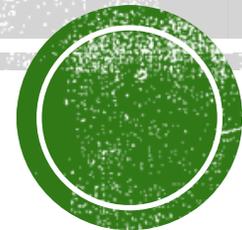


ADMIN & HR DEPARTMENT

REVIEW OF ACTIVITY – MAY, 2015

St. John of God Catholic Health Services, Sierra Leone



HUMAN RESOURCE

OUTLINE:

- Staff Strength as at 31st May, 2015
- Workshops and Training
- Staff issues and Disciplinary Actions
- Significant developments
- Recruitment and Transfers
- Awards and Programs
- AOB



STAFF STRENGTH AT 31ST MAY 2015

ADMINISTRATIVE STAFF	
C.E.O / Chairman	1
Health Service Administrator	1
Financial Administrator	1
Project Officer	1
Finance Officer	1
Executive Secretary	1
Internal Auditor	1
Account Clerk	1
Record Officer	1
Store Kepeer	1
Receptionist	1
Communication Officer	1
Cashiers	5
Total	17



STAFF STRENGTH: CONTINUED

TECHNICAL/CLINICAL STAFF			
Category	Total Staff	Active Staff	Remarks
General Practitioners	3	3	
CHO	2	1	One on study leave
SECHN	39	33	Two on study leave, one assigned to communication office, Three to dispensary
DIPLOMA SRN	1	1	
NURSE ANESTHETIST	1	1	
Aide Nurse	12	10	Two assigned to Dispensary
Diploma Midwife	1	1	
Certificate Midwife	3	3	
Pharmacist	1	1	
Dip Lab Technician	2	2	
Cert. Lab Technician	1	1	
Lab. Scientist	1	1	
X-ray Technician	1	1	
Total	68	59	



STAFF STRENGTH: CONTINUED

SUPPORT STAFF	
Labourers	5
Plumber	1
Electrician	1
Mechanic	1
Painter	1
Drivers	3
Laundry	2
Cook	2
Security	17
Cleaners	13
Total	46



WORKSHOPS & TRAINING

- Training workshop for nurses – organized by CUAMM and the Laboratory
- Three day training workshop organized by CHASL on psycho social trauma – attended by one nurse from Lungi.



STAFF ISSUES: CONTINUED

- **Annual Leave Due:**

The following staff had their annual leave due in May, 2015. However, management bought the leaves of Fatmata F Kamara and Margret Thomas due to shortage of staff.

- Fatmata Fatu Kamara – Nurse (Assigned to theatre, leave not approved due to shortage of staff)
- Mary Y Kamara – Nurse (Assigned to Pediatric ward: Leave approved. Resuming in June 2015)
- Ibrahim Sesay - Security (Leave approved: Resuming in June)
- Hawanatu Kuyateh – Nurse (Assigned to Female ward: Leave approved. Resuming in June 2015)
- Albert Sorie Sesay – Security (Leave approved: Resuming in June 2015)
- Sheriff Sankoh – Nurse (Assigned to orthopedic ward: Leave approved. Resuming in June 2015)
- John Abu Kargbo – Driver (Leave not approved)
- Margret Thomas – Acc/Clerk (Leave not approved due to shortage of staff)
- Isata Bangura – SECHN (Assigned to Maternity: Leave approved. Resuming in June 2015)



SIGNIFICANT DEVELOPMENTS

- **Job analysis concluded in Nursing department:** The focus was on nurses in the inpatient and outpatient departments
 - ✓ The study began in April and concluded in May. The period for purposes of analysis and recommendations were however based on the state of the nursing department as at April, 2015.
 - ✓ In all 17 respondents were randomly selected from all the category of staff in the department.
 - 10 SECHN
 - 3 Cert Midwives
 - 1 Nurse Anesthetist
 - 3 Aide Nurses
- The SECHN respondents also included people who have previously work in the particular ward or unit but is currently reassigned to other units like the PHU or Triage.
- Analysis of data, Findings, Observations and recommendations are contained in final report already submitted to Administration. Management members are encouraged to request for copies.



RECRUITMENT AND TRANSFERS

- 8 Auxiliary nurses have so far been recruited and they started work on 2nd June 2015. This is aimed to increase the number of nurses on shift to at least two in the wards.
- Due to the resignation of the IT officer, we have employed a new person to man the statistics department. He will begin work on Monday, 8th June 2015



AWARDS AND PROGRAMS

- Unit of the month award: Winner for the month of May to be determined by management. The units we are considering include:
 - All wards (Female, Male, Theater, Pediatric, Maternity & ANC, Orthopedic, Emergency)
 - Medical (Doctors, CHOs)
 - PHU
 - X-ray
 - Laboratory
 - Pharmacy
 - Administration (Accounts, Records, Cashiers, Receptionist, Communication, Stores, Drivers, etc.)
 - Sanitary
 - Security
 - Estate / Maintenance
 - IPC & Triage



GENERAL ADMINISTRATION

OUTLINE

- Analysis of Activity data – May, 2015
- Health Care Financing: Lunsar and Lungi
- Partnerships – CDC/Ehealth, IMC, Mariestopes, FRIENDS OF MATERNITY
- AOB



BEDSTATE STATISTICS: MAY 2015

- Definition of terms:

1. **Bed Compliment:** Total number of beds in the particular unit/ward
2. **Bed days:** The number of days in the given period by the number of beds available during the same period.
3. **Patient days:** Sum of each daily inpatient census
4. **Average Daily Occupancy (ADO):** Total inpatient service days for a given period over the number of days in the same period
5. **Percentage Occupancy:** The percentage of official beds occupied by inpatients for a given period of time. Generally, the greater the occupancy, the greater the revenues of the hospital. i.e. if there are no defaulters.
6. **Length of Stay (LOS):** The number of calendar days from the day of patient admission to the day of discharge



DEFINITION OF TERMS: CONTINUED

1. **Average Length of Stay (ALOS):** Patient days divided by the number of patients discharged including deaths.
2. **Turn Over Per Bed (TOPB):** This is a measure of hospital utilization. It includes the number of times each bed changes occupants OR the number of patients treated per bed in a given period
3. **Turn Over Interval (TOI):** The average length of time (in days) that elapses between the discharge of one inpatient and the admission of the next inpatient to the same bed over any period of time.
4. **Gross Death Rate (GDR):** Is the proportion of all hospital discharges that resulted in death.
5. **Net Death Rate (NDR):** Is the gross death rate less death occurring within 24hours of admission



BED UTILIZATION ANALYSIS: MAY 2015

BEDSTATE STATISTICS: MAY, 2015

WARD	BED COMP	ADMIS	DISCH.	DEATHS < 24HRS	TOTAL DEATHS	BED DAYS	PATIENT DAYS	AV.L.O.S TAY	T.O.P.BE D	T.O.I	AV.D.OC CUP	% OCCUP	Gross D.RATE (%)	Net D.RATE (%)
MALE WARD	12	39	33	0	2	372	168	4.8	2.9	5.8	5.4	45.2	5.7	5.7
FEMALE WARD	14	29	27	0	1	434	61	2.2	2.0	13.3	2.0	14.1	3.6	3.6
PAEDIATRICS	15	107	95	12	16	465	369	3.3	7.4	0.9	11.9	79.4	14.4	4.8
MATERNITY	10	58	55	0	0	310	179	3.3	5.5	2.4	5.8	57.7	0.0	0.0
TOTAL	51	233	210	12	19	1581	777	13.56	17.8	22.4	25.1	196.3	23.7	14.1



BED UTILIZATION ANALYSIS: CONTINUE

- The analysis shows that Pediatric ward and the Maternity ward were the most efficient wards in the hospital. The number of admissions and discharges in both ward are good and they recorded the same ALOS = 3.3 of patients.
- The 7.4 Turn over per bed recorded in the Pediatric ward was the highest in the hospital. This indicates that over 7 patients were treated per each bed in the Pediatric ward for the month of May and is a good indicator of which ward is contributing more in terms of patient fees.
- The percentage occupancy in the pediatric ward is again very high at 79.4%. The maternity also recorded 57.7%. This indicates of the percentage of beds that were occupied in the particular ward in the month of May.
- The Female ward was the most under-utilized ward in the hospital. Even though, they recorded the lowest ALOS which was good, they however, recorded the highest TOI = 13.3, the lowest T.O.P.B = 2.0 and the lowest percentage occupancy of 14.1%. They were followed closely by the Male. Therefore, it will be good to reduce the beds in those wards and place further attention on the maternity and Pediatric ward until the situation improves.



CONSULTATIONS: FEB – MAY 2015

CONSULTATIONS					
	NUMBER OF CONSULTATIONS				
UNIT	FEB	MAR	APR	MAY	Total
OPD	660	802	900	953	3315
ANC	80	125	96	102	403
EMERGENCY	22	163	212	224	621



AGE CATEGORY OF OPD CONSULTATIONS: APRIL & MAY 2015

OPD CONSULTATION DETAILS - APRIL 2015						
	APRIL		MAY		APRIL	MAY
YEAR	Male	Female	Male	Female	Ratio of female to male consultations	Ratio of female to male consultations
0-1	28	25	28	27	0.89	0.96
1-4	44	38	40	37	0.86	0.93
5-17	31	42	46	31	1.35	0.67
18-59	278	325	274	376	1.17	1.37
60 Above	38	51	46	48	1.34	1.04
Total	419	481	434	519	1.15	1.20



CONSULTATION BY DOCTOR

CONSULTANTS	Dr. Sandy	Dr. Jalloh	Dr. Joshua	Dr. Paulo (including scanning)
Total no. of consultations	293	294	287	172
No. of Consulting days	23	24	19	26
Ave. Consultation per day	13	12	15	7



MATERNITY

MATERNITY: APRIL - MAY 2015		
Cases	APRIL	MAY
C-section	8	15
Normal Delivery	5	16
Still Birth (masirated)	2	5
Anti Partum Hemorrhage	1	0
Breech	2	0
Total number of cases	18	36



THEATRE: MAY 2015

TOP TEN CASES IN THE THEATRE - MAY 2015		
Cases	Number	Position
C-section	15	1st
Hernia	13	2nd
Orthopaedic	12	3rd
Appendicetomy	3	4th
Keloid	2	5th
Eventration	1	6th
FIBROID	1	7th
RTA	1	8th
CYST	1	9th
BURNS	1	10th

**TOTAL NUMBER OF CASES
FOR THE MONTH**

55



LABORATORY: FEB – MAY 2015

LABORATORY TESTS: FEBRUARY - MAY 2015				
Test	Feb	Mar	April	May
HB	5	96	219	242
Malaria (mps)	11	236	173	132
HBSAG	43	216	139	124
VDRL	36	177	129	111
HCV	6	14	31	10
Glucose	17	201	220	211
Pregnancy test	6	35	25	28
Blood Grouping	5	56	50	0
HIV	5	73	94	39
Blood Transfusion	0	15	31	54
Creatinine	0	2	26	0
Urea	0	2	17	0
SGOT	0	0	13	0
Potasium	0	0	15	0
FBC	0	0	47	24
Total	134	1123	1229	975
Total no. of patients	64	366	419	424



XRAY AND SCANS: FEB-MAY 2015

MONTH	XRAY	SCANS (ECHO & ECG)
FEB	49	116
MAR	69	182
APR	86	172
MAY	157	157
TOTAL	361	627



ACTIVITY: LUNGI – MAY 2015

LUNGI: CONSULTATION - MAY 2015		
AGE GROUP	MALE	FEMALE
0 - 5	7	7
6 - 15	3	1
16 - 35	18	42
35 ABOVE	8	20
Total	36	70

TOTAL NUMBER OF PATIENTS 106

TOTAL ECHOGRAPHY 11



FINANCING: LUNGI

LUNGI (CLINIC)	Mar-15	Apr-15	May-15	TOTAL	AVERAGE
PATIENT FEES	158,000.00	2,244,000.00	3,161,000.00	5,563,000.00	1,854,333.33
RECURRENT EXP	22,230,000.00	22,633,000.00	16,195,000.00	61,058,000.00	20,352,666.67
% Variance Patient fees & Expenditure	-99%	-90%	-80%	-91%	-91%



FINANCING: LUNSAR

LUNSAR	Mar-15	Apr-15	May-15	Total	Mean
PATIENT FEES	97,752,732.64	146,798,153.98	117,374,599.62	361,925,486.24	120,641,828.75
REC. EXP	306,150,277.70	263,560,660.94	350,493,067.23	920,204,005.87	306,734,668.62
% VARIANCE PATIENT FEES & EXP	-68%	-44%	-67%	-61%	-61%



FINANCING LUN SAR: CONTINUE

- Up to the end of May, our analysis shows that the patient fee is only able to finance our recurrent expenditure up to 39%. In May, recurrent expenditure increased compared to April and March and the accountant must provide explanation to that so we can prevent repetition in June. Moreover, patient fees in May was low compared to April.
- The sharp rise in expenditure by about 33% in May compared to April has lowered our previous estimate of patient fees over recurrent expenditure. In April, we estimated that patient fees was about 50% of expenditure, however, the situation has changed in May due to low incomes and high expenditure.
- The situation in Lungi is yet to improve as incomes still less than 10% of expenditure in the clinic.



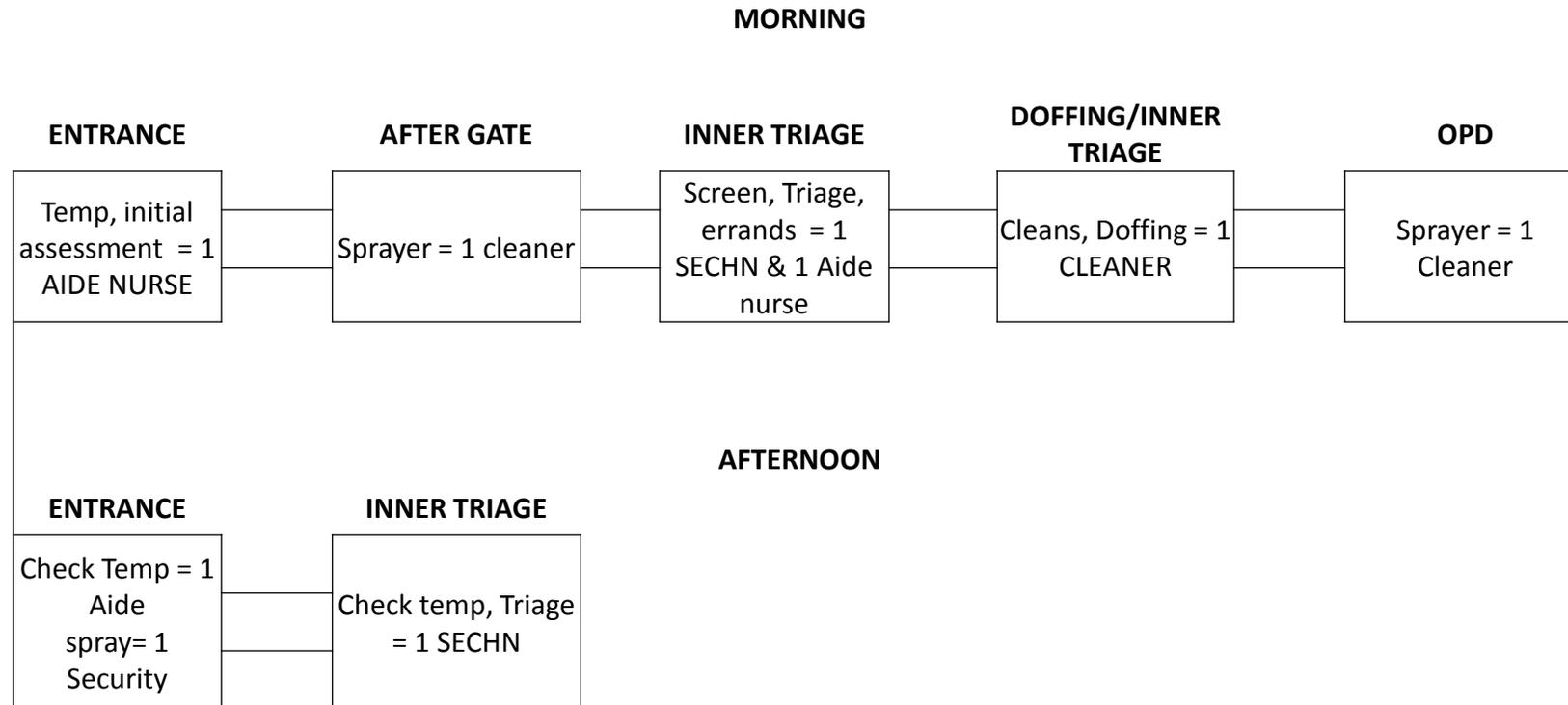
UPDATE ON PARTNERS

- The hospital continues to partner with the following Organizations:
 - ✓ **CDC/Ehealth:** The activities of CDC ends at SJOG, Lunsar on the 11th June, 2015 for the first phase of the programme. The Lungi section begins from the 15th June, 2015. Unlike Lunsar, our agreement with them in Lungi only involves the use of the facility. The clinic is neither been use as a referral hospital nor are we providing a study physician.
 - ✓ **Mariestopes:** We continue to partner with Mariestopes at the maternity.
 - ✓ **CUAMM:** Our partnership with CUAMM is also on-going. The agreement is currently focusing on the maternity and ensures the presence of two Doctors in the hospital at all times. Currently there is one surgeon and an Internist from the Organization.
 - ✓ **Rainbow for Africa:** Has established a trauma unit in the hospital. Due to delay in construction, we are currently using two wards at the pediatric section and operating 7 beds. The agreement ensures the presence of a Surgeon and two nurses from the organization at all times. The hospital has also made available 4 nurses and 1 Doctor for running of the unit.



UPDATE ON PARNERS: CONTINUED

- **IMC:** Contract ended on 31st May, 2015 and the Triage has since been reorganized to meet our needs.



Total nurses in morning shift	4	including the Supervisor
Total nurses in Afternoon shift	2	including the Supervisor
Total cleaners	2	

PLAN



THE END

THANK YOU

