



MONTHLY REPORT ON OUTREACH HEALTH EDUCATION AND CLINICAL SERVICES **FROM 30TH MARCH- 30TH APRIL 2015**

The mangrove section has a total of 20 villages with an estimated population of 3,618 people. Since this area is neglected of health services, THE ST. JOHN OF GOD SERVICES continues to fight in achieving their set objectives of reaching this hard to reach area with quality, efficient and effective medical accessibility and affordability by rendering them outreach clinic services so that early case detection, treatment or referral can be done to reduce high death rate

However, the outreach clinic services started with a team of five members (one clinical officer-ABDULAI ALPHA, three nurses including one midwife- AMINATA A. CONTEH, LOVETTA Z. KABBA AND JANET S. KARGBO and a driver-ABU KAMARA) a representative from AU CHEBUEZE ANWUSONYE respectively and it also started with a temporal structure called TENT with partition of three rooms-one for maternity consultation, one for general consultation and the other for pharmacy while at Mamassah gave us their community hall where it was also partition into three (3) rooms as above . There are also temporal structures outside the tent and community hall where the patients wait for health education and clinical services to be rendered to them.

Below are pictorial representations of the different service posts



OUTREACH CLINIC POST



OUTREACH CLINIC STAFF



PATIENTS WAITING POST



HEALTH EDUCATION POST



REGISTRATION POST



IPC POST



MATERNITY POST



CROSS SECTION OF STAFF AND CHWS

MONTHLY CLINIC ATTENDANCE AND REFERRAL REPORTS

The outreach clinic services has got 12 clinical sittings with a total patients turnout of 177 people including all ages and two referral cases, one for acute abdomen (age 29) and the other for postpartum hemorrhage with severe anemia (age 19)

AGE RANGE	TOTAL PATIENTS
0-5	74
6-15	4
16-35	74
36-49	11
50 & ABOVE	14
TOTAL	177 PATIENTS

Attendance by sex

Male	Female	Total
55	121	177

**THE DISEASE CONDITIONS REPORTED BY THE DIFFERENT AGE CATEGORIES
FROM 30TH MARCH-30TH APRIL 2015**

Conditions	0-5yrs	6-15yrs	16-35yrs	36-49yrs	50 and above	Total
Malaria (susp)	42	2	23	2	1	70
Malnutrition	5	-	-	-	-	5
ARI	11	-	-	-	2	13
PUD	1	-	5	4	2	12
STI	-	-	30	2	-	32
Hernia	-	-	1	1	3	5
Enteric fever (susp)	3	-	2	-	-	5
Anemia	2	-	-	-	-	2
Others	26	3	17	9	8	63

ANTENATAL VISITS

First visit	46
Fellow up visit	8
Total	54

FINANCIAL REPORTS INCLUDING EXPENDITURES AND INCOME

EXPENDITURES

NO.	ITEMS	TOTAL COST (Ie)
1.	Mobilization and sensitization meeting	725,000
2	Purchased of outreach Equipment	5,474,000
3	Maintenance cost	401,000
<u>4</u>	Fuel	750,000
<u>5</u>	Drugs	1,800,000
<u>6</u>	Staff allowances	1,800,000
	TOTAL	10,950,000

INCOME

In the first month (30th March -30th April 2015) of the mobile clinic services, we are able to collect the sum of one million, Eight hundred and sixty five thousand Leones **(1,865,000)** from patients for program sustainability.

However, an account has been opened with the marampa community Bank under the direction of the financial administrator Aminata B. Bangura.

May while, Aminata B. Bangura- Financial administrator, Abdulai Alpha –Head of the outreach unit and Mr. Osman Thoronka- project coordinator are all signatory to the account.

ACHIEVEMENTS

- The establishment of the outreach clinic at mange acre section
- Community awareness of the clinic and it important
- Staff willingness to do job
- Discovery of little or lack of immunization coverage.
- The awareness of the outreach programme by the DMO of port loko district.

EVALUATION

A meeting was held with the opinion leaders of the mange acre section on the 1st May, 2015 to actually evaluate the outreach staff, their work and attitudes, community feelings about the clinic and their participants from 30th-30th April 2015.

OUT COME OF THE MEETING

- Community appreciated the outreach clinic services, the staff, and their work performances as a whole.
- Pray for continuity

COMMUNITY CONCERN

- As to what to do with school going pupils who may fall sick in school. That is coordination between the clinic and the schools.

CHALLENGES

- Poor communication network
- Poor socio-economy of the inhabitants
- Poor environmental and health sanitation (poor water and toilet system)
- Poor or bad road network.

RECOMMENDATIONS

- Ambulance for patients evacuation
- Health insurance schemes
- Construction of local or temporal toilet for staff and patients for IPC protocols
- Mass immunization program to extend into Mange Acre section for under one children and pregnant women.
- Improvement of the tent and readiness against the rainy reason.

- Provision of rain coats for rainy season.
- Provision of tarpaulin to cover the car back
- Food provision (if available) for malnourished children.

Prepared by:

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