

ANNUAL REPORT

Jul-2021 to Jun-2022

**Cat-D Hospital
Mamad Gat, Mohmand**



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

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.....	7
f) Immunization	7
g) Surgical Services.....	7
h) Dental Services.....	8
i) Diagnostic Services (Lab & X-Rays)	9
j) Ultrasound services.....	10
k) Electrocardiography (ECG).....	10
l) COVID-19 Services.....	11
m) Vertical Programs.....	11
4. Pharmacy	11
5. Infection Prevention (IP) & Healthcare Waste Management (HCWM)	12
6. New Initiatives	12
7. Monitoring and Evaluation	15
8. Trainings and Assessments	15
9. External Monitoring and Visits.....	16
10. Human Resource Recruitment and Deployment.....	18
11. Problems Encountered and Actions Taken	19
12. Progress Report against Key Performance Indicators.....	20

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 (KP-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.

Since its inauguration on September 24, 2020, the Mammad Gat Hospital Mohmand District remained functional and continued without fail to provide 24/7 in this year as well with focus on the routine, emergency, surgical, maternity, neonatal/pediatrics and in patient care.

For the COVID-19 services, a dedicated vaccination counters for male, female and data entry established in collaboration with district health office and JSI. To enhance the coverage of vertical programmes, screening, treatment and awareness of TB, Hepatitis B & C and HIV AIDS started established in collaboration with the respective district and provincial programmes. Awareness and Screening (hepatitis B, C and HIV) campaigns were carried out along in two schools and army brigade in Mamad Gat.

To respond to emergencies appropriately, two plans were prepared and shared with DHO office, firstly an isolation ward was prepared with twenty beds capacity for any untoward vaccine related adverse events during the MR campaign (12-27 November) and secondly the main OT (surgical and anesthesia teams) remained open in local bodies elections on Sunday December 19, 2022.

In this year 69,025 total consultations (including A&E 18,287) were performed by filter, specialist clinics and ER department compared to 44,996 the previous year. Total 12,611 (Wards 1,852, 10,756 ER) patients received in patient care, 1,358 deliveries performed (including 21 C-sections), 2,718 antenatal and postnatal consultations done, 2,037 surgeries (1,793 Minor & 196 Major) performed. Total 86,837 investigations were performed which includes 78,486 (lab diagnostic tests), 3,241 (X-Rays), 4,766 (Ultra sound) and 344 (ECGs).

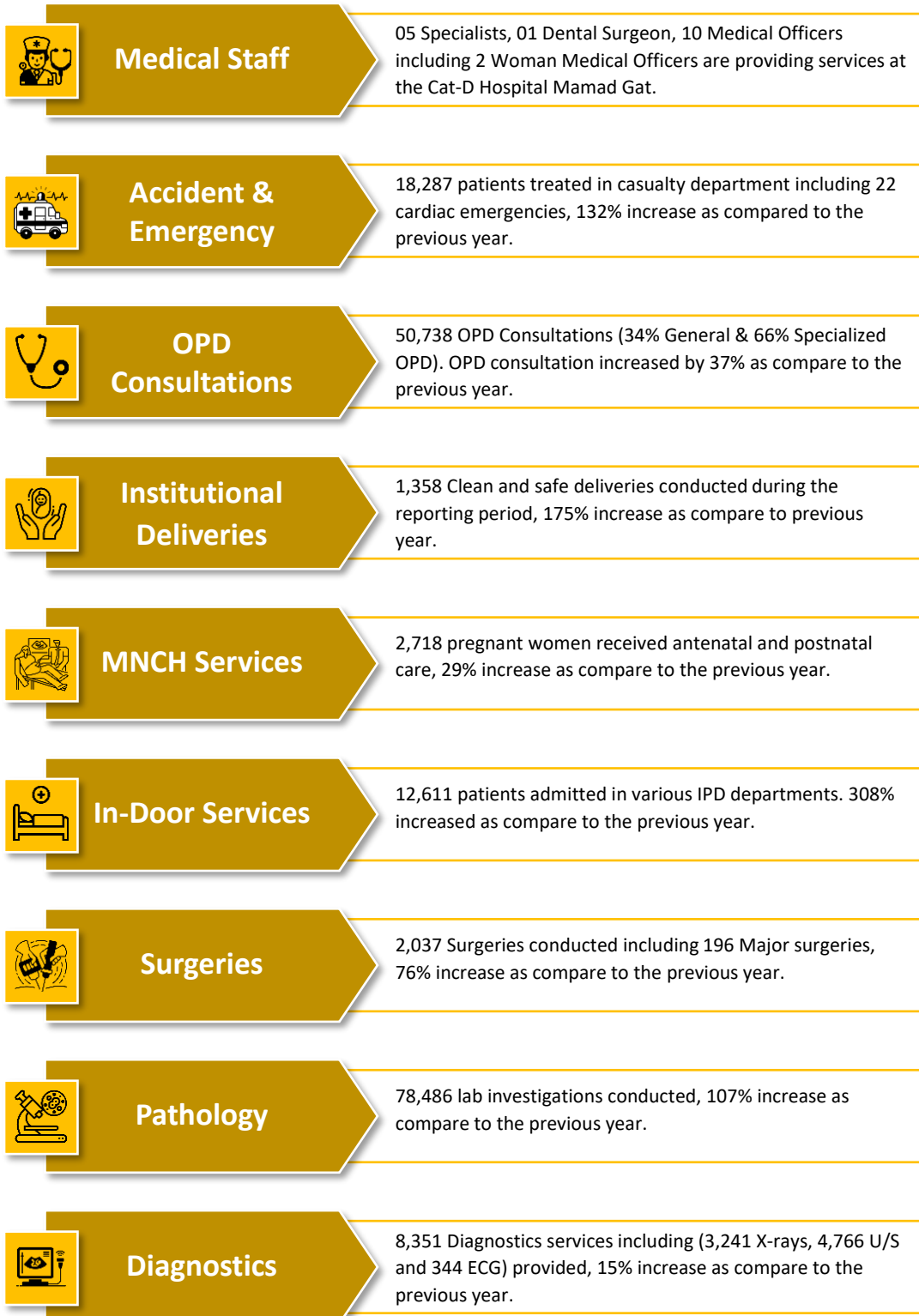
A second main OT for the Gynecology/Obstetrics was made functional and to further enhance the quality of care, several new equipment was added for example, Mindray ultrasound machine, Mindray automatic hematology analyzer, hydraulic OT table, sigmoidoscope with camera/screen, thermomed machine for leishmaniasis, baby warmer, infusion pump, cardiac monitor, phototherapy machine for neonatal intensive care unit (NICU), CTG machine (maternity), suction machines (pediatric) and a dental unit.

Unavailability of electricity and limited staff accommodation were main issues faced.

Pakistan Independence Day was celebrated with full zeal at the hospital in which deputy commissioner Mohmand, local elders and community participated.

Big challenge was the unavailability of electricity. Electricity lasts only 4-6 hours a day. There is only one hour of electricity in the working hours from 12 to 1 pm, and low voltage are common, becoming more challenging on cloudy days when solar power is not generated.

2. Summary of HMIS Data



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 has successfully continued the improved service delivery at Cat – D hospital, Mamad Gat, as compared to the last year as well. In this year, 69,025 consultations i.e. 33,589 specialist OPD, 17,149 general OPD, 18,287 and A&E were performed with 47% male, 53% female and 18% under 5 children.

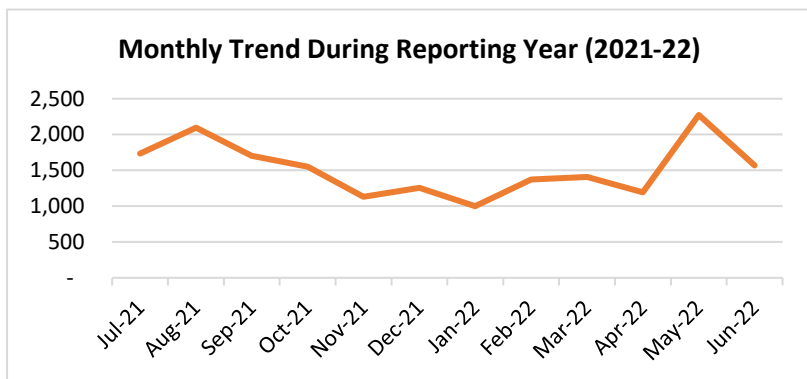
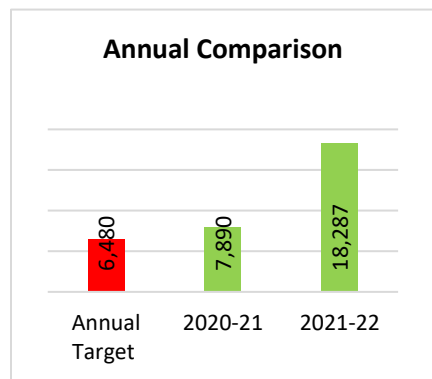
a) Accident and Emergency (A&E) Unit

Accident and Emergency unit at Cat – D Hospital, Mamad Gat, provided round the clock emergency services. In this year 18,287 patients for various emergency conditions which include Trauma (fall, trauma, RTAs, fractures, blast, stab injuries, donkey/cow kick/hit and gunshot), Bites (Dog, insect, donkey), poisoning, burns medical (RTIs, MI, diarrhoea, epilepsy etc.) treated or first aid provided before referral. Medical emergencies mainly including respiratory (upper, lower) tract cases managed at ER. An efficient response was provided to all gunshot casualties of Pakistan army with first aid, surgical antibiotics, TT, blood transfusion and hemostasis before referral to CMH Peshawar.



A young man from LEA received first aid before referred to CMH Peshawar.

Qualified and trained staff, working at A&E immediately identify and refer patients with serious complications requiring advanced investigations and management at tertiary care level hospital in district Ghallanai and Peshawar after stabilization.



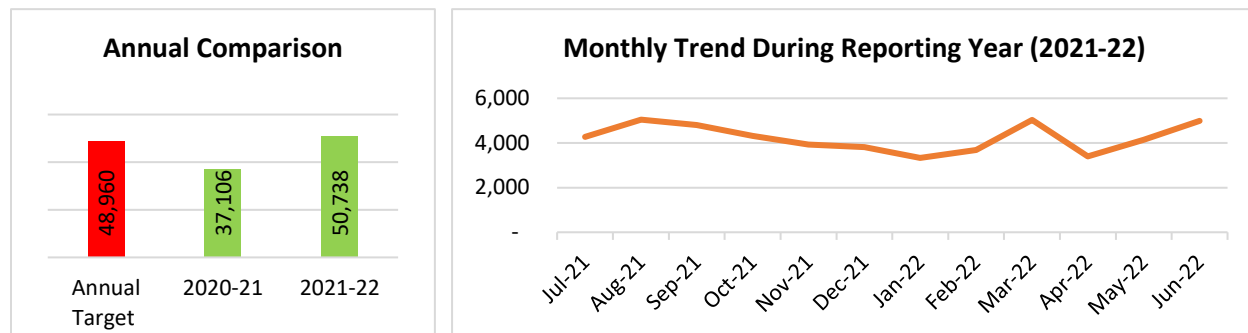
b) OPD Consultations

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 50,738 outpatient consultations were performed i.e. 17,149 (34%) by general/filter clinics and 33,589 (66%) by specialist clinics.



Patient queue at general OPD, EPI, COVID vaccination and dental clinics

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



c) Indoor Patient Services

All indoor services are available free of cost including medicines, consumables, investigations and procedures. In the reporting period a total of 12,611 patients were admitted for various conditions which includes surgical ward (170), medical ward (173), Peads ward (266), Obs/Gynae ward (1,411) and ER (10,747). 12,368 discharged, 236 became LAMA, 37 deaths and 184 referred.

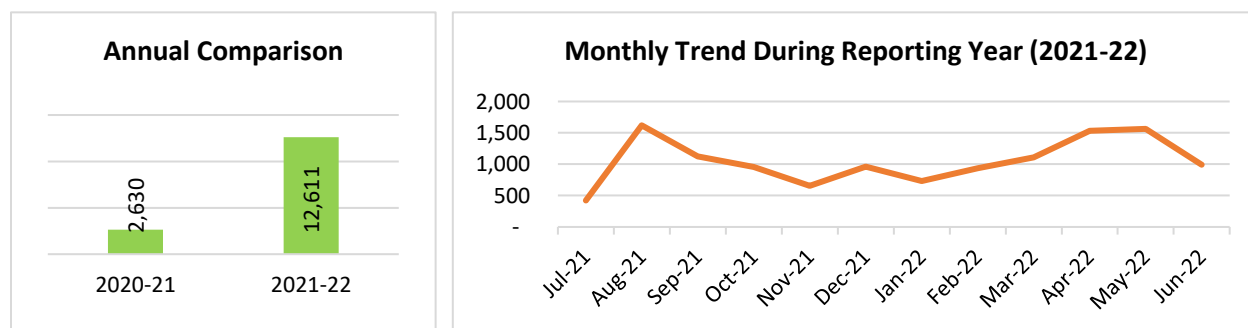
Pediatrics & NICU: 266 admissions for post newborn complications, delayed cry, Pneumonia, Fits, Bronchiolitis, Sepsis, AGE with severe dehydration, nephrotic syndrome, sepsis, urosepsis, Measles with multisystem involvement, Malaria, Poisoning, petrol ingestion, UTI, abscess, IUGR, ARDS, delayed cry, hemorrhagic disease, LNNS, acute tonsillitis, viral croup, hypovolemic shock, respiratory distress, prematurity/preterm, meconium aspiration, pulmonary TB and Down syndrome.

Medical: 173 admissions for Myocardial Infarction, Diabetes mellitus/diabetic foot, menorrhagia, COPD, post COVID pneumonia, cutaneous Leishmaniasis with secondary infection, spondylitis, hepatic encephalopathy, hypertension, IHD/CCF and Asthma etc.

Surgical: 170 admissions for hemorrhoids, rectal polyp, hernias, acute appendicitis, renal calculi with hydronephrosis, bladder stones, abscesses, cholecystitis/gallstones, abscesses, trauma-lacerations, anal fissures, hydrocele and lipoma.

Gynecology/Obstetrics: 1411 patients admitted for post-delivery complications, obstructed labor, normal labor, bilateral tubal ligation retained placenta, PV bleeding/anemia and caesarean and the rest were day care admissions in ER observation ward.

Below Graphs shows monthly trend of IPD admissions at Cat-D Mamad Gat during Jul-2021 to Jun-2022.



d) Maternal and Neonatal Child Health Services (MNCH)

Cat – D hospital Mamad Gat started providing Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services through trained and qualified staff including gynecologist, female medical officers and nursing staff, LHVs and trained birth attendants. The MNCH unit is equipped to comply with MHS DP standards. Antenatal and postnatal care clinic, supported by a 24/7 Labor Room and round-the-clock availability of obstetrical surgical team ready to cater for planned deliveries and emergency complicated obstetrics cases including C-sections & Hysterectomies. During this year, the unit entertained 2,718 antenatal and post-natal visits and conducted 1,358 clean and safe deliveries including 21 C – sections (including one on cadaver). 10 women who delivered at home or unregistered maternity centers with Retained placenta for several days especially two were 8 and 12 days respectively. All were admitted and successfully managed by gynecologist with team and health education given regarding safe motherhood. Others conditions/complications managed include bilateral tubal ligation, instrumental vaginal delivery, breech, pre-eclampsia delivered & discharged stable and eclampsia delivered & discharged.

Success story

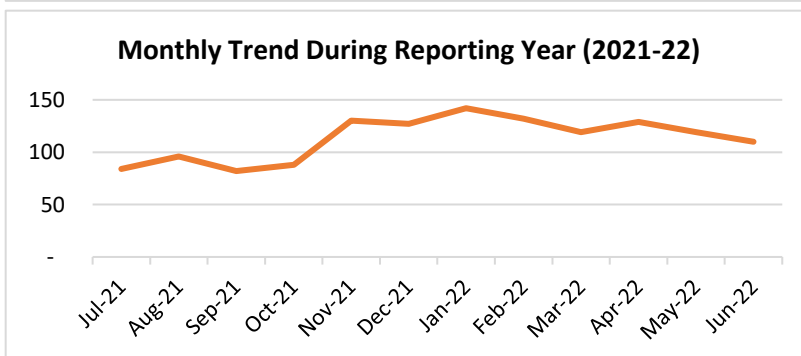
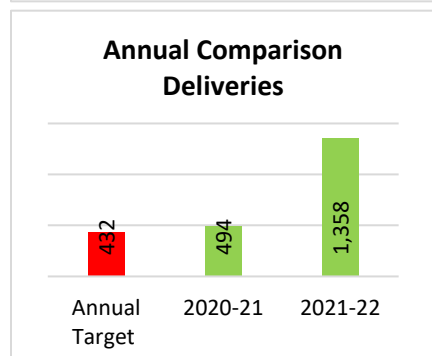
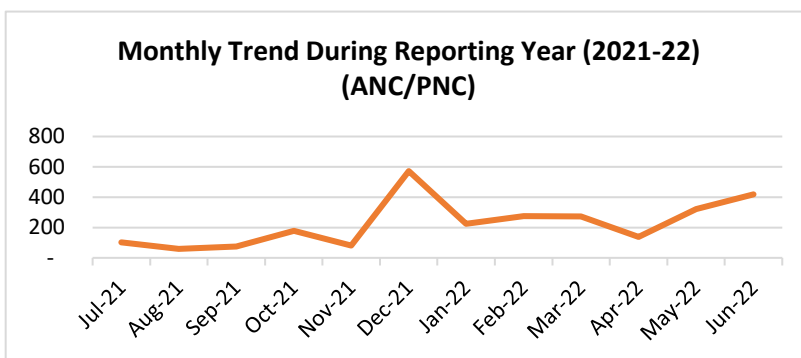
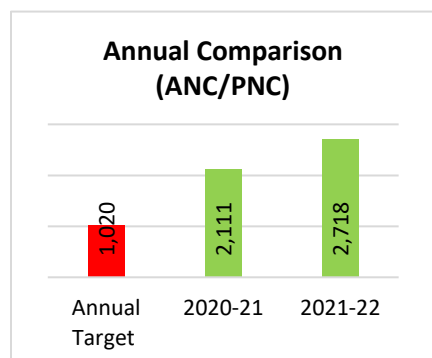
Birth of a baby via the longest procedure (Emergency C-Section followed by Hysterectomy) in history of Cat-D Mamad Gat hospital

35 years old pregnant (G6P4) with placenta accreta was brought in a state of Shock due to huge blood loss as failed induction was attempted by local LHV. Emergency Cesarean Section was performed and a healthy baby boy delivered but due to uncontrollable bleeding, emergency hysterectomy was considered to save the life of the mother. Pressure packs were kept for 36 hours to prevent non-surgical bleeding (oozes) in pelvic floor and removed accordingly to complete the surgery. During the management multiple blood pints and FFPs were transfused.

The procedure was completed by gynecologist and surgeon along with anesthetist and other staff in seven hours.

Both the mother and baby were discharged as healthy and were followed up.

Below graph shows monthly trend of ANC/PNC visits and institutional deliveries conducted in Cat-D hospital Mamad Gat.





Picture 1: A happy and satisfied beneficiary at birth of his child, picture 2: Twins and picture 3: Triplets delivered at Cat-D hospital Mamad Gat

e) Neonatal Unit

Neonatal care unit at Cat-D hospital Mamad Gat is equipped with 2 baby incubators, patient monitors, 2 phototherapy machines, 2 radiant warmers, and infusion pump. A pediatrician, qualified medical officers and nursing staff have been deployed and providing round the clock services for the admitted critically ill children under the supervision of consultant Pediatrician. In the reporting Period 141 for post newborn complications i.e. sepsis, respiratory distress, prematurity/preterm and meconium aspiration.



A baay receiving intensive neonatal care at Cat-D hospital Mamad Gat

f) Immunization

During the reporting period, 4,040 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). 455 children have been vaccinated against BCG, 1,573 against Polio, 1,098 against Penta, 407 Measles and 507 women received TT vaccination as per EPI schedule in the reporting period.

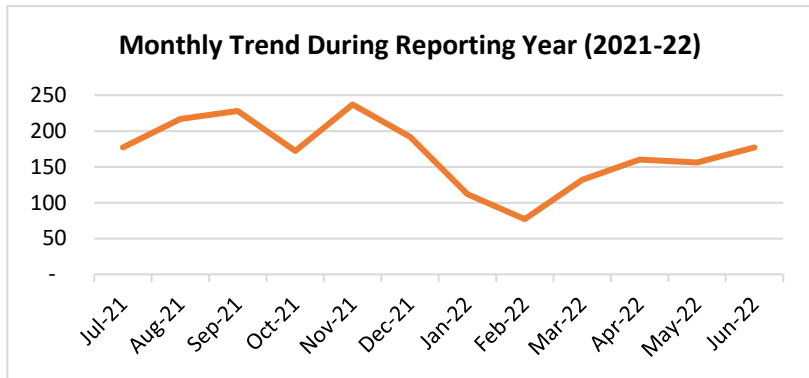
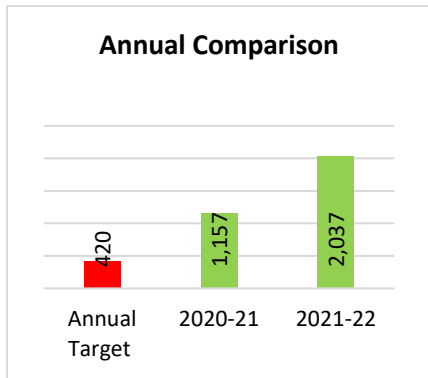
g) Surgical Services

Two Operation Theatres (OTs), fully equipped with all the necessary equipment (i.e. OT table/lights, anesthesia machine, cautery, sigmoidoscope etc.), medicine and consumables remained operational to provide free of cost services during the reporting period. A total of 2,037 surgeries were performed including 196 major (under spinal/gA) & 1,793 minor. The major surgeries included appendectomy, hernia/mesh repairs, hemorrhoidectomy, hydrocele, polypectomy, foreign body, BTL, GTN ,



Surgical and anesthesia teams are performing a surgical procedure on a 10 years boy, for a Hydrocele

circumcisions , Cholecystectomy, Caesareans, pilonidal sinus, polydactyly, Lipoma and fistula etc. All surgeries were conducted under strict Infection Control and under the supervision of a qualified Anesthetist. All patients were screened for hepatitis, HIV, blood grouping, fitness before the procedures.



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, six days a week i.e. Monday to Saturday. During the reporting period, 5,301 patients were provided the dental services, among which the major cases were surgical tooth extractions (1052), fillings (759), Root Canal Treatment (1733), drainage (61), Irrigations (66), scaling/root canaling (723), dental consultations (762) and 86 other dental services. Patients are routinely screened for HIV, hepatitis B virus and hepatitis C virus before dental procedures. An old damaged dental X-ray (beyond repair with huge cost) was replaced with a new dental x-ray unit.

**Success Story:
 First Dental Admission for Odontogenic Facial Space Infection in history of Cat-D Mamad Gat**

A 9 years old boy with marked left side Facial swelling (odontogenic facial space infection) caused by fractured maxillary left incisors was admitted, it was the first patient admitted at dental ward. The tooth which caused the infection was extracted and pus drained. He received in patient care for three (03) days and discharged in healthy condition with home treatment.

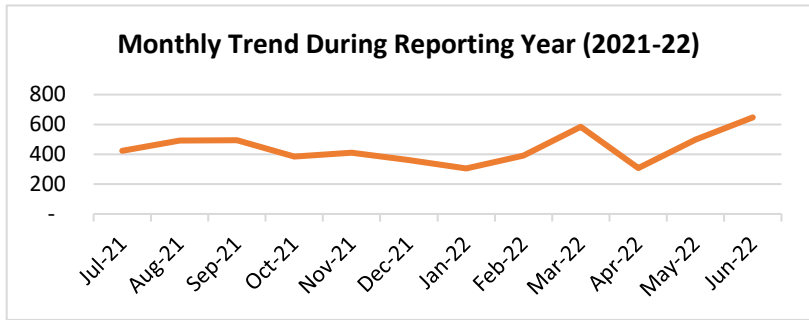
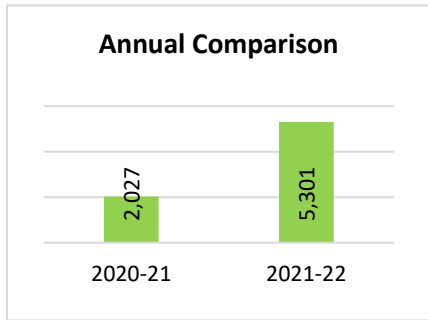


Success story#2:

A patient with Dentoalveolar fracture (trauma) (picture 1) is repositioned with wire and sutured (picture 2) was examined after 15 days with successful healing and recovery (picture 3)



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

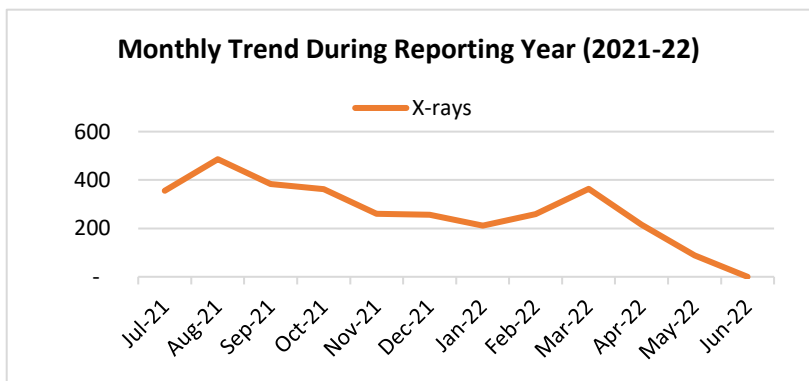
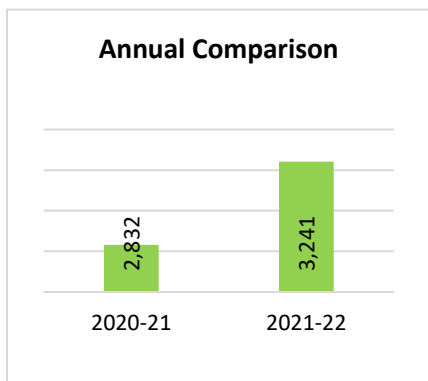
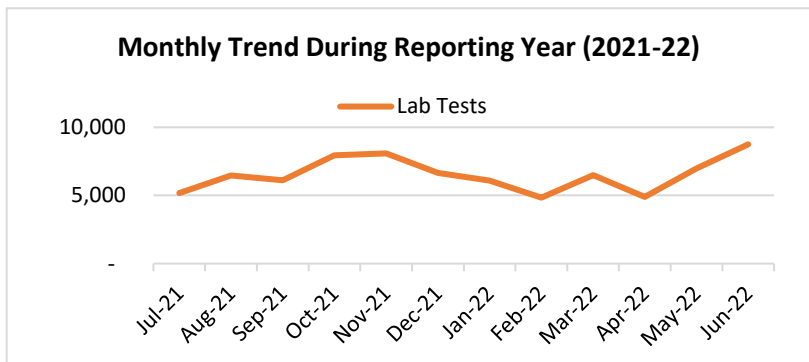
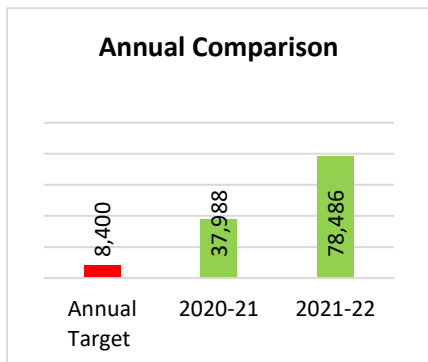


i) *Diagnostic Services (Lab & X-Rays)*

Cat-D Hospital, Mamad Gat, 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 MHS DP. During the reporting period, 81,727 investigations performed which includes 78,486 laboratory diagnosis and 3,241 x-rays.



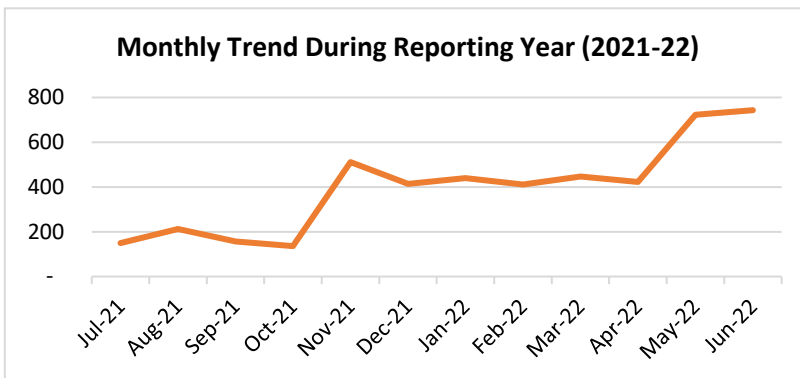
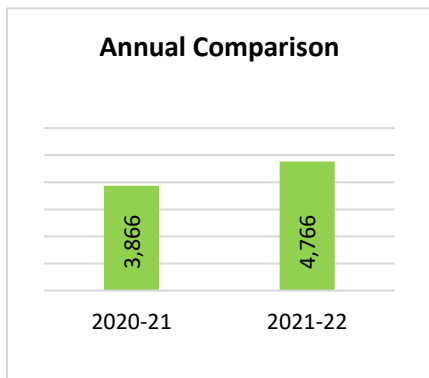
A new computed radiography (CR) system i.e. Fuji Capsula X11 with laser printer, UPS abck up and air condition installed with very good results.



j) *Ultrasound services*

The Cat-D Hospital, Mamad Gat, offers round the clock free of cost Ultrasound services to patients attending OPD Clinics, A&E department and admitted in indoor units. The Ultrasound services remained fully functional during this period. 4,766 Ultra-sonographies (general and obstetrics).

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

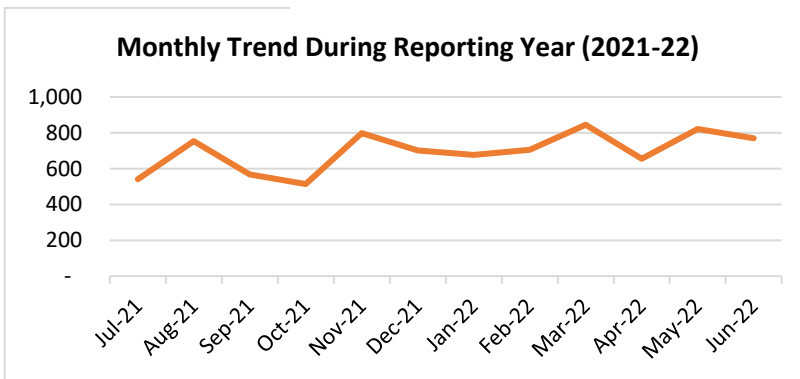
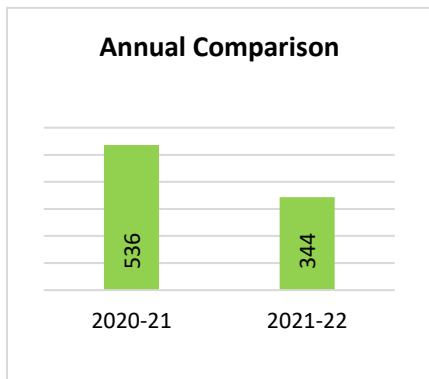


k) *Electrocardiography (ECG)*

Cat-D Hospital, Mamad Gat, offers round the clock free of cost ECG services to patients attending OPD Clinics, A&E department and admitted in indoor units. The diagnostic services remained fully functional during this period. 344 ECG conducted during the Period.



A nurse is performing an ECG of a patient



l) COVID-19 Services

Cat-D Hospital, Mamad Gat, offers both COVID-19 Sampling and vaccination facility to the local population. There are 07 dedicated CVCs (01 static at Mamad Gat hospital, 4 BHUs and 02 mobile centers) are established for Covid-19 sampling and vaccination in the proximity.

Screening as well as vaccination were available throughout the reporting period. 1,677 nasal swabs were collected and sent to DHO in UTM for PCR test in Peshawar. Total 17,453 Doses were administered which include Dose 1 (8,395), Dose 2 (8,222) and booster doses (836).

Dedicated vaccination counters were established for armed forces, teachers, male and female.

m) Vertical Programs

Malaria Program

During the reporting year, 2,548 suspected malaria patients visited the Hospital and among them 111 were confirmed with microscopy.

Tuberculosis Program

Among the patients visiting the Out-patients Department, 206 were suspected of Tuberculosis. 11 patients were confirmed with microscopy.

Hepatitis Screening and Treatment

6,593 patients were screened for Hepatitis B & C and HIV and among them 67 cases of Hepatitis B and 61 cases of Hepatitis C were positive with RDTs and have been referred for confirmation by PCR method.

4. Pharmacy

Cat-D hospital Mamad Gat has a central warehouse and satellites pharmacy at 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 the medicine are distributed to the satellites pharmacies on demand. Satellite pharmacy 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. Physical count was completed in January.



Dr Qazi Afsar Khan checking stock at main pharmacy during his monitoring team visit on 23 September 2021.

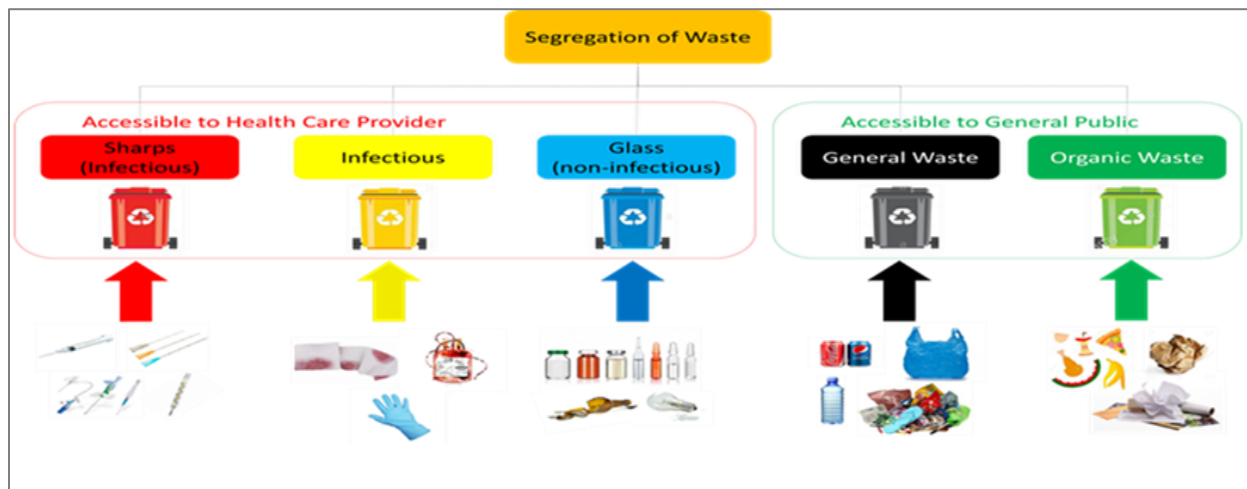
5. Infection Prevention (IP) & Healthcare Waste Management (HCWM)

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

Establishment of Gynae/OBs OT

In December, 2021, additional OT was functionalized for gynecological and obstetric surgeries with anesthesia machine, hydraulic OT table, fixed and mobile OT lights, central oxygen supply, suction machine and a baby warmer. Now two operation theaters are ready to cater general surgeries or Obs/gynae procedures.

HECT-CL: Hand-held Exothermic Crystallization Thermo-therapy for Cutaneous Leishmaniasis

Thermal therapy machine was added and will become functional for the treatment of cutaneous leishmanial in addition to injectable (glucantime), oral (Miltefosine) and Cryo-therapy for management of cutaneous leishmaniasis. Currently Cat-D hospital Mamad Gat is the one of the fewer centers where all options for the treatment of cutaneous leishmaniasis is available.



Campaigns: Screening for HIV, Hepatitis B & C

Two screening and awareness campaigns for HIV, Hepatitis B & C were conducted (on 16 February and 12 March 2022) in collaboration with Provincial district HIV, and Hepatitis programs at were carried out at Girls Middle School Chinari and Army Brigade Mamad Gat. The awareness sessions were followed by on-the-spot screening for three communicable diseases i.e. HIV, Hepatitis B and C. Total 426 students, teachers and forces men were screened at Girls Middle school (56) Army camp 150.



HIV, Hepatitis B&C screening at army brigade Mamad gat by Cat-Mamad Gat, district/provincial lab teams on 16 March 2022

Preparedness for Measles and Rubella Campaign

An isolation and response ward was readied for children suffering from the Adverse Events Following Immunization (AEFI) during 12 days MR campaign from 12-17 November, 2021.



AEFI preparedness: response ward & supplies

Preparation for emergency situations due to weather

On the direction of DG health and DHO offices, 6 beds were spared for the patients could be suffering from heat stroke due to currently prevailing heat wave and 7 beds for high incidence of diarrhoea/cholera cases in Moonsoon in 2022, supplies made available. Regular reporting is sent out to focal persons.



Supplies for heat stroke and cholera patients

Newly Added Equipment

Following equipment received and put to use in service areas.



From L to R: CBC machine, baby warmer, phototherapy, CTG machine and 6 baby suction machines



From L to R: Dental chair, Colour Doppler ultrasound machine and sigmoidoscopy equipment



From L to R: Fuji Capsula 11 CR system and Dental Xray

Strengthening of Vertical programmes

Now screening and treatments of TB, HIV, Hepatitis B & C, malaria available round the clock. Supplies are received from the district as well as provincial programmes and reports regularly provided.



Collaborative meeting with programme director Dr Aneesa at her office in Peshawar for the improvement of CEMOC services at Cat-D Mamad Gat

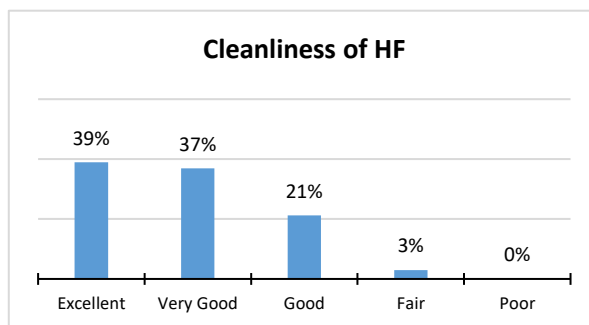
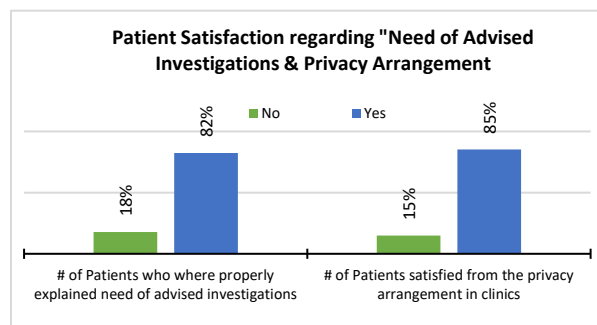
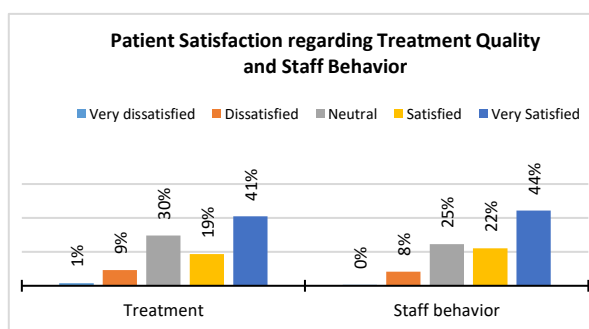
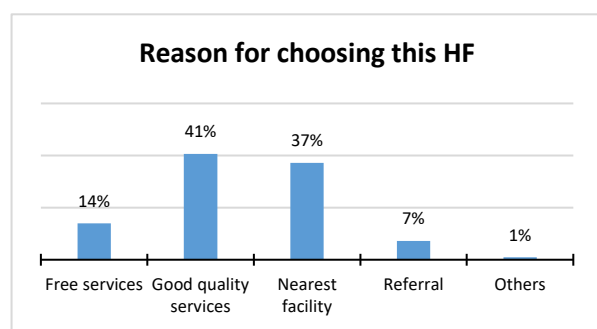
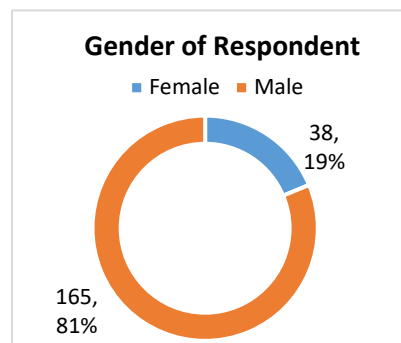


Dr Abdul Khaliq TB Programme Coordinator GFATM visited for the TB lab assessment

7. 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 60% respondents being satisfied from the treatment quality and 66% 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.

8. Trainings and Assessments

Drug use during ANC/PNC periods:

In collaboration with DHO and MNCH program KP, one WMO, Dr Shafaq Bakhtawar participated in a five days ToT training on "Current use of drugs during Ante/Post-natal period with identification of high risk cases and referral to the relevant health facilities from 21-23 March 2022.

3 Days Spinal Anesthesia training:

In collaboration with DHO and MNCH program KP, one Anesthetist, Dr Usama (consultant) participated in a Three days training on Spinal Anesthesia at Kuwait teaching hospital Peshawar from 29th- 31st March 2022. It was a ToT training only doctor participated from Mohmand.

Sputum smear microscopy:

In collaboration with district TB and DHO office, one lab technician was trained on sputum smear microscopy organized by PTB Peshawar at HMC lab.

Dengue Case Management Training:

One MO, attended a two days ToT training on the management of dengue cases organized by the integrated vector and malaria control programmes KP at Peshawar on 24-25 March 2022.



Dr Ali Roza MO, Cat-D Mamad gat hospital is receiving a certificate of participation at a Two Days Dengue Case Management Training organized by IVC/MCP KP at Peshawar

4 Day Training on patient safety, occupational therapy, and good lab practices:

Two MERF staff (One MO and One Lab technician) this 4 days training on patient safety, occupational therapy, and good lab practices organized by WHO in collaboration with Khyber Medical University Peshawar (also venue there) from 24 to 27 May, 2022.

9. External Monitoring and Visits

Surprise Visit by DHO Mohmand:

DHO Mohmand, Dr Rafiq Hayat paid a surprise visit on 10 March 2022 and inspected service delivery areas. During the visit the Quarterly Progress report (Oct-Dec 2022) of category D hospital Mamad Gat was also handed over to him.

Visit By Tehsil Mayor:

Newly elected mayor tehsil Safi-Halimzai visited the hospital on 19 January, check the hospital service areas and appreciated the good organization of the hospital and assured his support.

Physical Verification by DGHIS Provincial team:

Dr. Mushtaq Ahmad (Deputy Director EPI Programme), Dr Muhammad Ikram Coordinator DHSRU KP health department and Mr. Abdul Haq (Electro Medical engineer Mobile hospital programme) visited on 12 December 2021 and verified the equipment provided to Cat-D Mamad Gat hospital. All equipment which were previously received in 2021 were all verified.

Inspection Visit By secretary Health team:

Deputy Sectary health (Mr. Irfanullah Wazir) and team (Dr Sayed Ijaz Shah and DHO Mohmand) visited on Monday 21 March 2022) and inspected the hospital in detail and met the staff to discuss the progress and issues. They praised the staff for their achievements at the hospital here.

Surprise Visit by Provincial team:

A surprise visit by the provincial team of DGHIS was paid on 10 March 2022 late in the afternoon. They checked the hospital service delivery spots in the hospital and appreciated the services and cleanliness. The team included Mr. Fazal Akbar Additional Secretary health, Dr. Attaullah Coordinator Health Department and Mr. Waheed DMO.

22 Brigade Visit:

Brigadier Mubashar sb (22 brigade) visited on December 20 and checked the available services and inaugurated the newly added equipment and new gynecology/obstetrics Operation Theater.

11 Corp media team visit:

A media team from XI Corps Peshawar visited the hospital.



Dr Rafiq Hayat, DHO Mohmand is inspecting NICU during his surprise visit on 10 March 2021



Provincial team Mr. Fazal Akbar Additional Secretary health, Dr. Attaullah Coordinator Health Department and Mr. Waheed DMO debriefing on their visit on 10 March



Newly elected Tehsil Nazim, Mr Hafiz Taj Wali Khan visited and checked the hospital on 19 January 2022



Mr. Irfanullah Wazir checking OT and planting tree on 21 March 2022.



*Picture#1: Brigadier Mubashir Sb from 22 Brigade inspecting incubator during his visit to Mammad Gat.
Picture#2: Media team from XI Corps during their visit and coverage of Cat – D Hospital Mammad Gat*



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 budgeted 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 was hired by MERF and deployed at Cat – D Hospital Mamad Gat.

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	4
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	3
26	Dai/Aya	4	3
27	Ward Orderly	5	4
28	Chowkidar	5	4
29	Mali	1	1
30	Washer man	2	2
31	Sweeper	14	13
Total		100	95

11. Problems Encountered and Actions Taken

- *Limited availability of electricity*

Power / transmission lines from WAPDA are available, however electricity provision is only for 4-6 hours in 24 hours and only for one hour in the morning working hours from 1:00PM to 2:00 OM. Voltage is not sufficient to operate heavy equipment smoothly like X-ray machine. Although MERF has made alternative arrangements including repairing existing generator and installation of solar system, double source 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. An express line from the local grid to the hospital has been approved with budget allocation by health department but no progress seen on the ground as of 30th June, 2022.

- *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. The C&W team had visited in last quarter of 2021, created a map of construction and site identified but no progress made after their visit.

- *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, most of the equipment either missing necessary accessories or requiring major repairs. This will result 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 (one dental and Fuji Capsula 11 CR system purchased), anesthesia machines would ensure availability of services round the clock.

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)	Partially Available	100% (24/7)	100%	Observation	Periodic
		Safe Drinking water	Partially Available	Yes (100%)	100%	Observation	Periodic
		Availability of clean toilets for Male and Female staff/patients in every block/department.	Partially Available	Yes (100%)	100%	Observation	Periodic
		Telephone Phone line/Inhouse intercom system.	No	Yes (100%)	100%	Observation	Periodic
		Access to computer with internet connection.	No	Yes (100%)	100%	Observation	Periodic
		Ambulance Service	NO	Yes (100%)	100%	Observation	Periodic
		Availability of the Drainage System	No	Yes (100%)	100%	Observation	Periodic
	Basic Equipment	Availability of bio-medical and surgical equipment	Partially Available	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly
		Other equipment including office and IT equipment	No	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly
		Furniture	Partially 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	Partially Available	Satisfactory	100%	Observation	Periodic
		Regular Sterilization of Instrument/equipment	No	Yes	Yes	Observation	Periodic

	Hygiene and Waste Management	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	Very Poor	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	NA	Yes (100%)	100%	HR record	Monthly Attendance Record
	Specialist	Essential specialists filled as per proposed posts	NA	Yes (100%)	Yes	HR record	Monthly Attendance Record
	Bio metric staff attendance System	Bio metric attendance System	Not Available	Yes (100%)	Yes	Observation	Periodic
	Staff Presence	Availability of clinical staff as per duty roaster	Not Available	100%	100%	Staff duty Roster, biometric record	Periodic
		Availability of all support staff	Not Available	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).	Not Available	Yes (100%)	Yes	HR record	Periodic
		All required credentials are up to date for nurses Diploma/Experience. Relevant registration.	Not Available	Yes (100%)	Yes	HR record	Periodic
		All required credentials are up to date for mid wives / LHVs.	Not Available	Yes (100%)	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.)	Not Available	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)	Partially Available	100%	100%	Stock Record/LMIS system	Monthly
	Lab Services	Lab tests offered (As Per MHSDP Standard)	Partially Available	100%	100%	EMR reports	Periodic
		Lab Equipment maintenance	Partially Available	100%	Yes	Observation	Periodic
	OT Services	All required services provided / procedures performed (Available as per MHSDP standard and as per annexure list)	Partially Available	100%	Yes	Observation	Periodic

	Blood Bank Services	Availability of Blood Bank in vicinity.	Functional	Yes	Yes	Observation	Periodic
	Emergency Services	All required lifesaving services provided / procedures performed	Yes	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
Implementation of Vertical Program	Family Planning Services	Guidelines on family planning	Available	Yes	Yes	Observation	Periodic
		Space available for FP counselling	Available	Yes	Yes	Observation	Periodic
	MNCH services	Guidelines on MNCH	Available	Yes	Yes	Observation	Periodic
		Space available for MNCH counselling	Available	Yes	Yes	Observation	Periodic
	EPI Services	Guidelines on EPI and Vaccines	Available	Yes	Yes	Observation	Periodic
		Space available for EPI	Available	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	Available	Yes	Yes	Observation	Periodic
		Space available for Dengue / Malaria	Available	Yes	Yes	Observation	Periodic
Health Management Information System (HMIS)	General Services	Electronic Medical Record System	Not Available	Yes	Yes	Observation, EMR reports	Periodic
		Average Daily OPD Attendance	80-100	170	211	OPD Register, EMR	Monthly
		Bed Occupancy Rate (monthly)	Not Available	35%	68%	Daily Bed Statement Register, EMR	Monthly
		Average daily emergency service Utilization	Not Available	18	50	Emergency Register, EMR	Monthly
	Clinical services	Number of Surgical Procedures (minor + major) Performed (monthly)	Not Available	35	204	OT Register, EMR	Monthly
		Percentage of Hospital Death Among Admitted Patients	Not Available	<5%	2%	Admission File, EMR, mortality register	Monthly
	Diagnostic	Monthly Lab Services Utilization	Not Available	700	7,849	Lab Register, EMR	Monthly
		Monthly Diagnostic Services Utilization (X-ray, Ultrasound, ECG)	Not Available	450	835	X-Ray, ECG, Ultrasound Registers, EMR	Monthly

	EPI	Percentage of Full Immunization Coverage	Not Available	27%	41%	EPI Register	Monthly
		Penta immunization coverage	Not Available	35%	75%	EPI Register	Monthly
	Emergency maternal Obstetrical Services (EmOC)	Number of Antenatal Care (ANC) visit (Monthly)	Not Available	85	241	MNCH Register, EMR	Monthly
		Number of Normal Delivery Performed (Monthly)	Not Available	35	134	Labour Room Register, EMR	Monthly
		Number of Caesarean section performed (Monthly)	Not Available	1	2	Labour Room Register/OT Register	Monthly
		Percentage of New born Case Fatality in Health Facility	Not Available	<5%	1.3%	Labour Room Register	Monthly
	Other records	DHIS/ HMIS Reporting Compliance	Not Available	100%	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting timelines	Not Available	100%	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting completeness	Not Available	100%	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting accuracy	Not Available	90%	97%	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



Plot No. 59, Flat No. 2,

G – 8 / 1, I & T Center Islamabad

Ph. No. +92 51 8443306

Fax No. +92 51 8443307

E-mail: info@merf-pakistan.org web: www.merf-pakistan.org