

ST. MARTIN DE PORRES HOSPITAL, AGOMANYA
HALF YEAR REPORT – 2008

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HOSPITAL PROFILE

- ✓ Saint Martin de Porres Hospital was established in 1946 by the Rt. Reverend Joseph Oliver Bowers as a Maternity Home/Clinic
- ✓ However, in April 1997, it was upgraded to a hospital status by the Ministry of Health in recognition of the sterling health care delivery services offered at the facility.

VISION/MISSION

VISION

To continue Christ's healing ministry in bring healing to the greatest possible number of people in the provision of total quality patient care through healers with good ethical and moral standards; who are conscientious as well as professionally competent, motivated and united in their common respect of fundamental human values.

MISSION

To provide high quality health care in the most effective/efficient and innovative manner, specific to the needs of the communities we serve and at all times acknowledging the dignity of the patient.

CORE VALUES

- To continue the healing ministry of Christ
- To provide health care with competent staff with the flair for creativity and ingenuity
- Provide a safe environment for staff and clients alike
- We are ascribe to the tenet of the philosophy
 - No Mercy killing (euthanasia)

- No family planning
- No corruption

POLICY OBJECTIVES AND KEY PRIORITIES

- ✓ To promote and maintain the identity of the NCHS and strengthen the application of Catholic Ethics and moral health care delivery services
- ✓ To improve the organization and management efficiency of NCHS with emphasis on Partnerships, Human Resource Development, Health Information Systems and Supportive Supervision/Monitoring and Evaluation
- ✓ To improve the quality and access to health care services of communities
- ✓ To strengthen NCHS' response and approach to the HIV/AIDS pandemic in Ghana
- ✓ To improve and develop efficient and effective drugs and medical supplies systems which will ensure the availability of affordable high quality items
- ✓ To promote the development of alternative financing mechanisms and improve upon existing financial management practices at levels of the NCHS
- ✓ To promote and facilitate research activities in all areas of work of the NCHS

These above Policy Objectives of National Catholic Health Services fall within the broader policy frame work of the Ministry of Health.

HUMAN RESOURCE – (CATEGORIES OF STAFF)

NO:	CATEGORY	GRADE	NO. ON ROLL	NO. AT POST	REMARKS
1.	Medical Service	Senior Medical Officer	1	1	Secondment
		Medical Officer	3	1 1 1	Secondment Cuban Brigade German
2.	Nursing Service	Senior Nursing Officer	2	1	
		Nursing Officer	1	1	
		Senior Staff Nurse (Eye)	1	1	
		Staff Nurse (SRN)	1	1	
		Staff Nurse (RGN)	9	8	One on secondment One in school
		Principal Midwifery Officer	1	1	
		Supt. Midwifery Officer	4	4	One on secondment
		Senior Midwifery Officer	2	2	One on contract
		Staff Midwife	1	1	
		Supt E. N	4	4	

		Enrolled Nurse	1	1	
		Senior C. H. N	4	4	
		C.H.N	1	1	
3.	Pharmacy	Senior Pharmacist	1	1	
4.	Dispensing Tech	Senior Dispensing Technician	1	1	
		Dispensing Technician	4	3	
5.	Laboratory	Principal Laboratory Assistant	1	1	
		Senior Laboratory Assistant	1	1	
		Laboratory Technician	1	1	
		Assistant Laboratory Technologist	1	1	
6.	Radiology	X-ray Technician	-	-	
		Principal X-ray Assistant	1	1	
7.	Biostatistics	Senior Biostatistics Officer	1	1	
		Medical Records Assistant	4	4	
8.	Health Service Admin.	Principal Health Service Administrator	1	1	
9.	Accounts	Accountant	1	1	
		Chief Accounts Officer	3	3	
		Accounts Officer	2	2	
		Accounts Assistants	6	6	
10.	Executive/Clerk	Senior Executive Officer	1	1	
11.	Secretarial	Stenographer Grade 1	1	1	
12.	Orderly	Hospital Orderly	8	8	
13.	Ward Assistant	Senior Ward Assistant	5	5	
14.	Labourer/Scavenger	Labourer	1	1	
15.	Transport	Extra Heavy Duty Driver	3	3	
16.	Maintenance	Senior Works Supt.	1	1	
17.	Laundry	Laundryman	2	2	
18.	Security Guard	Security Guard	2	2	
		Day watchman	-	-	
19.	Social Worker	Social Welfare Officer	1	1	
20.	Store Officer	Supply Officer	1	1	
		Principal Store-keeper	1	1	
21.	Field Technician	Field Technician – Disease Control (Leprosy)	1	1	Secondment
22.	Nurse Anaesthetist	Grade 11	-	1	
23.	I. T	ICT Officer	1	1	

CATEGORIES OF SERVICES

OUTPATIENT SERVICES

- a) Generalist consultation
 - i) Laboratory investigation
 - ii) X-ray – Diagnostic Services (Currently not in operation)
 - iii) Ultrasound scanning
- b) Specialized Services
 - HIV/AIDS
 - PMCT+
 - Clinical
 - Home Based Care
 - Adherence Counselling
 - VCT

IN-PATIENT SERVICES

- a) Generalist In-patient Care
 - Laboratory investigations
 - X-ray – Diagnostic services (currently not in operation)
- b) Surgical Operations
 - Caesarean Section
 - Hysterectomy – Fibroid, Abdominal
 - Laparotomy
 - BTL
 - Herniorrhaphy
 - Appendicetomy
 - Incision of Abscesses
 - Excisions – Lipoma

EYE CARE SERVICES

- SCREENING
- TREATMENT

EMERGENCY CARE

- Surgical emergencies (C/S, Strangulated Hernia, etc)
- Pediatrics emergencies

- Road Traffic Accidents (RTA)
- Home, Industrial and Occupational accidents etc

INFRASTRUCTURE STATE

There is the need for a facelift of the current infrastructure through painting and refurbishment.

SUPPORT SERVICES (ESTATE)

The hospital has five (5) blocks;

- i) Mortuary
- ii) Wards
- iii) OPD
- iv) RHC
- v) Laboratory

They have been painted and structurally safe for both staff and clients.

SUPPORT SERVICES (EQUIPMENT)

- All tracer equipment at theatre, Laboratory and Maternity are in good condition.
- There is an in house preventive maintenance programme

WORKLOAD ANALYSIS – OUTPUT

		2007	2008
• Doctor Patient Ration	=	1:5401	1:9134
• No. of patients seen by Doctor	=	5401	9134
• No. of patients seen by medical assistant	=	5401	9134
• Total OPD attendance	=	27004	45,668
• Total Insured	=	17667	36,785
• Total non-insured	=	9337	8,883

WORKLOAD CONTINUOUS

	2005	2006	2007	2008
Total OPD attendance	12567	22944	27004	45668
Admissions	1509	1661	1793	1927
% Occupancy	35.3	35.5	36.9	33.3
Average daily occupancy	30	31	32	28.3
Average length of stay	3.6	3.3	3.2	3.0

IN-PATIENTS TOP FIVE CAUSES OF MORBIDITY – 2007

NO:	DISEASE	FREQ.	%
1.	Malaria	808	38.0
2.	Diarrhoea Disease	217	10.2
3.	Anaemia	215	10.1
4.	Pneumonia	209	9.8
5.	Typhoid Fever	103	4.8

TOP TEN ADMISSIONS/MORBIDITY – 2008

NO:	DISEASE	FREQ.	%
1.	Malaria	535	36.3
2.	Anaemia	148	10.0
3.	Diarrhoea Disease	148	10.0
4.	Pneumonia	127	8.6
5.	Hypertension	49	3.3
6.	AIDS/HIV	49	3.3
7.	Hernia	48	3.2
8.	Typhoid	46	3.1
9.	Tuberculosis	19	1.2
10.	Other heart disease	19	1.2
11.	All other diseases	285	19.3

TEN TOP CAUSES OF OPD MORBIDITY – 2007

DISEASE	FREQ.	%
Malaria	9120	38.8%
Hypertension	2347	10.0%
Other ARI	1759	7.5%
Diarrhea Diseases	1528	6.5%
Rheumatism & Join Pains	1434	6.1
Anaemia	1139	4.8%
Pneumonia	436	1.9%
Typhoid Fever	400	1.7%
Diabetes Mellitus	255	1.5%

HIV/AIDS	342	1.4%
All other diseases	4646	19.8%

TOP TEN CAUSES OPD MORBIDITY – 2008

NO:	DISEASE	FREQ.	%
1.	Malaria	10354	34.9
2.	Hypertension	3462	11.6
3.	Other ART	2914	9.8
4.	Rheumatism and Joint Pain	2647	8.9
5.	Diarrhea Diseases	1339	4.5
6.	Skin disease and Ulcer	992	3.3
7.	Anaemia	755	2.5
8.	Diabetes Mellitus	457	1.5
9.	HIV/AIDS	447	1.5
10.	Virginal Discharge	405	1.3
	All other diseases	5862	19.7

IN-PATIENTS TOP 5 CAUSES OF MORTALITY – 2007

NO:	DISEASES	FREQ.
1.	HIV/AIDS	35
2.	Hypertension	15
3.	Pneumonia	14
4.	Anaemia	14
5.	Malaria	13

TOP TEN CAUSES OF IN-PATIENT DEATH – 2008

NO:	DISEASE	FREQ.	%
1.	HIV/AIDS	42	34.1
2.	Hypertension	19	15.5
3.	Cerebro Vascular Accidents	13	10.5
4.	Anaemia	8	6.5
5.	Pneumonia	6	4.8
6.	Malaria	5	4.0

7.	Diabetes Mellitus	4	3.2
8.	Diarrhoeal Diseases`	4	3.2
9.	Hepatitis	2	1.6
10.	Septicaemia	2	1.6
	All other disease	18	14.6

PROFESSIONAL INDICATORS

	2007	2008
Total no. of operations emergency + elective	103	596
Total no. of deliveries	338	606
Total no. of C/S emergency/elective	46	74
Total no. of perinatal outcome (premature del)	1	24
Total no. of still births (fresh, non-fresh)	9	23
Total no. neonatal admission	2	2

EMERGENCY C/S AND ELECTIVE

EMERGENCY		ELECTIVE		EMERGENCY	ELECTIVE
2006	2007	2006	2006	2008	2008
4	22	48	24	46	28

SURGICAL OPERATIONS (INDICATORS FOR C/S) – TOP 5

	2007	2008
CPD (cEPHALO PELVIC DISPROPORTION)	12	16
FOETAL DISTRESS	12	12
POST DARE	6	3
DELAY 2 ND STAGE	3	5
MALPRESENTATION	3	7

MATERNAL MORTALITY

2007

- For four (4) conservative times the institution has recorded zero per thousand live births
- Thus zero (0) maternal death for the period under review

2008: Two maternal deaths were recorded under the period of review which represents **2%**

CASE FATALITY

PAEDICTRIC DEPARTMENT

CASE FATALITY	2007 (JAN-JUNE)	2008 (JAN - JUNE)
Malaria	3%	2%
Pneumonia	1%	1%
Diarrhoea	0.39%	0.21%
Anaemia	2%	0.43%

This shows a downward trend

MEDICAL DEPARTMENT

CASE FATALITY	2007 (JAN-JUNE)	2008 (JAN - JUNE)
DKA	1%	0.13%
Asthma	-	0.27%
Pneumonia	1%	2%
CUA	1.21%	1.06%

SURGICAL DEPARTMENT

CASE FATALITY	2007 (JAN-JUNE)	2008 (JAN - JUNE)
Hernia	0%	0%
Typhoid Perforation	-	-
Post Laposratomy	-	-
Soft tissue sepsis	-	-

MATERNITY DEPARTMENT

CASE FATALITY	2007 (JAN-JUNE)	2008 (JAN - JUNE)
Eclampsia	0%	0%
PPH	0%	1%
C/S	0%	0%
Septic Abortion	0%	0%

ANTENATAL/PMTCT SERVICES

NO:	ITEM	TOTAL 2008	2007
1.	ANC Registrants	1018	-
2.	ANC Attendance	2898	24411
3.	No. accepting counseling	716	-
4.	No. tested	710	-
5.	No. positive	77	-
6.	Hospital deliveries (Pos Mother)	33	-

NB: *All babies delivered by positive mothers were given syrup Nevirapine according to the protocol*

DELIVERIES Total number of supervised deliveries under the period of review was 596, the same period last year recorded 336 on increase of 71%.

STILLBIRTHS: Stillbirths for the period were **11** whilst the some period last year was **14**.

CAUSES OF STILLBIRTHS

- PIH
- Late reporting to hospital
- Delay in referral from TBA

WOUND INFECTION RATE: Wound infection rate 0% respective to Hernia and C/S

POSTNATAL SERVICES

NO:	ITEM	TOTAL
1.	Registrants	1050
2.	Supervised Deliveries	960
3.	Non supervised deliveries	18
4.	No. ANC	6

EYE SERVICES

- 242 eye cases were seen and treated under the period of review
- Five were referred for further management

FINANCE

TOP FIVE (5) EXPENDITURES

1)	Salary and Allowance	=	GH ¢74,904.58
2)	Rural Allowance	=	15,393.80
3)	Utilities	=	12,586.42
4)	Motivation	=	7,506.41
5)	Education and training	=	6,648.06

AS AT JUNE, 2008

REVENUE IN OUTSTANDING = **GH ¢143,420.63**
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MATERIALS OUTSTANDING

Non drugs	=	GH ¢10,802.76
Drugs	=	<u>¢52,044.28</u>
Total		GH ¢62847.04
		=====

Balance supply cash GH ¢80,573.59
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Note if all bills are vetted and paid without any deduction

REVENUE VARIOUS A/C's GH ¢

Service Account	=	GH ¢105,666.76
Mortuary	=	48,527.05
Drugs	=	232,542.85
Contingency	=	6,582.33
Development fund	=	16,653.41
Total revenue cash		GH ¢409,972.40
		=====

EXPENDITURE

Service Account	=	GH ¢105,256.54
Mortuary	=	40,448.63
Drugs	=	235,439.98
Contingency	=	6,249.03
Development fund	=	15,247.08
Total expenses cash		GH ¢402,641.26
		=====
Surplus (Overall)		7,331.14

About 90% of the surplus amount comes from mortuary accounts only

PERCENTAGES

REVENUE – 2007	REVENUE – 2008	%
GH ₵398,946.64	GH ₵409,972.40	2.8% (+)

QUALITY ASSURANCE – 2007

NO	ITEMS	FREQUENCY	TOTAL NUMBER	PERCENTAGE
1.	Seen in 2hrs	68	100	68
2.	No unnecessary delay	72	100	72
3.	Patient Examined	88	100	88
4.	Told Diagnosis	80	100	80
5.	Told instruction about illness	68	100	68
6.	Told to return or not	73	100	73
7.	Privacy	73	100	73
8.	a) Received all drugs	87	100	87
	b) Received all drugs (from Rec)	494	520	95
	c) Drug in stock (from Rec)	124	160	77.5
9.	Understood pharmacy instruction	100	100	100
10.	Staff attitude very good	70	100	70
11.	Clinic very clean	70	100	70
12.	Emergency seen quickly	25	29	86.2
13.	Patient very satisfied	83	100	83

SUPPORT SERVICES (TRANSPORT)

- Three vehicles in good and serviceable condition
 - a) Toyota Hilux 1mv pick up - 2years
 - b) Opel Astra - 10years
 - c) Jeep Cherokee - 7years

SPECIAL INITIATIVES

- Motivational package for staff
- Hospital website (St. Martin's Hospital.org) operational
- Daily Morning Devotion at all Depts/Units and OPD Holy Mass on Wednesdays in every month being officiated by the parish priest
- Assumption of duty of hospital chaplain for staff and clients

ACHIEVEMENTS

- Install an overhead water tank at the mortuary
- Landscape the hospital
- 33 seater bus for Hospital Welfare Association
- Re-wiring of the main ward to the stand by power generator
- Provision of mosquito and wire gauze nets around the wards

CHALLENGES/CONSTRAINTS

- ❖ Inadequate staff accommodation
- ❖ High maintenance costs due to old structures and equipments
- ❖ Poor hospital grounds
- ❖ Inadequate professional staff
- ❖ High workload
- ❖ Inadequate staff strength

WAY FORWARD

- ❖ Infrastructural development i.e. begin the OPD extension project
- ❖ Re-introduce name tags
- ❖ Internal Audit Unit to be strengthened
- ❖ Start with microbiology examination at the laboratory