Officers 45 Nurses and Paramedics are providing services in the hospital.
	30,600 OPD Consultations, 16% ↑ increase as compared to the established baseline.
	7,482 patients treated in casualty department including 02 Cardiac emergencies, 108% ↑ increase as compared to the baseline.
	281 clean and safe deliveries conducted including 06 C-Sections, 67% ↑ increase as compared to the baseline.
	854 pregnant women received antenatal and postnatal care, 42% ↑ increase from the baseline.
	1,458 Patient admissions in various IPD departments.
	1,694 Total Surgeries conducted with 54 Major surgeries, 606% ↑ increase from baseline.
	15,384 lab investigations conducted, 449% ↑ increase as compared to the baseline.
	1,592 X-rays carried out.
	181 Patients availed ECG services during the reporting year.
	1,065 Patients availed Ultrasound services during the reporting 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.

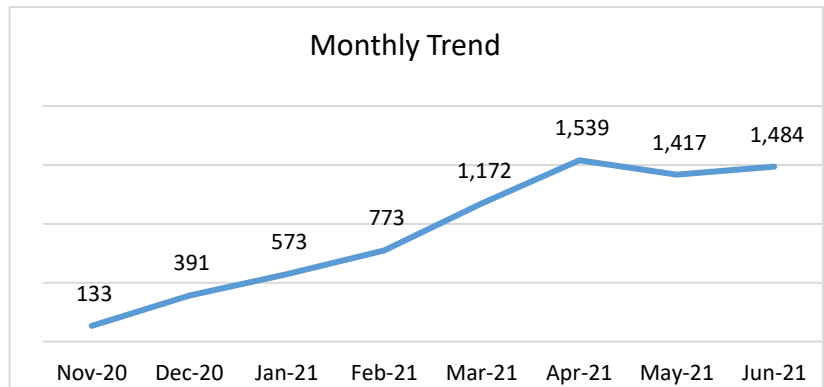
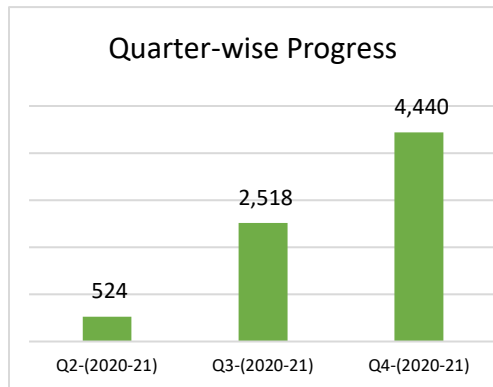
Accident and Emergency (A&E) Unit

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, **7,482** were treated. On average 44 cases, medical and surgical, were presented at A&E and were managed. 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.



Patient being treated at A&E, Cat – D Hosp. Dogar

Below Graphs shows quarterly progress and monthly trend of patient load at A&E department.



Out Patient Services - OPD

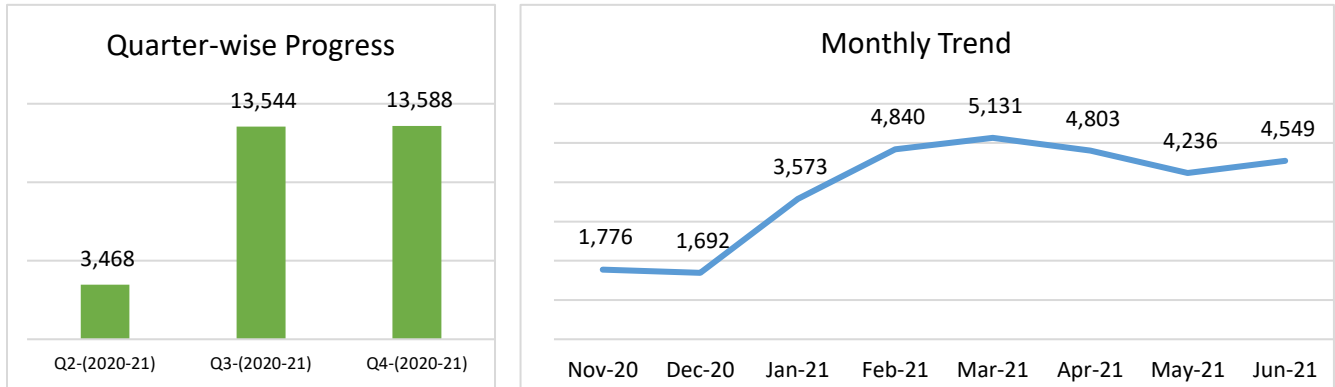
MERF continued to provide general and specialized OPD services during the reporting period and remarkable increase has been observed in the overall OPD cases over the preceding quarter. A total of **30,600** (Males: 45% & Females: 55%) OPD cases received both at general and specialized clinics and out of these 22% were children under five year of age.

65% patients attended general OPD clinics and 35% patients attended specialist clinics at Cat-D Hospital, Dogar. Hospital is providing specialist clinic services in the departments of Medicine, General Surgery, Pediatric, Obstetrics and Gynecology and Dentistry.



Patients waiting for the OPD consultation at Cat – D Dogar

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

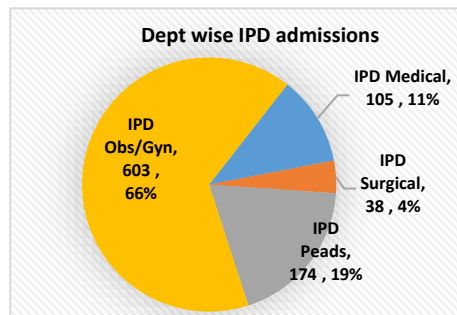


Indoor Patient Services

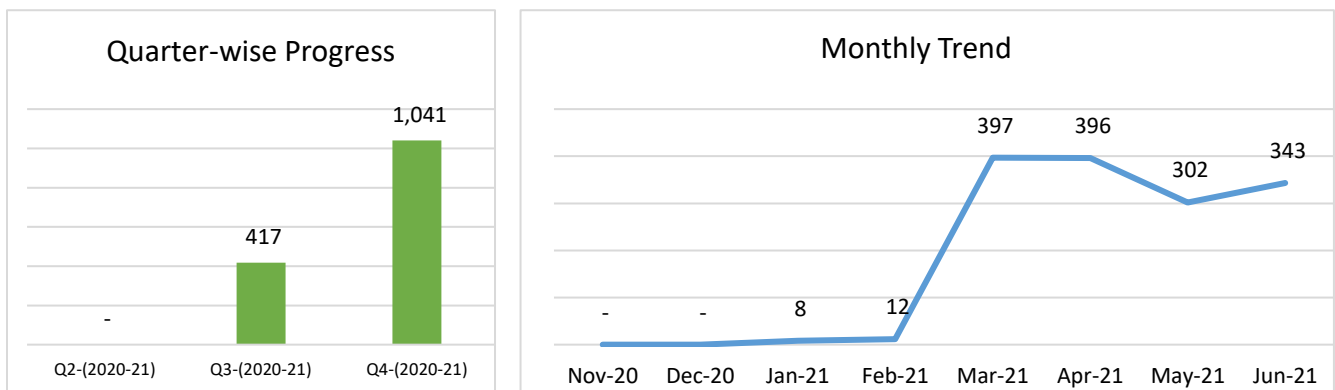
During the reporting period, a total of **1,458** patients were admitted at various indoor wards and received treatment under following specialties; Internal Medical, General Surgical, Obstetrics/Gynecology and Pediatrics. Indoor wards are sufficiently equipped & staffed to provide round the clock services to the admitted patients. Consultants/Specialists conduct morning & evening rounds to closely supervise the management of the admitted patients. Despite of the harsh weather conditions in the reporting quarter, proper insulation of the wards along with adequate heating system is ensured to provide a comfortable environment for the patients.



Consultant having a morning round at Paeds Ward



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

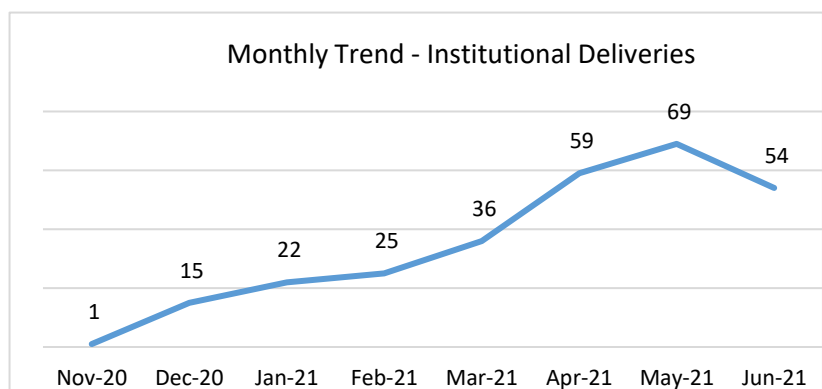
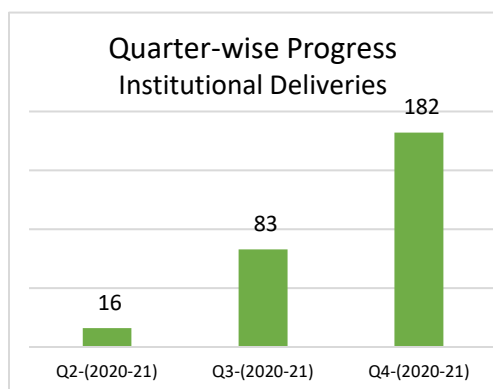
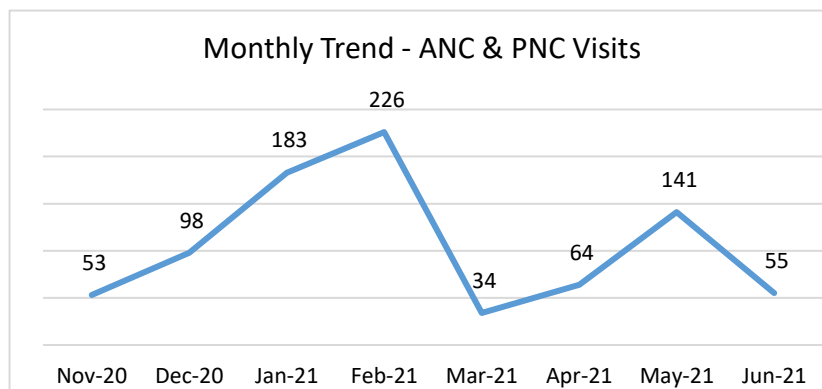
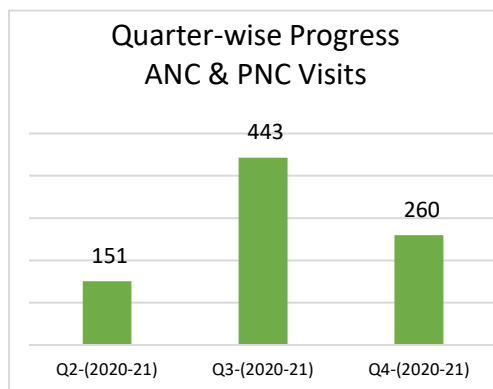


Maternal and Neonatal Child Health Services (MNCH)

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 MHS DP 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.

During the reporting quarter the unit registered **854** pregnant women for antenatal checkup, conducted **281** clean and safe deliveries. Out of the total deliveries, **274** were Normal Vaginal deliveries (NVDs), **01** assisted delivery and **06** complicated case were managed by Cesarean Section.

Below graph shows monthly trend and Quarterly progress of MNCH Services.



Neonatal Unit

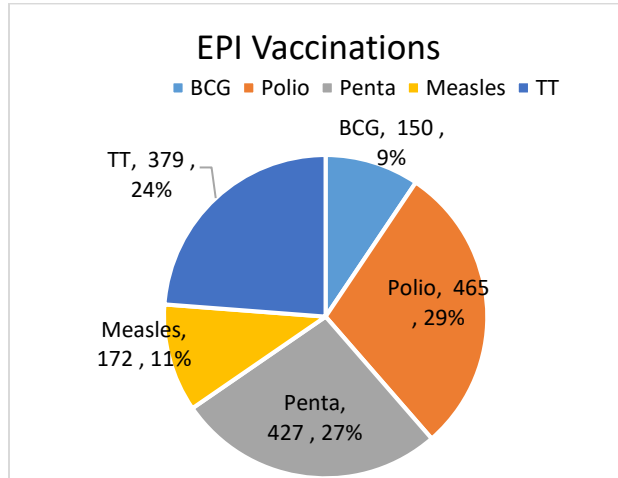
Neonatal care unit at Cat - D Hospital, Dogar, is equipped with baby incubators, patient monitors, phototherapy machines and radiant warmers. Qualified and trained medical officers and nursing staff has been deployed and providing round the clock services for the admitted critically ill children under the supervision of Paediatrician. In the reporting Period **15** children have been admitted to the neonatal care unit for newborn complications, Pneumonia, Fits, Bronchiolitis, Sepsis, ARDS, delayed cry, hemorrhagic disease, Jaundice etc.



Paediatrician examining a sick child at Nursery

Immunization

1,593 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).



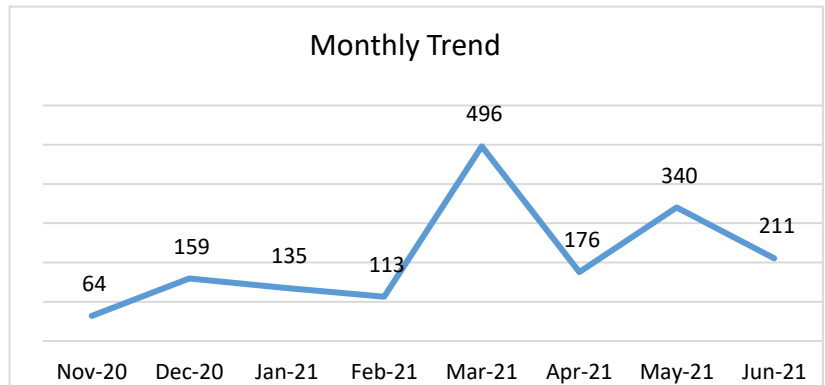
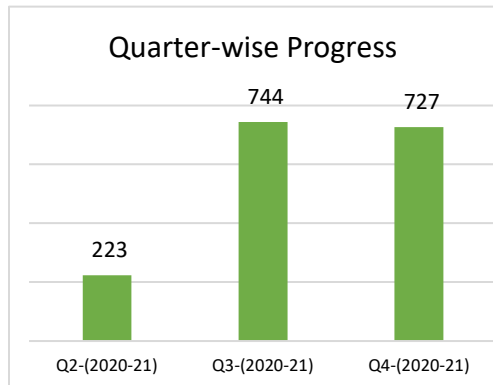
Surgical Services

During the reporting period, the health facility performed **1,694** (54 Major and 1,640 minor) surgeries under various specialties. The major surgeries conducted in the quarter 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 foets, 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 qualified Anesthetist.



Gynecologist performing Emergency C – Section

Following graphs depicts monthly trend and quarterly progress of minor and major surgeries performed during the reporting year.



Dental Services

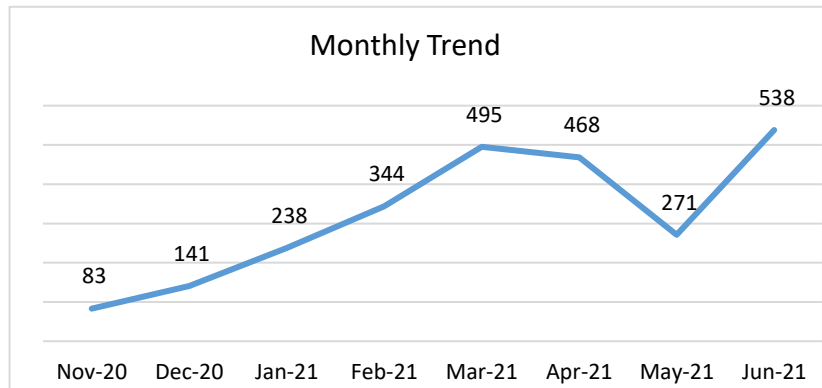
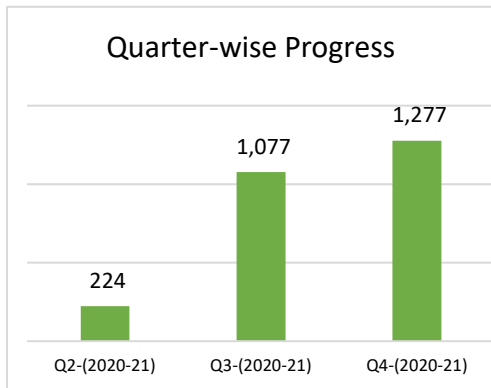
Well-equipped dentistry unit under the supervision of a qualified dental surgeon and experienced staff, continued to offer free of cost dentistry service to the local population.

During the reporting period, **2,578** 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 Surgeon examining female patient



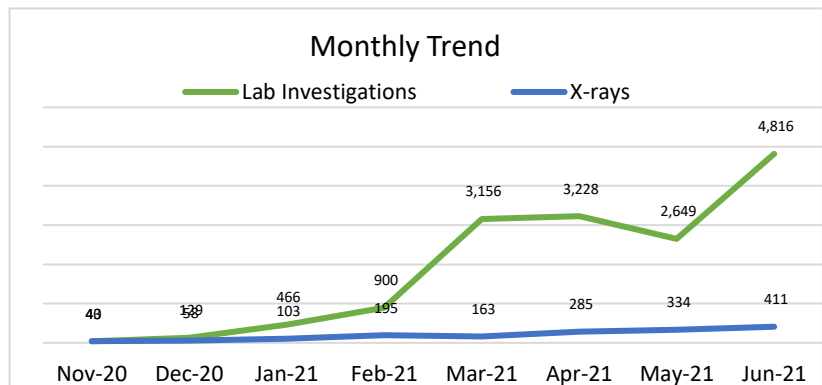
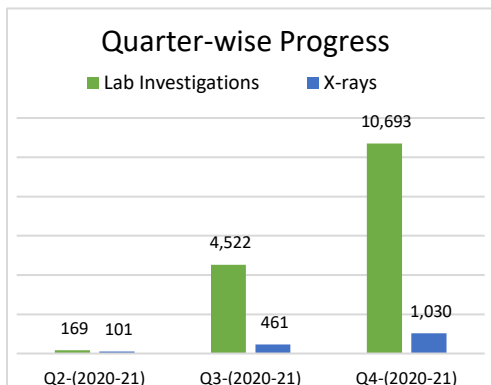
Diagnostic Services (Lab & X-Rays)

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, **15,384** Lab investigation and **1,592** x-rays done.

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



Lab Technician performing Microscopy



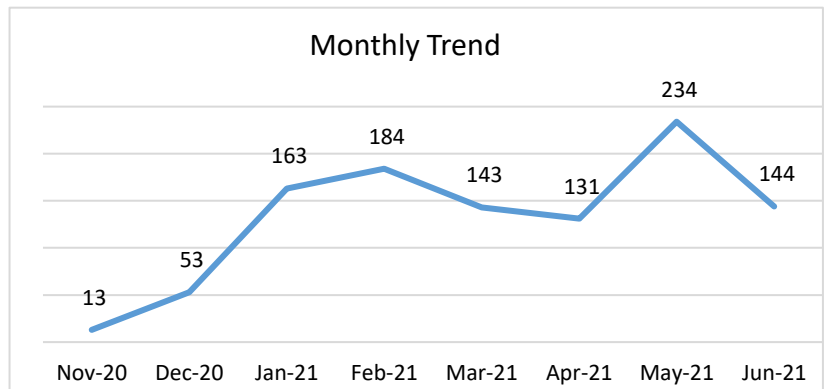
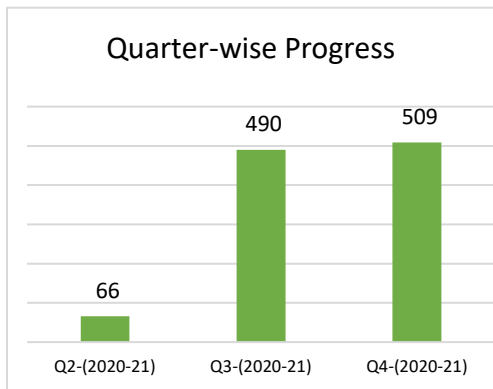
Ultrasound service

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 **1,065** Ultra-sonographies (general and obstetrics) were performed including **1,042** in OPD and **23** in IPD.



MO performing Ultrasound of a child

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



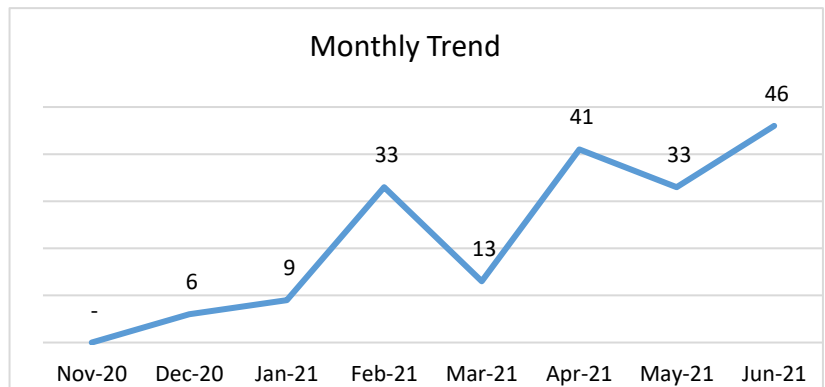
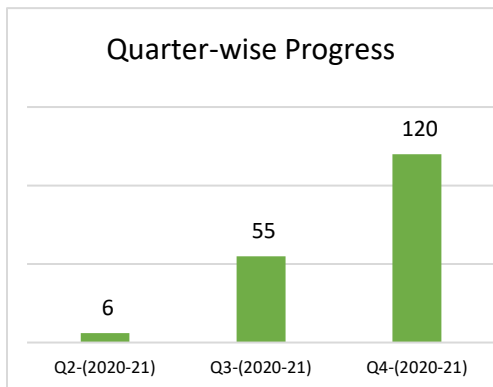
Electrocardiography (ECG)

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 181 ECG tests.



Patient with chest pain having ECG

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



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.



People getting Covid-19 vaccine at covid-19 vaccination center – DHQ Mishti Mela

During the Period COVID-19 vaccination center was fully functional with two dedicated staff, which have vaccinated **3,836** individuals. 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.

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.



Pharmacy staff updating MLMIS



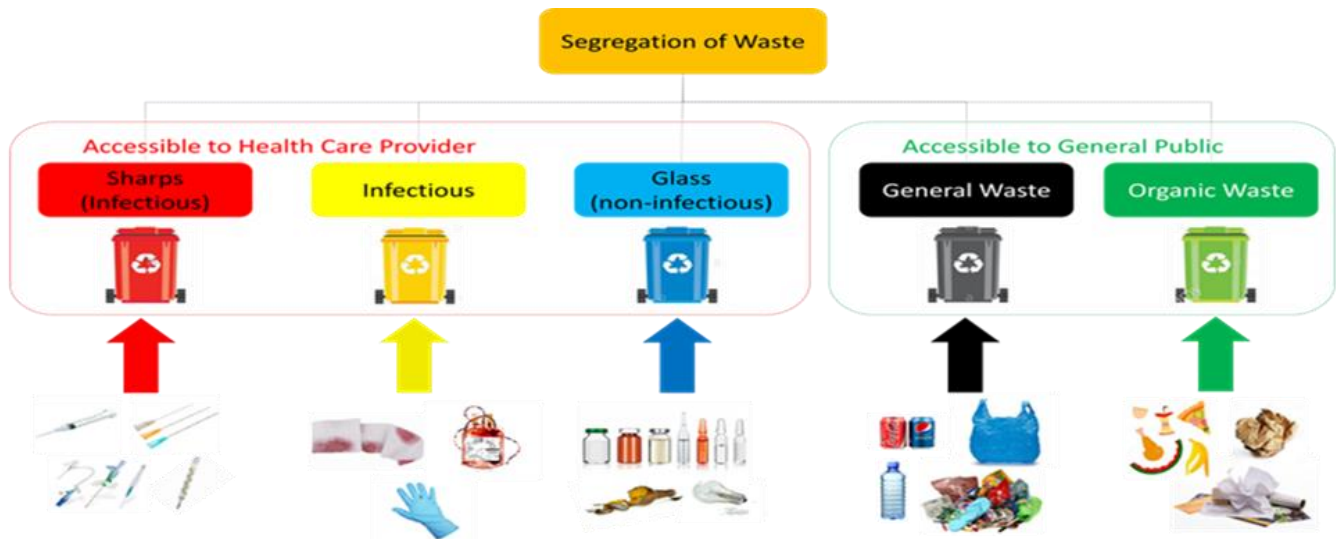
Pharmacist updating bin card at warehouse

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

MERF through its detailed IP policies and 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.



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 segregation of waste at source, collection, storage, transportation and safe disposal.



6. 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	HR Officer	1	1
5	Physician	1	1
6	Surgeon	1	1
7	Gynecologist	1	1
8	Pediatrician	1	1
9	Anesthetist	1	1
10	MO	8	8
11	WMO	2	2
12	Dental Surgeon	1	1
13	Charge Nurse	9	9
14	Clinical Technician (Radiology)	4	3
15	Clinical Technician (Dental)	1	1
16	Clinical Technician (Pathology)	4	4
17	Clinical Technician (Pathology) for Blood Transfusion	2	2
18	Clinical Technician (Surgical)	5	5
19	Clinical Technician (Anesthesia)	4	3
20	Clinical Technician (EPI)	2	2
21	Lady Health Visitor-LHV	4	2
22	Senior Pharmacist	1	1
23	Pharmacy Technician	3	3
24	Computer Operator	7	7
25	Handy Man	1	0
26	Store Keeper	1	1
27	Driver	3	3
28	Dai/Aya	4	4
29	Ward Orderly	5	5
30	Chowkidar	5	5
31	Mali	1	1
32	Washer man	2	2
33	Sweeper	14	14
Total		102	97

7. 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, Mood Disorder and infection prevention.



Presentation on Dengue, COVID-19 and hypertensions Case Management

8. 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.

Monitoring 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.

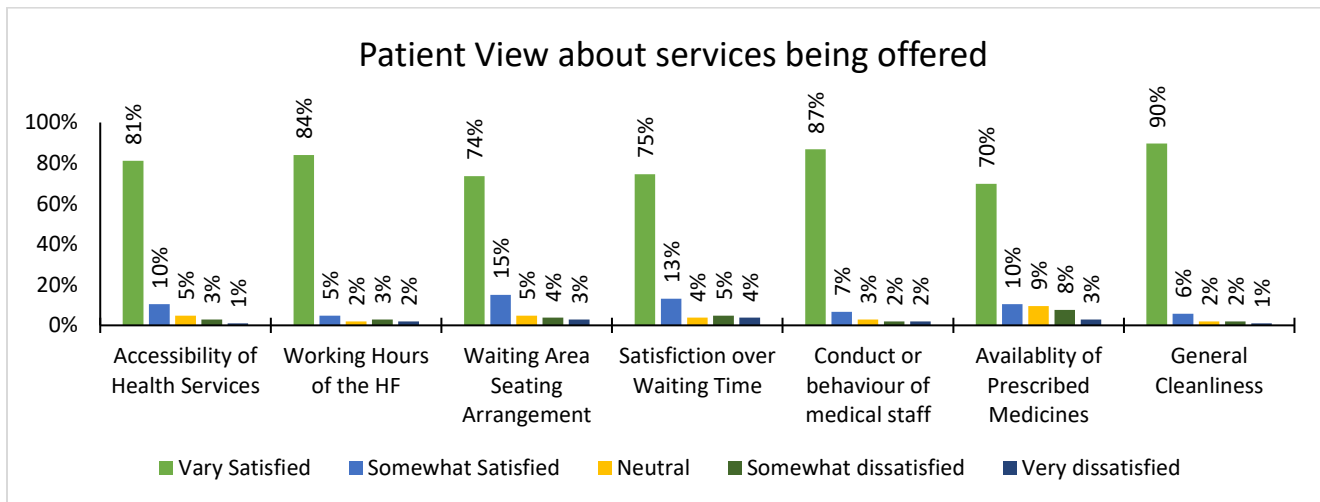
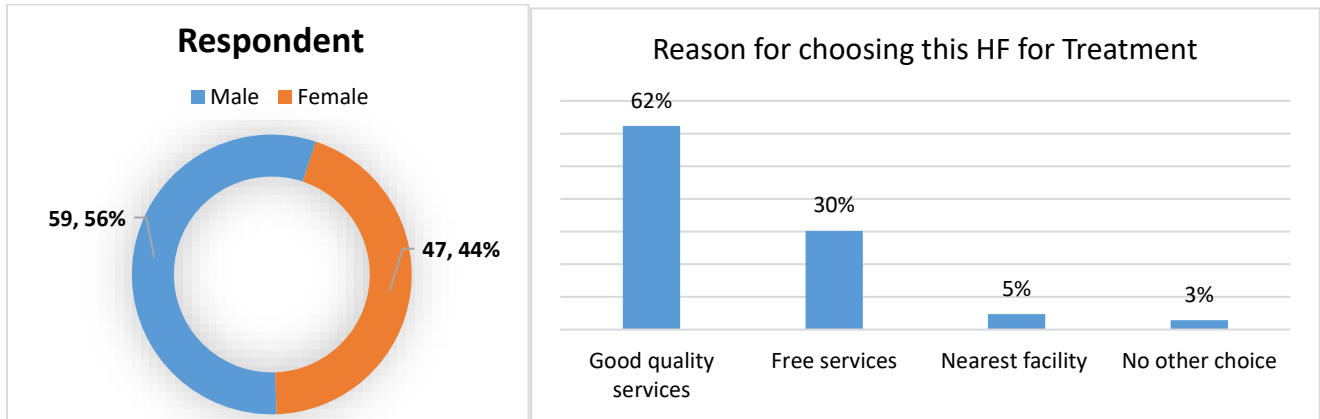


Grievance Redressal Mechanism

GRM 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.

Patient Exit Survey

106 respondent age 15 years or above who came to availed services were interviewed. Out of which 59 were male and 47 were female. All the participants belong to the catchment population and most of them either un-educated or primary level.



9. 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 – XXXIV of 1997).

10. Problems Encountered and Solutions Taken

- *Limited availability of electricity*

Power / transmission lines from WAPDA are available, however electricity provision is only for few hours in 24 hours. Voltage is not sufficient to operate heavy equipment like X-ray machine. 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 effected 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.

11. Financial Updates

FINANCIAL PROPOSAL FOR TYPE D HOSPITAL DOGAR		
Description	Budget-PKR-Year 1- Revised	Spending Till June 30, 2021
HR budget		
Human Resource Costs	59,495,544	51,231,672
Total HR Budget	59,495,544	51,231,672
Operational Budget		
Communication	720,000	601,321
Utilities	2,400,000	1,481,748
Travel and Transport	1,320,000	1,709,683
General	4,340,000	1,502,766
Health Care Waste Management	990,000	494,835
Medicines and Consumables	17,017,540	24,435,217
Medical and Non Medical Equipment	35,000,000	41,003,238
EMR (Electronic Medical Record System)-(Innovative Costs)	3,500,000	2,322,604
Total Operational Budget	65,287,540	73,551,412
Total Budget	124,783,084	124,783,084
Management fee @10%	12,478,308	12,478,308
Total Budget with Management Fee	137,261,392	137,261,392

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
Facilities Management	Basic Amenities	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
		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
		Ambulance Service	Not Available	Yes (100%)	100%	Observation	Periodic
		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
	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
Human Resource Management	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
	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 Management (Clinical Services / Clinical Quality)	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
	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 registers	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
Implementation of Vertical Program	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 services	Guidelines on MNCH	Not available	Yes	Yes	Observation	Periodic
		Space available for MNCH counselling	Not available	Yes	Yes	Observation	Periodic
	EPI Services	Guidelines on EPI and Vaccines	Not available	Yes	Yes	Observation	Periodic

		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 / Malaria Services	Guidelines on Dengue / Malaria	Not available	Yes	Yes	Observation	Periodic
		Space available for Dengue / Malaria	Not available	Yes	Yes	Observation	Periodic
	Health Management Information System (HMIS)	General Services	Electronic Medical Record System	Not available	Yes	Yes	Observation, EMR reports
Average Daily OPD Attendance			0	150	180	OPD Register, EMR	Monthly
Bed Occupancy Rate (monthly)			0	20%	43%	Daily Bed Statement Register, EMR	Monthly
Average daily emergency service Utilization			0	15	44	Emergency Register, EMR	Monthly
Clinical services		Number of Surgical Procedures (minor + major) Performed (monthly)	0	30	212	OT Register, EMR	Monthly
		Percentage of Hospital Death Among Admitted Patients	Not available	<5%	0.1%	Admission File, EMR, mortality register	Monthly
Diagnostic		Monthly Lab Services Utilization	0	350	1923	Lab Register, EMR	Monthly

		Monthly Diagnostic Services Utilization (X-ray, Ultrasound, ECG)	0	250	355	X-Ray, ECG, Ultrasound Registers, EMR	Monthly
	EPI	Percentage of Full Immunization Coverage	0	27%	49%	EPI Register	Monthly
		Penta immunization coverage	0	35%	78%	EPI Register	Monthly
	Emergency maternal Obstetrical Services (EmOC)	Number of Antenatal Care (ANC) visit (Monthly)	0	75	83	MNCH Register, EMR	Monthly
		Number of Normal Delivery Performed (Monthly)	0	20	34	Labour Room Register, EMR	Monthly
		Number of Caesarean section performed (Monthly)	0	1	1	Labour Room Register/OT Register	Monthly
		Percentage of New born Case Fatality in Health Facility	Not available	<5%	0%	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

13. Progress Made against the Work Plan

Key Tasks and Sub Tasks	Timeline												Current Status
	Year 1												
	Q1			Q2			Q3			Q4			
	1	2	3	4	5	6	7	8	9	10	11	12	
Phase 1: Inception Period (0-2 months)													
Establishing Offices and Hubs	█												√
Placement of Rapid Deployment Team	█	█											√
Establishing supply chain mechanisms	█	█											√
Orientation of district health and administrative authorities	█												√
Conducting key detail assessments for establishing project baselines	█	█											√
✓ HR mapping	█	█											√
✓ Assets verification	█	█											√
✓ Infrastructure assessment	█	█											√
✓ Baselines & Target settings for KPI	█	█											√
Advertising, initiating & completing recruitment process	█	█											√
Start procurement process based on approved procurement plan	█	█											√
Phase 2: Master the Basics (3-4 months)													
Conduct training need assessment	█	█	█	█									√
Develop Training Plan	█	█	█	█									√
Start providing medical supplies	█	█	█	█									√

Rolling out standard healthcare waste management system (capital budget)																				√
Phase 3 (5 months onward)																				
Provide core clinical functions of secondary care services																				
✓ General Surgical services																				√
✓ General Medical services																				√
✓ Paederiatric services																				√
✓ Gynecological & Obstetric services																				√
Strengthen Laboratory & Diagnostic Services (Support Functions)																				√
Provide essential medicines, and supplies																				√
✓ Provide essential drugs & consumables																				√
✓ Provide lab reagents																				√
Develop capacities of first level healthcare provider																				√
✓ Improved Sick Child Management Approaches																				√
✓ CMAM Approach and Essential Nutrition Actions																				√
✓ Basic Life Support (BLS) Services																				√
✓ Management of Non-Communicable Diseases (NCD)																				√
✓ Integrated Management of Pregnancy and Childbirth																				√
Provide opportunity for staff to take online training courses																				√
Provide appropriate salary packages to essential health staff																				√
Provide Performance Based Incentives (PBI)																				√
Provide good working environment for the staff																				√

Collect routine HIS data													√
Perform Data Quality Audit													√
Measure compliance with standards													√
Provide supportive supervision													√
Establish Complaint Response mechanism													√
✓ Phone calls													√
✓ Complaint Registration Forms													√
✓ Patient Exit Interviews													√
✓ Sharing information with Community Health Committees													√
Establish and maintain strong pharmaceutical quality assurance mechanism													√
Follow good practices in HCWM and infection prevention													√
Maintain effective and efficient supply chain management system													√
Implement good financial management system													√
Key Reporting Schedules	Year 1												
	Q1			Q2			Q3			Q4			
	1	2	3	4	5	6	7	8	9	10	11	12	
One Time Reporting Package													√
✓ Asset and inventory reports													√
✓ Inception Report													√
✓ Procurement Plan													√
✓ Recruitment Plan													√

✓ Status of vacant post												✓
✓ Progress against Procurement Plan												✓
✓ Progress against HR Plan												✓
Monthly Reporting Package												✓
✓ Monthly DHIS Reports												✓
✓ Incident Reports												✓
Quarterly Reporting Package												✓
✓ Overall Commentary on Financial Performance												✓
✓ Cash and Work Plan												✓
✓ Funds Utilization Statement on Salary/Non-Salary												✓
✓ Staff Post Reconciliation												✓
✓ Change in Staffing												✓
○ Staff Joining & Leaving												✓
○ Reasons for vacant positions												✓
○ Recruitment Plan for vacant positions												✓
✓ Change in Assets												✓
✓ Inventory												✓
Annual Reporting												✓

14. List of Equipment

Sr.no	Form	Total Quantity	ITEM DESCRIPTION	Manufacturer
1	Medical Equipment	1	Chemistry Analyzer (BIOLAB equivalent) ISO Certified	BIOLAB
2	Medical Equipment	1	Electrolyte Analyzer JOKO Japan	JOKO JAPAN
3	Medical Equipment	20	Food trolley	Pak made
4	Medical Equipment	20	Bed side tables ABS Upper China	CHINA
5	Medical Equipment	1	Dental Autoclave B class USA	USA
6	Medical Equipment	1	Dental X Ray Machine Model	Imported
7	Medical Equipment	10	Patient Beds for A&E	CHINA
8	Medical Equipment	12	Examination Couches S.S Non magnetic	Imported
9	Medical Equipment	2	Patient Strature with IV Pole Strongman Type	STRONGMEN TYPE
10	Medical Equipment	6	Vital Monitors - Made MDX USA	MDX USA
11	Medical Equipment	4	Patient Monitor 1 ER 2 OT 1 LR Made MDX USA with Battery Backup with Wall Stand complete	MDX USA
12	Medical Equipment	15	Instrument Trolley S.S Nonmagnetic Complete	Imported
13	Medical Equipment	8	Medicine Trolley, S.S Non Magnetic	Imported
14	Medical Equipment	4	Resuscitation Trolley / Medical Crush Trolley Complete with Draws And Monitor stand Also with oxygen cylinder Trolley Attach Complete medical Crush Trolley	Imported
15	Medical Equipment	4	Dirty Linen Trolley With Japanese Parachute Waterproof	Pak Made
16	Medical Equipment	12	Patient Side Screen 18 gage with Japanese Parachute waterproof	Pak Made
17	Medical Equipment	1	Baby Resuscitation Trolley IKN-90 Ningbo David Original With warranty	IKN-90 Ningbo David Original
18	Medical Equipment	3	Infant Incubator YP-100 Ningbo David Original With Warranty	YP-100 Ningbo David Original
19	Medical Equipment	2	Baby Warmer	CHINA
20	Medical Equipment	2	Phototherapy Machine - LED	CHINA
21	Medical Equipment	12	X Ray Illuminators Double X-ray Viewer LED Display Latest	CHINA
22	Medical Equipment	20	B.P Apparatus + Stethoscope	CHINA
23	Medical Equipment	1	Minor OT light portable 60 LED Shadow Less Latest With Long Battery Backup Made MDX USA	MDX USA
24	Medical Equipment	10	Glucometer	Accu check
25	Medical Equipment	1	Infusion Pump MDX USA	MDX USA
26	Medical Equipment	2	Syringe pump MDX USA	MDX USA
27	Medical Equipment	2	Refrigerator For LAB - 15 Carvel For LAB	Carvel
28	Medical Equipment	4	Wheel chair heavy duty Made In china	China
29	Medical Equipment	12	IV Stand S.S Non Magnetic with 4 hooks	Pak made
30	Medical Equipment	2	Sealing machine for autoclave small	China

31	Medical Equipment	1	Sealing machine foot operated	China
32	Medical Equipment	2	OT Table Hydraulic S.S Upper Imported with Hydraulic System TAIWAN Model 3001-A/B	Taiwan
33	Medical Equipment	1	Anesthesia Machine MDX USA With Built-in Ventilator With Complete Trolley With ISOFLORINE Vaporizer Made MDX USA	MDX USA
34	Medical Equipment	4	Scrub station small single S.S NON MAGNTAIC	Pak made
35	Medical Equipment	1	ECG Machine 12 channel Germany Made In Germany 12 Channel ECG With Latest Interpretation With Large Screen and Full Keyboard System Latest Version Model IG Medical EKG-2	IG Medical EKG-2
36	Medical Equipment	1	Ultrasound machine Chison USA FDA Approved Medel ECO -1 with Trolley	Chinson USA FDA Approved
37	Medical Equipment	10	Nebulizer Machine Piston compressor Large For hospital MDX USA	MDX USA
38	Medical Equipment	1	Defibrillator PHILIPS with Latest Model with Warranty	PHILIPS
39	Medical Equipment	1	Ophthalmoscope Fiber Optic Export Quality	CHINA
40	Medical Equipment	1	Suction Machine Double Bottle Made Yuwell ISO CE Certified Oil Less Sound Less Latest Model With Fiber Body YBDXA-23	YUWELL (ISO Certified)
41	Medical Equipment	1	Hematology Analyzer Swelab Europe	Europe
42	Medical Equipment	1	Dental chair Imported Made Complete Table Without Compressor	Imported
43	Medical Equipment	1	Blood bank refrigerator Bio base	BIO BASE
44	Medical Equipment	1	Auto Clave Large 16x30 with 2 Drums and with Latest Electric & Gas Operates S.S NON Magnetic Drums	LOCAL
45	Medical Equipment	1	Xray machine 100 mah portable for Dental	CHINA
46	Medical Equipment	10	Ambu bag adult/paeds Basmed Taiwan	Taiwan
47	Medical Equipment	1	Diathermy Machine China MDX USA Saber 400A	MDX USA
48	Medical Equipment	2	Centrifuge Machine Model 80-2	CHINA
49	Medical Equipment	2	Binocular Microscope 107BN	OLYMPUS
50	Medical Equipment	12	Patients Stool S.S Non magnetic	IMPORTED
51	Medical Equipment	1	Incubator - Lab	CHINA
52	Medical Equipment	3	Weight Machine - Adult Camry China	CHINA
53	Medical Equipment	3	Weight Machine - Baby Cami Italy	ITALY
54	Medical Equipment	7	Baby Cart	CHINA
55	Medical Equipment	1	Water Bath Digital Model HS-4 china	CHINA
56	Medical Equipment	3	AVR for Autoclave	IMPORTED
57	Medical Equipment	1	Fetal Doppler VIVO Medical Italy	ITALY
58	Medical Equipment	1	Proctoscope Complete Set S.S	CHINA
59	Medical Equipment	1	Fetoscope	CHINA
60	Medical Equipment	4	X-ray Films 2 small	Fuji
61	Medical Equipment	1	Table Lamp	Local

62	Medical Equipment	7	Juster 100-1000 ul	Local
63	Medical Equipment	7	Juster 10-100 ul	Local
64	Medical Equipment	7	ESR Stand	Local
65	Medical Equipment	21	Tube Rack Steel	Local
66	Medical Equipment	2	Hot air oven China	CHINA
67	Medical Equipment	90	Pipette 10 ml	IMPORTED
68	Medical Equipment	5	Pipette 2 ml	IMPORTED
69	Medical Equipment	5	Pipette 1 ml	IMPORTED
70	Medical Equipment	5	Pipette 5 ml	IMPORTED
71	Medical Equipment	29	ESR Pipette	IMPORTED
72	Medical Equipment	1	Urine meter Model Korea	KOREA
73	Medical Equipment	15	Salhi HB% Meter	Local
74	Medical Equipment	1	Blood Bag Tube Sealer China	CHINA
75	Medical Equipment	1	Thermo Gun	CHINA
76	Medical Equipment	10	Steel Almirah	LOCAL
77	Medical Equipment	2	UPS for Computer & for Ultrasound machine	LOCAL