

*MINISTRY OF HEALTH  
INTER-AGENCY REVIEW CONFERENCE*



***GHANA TEACHING HOSPITALS  
2018 ANNUAL PERFORMANCE REPORT***

*Presented by: Miss Princess Gloria Ofori – from Cape Coast Teaching Hospital  
(on Behalf of all Teaching Hospitals in Ghana)*

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# OUTLINE OF PRESENTATION

- **Introduction**
- **Background Information**
- **2018 THs KPI Reporting**
- **Key Challenges**
- **Outlook For 2019**
- **Acknowledgement**

# INTRODUCTION

In 2017 THs started the process of developing key performance indicators which will be uploaded on the DHIMs to:

1. Harmonize reporting of data to aid peer review performance among TH, and
2. Aid in standardized reporting to the Ministry of Health for its monitoring and performance review activities and holistic assessment reporting.

The mandate of Teaching Hospitals as outlined in the Ghana Health Service and Teaching Hospitals Act 525 of 1996 are as follows:

- To provide Tertiary Service (Specialist Clinical Care)
- To train graduate and post graduate medical students and other health professionals.
- To conduct research
- Support to Peripheral Health Facilities

This presentation reviews the performance and outlines the challenges of the four teaching hospitals in Ghana for the year 2018 using the 63 agreed KPIs as a benchmark.

# BACKGROUND

Teaching Hospitals (THs) play important role in quality healthcare delivery in the Ghana. As apex health facilities, these hospitals provide a leading role in setting high quality clinical standards and means of measuring these standards at all levels of the health sector.

To comprehensively achieve these objectives, all the teaching hospitals in the country have forge a common front, and work in unionism with the Ghana Health Service (GHS) to provide seamless care to clients across all levels of service delivery.

In recognition of the above, and in their continuous quest to provide quality of care to all Ghanaians, the CEOs of the four teaching hospitals (KBTH, KATH, TTH, and CCTH) in Ghana created a platform to discuss issues of common interest to their respective facilities and the Ghana Health Services facilities within their respective catchment areas.

# HEALTH SECTOR OBJECTIVES (S.O)

S.O. 1: Bridge the equity gaps in geographical access to health services

S.O. 2: Ensure sustainable financing for health care delivery and financial protection for the poor

S.O. 3: Improve efficiency in governance and management of the health system

S.O. 4: Improve quality of health services delivery including mental health services

**HUMAN RESOURCES FOR HEALTH**  
(Improve Human Resource Base)

**BLACK = 2018**

**RED = 2017**

# SELECTED HR TRENDS

CADRE	KBTH	KATH	TTH	CCTH
Consultant & Specialist	307 (280)	232 (229)	64 (43)	53 (45)
Resident & Medical Officers	315 (311)	316 (288)	57 (59)	82 (69)
Professional Nurses / <i>(Enrolled Nurses)</i>	2,081 (2,185)	1,378 (1,440)	763 (884)	449 (97) (554)
Midwives	258 (260)	346 (364)	164 (172)	105 (106)
Pharmacist & Pharm Tech	105 (107)	117 (118)	49 (48)	28 (15)
Others	2,239 (2,241)	1,520 (1,792)	925 (1,005)	511 ( 531)
<b>TOTAL STAFF</b>	5,082 (5,159)	3,909 (4,065)	2,097 (2,211)	1325 (1,320)

# 2018 ACHIEVEMENTS



## S.O. 4: Improve Quality Of Health Services Delivery Including Mental Health Services

### ❖ **Mandate 1:**

- ❖ **To provide Tertiary Service (Specialist Clinical Care)**

# KEY ACTIVITY ACHIEVEMENTS

## KBTH

1. The refurbished Accident and Emergency Centre was commissioned and put to use
2. A reduction in institutional maternal mortality
3. An improvement in oxygen supply
4. A successful advocacy for the construction of NICU and PICU
5. Fully functional ICUs
6. Abolishment of no bed syndrome

# KEY ACTIVITY ACHIEVEMENTS

## KATH

1. Acquisition and installation of state of the art oxygen plant
2. 1<sup>st</sup> Phase of construction of hospital sewage system completed
3. Scale up of Family Medicine consultation services
4. Successful launch of KATH Endowment Fund
5. Installation of Linac and High dose brachetherapy machines at oncology-ongoing
6. 24-hour Pharmacy Started
7. Vitreo-retinal surgeries successfully done for the first time in the hospital (first to be done in the northern sector)
8. Monthly mortality audits were all carried out
9. Construction of NAKSA Block for mothers and babies courtesy office of the 1<sup>st</sup> Lady.

# KEY ACTIVITY ACHIEVEMENTS

## TTH

1. Increase in mobile blood donations from 1,091 units of blood in 2017 to 1,696 units of blood in 2018
2. Major surgeries increased by 26.8%
3. Reduction in Maternal Mortality from 56 (688/100,000)LB in 2017 to 47 (597/100,000)LB in 2018
4. Increase in deliveries from 7,859 in 2017 to 8,209 in 2018
5. Reduction in in-patient mortality rate from 2.3% to 1.8% in the pediatrics ward
6. Improved water, oxygen and logistics supplies
7. Improvement in laboratory especially blood bank services

# KEY ACTIVITY ACHIEVEMENTS

## CCTH

1. Roll-out of **Paperless System** through the use of e-health with 100% utilisation by close of year
2. **Maiden Scientific Research Conference Organised in November 2018**– Promoting evidence-based quality health care
3. Operationalisation of **O&G Emergency Centre**
4. Operationalisation of Mothers Hostel
5. MoU with Himalayan Cataract Project to increase access to eye care services
6. **34% Reduction in maternal mortality** (from 41 deaths in 2017 to 27 deaths in 2018)
7. **34% increase in OPD Attendance**
8. Reduction of patients **waiting time** from 2hrs to **1hr:36 Sec** (from entry to exit at **pharmacy**)
9. Enforcement of **total nursing care policy & linked medical teams** with **nurses** (e.g. **O&G Ward**)

# KEY OUTPUTS ACHIEVEMENTS

# Provide Outpatient Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Total Number of OPD cases	<b>381,830</b> (339,128)	<b>351,443</b> (338,152)	<b>95,900</b> (97,135)	<b>158,164</b> (117,854)	Total no. of client attending OPDs
OPD cases seen per doctor (ratio)	<b>1:1,514</b> (1:1,614)	<b>1:1,040</b> (1:630)	<b>1:705</b> (1:952)	<b>1:716</b> (1:1,034)	Total no. of client attending OPDs / Total no. of Drs
OPD cases seen per specialist	<b>1:1,830</b> (1:2,173)	<b>1:2,108</b> (1:2,486)	<b>1:585</b> (1:2,259)	<b>1:1429</b> (1:1676)	Total no. of client attending specialist OPDs / Total no. of Snr. Specialists/Consultants.

# Provide Inpatient Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Number of admissions	<b>44,908</b> (43,616)	<b>35,553</b> (34,552)	<b>22,640</b> (23,109)	<b>10865</b> (11,444)	Total no. of clients admitted.
% of patients admitted due to external referrals	- (-)	- (-)	- (-)	<b>25.8%</b> (35%)	No. of Patients admissions due to external referrals / Total admissions * 100
% of Neonatal Admissions due to external Referrals	- (40.2%)	- (-)	- (-)	<b>26.1%</b> (28%)	No. of Neonatal admissions due to referrals / Total neonatal admissions * 100
% of Maternal Admissions due to external Referrals	<b>84.7%</b> (60.9%)	<b>79.41%</b> (63%)	- (-)	<b>41.4%</b> (49)	No. of Maternal admissions due to referrals / Total maternal admissions



# Provide Inpatient Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Nurse and Midwife : admission ratio	<b>1:35</b> (1:36)	<b>1:37</b> (1:19)	<b>-</b> (1:24)	<b>1:20</b> (1:21)	Total no. of clients admitted / total no. of nurses and midwives
Percentage bed occupancy (%)	<b>63.7%</b> (56.9%)	<b>70.68 %</b> (75.5)	<b>60.4%</b> (67.4)	<b>51%</b> (53)	No. of client days / No. of beds * No of days in the period
Average length of stay in the facility	<b>8.5</b> (8.2)	<b>7</b> (7)	<b>6</b> (4.5)	<b>5</b> (4.0)	No. of client days / No. of Discharges + Deaths
<b>Proportion of in- patients managed on nursing and midwives' care plan</b>	<b>65%</b> (50%)	<b>-</b> (-)	<b>-</b> (-)	<b>-</b> (-)	No. of admissions with care plan/ Total admissions

# Provide Emergency Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Average length of stay at the emergency wards	<b>4.9</b> (4.7)	<b>4.65</b> (5)	<b>5.1</b> 10.3)	<b>4.2</b> (2.8)	No. of client days / No. of emergency discharges and death

## Provide Surgical Operations

Surgical site infection rate	- (-)	- (-)	- (-)	- (-)	Total infected wounds within 10 days / Total Surgeries * 100
Total Surgeries	<b>22,362</b> (21,638)	<b>18,666</b> (17,558)	<b>4,137</b> (3,180)	<b>3728</b> (3,853)	Total number of surgeries conducted
Surgery - Surgeon Ratio	<b>1:191</b> (1:149)	<b>1:267</b> (1:266)	<b>1:172</b> (-)	<b>1:129</b> (1:148)	Total no. of surgeries performed / total no. of Surgeons
<i>Total Number of Surgeons</i>	<b>117</b> (-)	<b>70</b> (89)	24 (-)	<b>29</b> (26)	

# Provide Maternal Health Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Total Deliveries	<b>9,145</b> (9,597)	<b>8,117</b> (8,438)	<b>8,238</b> (8,462)	<b>3,160</b> (3,055)	Total No. of Deliveries undertaken
Midwife : Delivery ratio <i>(TOTAL MIDWIVES IN THE HOSPITAL)</i>	<b>1:35</b> (1:36)	<b>1:24</b> (1:23)	<b>1:50</b> (1:49)	<b>1:30</b> (1:29)	Total Number of deliveries / Total No. of midwives
Midwife : Delivery ratio <i>(TOTAL MIDWIVES IN THE DELIVERY SUITE)</i>	<b>1:141</b> (1:171)	<b>1:271</b> (-)	<b>1:298</b> (-)	<b>1:81</b> (1:62)	Total Number of deliveries / Total No. of midwives
Partograph use rate	<b>60%</b> (45%)	- (-)	<b>60%</b> (-)	<b>100</b> (100)	Assisted Partograph deliveries / total deliveries * 100
Low birth rate	<b>15.7%</b> (17.5%)	<b>36.8%</b> (41.5%)	<b>19.9 %</b> (26%)	<b>13.5%</b> (13%)	Total no. of babies < 2.5kg/ Total live births *100
Still birth rate / 1000 Birth	<b>3.4</b> (3.8)	<b>39.5</b> (45.5)	<b>46.4</b> (39.9)	<b>36</b> (34)	No. of babies born with no signs of life / Total no. of birth in the specific period
Caesarean Section Rate (%)	<b>46.7</b> (45.5)	<b>40.7%</b> (38.6)	<b>29.4%</b> (28.3)	<b>47%</b> (40)	No. of women delivered by CS in a specified time period / Total no. deliveries within a specified time period

# Provide Maternal Health Services

## Cont'n

**BLACK = 2018**  
**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Institutional Maternal Mortality Ratio / 100,000 LB	492/100,000LB (594)	1,500/100,000LB (1,207)	573/100,000LB (688)	860/100,000LB (1,335)	No of maternal deaths / total live births * 100 000
Maternal deaths audited (%)	100% (100%)	100 (100)	100 (100)	100 (100)	No. of reported maternal deaths audited according to established guidelines. / total no. of reported maternal deaths within a specified period * 100
Couple year protection	45,431 (39,372)	1,378.7 (1191.8)	6,408 (2,962)	1,521.6 (1,507)	Total No. of Commodities dispensed / CYP factor

# THs TOP FIVE CAUSES OF MATERNAL DEATH

CONDITIONS	2018 ANNUAL PERFORMANCE			
	KBTH	KATH	TTH	CCTH
Sepsis	4 <sup>th</sup> (2 cases)	3 <sup>rd</sup> (13 cases)	2 <sup>nd</sup> (8 cases)	1 <sup>st</sup> (9 cases)
Hypertensive disorders in pregnancy (Eclampsia / Pre-eclampsia)	1 <sup>st</sup> (15 cases)	2 <sup>nd</sup> (32 cases)	1 <sup>st</sup> (9 cases)	2 <sup>nd</sup> (8 cases)
Haemorrhage	3 <sup>rd</sup> (4 cases)	1 <sup>st</sup> (33 cases)	3 <sup>rd</sup> (5 cases)	2 <sup>nd</sup> (8 cases)
Severe Acute Liver Disease	-	5 <sup>th</sup> (6 cases)	4 <sup>th</sup> (5 cases)	4 <sup>th</sup> (1 cases)
Sickle cell	2 <sup>nd</sup> (9 cases)	4 <sup>th</sup> (7 cases)	3 <sup>rd</sup> (5 cases)	5 <sup>th</sup> (1 cases)
Abortion	4 <sup>th</sup> (2cases)	-	-	-
<b>TOTAL MATERNAL DEATH</b>	<b>32</b>	<b>123</b> <b>(102)</b>	<b>47</b>	<b>27</b> <b>(41)</b>

# CAUSES OF MATERNAL DEATH

NO	<b>KEY FIVE CONDITIONS in General</b>
1	Eclampsia / Pre-eclampsia
2	Hypertensive Disorders Of Pregnancy
3	Hemorrhage
4	Sickle Cell Disease
5	Sepsis

# TOP FIVE CAUSES OF DEATH – CHILD HEALTH

CONDITIONS	2018 ANNUAL PERFORMANCE			
	KBTH	KATH	TTH	CCTH
Pre-maturity	1 <sup>st</sup> (254 cases)	1 <sup>st</sup> (210 cases)	1 <sup>st</sup> (168 cases)	1 <sup>st</sup> (77 cases)
Asphyxia Birth (neonatal)	2 <sup>nd</sup> (127 cases)	2 <sup>nd</sup> (173 cases)	2 <sup>nd</sup> (103 cases)	2 <sup>nd</sup> (47 cases)
Jaundice (neonatal)	3 <sup>rd</sup> (105 cases)	10 <sup>th</sup> (13 cases)	-	3 <sup>rd</sup> (31 cases)
Sepsis (neonatal)	4 <sup>th</sup> (98 cases)	9 (15 cases)	5 <sup>th</sup> (30 cases)	4 <sup>th</sup> (22 cases)
Malnutrition	-	5 <sup>th</sup> (21 cases)	-	5 <sup>th</sup> (7 cases)
Congenital Abnormalities	5 <sup>th</sup> (91 cases)	-	-	-
Severe/Cerebral Malaria	-	-	3 <sup>rd</sup> (63 cases)	-
Pneumonia	-	-	4 <sup>th</sup> (36% cases)	-

# CAUSES OF DEATH – CHILD HEALTH

NO	<b>KEY FIVE CONDITIONS in General</b>
1	Neonatal Sepsis
2	Birth Asphyxia
3	Prematurity
4	Neonatal Jaundice
5	Pneumonia



# Provide Child Health Services

BLACK = 2018

RED = 2017

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Institutional Infant mortality rate /1,000 LB	13.8/1000 LB (9.1)	55/1000 LB (68)	79/1000 LB (46)	69/1000 LB (65)	No. of children dying under one year of age during a year / Total live births in a year * 1000
Institutional Neonatal mortality rate /1,000 LB	18.3 (20.7)	79.9/1000 LB (93.62)	19/1000L B (40)	63/1000 LB (59)	No. of Deaths from 0-28 days / Total No. of live births
<i>Infant Death</i>	16.2 (11.7)	629 (758)	619 (-)	216 (201)	
<i>Neonatal Death</i>	15.3 (11.5)	647 (780)	150 (-)	197 (180)	
<i>Number of under five deaths- Institutional</i>	749 (798)	670 (783)	555 (-)	242 (219)	
<i>Under Five Mortality Rate (/1000LB)</i>	13 (11.0)	81.71 (92.66)	70/1000L B (-)	77/1000 LB (71)	

# Provide Pharmaceutical Services

**BLACK = 2018**

**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Tracer Drug availability (%)	<b>90%</b> (90%)	<b>92</b> (87)	<b>73.5</b> (76)	<b>96.10</b> (96.15)	Medicines available / Total medicines in the tracer medicines list * 100
Prescriptions - Pharmacist Ratio	<b>1:17,462</b> (1:15,910)	<b>1:12,300</b> (-)	<b>1:6,255</b> (1:17,382)	<b>1:16097</b> (1:12,159)	Total no. of prescription served / total no. of pharmacists
Percentage antibiotic prescribed (%)	<b>18.9%</b> (36.4%)	<b>25.3%</b> (-)	<b>53.2%</b> (56%)	<b>18.4%</b> (15.2%)	Total number of antibiotic / Total of medicines on a prescription * 100
Percentage injectable prescribed (%)	<b>14.6%</b> (26.7%)	<b>53.3%</b> (-)	<b>14.6%</b> (14%)	<b>3.6%</b> (1.8%)	Total number of injectable / Total of medicines on a prescription * 100
Utilization of Pharmaceutical Care interventions	<b>20.9%</b> (24.6%)	- (-)	- (-)	<b>5.4%</b> (5.5%)	Number of interventions / cases seen * 100
Proportion of ward round inputs by clinical pharmacist utilised	- (-)	- (-)	<b>85%</b> (-)	<b>92%</b> (86.7%)	Number of clinical pharmacist inputs utilised / Total number of inputs

# Provide Pathological & Mortuary Services

BLACK = 2018

RED = 2017

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Institutional All-cause mortality rate	8.6% (8%)	6.6% (7.8%)	4.8% (4.5%)	9.35% (8.7%)	Total death /(Discharges + deaths) * 100
Theatre Deaths Rate	7.9% (-)	0.61% (0.4%)	0.9% (-)	0.3% (0.4%)	Total No. of deaths at the theatre (Including Recovery Wards) / Total Surgeries * 100

# Provide Diagnostics Services

<b>KEY INDICATORS</b>	<b>PERFORMANCE</b>				<b>MEASUREMENT</b>
	<b>KBTH</b>	<b>KATH</b>	<b>TTH</b>	<b>CCTH</b>	
Utilization of Radiological services	- (-)	- (-)	- (-)	<b>342%</b> (-)	Total Radiological Investigations / Total Radio. request * 100
<b>Total Radiology Investigations</b>	<b>31,854</b> (37,136)	<b>63,435</b> (49,209)	<b>12,030</b> (21,950)	<b>20766</b> (17,342)	-
<b>Total Radio. request</b>	- (-)	- (-)	- (-)	<b>6076</b>	-
Utilization of Laboratory Services	- (-)	- (-)	- (-)	<b>361%</b> (-)	Total Laboratory Investigations / Total Radio. request * 100
<b>Total laboratory Investigations</b>	<b>434,747</b> (257,012)	<b>280,770</b> (270,728)	<b>193,376</b> (126,970)	<b>275,329</b> (266,635)	-
<b>Total Lab request</b>	- (-)	- (-)	- (-)	<b>76,266</b> (-)	-
Availability of non-drug consumables	(-)	(-)	(-)	(-)	Non-drug consumables available / Total non-drug consumables in the baskets (Baskets to be determined e.g. Gloves, gauze, syringes etc.)

## **S.O. 3: Improve Efficiency In Governance And Management Of The Health System**

### **❖ Mandate 2 & 3:**

**❖ To Train Graduate And Post Graduate  
Medical Students And Other Health  
Professionals.**

**❖ To Conduct Research**

# KEY ACTIVITY ACHIEVEMENTS

## KBTH

1. Complete and implement MOUs with University of Ghana School of Medicine and Dentistry, National Cardio-Thoracic Centre, National Radiotherapy and Nuclear Medicine Centre and the Reconstructive and Plastic Surgery Centre.
2. Commenced Provident Fund
3. Acquiring Blueprints for Current Infrastructure and developing the Korle Bu master plan
4. Complete the Paediatric Emergency Project

# KEY ACTIVITY ACHIEVEMENTS

## KATH

1. Construction of 1Nr 47 flats Houseman blk at Bantama Nurses Qtrs (52%)
2. Construction of Sickle cell and Blood centre at KATH (20%)
3. Refurbishment of Hospital central sewer lines at Barracks. 1<sup>st</sup> Phase completed. 2<sup>nd</sup> phase ongoing (30%)
4. Chemical cleaning/disinfecting of water reservoirs at KATH (80%)
5. Role out of Electronic Health Information Management system (LHIMS). Family Medicine, EENT, Oncology, and Oral Health connected.
6. Renovation works at A & E centre (75%)
7. Painting and Cladding of fence wall at A & E centre (85%)
8. Biometric Registration of all staff completed for clock in and out
9. Construction of Maternity & Children's Blk. (65%)
10. Some Key institutional policies that were developed
  - Drug/Alcohol-free workplace
  - Guidelines on Staff Admission to Special Ward
  - KATH Retired Staff
  - Occupational Health & Safety
  - Revised Staff Appraisal form
  - Biometric Attendance

# KEY ACTIVITY ACHIEVEMENTS

## TTH

1. 3 pharmacist (Dr. of Pharmacy), 4 Membership GCP, 1WACP, 1 MSc clinical Pharmacy
2. A total of 99 trainees of different levels under the pharmacy directorate
3. 1 membership level in GS, 1 fellowship level in T/O, 1 fellowship level in Urology
4. Accreditation for WACS (pending)
5. A total of 152 House-officers received training
6. 30 Peer review Journals published in the ff: British Journal of surgery, The Lancet, World Journal of Surgery, Ghana Medical Journal, Post-graduate Medical Journal



# KEY ACTIVITY ACHIEVEMENTS - CCTH

1. SOME KEY INSTITUTIONAL POLICIES DRAFTED includes;
  - a. Institutional Transport Policy drafted
  - b. Uniform and Dress Code Policy
  - c. Human Resource Policy document drafted
  - d. Staff Accommodation policy drafted
  - e. Institutional Policy Guideline on Asset Management
  - f. Correspondence Management Policy developed
  - g. Staff Accommodation policy developed
  - h. Institutional ICT Policy
  - i. Data Backup Policy was 80%
  - j. Institutional Research Policy drafted
  - k. Institutional Monitoring and Evaluation Policy drafted
2. Proposal for a NICU submitted and approved by the CCTH board.
3. 100% Completion and operationalization of the 24-Hour Pharmacy
4. The decentralization strategy (Sub-BMC system) further deepened and are assesses based on their POW.
5. 100% completion and operationalisation of the medical waste plant

# KEY OUTPUTS ACHIEVEMENTS

# Provide OHS/ QA Services

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Work place related injuries resulting in death or incapacitation	<b>0</b> ( 1)	- ( -)	- ( -)	<b>0</b> ( 0)	Total work place injuries resulting in deaths or incapacitation / total injuries recorded
<b>Total Staff injuries recorded</b>	- ( -)	- ( -)	- ( -)	<b>8</b> ( 13)	
Health Workers who benefited from Occupational health and safety interventions	<b>16</b> ( 25)	<b>26</b> ( -)	- ( -)	<b>3.9%</b> ( 5.8%)	Total no. of staff benefiting from OHS interventions/Total no. of staff * 100
<b>Percentage of clients satisfied</b>	- ( -)	<b>53%</b> (69%)	<b>91.7%</b> (88.4%)	<b>87.3%</b> (96.8%)	Total no. of client surveyed who are satisfied with health care services / total no. client surveyed * 100
<b>Percentage of Staff satisfied</b>	- ( -)	<b>54%</b> (55%)	<b>33.3%</b> (50.4%)	<b>36.5%</b> (55.9%)	Total no. of workers surveyed who are satisfied with work / total no. of workers surveyed * 100
Percentage of Health Staff with accidental needle prick injury	<b>9.8 %</b> ( 11.2%)	<b>2%</b> ( -)	- ( -)	<b>0.4%</b> ( 0.6%)	Total no. of workers reported with needle prick / total no. of workers * 100
<b>Total no. of workers reported with needle prick</b>	<b>313</b> ( 385)	<b>70</b> ( -)	- ( -)	<b>5</b> ( 8)	

## Provide Staff Development & Training & Staff Welfare Support

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Proportion of staff Appraised	<b>17%</b> (25%)	<b>80.25</b> (53%) )	<b>75%</b> (47%)	<b>33%</b> (57%)	Number of staff appraised / total number of staff * 100
Consultant : Resident Doctor ratio	<b>1:1</b> (1:3)	<b>1:5</b> (1:4)	<b>1:13</b> (0)	<b>1:1</b> (1:3)	Number of Consultant and Senior Specialist / total number of Resident Doctors
Doctor : Nurse/Midwife Ratio	<b>1:7</b> (1:7)	<b>1:5</b> (1:3)	<b>1:8</b> (1:10)	<b>1:24</b> (1:21)	Total number of Doctors in the hospital / Total of Nurses
Doctor : Pharmacist Ratio	<b>3:1</b> (3:1)	<b>3:1</b> (5:1)	<b>5:1</b> (2:1)	<b>15:1</b> (11:1)	Total number of Doctors in the hospital / Total number of pharmacist
No. Of welfare packages available	<b>2</b> (2)	<b>7</b> (7)	<b>1</b> (-)	<b>1</b> (1)	Total Number of welfare packages provided for staff

# Provide Technical Services and Logistical Support Services

**BLACK = 2018**  
**RED = 2017**

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Percentage equipment down time	12% (10%)	33.5% (26.8%)	29% (-)	1.92% (7.69%)  CT SCAN	Average downtime / Total productive hours
PPM output achieved	60% (80%)	75% (68.5%)	90% (85.5%)	60% (80%)	PPM executed / PPM * 100
Equipment Utilisation	70% (98%)	69.5% (64.45%)	67% (80%)	74.18% (34.76%)  CT SCAN	No. of hours equipment was used / total no. of hours available for usage * 100

BLACK = 2018

RED = 2017

# Support Teaching And Training Of Health Professionals

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Number of professional pass rate (medical students)	80.2% (79.3%)	- (-)	93% (-)	93% (100%)	Percentage of final year professional passes / Total number of students enrolled * 100
Number enrolled in postgraduate colleges	58 (19)	101 (-)	97 (-)	53 (-)	-
<b>Undertake Research Activities</b>					
Number of operational research conducted	- (46)	5 (4)	2 (3)	3 (2)	Total number of operational research conducted / Total research planned
Number of Research published	27 (32)	18 (22)	30 (-)	11 (-)	

**BLACK = 2018**

**RED = 2017**

## Undertake Financial Audit and Administrative Activities

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Proportion Audit recommendations implemented	- (100%)	100% (100%)	100% (100%)	100 (100%)	Total audit recommendations implemented / Total Audit Recommendations
Number of ARIC Meetings <i>(Audit Committee meetings)</i>	- (-)	8 (-)	- (-)	4 (-)	Total Meetings Organized / Total meetings planned
Number of Board Meeting	8 (0)	13 (-)	- (-)	6 (1)	Total Board Meetings organized / Total Board Meetings Planned

**S.O. 2: Ensure Sustainable Financing  
For Health Care Delivery And  
Financial Protection For The Poor**

**Mandate 1, 2 & 3**



# KEY ACTIVITY ACHIEVEMENTS

NO.	KEY ACTIVITY ACHIEVEMENTS	TH RESP.
1	Computerize the operations of the financial activities by effectively collaborating with the e-governance initiative (GIFMIS)	ALL THs
3	Follow up on and address all audit observations from both internal and external audit reports	ALL THs
4	All financial data validated and submitted to MOH & MOFEP	ALL THs
5	Development of a cashless system of revenue mobilization to address leakages	KBTH
6	Establish financial decentralization for established sub-BMCs	TTH

# KEY ACTIVITY ACHIEVEMENTS

## KBTH

1. Ghana Integrated Financial Management Information System (GIFMIS) implementation strengthened
2. 87% of the 2018 Revenue targets achieved

# KEY ACTIVITY ACHIEVEMENTS

## KATH

1. Control measures of issuing of medical supplies to service points were improved
2. Sensitization on documentation to enhance NHIA claims processing improved
3. Continuous monitoring of wards stores to check overstock of consumables

# KEY ACTIVITY ACHIEVEMENTS

## TTH

1. Cleared a back lock of claim submission following NHIA system upgrade
2. Establish and maintain an effective accounting and internal control system for revenue mobilization and reporting on IGF
3. Regular preparation and submission of all financial reports

# KEY ACTIVITY ACHIEVEMENTS

## CCTH

1. GIFMIS rollout training done
2. Pharmacy directorate continue undertake preparations of products such as;
  - a. the production of **Nasal & Ear drops** for the ENT Unit.  
(Spirit Ear Drops, Boric Acid Ear Drops, Ephedrine Nasal drops, etc.) as well as
  - b. Liquid soap
3. 10.4% Increase in Revenue
4. 28.5%% increase in expenditure

# KEY OUTPUTS ACHIEVEMENTS

# Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
IGF Revenue	<b>94,531,528.66</b> (87,085,455.00)	<b>69,590,563.41</b> (63,193,002.36)	17,117,126.15 (16,778,766.78)	<b>18,863,206.32</b> (17,089,470.00)	Total revenue collected
IGF Expenditure	<b>89,954,675.00</b> (82,598,347.00)	<b>68,891,790.33</b> (63,794,573.28)	13,326,806.23 (15,394,985.21)	<b>18,027,876.43</b> (14,027,784.00)	Total expenditure made
Percentage of submitted claims paid	<b>96.28%</b> (96.08%)	<b>28.20%</b> (41.10%)	<b>34%</b> (68%)	<b>20.88%</b> (58.68%)	Total claims settled/total submission
Debtors days	<b>273</b> (247)	<b>262</b> (275)	<b>406</b> (149)	<b>346.85</b> (283.22)	Debtors / credit revenue * 365
Creditors days	<b>172</b> (169)	<b>131</b> (162)	<b>360</b> (125)	<b>100.82</b> (184.73)	Creditors / total purchases
Proportion of IGF revenue spent on PPM	<b>5.9%</b> (3.1%)	<b>4%</b> (4.61%)	<b>4%</b> (3%)	<b>3.52%</b> (4.13%)	IGF spent on PPM/ Total revenue
Percentage IGF paid as compensation	<b>20.3</b> (22%)	<b>16%</b> (14.97%)	<b>16%</b> (12.44%)	<b>9.68%</b> (11.47%)	IGF paid as compensation/ total revenue
Ratio of cash revenue to NHIA reimbursement	<b>1:0.21</b> (1:1.22)	<b>1.99:1</b> (1.49:1)	<b>1.5:1</b> (0.4:1)	<b>0.66:1</b> (-)	Cash Revenue/ NHIS revenue reimbursement

# STATUS OF NHIA CLAIMS

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Percentage of NHIA Claims Submitted on time	<b>100%</b> (100%)	<b>100 %</b> (100%)	<b>100%</b> (100%)	<b>100%</b> (100%)	Total number of claims submitted to NHIS at the end of the ensuing month / Total Number of claims submitted to NHIA by all facilities * 100
Percentage of rejection on claims submitted to NHIS	<b>3.72%</b> ( 3.92%)	<b>5%</b> ( 5%)	<b>3%</b> ( -)	<b>0</b> ( 0)	Total number of rejected claims received from NHIS / Total Number of claims submitted to NHIA by all facilities * 100



# STATUS OF NHIA CLAIMS

KEY INDICATORS	PERFORMANCE			
	KBTH	KATH	TTH	CCTH
Unpaid Claims Bal B/F	<b>8,368,205.03</b> (11,959,148.85)	<b>14,510,720.16</b> (17,689,233.47)	<b>6,711,309.40</b> (5,810,803.39)	<b>8,041,108.90</b> (6,613,799.00)
Claims Submitted	<b>16,260,621.98</b> (15,456,089.52)	<b>22,310,669.71</b> (21,613,761.16)	<b>11,173,862.27</b> (11,409,035.29)	<b>9,629,551.55</b> (10,549,108.00)
Claims Paid	<b>15,265,135.48</b> (17,938,513.18)	<b>17,315,822.96</b> (23,328,148.54)	<b>3,785,896.26</b> (10,508,529.28)	<b>9,393,716.11</b> (9,121,870.00)
Outstanding As At end of 2018	<b>9,363,691.53</b> (8,368,205.03)	<b>18,503,027.46</b> (14,510,720.16)	<b>12,188,627.56</b> (6,711,309.40)	<b>8,276,944.34</b> (8,041,109.00)
No Of Month Outstanding	<b>9</b> (8)	<b>6 (9)</b> (6)	<b>7 (10)</b> (7)	<b>5 (8)</b> (6)

**S.O. 1: Bridge the equity gaps in  
geographical access to health  
services**

**Mandate 4**

Support Primary and Secondary Health  
Facilities

# Key Activity Achievements

NO	KEY ACTIVITY ACHIEVEMENTS	TH RESP.
1	Clinical Support visits to primary & secondary facilities	ALL THs

# KEY OUTPUTS ACHIEVEMENTS

# Support Peripheral Health Institutions

KEY INDICATORS	PERFORMANCE				MEASUREMENT
	KBTH	KATH	TTH	CCTH	
Number of visits carried out	27 (18)	- (-)	- (-)	267% (283%)	Total number of facilities visited / Total visit planned * 100
Total number of facilities visited	23 (14)	21 (20)	- (8)	16 (17)	
Number of visits planned	- (-)	20 (-)	- (-)	6 (6)	
Number of visits carried out	- (-)	26 (-)	- (-)	8 (4)	
Number of Beneficiaries recorded	561 (427)	32,022 (-)	- (-)	1,062 (2,359)	
<i>Outreach to communities (no. of comm.)</i>	- (-)	16 (-)	- (-)	8 (-)	
<i>Outreach to schools</i>	- (-)	17 (-)	- (-)	6 (-)	
<i>Surgical Outreach to facilities</i>	- (-)	6 (6)	- (-)	2 (-)	

# KEY CHALLENGES

## CHALLENGES FOR ALL THs

CHALLENGES	TH HSP
High Institutional Maternal and Neonatal Mortality	ALL THs
Inadequate and ageing equipment eg. Oxygen Plant, diagnostic equipment, Cobalt machine, Laundry and CSSD equipment, Generators, Laundry, CSSD Machines etc.	ALL THs
Accommodation for House officers and Residents (High cost of Rent)	ALL THs
Delays in the payment of health insurance claims/ unrealistic tariffs/ withheld NHIS claims	ALL THs
Inadequate and Ageing Vehicles	ALL THs
Inadequate Staff Accommodation	ALL THs
Absence of a Relative Hostel	ALL THs
MRI machine still not functioning and handed over for service after 4 years	<i>TTH, KATH &amp; CCTH</i>
<b>10% Retention of NHIS claims by NHIA</b>	<b><i>TTH, KATH &amp; CCTH</i></b>

# CHALLENGES - KBTH

CHALLENGES	REMARKS
• Infrastructure problems in all the units	
• Revenue leakages	
• Breakdown of patient beds affecting the intake of patients	
• Tracking of care outcomes using paper-based medical records	
• Inadequate capacity in quality improvement methods	
• Lack of Financial support for operational research	
• <b>Delay in reimbursement by NHIA</b>	
• Challenges resulting from under recovery of cost due to low NHIS tariffs	
• Down time of equipment for CT scan and MRI, affecting revenue generation during the year	
• Lack of a Centralized database for patient records and statistics	



# CHALLENGES - KATH

CHALLENGES	REMARKS
1. Delays in payment of health insurance and unrealistic tariffs	
2. Deplorable condition of the old hospital block	
3. Congestion at Specialist OPD and the A & E	
4. Overstay of discharged patients due to non-payment of bills	
5. High rate of Abscondees	
6. High maternal mortalities as a result of late referrals	
7. Frequent breakdown of CT scan and MRI	
8. Lack of financing module for emergency cases	

# CHALLENGES - TTH

CHALLENGES	REMARKS
• Delays in receiving payments from NHIA, which forms about 70% of our revenue.	
• Frequent shortages of programme drugs such as ACTs, ARVs and psychotropic medications.	
• High attrition rates, poor attitudes and general apathy among staff.	
• Inadequate in-service training for all staff at various levels to boost work output.	
• Inadequate health professionals in critical areas	
• Poor supervision by various line managers	
• Frequent equipment breakdown due to high costs of maintaining some pre-installed equipment coupled with a general lack of adherence to planned preventive maintenance schedules.	
• Lack of a research fund to carry out research activities and poor coordination of research activities in the hospital.	
• Inadequate transportation services for outreach purposes and ambulances for internal transfers.	

# CHALLENGES - CCTH

## KEY CHALLENGES

Absence of **NICU**

Absence of a Relative Hostel

Over crowding, congestion and inadequate triage space at the **Accident & Emergency** ward

**MRI machine** still not functioning and handed over for service after 4 years

# CHALLENGES - CCTH

## KEY CHALLENGES

High Institutional Maternal Mortality and Neonatal Deaths (**Macerated Death**)

Delay in NHIS reimbursement

Illegal sale, development and encroachment of hospital lands

Inadequate Staff **Accommodation**

Inadequate and ageing equipment eg. Medical Oxygen Plant, Power Generators, Laundry and CSSD equipment, etc.

**SUMMARY OF KEY ACTIVITIES  
& PROJECTS PLANNED  
FOR 2019**

# OUT LOOK FOR 2019 **FOR ALL THs**

PLAN	TH HSP
1. To Reduce Institutional Maternal and Neonatal Mortalities	ALL THs
2. Lobby for support to replace and procure needed equipment and infrastructure	ALL THs
3. Dialogue with key Stakeholders on the issue of 10% Retention of NHIS claims by NHIA	<i>TTH, KATH &amp; CCTH</i>

# OUT LOOK FOR 2019 - KBTH

## OUTLOOK

- Re—brand and Transform KBTH
- Meet the needs and expectations of clients
- Build an efficient robust Governance and management system to support quality and safe health care delivery
- Meet expectations of staff to improve cohesion , team work and client centered care.
- Be responsive to public financial management Act and procurement to protect public purse.
- Recruit, induct, orientate and deploy right numbers and mix
- Maintain hospital estate and equipment to support care
- Develop a new 4 year strategic plan 2019 -2023
- Secure the entire hospital environment to make KBTH Safe

# OUT LOOK FOR 2019 - KATH

## OUTLOOK

- Quality health care delivery, leading to better health outcomes especially in maternal and Child Health
- Expansion of Radiation and Nuclear Medicine Centre (Oncology)
- Rehabilitate the old hospital block (A-D)
- Continue the provision of infrastructure for clinical training of students
- Strengthen outreach services
- Continue efforts to complete the 44-year old Children and Maternity block
- Construction of a patient relatives' hostel



# OUT LOOK FOR 2019 - KATH

- Renovation of A1 theatre
- Renovation of old MBU to serve as mothers' hostel
- Construction of a patient relatives' hostel
- Retooling of A & E centre
- Setting up of a Renal Centre
- Setting up of a Fertility Centre

# OUT LOOK FOR 2019 - TTH

## OUTLOOK

- Engage NHIA to improve timeliness in the payment of claims submitted.
- Augment the provision and availability of programme drugs through in-house procurements
- Ensure drug availability of 98% of essential medicines
- Improve supervision of nursing & midwifery practice and institutionalize total nursing & midwifery care.
- Attract and retain adequate skill-mix of staff especially in specialized areas
- Finalize and implement HR policies
- Enhance specialist outreach and support services to communities and peripheral facilities
- Establish additional specialties and sub-specialties such as the wellness clinic and the polyclinic
- Finalize, disseminate and implement 2019-2023 Strategic Plan
- Expand trauma/orthopaedics and neurosurgical units into departments.
- Improve internal audit activities and implement recommendations
- Improve monitoring of the use of drug-and non-drug consumables across the supply chain
- Improve hospital data collection and management through improved data capture and reporting systems

# OUT LOOK FOR 2019 - CCTH

## OUTLOOK

Additional equipment to make the current SCBU more operational / Construction of a modern NICU

Pursue PPP & Gov't completion of Ghana @ 50 hostel started

Expansion of A & E to the level of Teaching Hospital

Continuous dialogue with NHIA

To rectify and wall of encroachers on CCTH Lands

Pursue the PPP agreement for the construction of 270 accommodation units

Lobby MOH for replacement of obsolete equipment and machinery (Laundry, CSSD, Generator Sets, Oxy

Currently, arranged with Air-liquid for the supply of oxygen bottles

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- All Medical Schools
- All Boards & Managements
- Hardworking staffs
- All other institutions / stakeholders

*THANK YOU*

