MINISTRY OF HEALTH INTER-AGENCY REVIEW CONFERENCE











GHANA TEACHING HOSPITALS JOINT 2020 ANNUAL PERFORMANCE REPORT

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

DATE: 22nd to 23rd April, 2021

VENUE: Virtual (due to Covid-19 Pandemic)

OUTLINE OF PRESENTATION

- Introduction
- Background Information
- 2020 THs KPI Reporting
- Key Challenges
- Outlook For 2021
- Acknowledgement

INTRODUCTION – THs Profile

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.

This presentation reviews the performance and outlines the challenges of four teaching hospitals in Ghana for the year 2020 using the 63 agreed KPIs as a benchmark.

INTRODUCTION – CON'T

Teaching Hospitals (THs) play important roles 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 forged 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 five Teaching Hospitals (KBTH, KATH, TTH, CCTH and HTH) 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)

HEALTH SECTOR OBJECTIVE 1:

Ensure sustainable affordable, equitable and easily accessible healthcare services

HEALTH SECTOR OBJECTIVE 2:

Reduce morbidity, disability, mortality and intensify prevention and control of non - communicable diseases

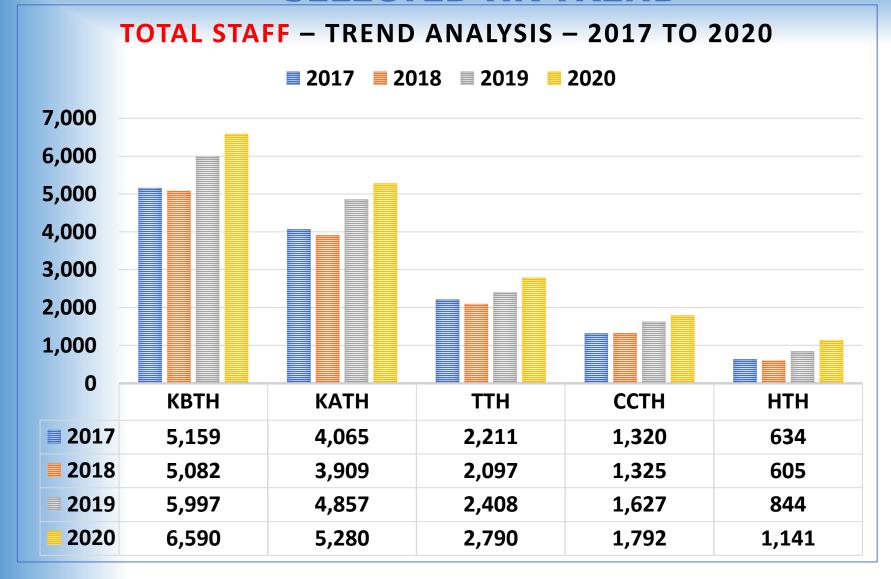
HEALTH SECTOR OBJECTIVE 3:

Ensure efficiency in governance and management of health systems

HEALTH SECTOR OBJECTIVE 4:

☐ Intensify prevention and control of communicable diseases

HUMAN RESOURCES FOR HEALTH(Improve Human Resource Base)

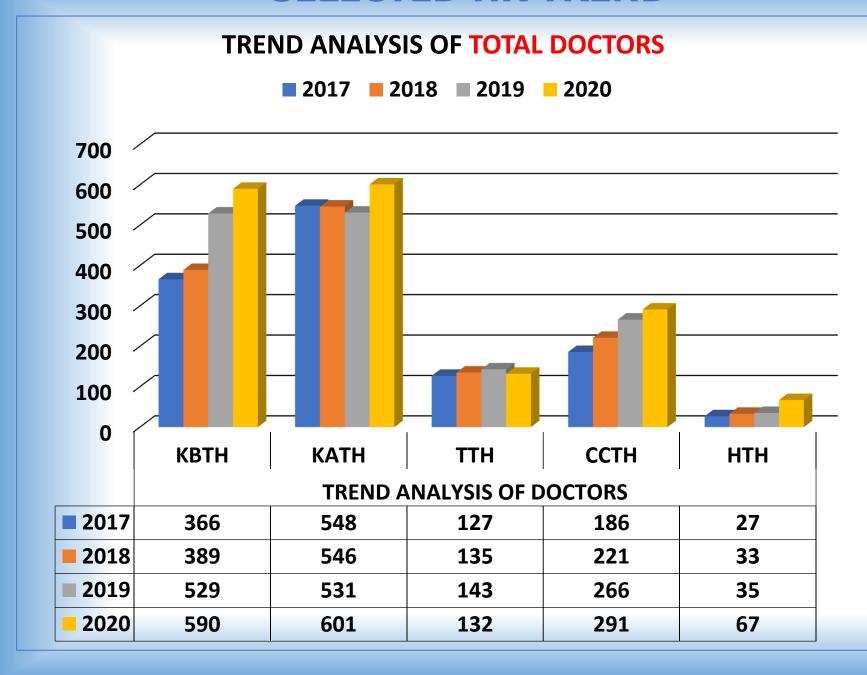


NOTE: BED CAPACITY OF THE TEACHING HOSPITALS:

KBTH = 1538; KATH = 982; TTH = 812; CCTH = 400; HTH = 300

REMARKS:

- KBTH STAFF = $2020 = 6,590 (9.9\%\uparrow)$ $2019 = 5,997 (18\%\uparrow)$
- KATH STAFF = $2020 = 5,280 (8.71\%\uparrow)$ $2019 = 4,857 (24.3\%\uparrow)$
- TTH STAFF = 2020 = 2,790 (15.9% ↑) 2019 = 2,408 (14.8%↑)
- CCTH STAFF = $2020 = 1,792 (10.1\%\uparrow)$ $2019 = 1,627 (22.8\%\uparrow)$
- HTH STAFF = $2020 = 1,141 (35.2\%\uparrow)$ $2019 = 844 (39.5\%\uparrow)$



REMARKS:

• KBTH:

$$2020 = 590 (11.53\%\uparrow)$$

 $2019 = 529 (35.99\%\uparrow)$

• KATH:

$$2020 = 601 (13.2\uparrow)$$

 $2019 = 531 (2.8\% \downarrow)$

• TTH:

$$2020 = 132 (7.7\% \downarrow)$$

 $2019 = 143 (5.93\% \uparrow)$

• CCTH:

$$2020 = 291 (9.4\% \uparrow)$$

 $2019 = 266 (20.4\% \uparrow)$

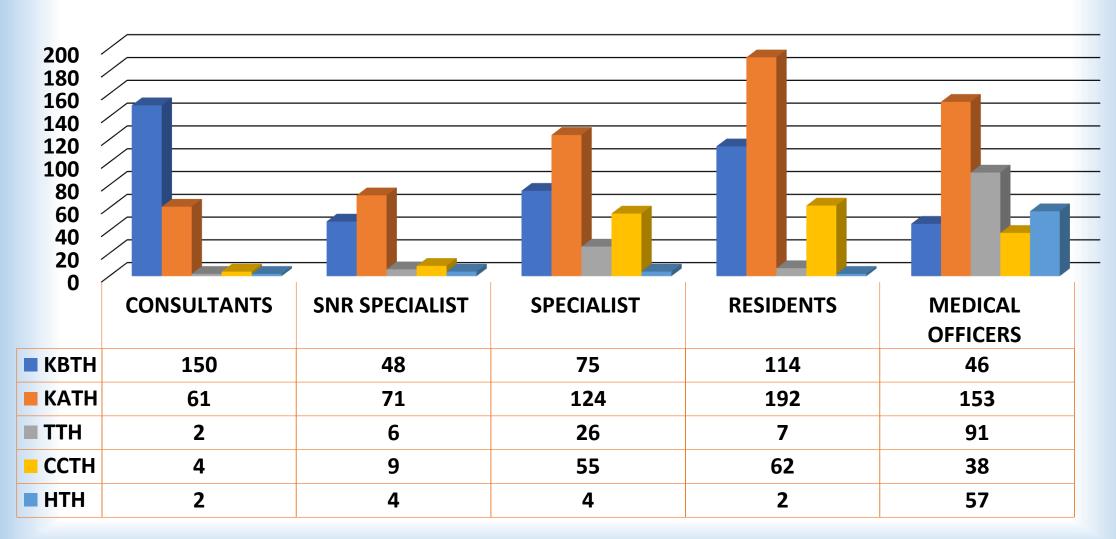
HTH:

$$2020 = 67 (91.4\%\uparrow)$$

 $2019 = 35 (6.1\%\uparrow)$

COMPARATIVE ANALYSIS OF THS CATEGORY OF DOCTORS IN 2020



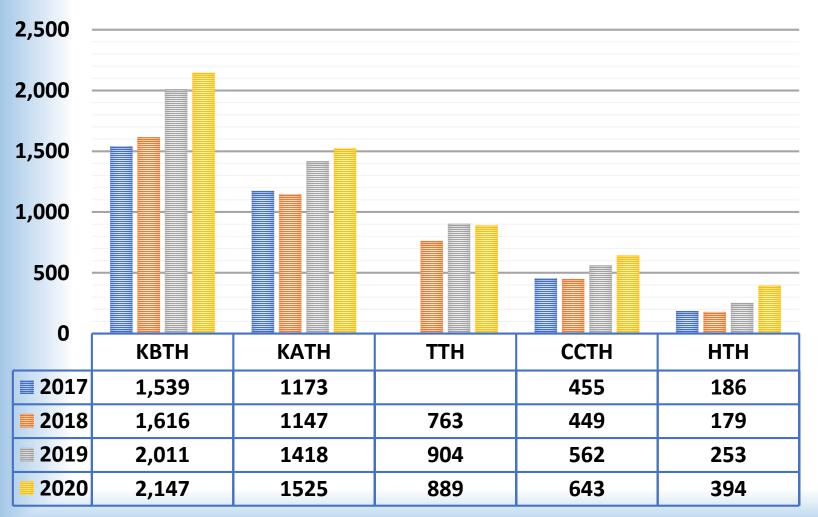


CADRE	KBTH	KATH	TTH	ССТН	HTH
Total Staff	6,590 (9.9%↑)	5,280 (8.71%↑)	2,790 (15.9% ↑)	1,792 (10.1% ↑)	1,141 (35.2%↑)
	5,997 (18%↑)	4,857 (24.3%↑)	2,408 (14.8%↑)	1,627 (22.8%↑)	844 (39.5%↑)
	5,082 (1.5↓)	3,909 (3.8% ↑)	2,097 (5.2% ↓)	1,325 (0.4%↑)	605 (4.6%↓)
	5,159 = 2017	4,065 = 2017	2,211 = 2017	1,320 = 2017	634= 2017
Total Doctors	590 (11. 53% ↑)	601 (13.2↑)	132 (7.7%↓)	291 (9.4 % ↑)	67 (91.4% ↑)
	529 (35.99% ↑)	531 (2.8%↓)	143 (5.93% ↑)	266 (20.4% ↑)	35 (6.1%↑)
	389 96.3%↑)	546 (0.4% ↓)	135 (6.3 %↑)	221 (18.8%↑)	33 (22.3%↑)
	366 = 2017	548= 2017	127 = 2017	186 = 2017	27=2017
Consultant, Senior	160 (27.9%↓)	256 (16.9% ↑)	34 (5.6%↓)	68 (5.6% ↓)	10 (25%↑)
Specialist and	222 (27.7%↓)	219 (4.8% ↓)	36 (10%↓)	72 (35.8%↑)	8 (20%)
*	307 (9.6%↓)	230 (0.9% ↑)	40 = 2018	53 (17.8% ↑)	10 (9.1%)
specialists	280 = 2017	228= 2017	- = 2017	45 = 2017	11= 2017
Consultants	150 (0%)	61 (13%↑)	2 = 2020	4 = 2020	2 (100%↑)
	150 (4.9% ↑)	54 (3.9% ↑)	2 = 2019	4 = 2019	1 (†)
	143 (0%)	52 (3.7%↓)	2 = 2018	4 = 2018	0 = 2018
	143 = 2017	54= 2017	- = 2017	4 = 2017	0 = 2017
Senior Specialist	48 (2.1 %↑)	71 (9% ↓)	6 (50%↑)	9 = 2020	4 = 2020
T I I I	47 (9.3% ↑)	78	4 = 2019	8 = 2019	4 (33.3%↑)
	43 (7.5%↑)	78 (9.9% ↑)	4 = 2018	4 = 2018	3 = 2018
	40= 2017	71= 2017	- = 2017	1 = 2017	3= 2017
Specialist	78 (39.3 %↑)	124 (6%↑)	26 (13.3%↓)	55 (8.3% ↓)	4 (33.3%↑)
1 1	56 (12%↑)	117 (17% ↑)	30 (11.8%↓)	60 (33.3%↑)	3 (57.1%)
	50 (0%)	100 (3%↓)	34 = 2018	45 (12.5%↑)	7 (12.5%)
	50= 2017	103= 2017	2017 = -	40 = 2017	8 = 2017
Residents	114 (44.4%↓)	192 (5.9%↓)	7 = 2020	62 (29.2% ↓)	2 = 2020
	20 5 (26.5%↑)	204 (10.1\psi)	7 (↑)	48 (9.4% ↓)	N/A = 2019
	162 (42.1 %↑)	227 (5%↓)	0 = 2018	53 = 2018	N/A = 2018
	114 = 2017	239= 2017	0 = 2017	47 = 2017	N/A = 2017

CADRE	KBTH	KATH	TTH	ССТН	НТН
Medical Officers	46 (42.5%) $80 (166.7%)$ $30 (36.4%)$ $22=2017$	153 (41.6%↑) 108 (21.4%↑) 89 (9.9%↑) 81= 2017	91 (16.7%↑) 78 (6.9%↑) 73 (-) -= 2017	$38 (15.2\%\uparrow)$ $33 (13.8\%\uparrow)$ $29 (58\%\downarrow)$ $69 = 2017$	57 (111.1%↑) 27 (17.4%↑) 23 (43.8%↑) 16= 2017
House Officers	$179 (6.6\%\uparrow)$ $168 (21.7\%\uparrow)$ $138 = 2018$ $138 = 2017$	150 (0%) 150 (2.0%↓) 153 ((0.6%↑) 162= 2017	141 (31.6% \downarrow) 206 (52.6% \uparrow) 135 = 2018 - = 2017	123 (8.9% \uparrow) 113 (68.7% \uparrow) 67 (26.4% \downarrow) 91 = 2017	79 (16.2% \uparrow) 68 (23.6% \uparrow) 55 (16.7% \downarrow) 66 = 2017

TREND ANALYSIS OF PROFESSIONAL NURSES





REMARKS:

• KBTH:

$$2020 = 2,147 (6.8\%\uparrow)$$

 $2019 = 2,011 (24.4\%\uparrow)$

• KATH:

$$2020 = 1525 (7.6\%\uparrow)$$

 $2019 = 1418 (23.6\%\uparrow)$

• TTH:

$$2020 = 889 (1.7\% \downarrow)$$

 $2019 = 904 (18.5\% \uparrow)$

• CCTH:

$$2020 = 643 (14.4\%\uparrow)$$

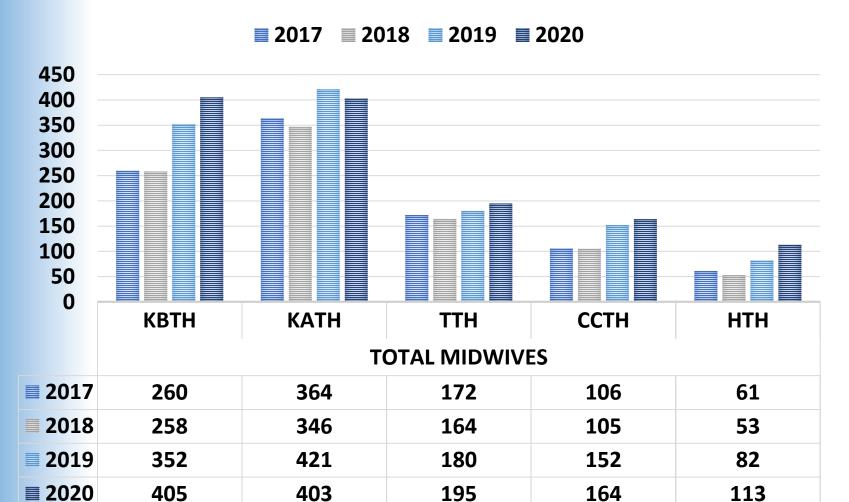
 $2019 = 562 (25.2\%\uparrow)$

• HTH:

$$2020 = 394 (55.7\%\uparrow)$$

 $2019 = 253 (41.3\%\uparrow)$

TTREND ANALYSIS OF TOTAL NUMBER OF MIDWIVES



REMARKS:

• KBTH:

$$2020 = 405 (0.3\%\uparrow)$$

 $2019 = 352 (36.4\%\uparrow)$

• KATH:

$$2020 = 403 (4.3\% \downarrow)$$

 $2019 = 421 (21.7\% \uparrow)$

TTH:

$$2020 = 195 (8.3\%\uparrow)$$

 $2019 = 180 (9.8\%\uparrow)$

• CCTH:

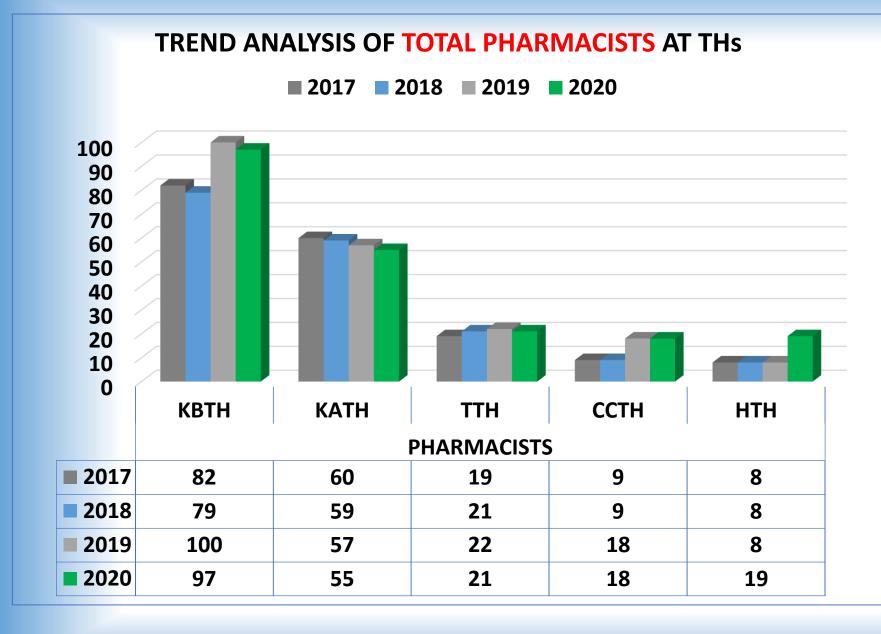
$$2020 = 164 (7.9\%\uparrow)$$

 $2019 = 152 44.8\%\uparrow)$

• HTH:

$$2020 = 113 (37.8\%\uparrow)$$

 $2019 = 82 (54.7\%\uparrow)$



REMARKS:

• KBTH:

$$2020 = 97 (3\%\downarrow)$$

 $2019 = 100 (26.6\%\uparrow)$

• KATH:

$$2020 = 55 (3.5\% \downarrow)$$

 $2019 = 57 (3.4\% \downarrow)$

• TTH:

$$2020 = 21 (4.5\%)$$

 $2019 = 22 (4.8\%)$

• CCTH:

$$2020 = 18$$

 $2019 = 18 (100\%)$

• HTH:

$$2020 = 19 (137.5\%\uparrow)$$

 $2019 = 8$

CADRE	KBTH	KATH	TTH	CCTH	HTH
	2 1 47 ((00 / A)	1505 (B (0/ A)	000 (1.70/ 1)	(42 (14 40/ 4)	204 (55 50/ 4)
Professional	2,147 (6.8% ↑)	1525 (7.6% ↑)	889 (1.7%↓)	643 (14.4%↑)	394 (55.7%↑)
Namagag	2,011 (24.4 %↑)	1418 (23.6 %↑)	904 (18.5 %↑)	562 (25.2 %↑)	253 (41.3% ↑)
Nurses	1,616 (5%↑)	$1147(2.2\%\downarrow)$	763 = 2018	449 (1.3% ↓)	179 (3.8% ↓)
	1,539 = 2017	1173= 2017	- = 2017	455= 2017	186= 2017
	1,000 = 2017	1170-2017	_ 2017	100-2017	100-2017
			1.50 (0.10()	-0 (10 ()	100 (1 50 (1)
Enrolled Nurses	482 (26.2%↑)	229 (9.8% ↓)	169 (3.4% ↓)	70 (17.7%↓)	128 (1.5%↓)
	382(32.9%↓)	254(19.8% ↑)	175 (196.6 %↑)	85 (12.4%↓)	130 (150% ↑)
	569 (3.2%↓)	212 (12.4%↓)	59 = 2018	97 (2.0% _↓)	52 (8.8%↓)
	588 = 2017	242= 2017	- = 2017	99 = 2017	57= 2017
	300 – 2017	272-2017	2017	77 - 2017	37-2017
Midwives	405 (0.3% ↑)	403 (4.3%↓)	195 (8.3 %↑)	164 (7.9% ↑)	113 (37.8% ↑)
	352 (36.4% ↑)	421 (21.7 %↑)	180 (9.8% ↑)	152 44.8% ↑)	82 (54.7 %↑)
	258 (0.8% ↓)	346 (5%↓)	164 (4.7%↓)	105 (0.9% ↓)	53 (13.1%↓)
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	260 = 2017	364 = 2017	172 = 2017	106 = 2017	61= 2017

CADRE	KBTH	KATH	TTH	CCTH	HTH
Pharmacist	$97 (3\% \downarrow)$ $100 (26.6\% \uparrow)$ $79 (3.7\% \downarrow)$ $82 = 2017$	55 (3.5%) 57 (3.4%) 59 (1.7%) 60 = 2017	21 (4.5%↓) 22 (4.8%↑) 21 (10.5%↑) 19= 2017	$18 = 2020$ $18 (100\%\uparrow)$ $9 = 2018$ $9 = 2017$	19 (137.5% \uparrow) $8 = 2019$ $8 = 2018$ $8 = 2017$
Pharmacy Technicians	58 (3.3%) $60 (27.7%)$ $47 (6.8%)$ $44 = 2017$	51 (7.3%) 55 (5.2%) 58 = 2018 58 = 2017	$27 = 2020$ $27 (59.3\%\uparrow)$ $11 (50\%\downarrow)$ $22 = 2017$	$7 = 2020$ $7 (16.7\%\uparrow)$ $6 = 2018$ $6 = 2017$	$2 (100\%\uparrow) 1 (100\%\downarrow) 2 (33.3\%\downarrow) 3 = 2017$
Others	$2,786 (28.7\%\uparrow)$ $2,164 (3.3\%\downarrow)$ $2,239 (0.1\%\downarrow)$ $2,241 = 2017$	2,266 (15%↑) 1,971 (41.4%↑) 1,394 (22%↓) 1,792 = 2017	1,083 (20.1% \uparrow) 902 (2.5% \downarrow) 925 (9.8% \downarrow) 1,025 = 2017	609 (11.3%↑) 547 (7.1%↑) 511 (3.8%↓) 531 = 2017	$341 (8.3\% \downarrow)$ $372 (57.6\% \uparrow)$ $236 (7.1\% \downarrow)$ $254 = 2017$

2020 ACHIEVEMENTS

S.O. 1:

Ensure Sustainable Affordable, Equitable And Easily Accessible Healthcare Services

S.O 2:

Reduce Morbidity, Disability, Mortality And Intensify
Prevention And Control Of NonCommunicable Diseases

S.O 4:
Intensify Prevention
And Control Of Communicable Diseases

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KBTH

- □ Sod cutting conducted for construction of the Korle Bu Urology and Nephrology Centre.
- □ Sod cutting done for construction of the new Obstetrics and Gynaecology Block.
- ☐ Accident and Emergency decongested (CDC) to solve no bed syndrome
- Regular supply of PPEs and others logistic has been maintained
- Uninterrupted supply of utility services was ensured.

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KATH

- Improved appointment system
- Expansion of interventional gastrointestinal services
- Clinical assessment of prescriptions
- Pacemaker Insertion services (3 cases done)
- Improved average length of stay at the emergency areas
- Creation of the infectious disease holding area (IDHA) at A & E
- ➤ Increased outreach and support services
- ➤ Introduction of time-check list to speed up work flow at the A & E theatre

- Creation of treatment protocols for house officers and medical officers
- ➤ Introduced mixing test for differential diagnosis of prolonged APTT
- ➤ Set-up of Covid-19 laboratory
- ➤ Introduced Covid-19 commercial testing for travelers
- Reduction in institutional maternal mortality
- Reactivation of completion of the Maternity and Children's block
- Creation of blood sample collection and results point at the diabetic Centre

KEY ACTIVITY ACHIEVEMENTS IN 2020 - TTH

- Establishment of a Polyclinic with seed funds from former CEO of GNPC
- ➤ Reduction in Maternal Mortality from 633 (56) to 608 (49) deaths per 100.000 LB.
- ➤ Reduction in Average Length of Stay (ALOS) a the Accident & Emergency Ward from 5.8 in 2019 to 4.0 in 2020.
- Renovation/retooling of the Infectious Diseases Treatment Centre with the support of KOICA/CDC
- > Production of chlorine and alcohol-based sanitizer by the Drugs Manufacturing Unit
- Establishment of a Holding Area for triaging of suspected Covid-19 patients
- ➤ Successful Management, treatment and discharge of all Covid-19 Cases from the Northern, North-East, Upper East, Upper West and Savannah Regions.
- ➤ Initial phases of partnership with Roche underway for support for oncology and nephrology care.
- Acquired Lexicomp (complete online premium pack) for the Drug information Centre
- > Secured a toll-free number for the Drug Information Centre from the National Comm.

 Authority

KEY ACTIVITY ACHIEVEMENTS IN 2020 - CCTH

- Established SARS-CoV-2 Testing Centre at CCTH in September, 2020
 - o (NB: CCTH Lab started conducting PCR test (Covid-19 test) on 24th September, 2020 and the hospital received a new PCR machine in January, 2021)
- ➤ Set up an institutional Covid-19 Task Team and developed Policy Guideline with 23 protocols in response to the pandemic at designated
 - ✓ A joint monitoring team set up within the institutional COVID-19 Task Team to effectively monitor the response, conduct daily validation of the covid-19 data and disseminate daily data update to all Directors and HODs of Units & Sub-BMCs.
- > Securing of GRNMA hostel for exposed staff under quarantine
- > Production of alcohol-based hand sanitizer with 96% concentration
- ➤ The completion of the hospital Polyclinic as a Treatment Centre (7 bedded Treatment Center) to accommodate and treat COVID-19 confirmed patients
- ➤ The designation and creation of a Holding/Isolation Bay (7 bedded Holding bay/isolation Center) at the UCC-SMS Diagnostic Centre to accommodate suspected cases

KEY ACTIVITY ACHIEVEMENTS IN 2020 - CCTH

- > Enforced total nursing care on the wards
- Set up New Drug Information Centre (Drug information unit is fully functional & internet provided)
- Additional High Dependency Unit (HDU) at the Paediatric Ward Set up in addition to the existing one at the Female Medical Ward
- Put in place a robust monitoring system in response to the covid-19 and provided daily data update on covid-19 situation to all hospital managers and other key stakeholders to guide evidence-based decision making

- Strengthened the cancer registry and reported data on cancers to key stakeholders to guide decision making
 - Organized a three-day refresher training for registrants at CCTH from 24th – 26th June, 2020.
- ➤ Organized webinar training for general staff on covid-19 and also training workshop for 717 staff on IPC practices in response to covid-19
- Construction of a blood bank with the support of MTN
- ➤ Acquisition of assorted equipment from MoH to support Covid-19 management
- ➤ Procurement of assorted equipment to support service delivery

KEY ACTIVITY ACHIEVEMENTS IN 2020 - HTH

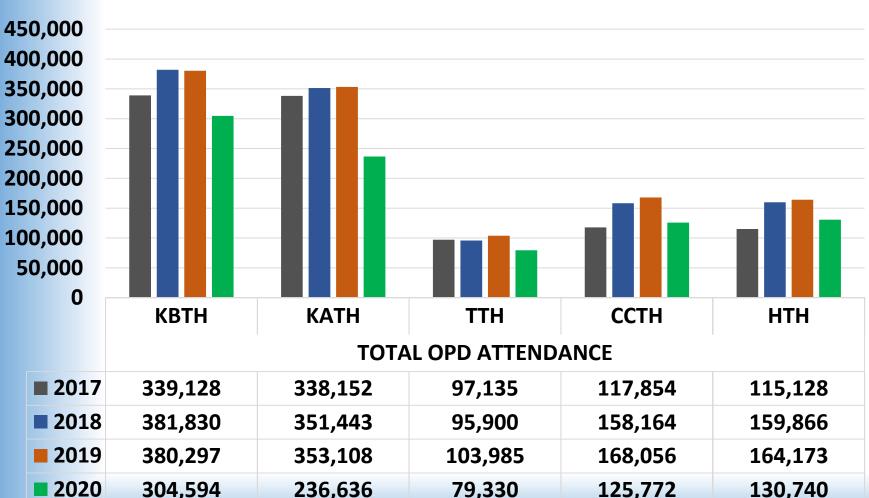
- Established a Relaxation Clinic for Staff and others including a Relaxation Clinic Outreach Programme provided to NPA.
- Obtained accreditation from the GCPS for Residency Programme in:
 - Surgery
 - Psychological Medicine
 - ❖ OBGY has been assessed for accreditation
- ➤ Major surgeries increased by 26.8%
- Reduction in Maternal Mortality from 1093.5/100,000 LB in 2019 to 526/100,000)LB in 2020
- Rolled out of the LHIMS

KEY OUTPUTS ACHIEVEMENTS

Provide Outpatient Services

TREND ANALYSIS OF TOTAL OPD ATTENDANCE





REMARKS:

• KBTH:

$$2020 = 304,594 (19.9\%)$$

 $2019 = 380,297 (0.4\%)$

• KATH:

$$2020 = 236,636 (33\%)$$

 $2019 = 353,108 (0.5\%)$

• TTH:

$$2020 = 79, 330 (23.7\% \downarrow)$$

 $2019 = 103,985 (8.4\% \uparrow)$

• CCTH:

$$2020 = 125,772 (25.2\% \downarrow)$$

 $2019 = 168,056 (6.3\% \uparrow)$

• HTH:

$$2020 = 130,740 (20.4\% \downarrow)$$

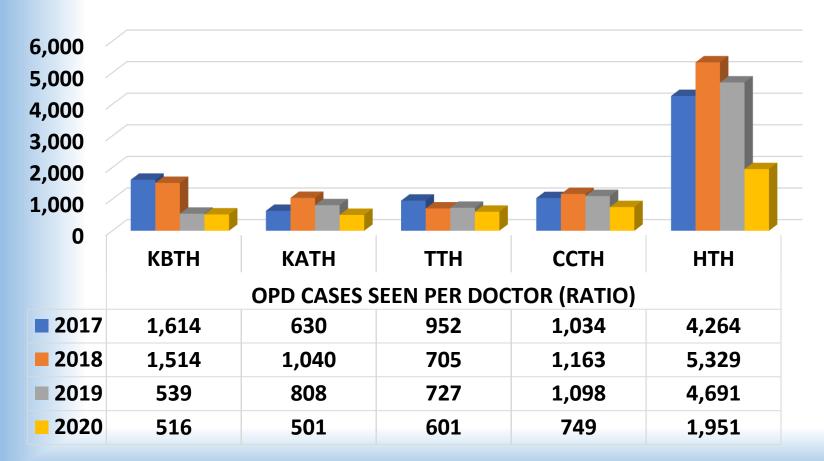
 $2019 = 164,173 (2.7\% \uparrow)$

Provide Outpatient Services

OPD CASES SEEN PER DOCTOR (RATIO)

THs Target = 1:1080

2017 2018 2019 2020



REMARKS:

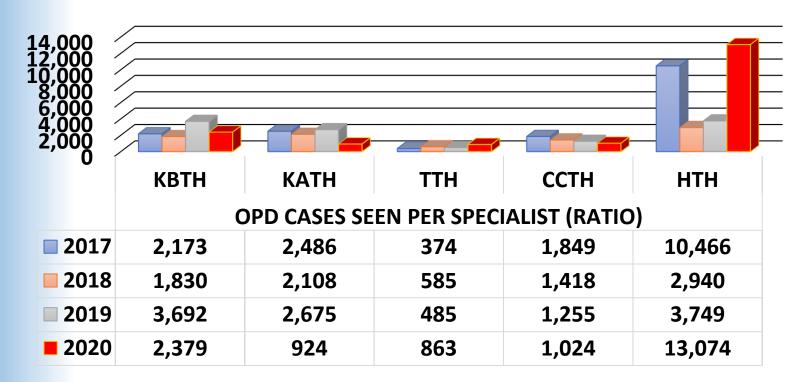
- KBTH: Target Not Achieved 2020 = 1:516 (↓) 2019 = 1:539 (↓)
- KATH: Target Not Achieved 2020 = 1:501 (↓) 2019 = 1:808 (↓)
- TTH: Target Not Achieved 2020 = 1:601 (↓) 2019 = 1:727 (↑)
- CCTH: Target Not Achieved 2020 = 1:749 (↓) 2019 = 1:1098 (↓)
- HTH: Exceeded Target 2020 = 1:1,951 (↓) 2019 = 1:4,691 (↓)

Provide Outpatient Services

OPD CASES SEEN PER SPECIALIST (RATIO)

THs Target = 1:1200

■ 2017 ■ 2018 ■ 2019 ■ 2020



CADRE	KBTH	KATH	TTH	CCTH	HTH
Consultant, Senior	160 (27.9% ↓)	256 (16.9% ↑)	34 (5.6%↓)	68 (5.6% ↓)	10 (25%↑)
Specialist and	222 (27.7% ↓)	219 (4.8% ↓)	36 (10%↓)	72 (35.8% ↑)	8 (20%)
*	307 (9.6% ↓)	230 (0.9% ↑)	40 = 2018	53 (17.8% ↑)	10 (9.1%)
specialists	280 = 2017	228= 2017	- = 2017	45 = 2017	11= 2017

REMARKS:

• KBTH: Exceeded Target 2020 = 1:2,379 (↓) 2019 = 1:3,692 (↑)

• KATH: Target Not Achieved 2020 = 1:924 (↓) 2019 = 1:2,675 (↑)

• TTH: Target Not Achieved 2020 = 1:863 (↑) 2019 = 1:485 (↓)

• CCTH: Target Not Achieved 2020 = 1:1024 (↓) 2019 = 1:1255 (↓)

• HTH: Exceeded Target 2020 = 1:13,074 (↓) 2019 = 1:20,521 (↑)

Provide Outpatient Services | BLACK = 2020, RED = 2019, GREEN = 2018, BLUE = 2017

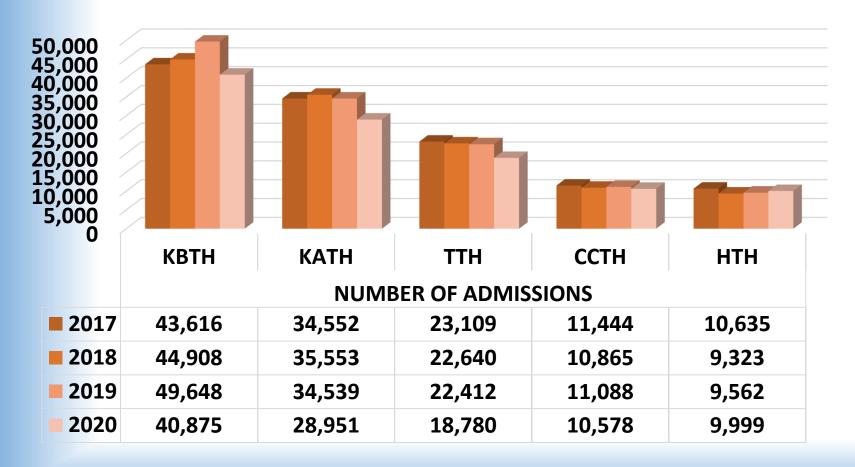
KEY INDICATORS		PE	THs TARGET S	MEASUREMEN T			
	KBTH	KATH	TTH	ССТН	HTH		
Total OPD Attendance	$304,594 (19.9\% \downarrow)$ $380,297 (0.4\% \downarrow)$ $381,830 (12.6\% \uparrow)$ 339,128 = 2017	1 ' ' ' 1	103,985 (8.4%↑)	$\begin{array}{c} 125,772 \ (25.2\% \downarrow) \\ 168,056 \ (6.3\% \uparrow) \\ 158,164 \ (34.2\% \uparrow) \\ 117,854 = 2017 \end{array}$	164,173 (2.7% ↑) 159,866 (38.9%↑)		Total no. of client attending OPDs
OPD cases seen per doctor (ratio)	1:516 (1)	1:501 (\downarrow) 1:808 (\downarrow) 1:1,040 (\uparrow) 1:630 = 2017	1:601 (↓) 1:727 (↑) 1:705 (↓) 1:952 = 2017	1:749 (↓) 1:1098 (↓) 1:1163 (↑) 1:1034 = 2017	1:1,951 (\psi) 1:4,691 (\psi) 1:5,329 (\psi) 1:4,264= 2017	1:1080	Total no. of client attending OPDs / Total no. of Drs
OPD cases seen per specialist (ratio)	1:2,379 (↓) 1:3,692 (↑) 1:1,830 (↓) 1:2,173 = 2017	1:924 (↓) 1:2,675 (↑) 1:2,108 (↓) 1:2,486 = 2017	1:863 (↑) 1:485 (↓) 1:585 (↓) 1:374 = 2017	1:1024 (↓) 1:1255 (↓) 1:1418 (↓) 1:1849 = 2017	1:13,074 (↓) 1:20,521 (↑) 1:15,987 (↑) 1:10,466= 2017	1:1200	Total no. of OPD client attending specialist clinics / Total no. of specialist/Snr. Specialists/Consul
							tants.

Provide Inpatient Services

TREND ANALYSIS OF TOTAL ADMISSIONS

THs Target = 12,000

2017 2018 2019 2020



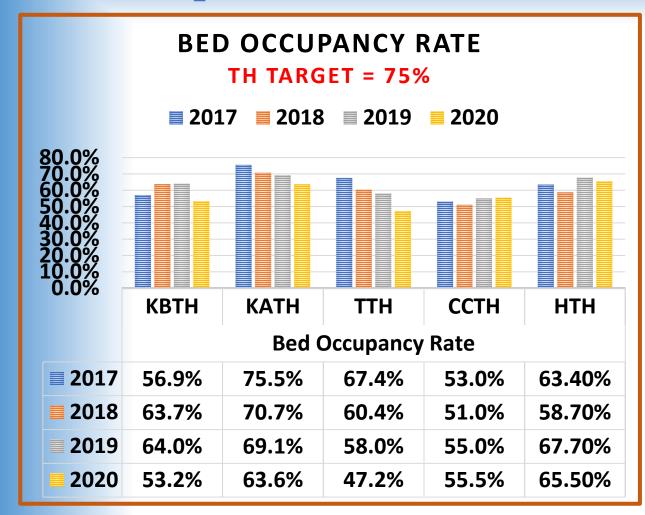
REMARKS:

- KBTH: Target Achieved $2020 = 40,875 (17.7\% \downarrow)$ $2019 = 49,648 (10.6\% \uparrow)$
- KATH: Target Achieved $2020 = 28,951 (16.2\% \downarrow)$ $2019 = 34,539 (2.9\% \downarrow)$
- TTH: Target Achieved $2020 = 18,780 (16.2\% \downarrow)$ $2019 = 22,412 (1\% \downarrow)$
- CCTH: Target Not Achieved $2020 = 10,578 (4.6\% \downarrow)$ $2019 = 11,088 (2.1\% \uparrow)$
- HTH: Target Not Achieved $2020 = 9,999 (4.6\%\uparrow)$ $2019 = 9,562 (2.7\%\uparrow)$

Provide Inpatient Services

KEY INDICATORS		PEI	THs TARGETS	MEASUREMENT			
	KBTH	KATH	TTH	CCTH	НТН		
Number of admissions	40,875 (17.7%↓) 49,648 (10.6%↑) 44,908 (3%↑) 43,616 = 2017	28,951 (16.2%↓) 34,539 (2.9%↓) 35,553 (2.9%↑) 34,552 = 2017	$18,780 (16.2\% \downarrow)$ $22,412 (1\% \downarrow)$ $22,640 (2.1\% \downarrow)$ $23,109 = 2017$	$10,578 (4.6\%\downarrow)$ $11,088 (2.1\%\uparrow)$ $10,865 (5.1\%\downarrow)$ $11,444 = 2017$	9,999 (4.6%↑) 9,562 (2.7%↑) 9,323 (12.3%↓) 10,635= 2017	12,000	Total no. of clients admitted.
% of patients admitted due to external referrals % of Neonatal Admissions due to external	-= 2020 -= 2019 -= 2018 -= 2017 55% % (↑) 42% % (↑) 40% % (↑)	-= 2020 -= 2019 (↑) = 2018 63%= 2017 -= 2020 -= 2019 -= 2018	-= 2020 -= 2019 -= 2018 -= 2017 48.3 (\) 51.2 % (\) 18.8 = 2018	$21.6\% (\downarrow)$ $40.4\% (\uparrow)$ $25.8\% (\downarrow)$ $35\% = 2017$ $25.5\% (\downarrow)$ $27.2\% (\uparrow)$ $26.1\% (\downarrow)$	5.48% = 2020 N/A = 2019 N/A = 2018 N/A = 2017 24.1% (\) 34.7% (\) 28.8% (\)	30%	No. of Patients admissions due to external referrals / Total admissions * 100 No. of Neonatal admissions due to referrals / Total
Referrals % of Maternal Admissions due to external Referrals	35% = 2017 80.8% (↓) 86.3% (↑) 84.7% (↑) 60.9% = 2017	-= 2017 -= 2020 -= 2019 79.41% (↑) 63% = 2017	-= 2017 34% (↑) 25% (↓) 26% = 2018 -= 2017	28% = 2017 21.2% (\) 27.2% (\) 41.4% (\) 49% = 2017	30.5%= 2017 21.0% (↓) 21.3% (↑) 15.8% (↓) 20.7%= 2017	60%	neonatal admissions * 100 No. of Maternal admissions due to referrals / Total maternal admissions

Provide Inpatient Services Con't



REMARKS ON PERFORMANCE – BED OCCUPANCE RATE:

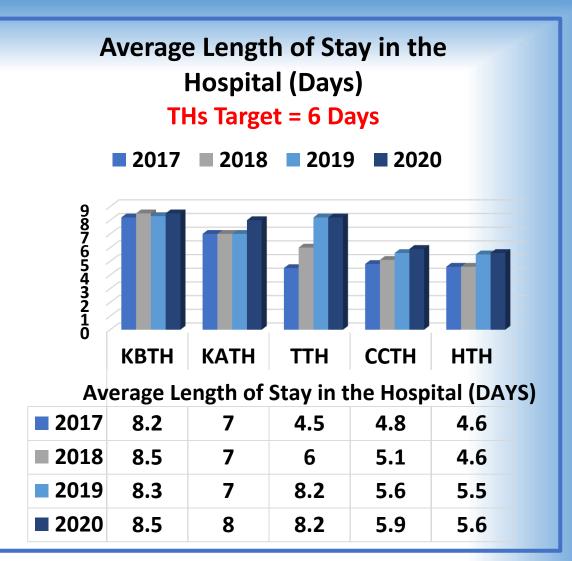
KBTH = Target Not Achieved

KATH = Target Not Achieved

TTH = Target Not Achieved

CCTH = Target Not Achieved

HTH = Target Not Achieved



REMARKS ON PERFORMANCE – AVERAGE LENGTH OF STAY:

KBTH = Target Achieved

KATH = **Target Achieved**

TTH = Target Achieved

CCTH = **Target Achieved**

HTH = Target Achieved

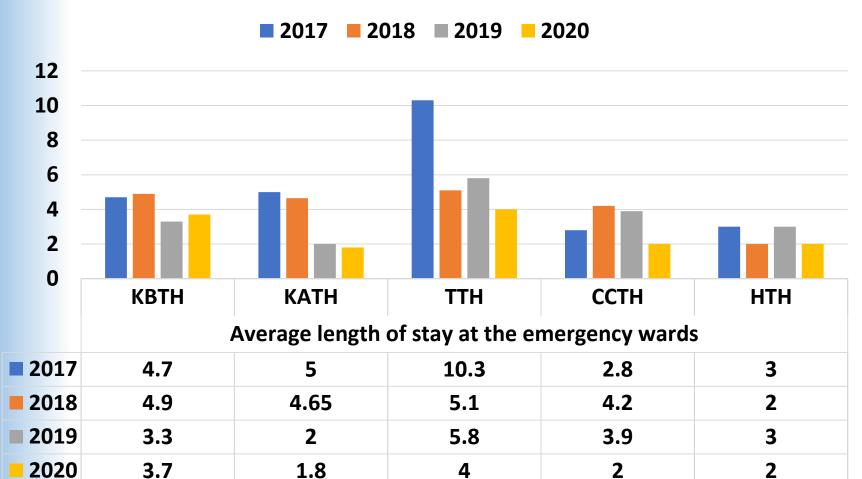
Provide Inpatient Services Con't

KEY INDICATORS		PE	THs TARGETS	MEASUREMENT			
	KBTH	KATH	TTH	CCTH	нтн		
Nurse and Midwife to admission ratio	1:13 (↓) 1:18 (↓) 1:35 (↓) 1:36 = 2017	1:16 (↓) 1:19 (↓) 1:37 (↑) 1:19 = 2017	1:15 (↓) 1:18 (↓) 1:23 (↓) 1:24 = 2017	1:13 (↓) 1:16 (↓) 1:20 (-) 1:20 = 2017	1:16 (\psi) 1:21 (\psi) 1:41 (\psi) 1:44= 2017	1:25	Total no. of clients admitted / total no. of nurses and midwives
Bed occupancy rate	$53.2\% (\downarrow)$ $64\% (\uparrow)$ $63.7\% (\uparrow)$ $56.9\% = 2017$	$63.58\%(\downarrow)$ $69.14\%(\downarrow)$ $70.68\%(\downarrow)$ $75.5\% = 2017$	$47.2\%(\downarrow)$ $58.0\%(\downarrow)$ $60.4\%(\downarrow)$ $67.4\% = 2017$	$55.5\% (\uparrow)$ $55\% (\downarrow)$ $51\% (\downarrow)$ 53% = 2017	65.5% (\) 67.7% (\) 58.7% (\) 63.4%= 2017	75%	No. of client days / No. of beds * No of days in the period
Average length of stay in the facility	8.5 (↑) 8.3 (↓) 8.5 (↑) 8.2 = 2017	8 (↑) 7= 2019 7 = 2018 7 = 2017	8.2 = 2020 8.2 (\uparrow) 6 (\uparrow) 4.5 = 2017	5.9 (↑) 5.6 (↑) 5.1 (↑) 4.8 = 2017	5.6 (↑) 5.5 (↑) 4.6 = 2018 4.6 = 2017	6	No. of client days / No. of Discharges + Deaths
Proportion of in-patients managed on nursing and midwives' care plan	53% (↑) 52% (↑) 50% = 2018 50% = 2017	57.65% (↑) 35.12% = 2019 -= 2018 -= 2017	100% (†) 85% = 2019 - = 2018 - = 2017	- = 2020 - = 2019 - = 2018 - = 2017	100%= 2020 100%= 2019 100%= 2018 100%= 2017	65%	No. of admissions with care plan/ Total admissions * 100

Provide Emergency Services

Average Length of Stay at the Emergency Ward

THs Target = 2 Days



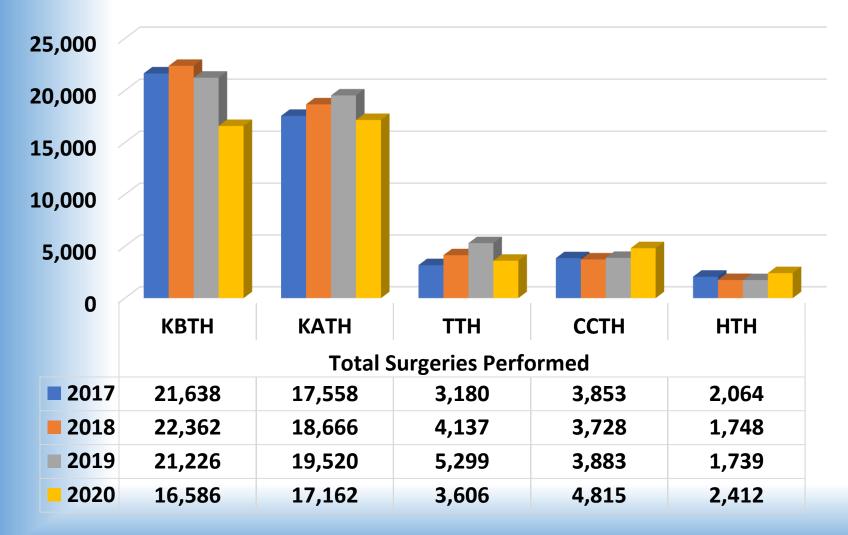
REMARKS:

- KBTH: Target Not Achieved $2020 = 3.7 (\uparrow)$ $2019 = 3.3 (\downarrow)$
- KATH: Target Achieved 2020 = 1.8 (↓) 2019 = 2 (↓)
- TTH: Target Not Achieved $2020 = 4.0 (\downarrow)$ $2019 = 5.8 (\uparrow)$
- CCTH: Target Achieved $2020 = 2 (\downarrow)$ $2019 = 3 (\uparrow)$
- HTH: Target Achieved $2020 = 2 (\downarrow)$ $2019 = 3 (\uparrow)$

Provide Surgical Services

Trend Analysis of Total Surgeries Performed

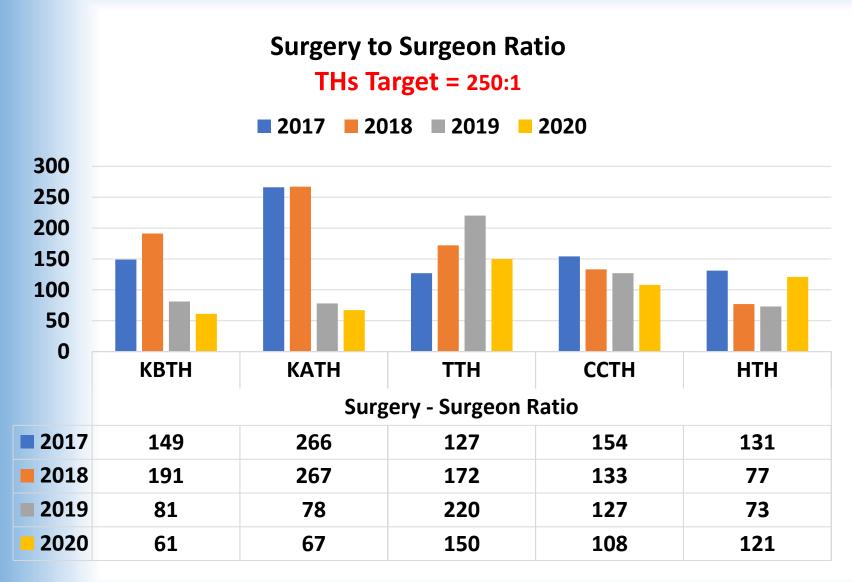




REMARKS:

- KBTH: $2020 = 16,586 (21.9\% \downarrow)$ $2019 = 21,226 (5.1\% \downarrow)$
 - KATH: $2020 = 17,162 (12.1\% \downarrow)$ $2019 = 19,520 (4.6\% \uparrow)$
- TTH: $2020 = 3,606 (32\% \downarrow)$ $2019 = 5,299 (28.1\% \uparrow)$
- CCTH: $2020 = 4,815 (24\%\uparrow)$ $2019 = 3,883 (4.2\%\uparrow)$
- HTH: $2020 = 2,412 (38.7\%\uparrow)$ $2019 = 1,739 (0.5\%\downarrow)$

Provide Surgical Services



REMARKS:

• KBTH: Target Not Achieved 2020 = 61:1(↓) 2019 = 81:1 (↓)

• KATH: Target Not Achieved 2020 = 67:1 (↓) 2019 = 78:1 (↓)

• TTH: Target Not Achieved 2020 = 150:1 (↓) 2019 = 220:1 (↓)

• CCTH: Target Not Achieved 2020 = 108:1 (↓) 2019 = 127:1 (↓)

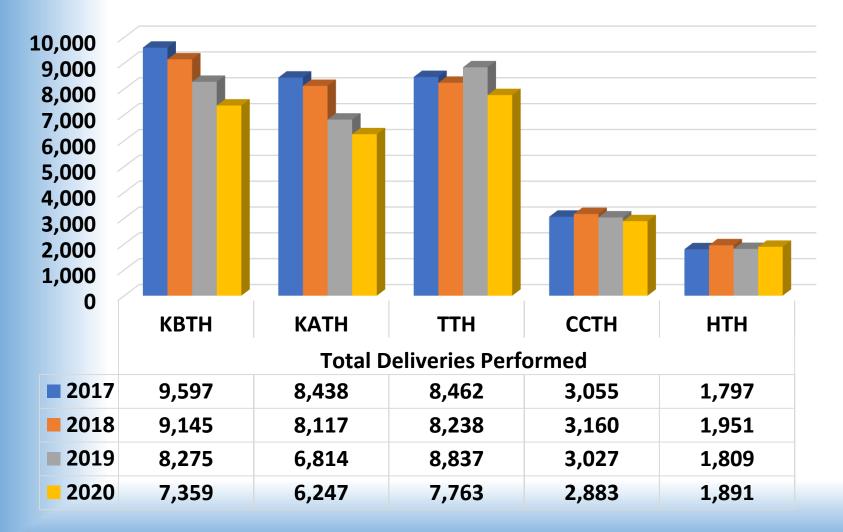
HTH: Target Not Achieved
 2020 = 121:1(↑)
 2019 = 73:1 (↓)

Provide Emergency Services

KEY	Y		PEI	RFORMANC	E		THs	MEASUREMENT
INDICA	TORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Average len	gth of	3.7 (↑)	1.8 (↓)	4.0 (↓)	2.0 (\big\)	2 (\psi)	2	No. of client days /
stay at the		3.3 (1)	2 (1)	5.8 (†)	3.9 (↓)	3 (↑)		No. of emergency
emergency	wards	4.9 (↑)	4.65 (↓)	5.1 (↓)	4.2 (↑)	2 (1)		discharges and death
		4.7 = 2017	5 = 2017	10.3 = 2017	2.8 = 2017	3 = 2017		
			Pro	vide Surgic	al Operatio	ns		
Surgical	site	- = 2020	- = 2020	2.4% (↑)	12.61% (†)	0= 2020	5%	Total infected
infection		- = 2019	- = 2019	0.9% (†)	0.27% = 2019	0= 2019		wounds within 10
infection		- = 2018	- = 2018	0.7% (↑)	- = 2018	0= 2018		days / Total
		- = 2017	- = 2017	0.6% = 2017	- = 2017	0= 2017		Surgeries * 100
		16, 586 (21.9%↓)	17,162 (12.1%↓)	3,606 (32%↓)	4,815 (24%↑)	2,412 (38.7%↑)	_	Buigeries 100
		21,226 (5.1% _↓)	19,520 (4.6%↑)	5,299 (28.1%↑)	3,883 (4.2%↑)	1,739 (0.5%)		Total number of
Total Sur	geries	22,362 (3.4%↑)	18,666 (6.3%↑)	4,137 (30.1%↑)	3,728 (3.2%↑)	1,748 (18.1%↑)		surgeries conducted
		21,638 = 2017	17,558 = 2017	3,180 = 2017	3,853 = 2017	2,064 = 2017		Surgeries Conquetted
		61:1(↓)	67:1 (\b)	150:1 (↓)	108:1 (↓)	121:1 (†)	250:1	Total no. of
Surgery -		81:1 (↓)	78:1 (↓)	220:1 (↓)	127:1 (↓)	73:1 (↓)		surgeries performed
Surgeon 1		191:1 (↑)	267: (↑)	172: (↑)	133:1 (↓)	77:1 (↓)		/ total no. of
Burgeon		149:1 = 2017	266:1 = 2017	127:1 = 2017	154:1 = 2017	131:1= 2017		Surgeons
Total Nui	mber	270 (3.5%↑)	256 (2.4% ↑)	24 (0%)	36 (5.3%↓)	20 (13%↓)	-	
of Surged		261 (0.8% ↑)	250 (257.1% ↑)	24 (0%)	38 (35.7%↑)	23 (4.6%↑)		
oj surget	7165	259 = 2018	70 (21.4% ↓)	24 (4.2%↓)	28 (12% ↑)	22 (46.7% ↑)		
		259 = 2017	89 = 2017	25 = 2017	25 = 2017	15= 2017		

Trend Analysis of Total Deliveries Performed





REMARKS:

• KBTH:

$$2020 = 7,359 (11.1\% \downarrow)$$

 $2019 = 8,275 (9.5\% \downarrow)$

• KATH:

$$2020 = 6,247 (8.3\%)$$

 $2019 = 6,814 (16.1\%)$

• TTH:

$$2020 = 7,763 (12.2\% \downarrow)$$

 $2019 = 8,837 (7.3\% \uparrow)$

CCTH:

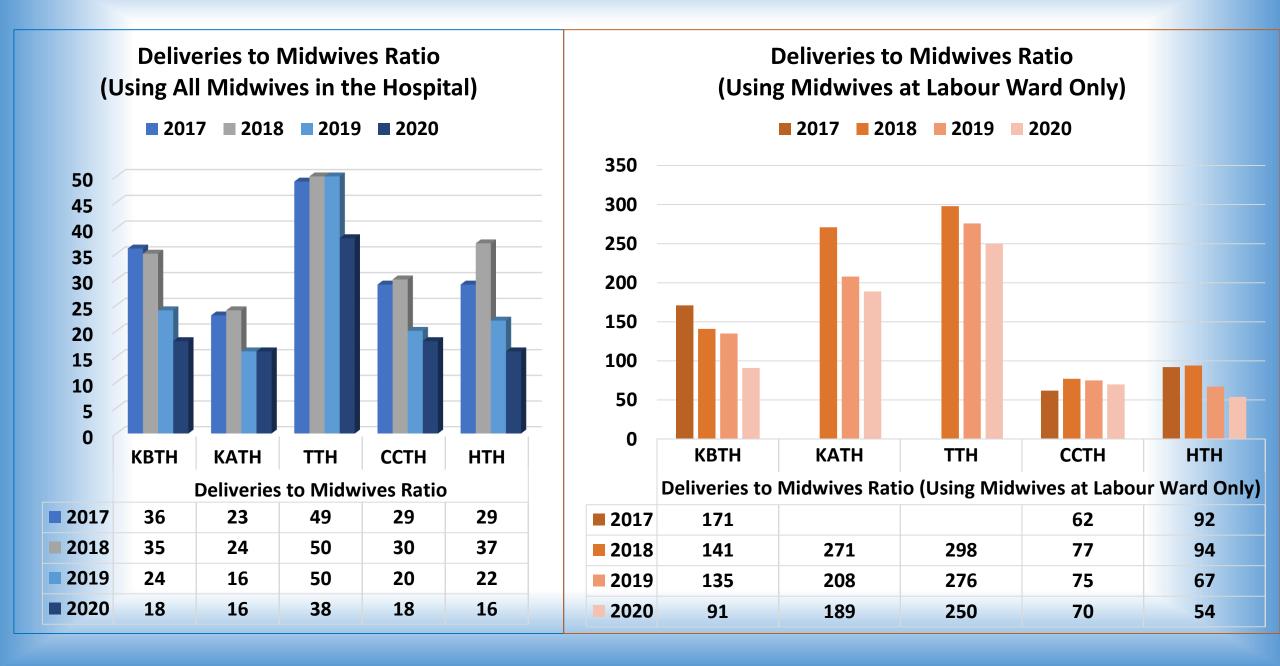
$$2020 = 2,883 (4.8\% \downarrow)$$

 $2019 = 3,027(4.2\% \downarrow)$

HTH:

$$2020 = 1,891(4.5\%\uparrow)$$

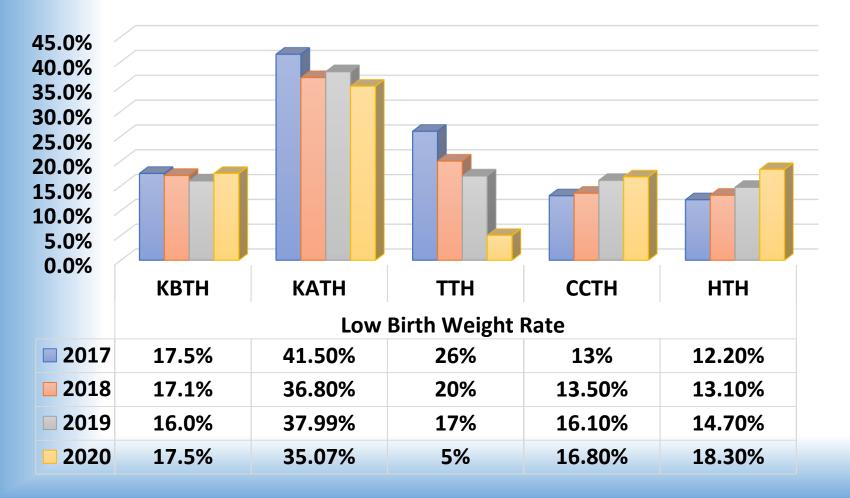
 $2019 = 1,809(7.3\%\downarrow)$



KEY		PEI	RFORMANC	EE		THS	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	CCTH	HTH	TARGETS	
Total Deliveries	7,359 (11.1% \downarrow) 8,275 (9.5% \downarrow) 9,145 (4.7% \downarrow) 9,597 = 2017	6,247 (8.3% \ \) 6,814 (16.1% \ \) 8,117 (3.8% \ \) 8,438 = 2017	7,763 (12.2% \downarrow) 8,837 (7.3% \uparrow) 8,238 (2.7% \downarrow)	$2,883 (4.8\% \downarrow)$ $3,027(4.2\% \downarrow)$ $3,160 (3.4\% \uparrow)$ $3,055 = 2017$	1,891(4.5%↑) 1,809(7.3%↓) 1,951(8.6%↑) 1,797= 2017	-	Total No. of Deliveries undertaken
Deliveries to midwives ratio (TOTAL MIDWIVES IN THE HOSPITAL)	18:1(↓) 24:1(↓) 35:1(↓) 36:1= 2017	16:1 16:1 24:1 (↑) 23:1 = 2017	8,462 = 2017 38:1(↓) 50:1 50:1 (↑) 49:1 = 2017	$18:1(\downarrow)$ $20:1(\downarrow)$ $30:1(\uparrow)$ $29:1 = 2017$	1:16(↓) 1:22(↓) 1:37(↑) 1:29= 2017	-	Total Number of deliveries / Total No. of midwives
Deliveries to midwives ratio (TOTAL MIDWIVES IN THE DELIVERY SUITE)	1:91 (↑) 135:1 (↓) 141:1(↓) 171:1 = 2017	189:1(↓) 208:1(↓) 271:1(-) -= 2017	250:1 (\psi) 276:1 (\psi) 298:1(-) -= 2017	70:1 (↓) 75:1 (↓) 77:1 (↑) 62:1 = 2017	1:54(↓) 1:67(↓) 1:94(↑) 1:92= 2017	-	Total Number of deliveries / Total No. of midwives
Partograph use rate	50.3% (↓) 50.4% (↓) 60% (↑) 45% = 2017	74% (↓) 94.1% (-) -= 2018 -= 2017	100% 100% 100% 100%	48.7% (↑) 46.1% (↑) 40.8% -= 2017	100% 100% (†) 95% (-) - = 2017	60%	Deliveries done with use or support of Partograph / Total deliveries * 100

Trend Analysis of Low Birth Weight (< 2.5kg) Rate THs Target = 12%





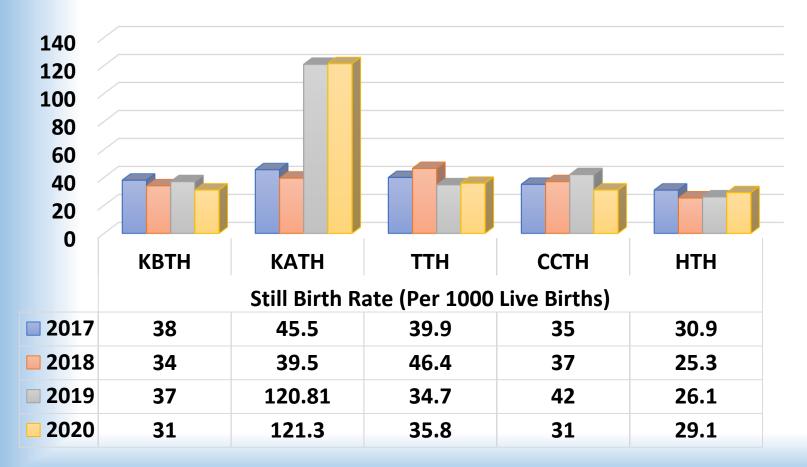
REMARKS:

- KBTH: Target Not Achieved 2020 = 17.5% (↑) 2019 = 16 5(↓)
- KATH: Target Not Achieved 2020 = 35.07(↓) 2019 = 37.99(↑)
- TTH: Target Achieved $2020 = 5\% (\downarrow)$ $2019 = 17\% (\downarrow)$
- CCTH: Target Not Achieved 2020 = 16.8% (↑) 2019 = 16.1% (↑)
- HTH: Target Not Achieved $2020 = 18.3(\uparrow)$ $2019 = 14.7(\uparrow)$

Still Birth Rate (per 1000 Live Births)

THs Target = 15/1000LB





REMARKS:

• KBTH:

$$2020 = 31 (\downarrow)$$

 $2019 = 37 (\uparrow)$

• KATH: Target Not Achieved 2020 = 121.30(↑)

$$2019 = 120.81(\uparrow)$$

• TTH: Target Not Achieved

$$2020 = 35.8 (\uparrow)$$

 $2019 = 34.7 (\downarrow)$

• CCTH: Target Not Achieved

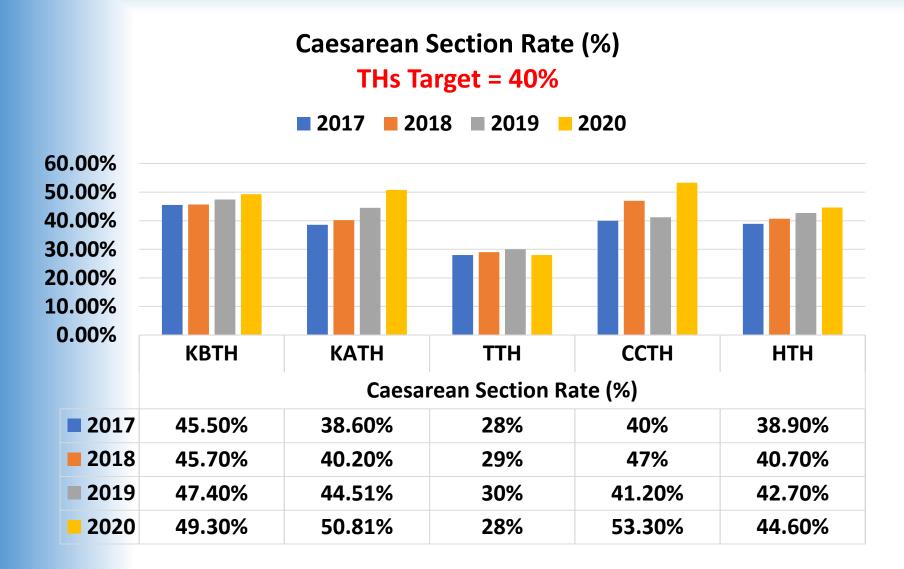
$$2020 = 31 (\downarrow)$$

 $2019 = 42 (\uparrow)$

• HTH: Target Not Achieved

$$2020 = 29.1(\uparrow)$$

 $2019 = 26.1(\uparrow)$



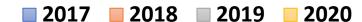
REMARKS:

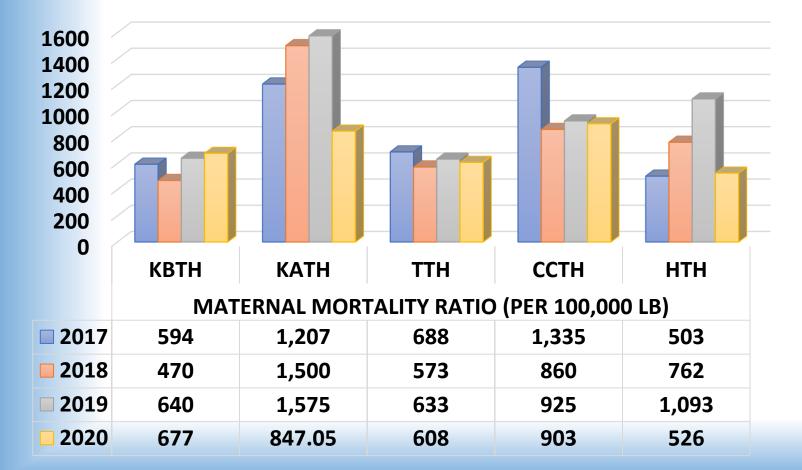
- KBTH: Target Not Achieved $2020 = 49.3\% (\uparrow)$ $47.4\% (\uparrow)$
- KATH: Target Not Achieved 2020 = 50.81(↑) 2019 = 44.51(↑)
- TTH: Target Achieved $2020 = 28\% (\downarrow)$ $2019 = 30\% (\uparrow)$
- CCTH: Target Not Achieved $2020 = 53.3\% (\uparrow)$ $2019 = 41.2\% (\downarrow)$
- HTH: Target Not Achieved $2020 = 44.6\%(\uparrow)$ $2019 = 42.7\%(\uparrow)$

KEY		PER	RFORMANC	EE		THs	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	CCTH	HTH	TARGETS	
Low birth rate	17.5% (↑)	35.07(↓)	5% (↓)	16.8% (†)	18.3 (↑)	12%	Total no. of babies
	16 5(↓)	37.99 (↑)	17% (↓)	16.1% (†)	14.7 (↑)		< 2.5kg/ Total live
	17.1% (↓)	36.8% (↓)	20 % (↓)	13.5% (↑)	13.1 (↑)		births *100
	17.5% = 2017	41.5% = 2017	26% = 2017	13% = 2017	12.2= 2017		
Still birth rate	31 (↓)	121.30 (↑)	35.8 (↑)	31 (↓)	29.1 (↑)	15/1000L	No. of babies born
/ 1000 Birth	37 (↑)	120.81 (↑)	34.7 (↓)	42 (†)	26.1 (↑)	${f B}$	with no signs of life /
7 1000 Bitti	34 (↓)	39.5 (↓)	46.4 (↑)	37 (↑)	25.3(↓)		Total no. of birth in
	38 = 2017	45.5 = 2017	39.9 = 2017	35 = 2017	30.9= 2017		the specific period
Caesarean	49.3% (†)	50.81 (↑)	28% (↓)	53.3% (↑)	44.6% (↑)	40%	No. of women
Section Rate	47.4% (↑)	44.51 (↑)	30% (↑)	41.2% (↓)	42.7% (↑)		delivered by CS in a
	45.7% (↑)	40.2 (↑)	29% (↑)	47% (↑)	40.7% (↑)		specified time period /
(%)	45.5% = 2017	38.6= 2017	28% = 2017	40% = 2017	38.9% = 2017		Total no. deliveries
							within a specified
							time period
Couple year	10, 993 (↓)	6362.48 (↓)	2,258.91 (\psi)	1,891.2 (†)	1,134.1(↓)	2,500	Total No. of
protection	45,111 (↓)	8588.67 (↑)	6,409 (↑)	1,562.5 (†)	1,582.3 (↑)		Commodities
Protoction	45,432 (↑)	6410.22 (↓)	2,284 (↓)	1,521.6 (†)	1,531.8 (†)		dispensed / CYP
	39,372 = 2017	7329.79 = 2017	2,371 = 2017	1,507 = 2017	1,441.3= 2017		factor

Maternal Mortality Ratio (per 100,000LB)

THs Target = 300/100,000LB





REMARKS:

- KBTH: Target Not Achieved $2020 = 677 (\uparrow)$ $2019 = 640 (\uparrow)$
- KATH: Target Not Achieved $2020 = 847.05 (\downarrow)$ $2019 = 1,575 (\uparrow)$
- TTH: Target Not Achieved $2020 = 608 (\downarrow)$ $2019 = 633 (\uparrow)$
- CCTH: Target Not Achieved 2020 = 903 (↓) 2019 = 925 (↑)
- HTH: Target Not Achieved $2020 = 526 (\downarrow)$ $2019 = 1093 (\uparrow)$

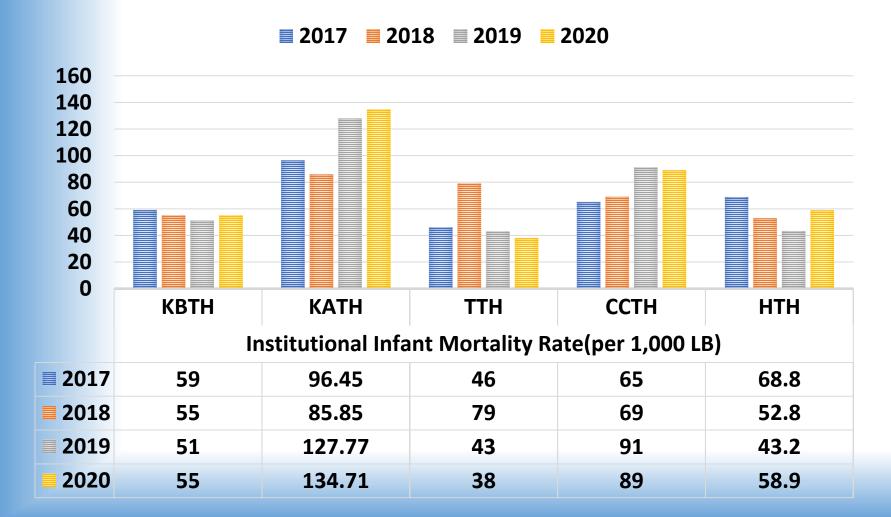
KEY INDICATORS		PEI	RFORMANC	CE		THs TARGET	MEASUREMENT
	KBTH	KATH	TTH	ССТН	HTH	\mathbf{S}	
Institutional Maternal Mortality Ratio (/ 100,000 LB)	677 (†) 640 (†) 470 (↓) 594 = 2017	847.05 (↓) 1,575 (↑) 1,500 (↑) 1,207 = 2017	608 (↓) 633 (↑) 573 (↓) 688 = 2017	903 (↓) 925 (↑) 860 (↓) 1335 = 2017	526 (↓) 1093 (↑) 762 (↑) 503 = 2017	300/100,	No of maternal deaths / total live births * 100 000
Maternal deaths audited (%)	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100%= 2020 100%= 2019 100%= 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	$87.5 (\downarrow)$ $100 = 2019$ $100 (\uparrow)$ $77.8 = 2017$	100%	No. of reported maternal deaths audited according to established guidelines. / total no. of reported maternal deaths within a specified period * 100

THS TOP FIVE CAUSES OF MATERNAL DEATH

CONDITIONS	КВТН	KATH	ТТН	ССТН	НТН
Hemorrhage / Severe Anemia	2 nd (10 cases)	1st - 39.62% (21 cases)	1st - 16% (8 cases)	1 st - 46.2% (11 cases)	-
Hypertensive Disorders Of Pregnancy	1st (21 cases)	2 nd - 28.30% (15 cases)	2 nd - 12% (6 cases)	2 nd - 26.9% (26.9%)	-
Sepsis	3 rd (3 cases)	-	-	3 rd - 11.5% (5 cases)	-
Pulmonary Embolism	-	-	-	4 th - 15.4% (2 cases)	-
Sudden Cardiac Death (PM Diagnosis)	-	-	-	5 th - 1 case	-
Gental Tract Sepsis In Pregnancy	-	3 rd - 7.55% (4 cases)	-	-	-
Diabetic Kedacidosis	-	4 th - 3.77% (2 cases)	-	-	-
Septic Abortion	-	5 th - 1% (1 cases)	-	-	-
Sickle cell diseases	3 rd 3 cases)	-	4 th - 6% (3 cases)	-	-
Heart failure	3 rd (3 cases)	-	-	-	-
Eclampsia	-	-	3 rd - 10% (5 cases)	-	-
Pneumonia	-	-	3 rd	-	-
CVA	-	-	-	-	1 case
Brain Injury	-	-	-	-	1 case
Endometritis	-	-	-	-	1 case
Brain death	-	-	-	-	1 case
Hepatosplenomegaly	-	-	-	-	1 case
Seizure Disorder	-	-	-	-	1 case
?COVID-19	<u>-</u>	<u>-</u>	-	-	1 case
Aspiration Pneumonia	-	-	-	-	1 case
Total Maternal Death	40	53	49	26	9

N	O	KEY FIVE CONDITIONS IN GENERAL
1		Eclampsia / Pre-eclampsia
2		Hypertensive Disorders Of Pregnancy
3		Hemorrhage
4		Sickle Cell Disease
5		Sepsis

INSTITUTIONAL INFANT MORTALITY RATE TH TARGET = 15/1000LB



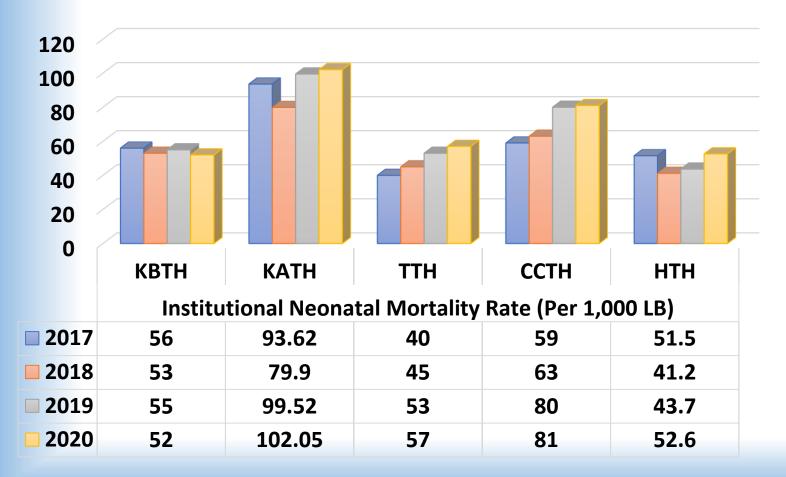
REMARKS:

- KBTH: Target Not Achieved 2020 = 55 (↑) 2019 = 51 (↑)
- KATH: Target Not Achieved 2020 = 134.71 (↑) 2019 = 127.77 (↑)
- TTH: Target Not Achieved $2020 = 38 (\downarrow)$ $2019 = 43 (\downarrow)$
- CCTH: Target Not Achieved 2020 = 89 (↓) 2019 = 91 (↑)
- HTH: Target Not Achieved $2020 = 58.9 (\uparrow)$ $2019 = 43.2 (\downarrow)$

Institutional Neonatal Mortality Rate

THs Target = 25/1000 LB

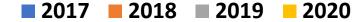
2017 2018 2019 2020

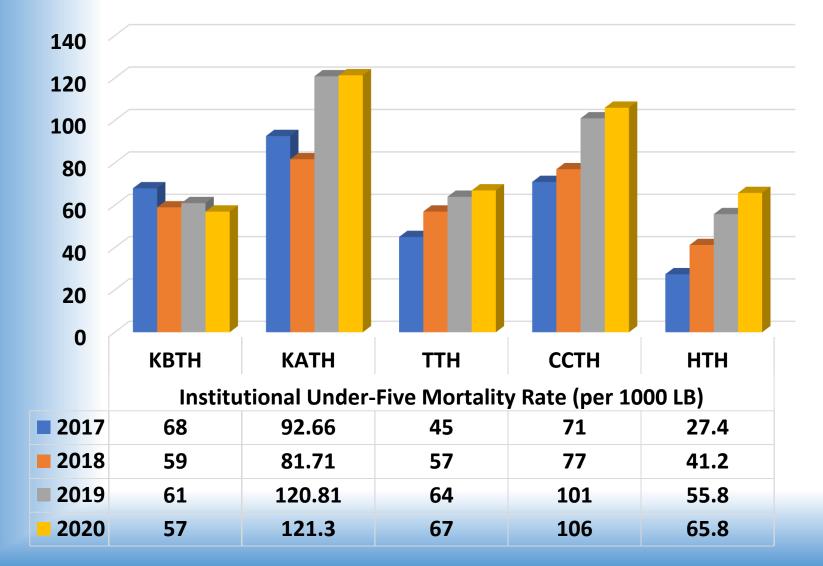


REMARKS:

- KBTH: Target Not Achieved $2020 = 52 (\downarrow)$ $2019 = 55 (\uparrow)$
- KATH: Target Not Achieved $2020 = 102.05 (\uparrow)$ $2019 = 99.52 (\uparrow)$
- TTH: Target Not Achieved $2020 = 57 (\uparrow)$ $2019 = 53 (\uparrow)$
- CCTH: Target Not Achieved 2020 = 81 (↑) 2019 = 80 (↑)
- HTH: Target Not Achieved $2020 = 52.6 (\uparrow)$ $2019 = 43.7 (\uparrow)$

Institutional Under-Five Mortality Rate





REMARKS:

• KBTH:

$$2020 = 57 (\downarrow)$$

 $2019 = 61 (\uparrow)$

• KATH:

$$2020 = 121.30 (\uparrow)$$

 $2019 = 120.81 (\uparrow)$

• TTH:

$$2020 = 67 (\uparrow)$$

 $2019 = 64 (\uparrow)$

• CCTH:

$$2020 = 106 (\uparrow)$$

 $2019 = 101 (\uparrow)$

• HTH:

$$2020 = 65.8 (\uparrow)$$

 $2019 = 55.8 (\uparrow)$

KEY		PER	RFORMANC	CE		THs	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Institutional	55 (↑)	134.71 (†)	38 (↓)	89 (↓)	58.9 (↑)	15/1000L	No. of children
Infant	51 (↑)	127.77 (↑)	43 (\psi)	91 (†)	43.2 (↓)	В	dying under one
	55 (↓) 50 201 5	85.85 (\psi)	79 (↑)	69 (†)	52.8 (↓)		year of age during
mortality	59 = 2017	96.45 = 2017	46 = 2017	65 = 2017	68.8 = 2017		a year / Total live
rate /1,000							births in a year *
LB							1000
Institutional	52 (↓)	102.05 (†)	57 (↑)	81 (↑)	52.6 (↑)	25/1000L	
Neonatal	55 (↑)	99.52 (†)	53 (†)	80 (↑)	43.7 (↑)	В	No. of Deaths
	53 (↓)	79.9 (↓)	45 (↑)	63 (↑)	41.2 (↓)		from 0-28 days /
mortality	56 = 2017	93.62 = 2017	40 = 2017	59 = 2017	51.5 = 2017		Total No. of live
rate /1,000							births
LB							
Infant Death	690 (29% ↑)	786 (12.7% ↓)	282 (25%↓)	284 (4.4% ↑)	97 (51.6%		
	535 (23.9% ↓)	900 (27.8% ↑)	376	272 (25.9%↑)	1)		
	$703 \; (2.2\% \downarrow)$	704 (13.6%↓)	(39.3%↓)	216 (7.5%↑)	64 (30.4%↓)		
	719 = 2017	815 = 2017	619 = 2018	201 = 2017	92 (15.6%↓)		
			- = 2017		109 = 2017		

KEY INDICATORS		PE	RFORMANO	CE		MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	
Neonatal Death	52 (5.5%↓) 55 (3.8%↑) 53 (5.4%↓)	662 (20.8%↑) 548 (15.3%↓) 647 (17.1%↓)	$425 (8.4\% \downarrow) 464(29.4\%\uparrow) 359 = 2018$	233 (2.5%↓) 239 (23.1%↑) 197 (9.4%↑)	67 (16.3%↓) 80 (1.2%↓) 81 (12%↓)	-
Number of under five deaths-Institutional	$56 = 2017$ $711(4.1\%\downarrow)$ $741(1.1\%\downarrow)$ $749(6.1\%\downarrow)$ $798 = 2017$	$780 = 2017$ $759 (10.8\% \downarrow)$ $851 (27\% \uparrow)$ $670 (14.4\% \downarrow)$ $783 = 2017$	$-= 2017$ $539 (5.1\% \downarrow)$ $568(26.2\% \uparrow)$ $450 23.3\% \uparrow)$ $365 = 2017$	$180 = 2017$ $233 (2.5\% \downarrow)$ $239 (1.2\% \downarrow)$ $242 (10.5\% \uparrow)$ $219 = 2017$	92= 2017 129 (46.6%↑) 88 (307%↓) 127 (11.2%↓) 143= 2017	_
Under Five Mortality Rate (/1000LB	57 (\psi) 61 (\psi) 59 (\psi) 68 = 2017	121.30 (\uparrow) 120.81 (\uparrow) 81.71 (\downarrow) 92.66 = 2017	67 (↑) 64 (↑) 57 (↑) 45 = 2017	106 (↑) 101 (↑) 77 (↑) 71 = 2017	65.8 (†) 55.8 (†) 41.2 (†) 27.4= 2017	-

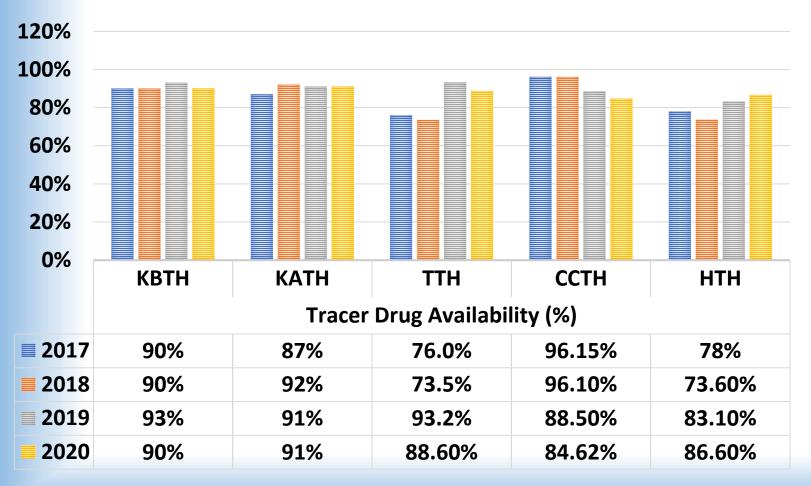
THS TOP FIVE CAUSES OF UNDER-FIVE CHILD DEATH

CONDITIONS		P]	ERFORMANCE		
	KBTH	KATH	TTH	CCTH	HTH
Pre-maturity	1 st	1 st (31.43%)	1st (33%)	1 st	
	(245 cases)	247 cases	176 cases	(27%)	
Asphyxia		2 nd (23.79%)	2 nd (20%)	2nd	
		187 cases	108 cases	(18%)	
Sepsis		4 th (13.36%)	4 th (5%)	3rd	
		105 cases	26 cases	(16%)	
HIE		-	-	4th	
				(7%)	
Respiratory		3 rd (16.79%)	-	5 th	
Distress		132 cases		(6%)	
Neonatal Jaundice	6 th (25 cases)	5 th (8.06%)	3rd (7%)	-	
		63 cases	39 cases		
Malnutrition			5 th (4%)	-	
			23 cases		

TRACER DRUG AVAILABILITY (%)

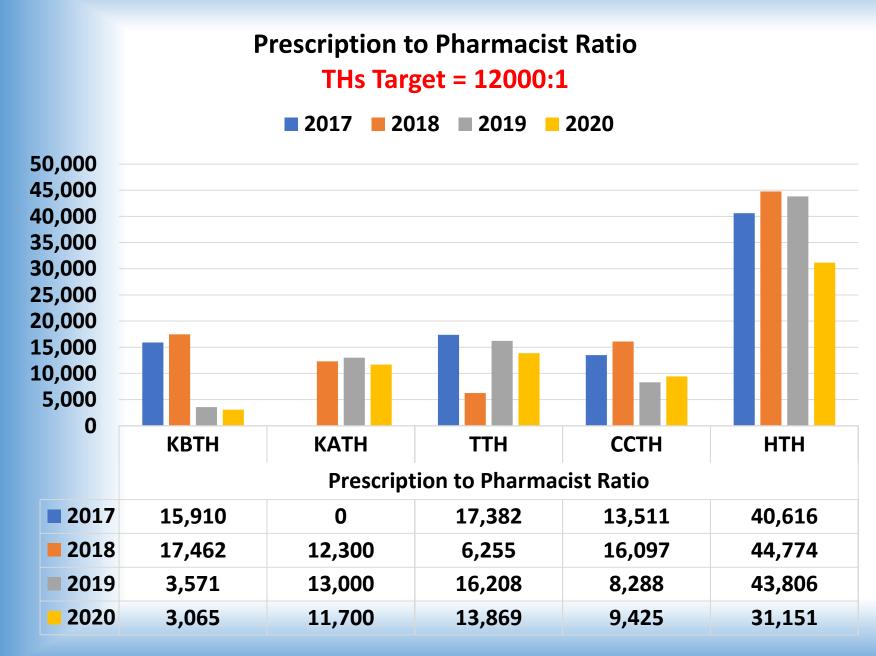
TH TARGET = 90%





REMARKS:

- KBTH: Target Achieved 2020 = 90% (↓) 2019 = 93% (↑)
- KATH: Target Achieved 2020 = 91% 2019 = 91% (↓)
- TTH: Target Not Achieved $2020 = 88.6\% (\downarrow)$ $2019 = 93.2\% (\uparrow)$
- CCTH: Target Not Achieved 2020 =84.62% (↓) 2019 = 88.5% (↓)
- HTH: Target Not Achieved $2020 = 86.6\% (\uparrow)$ $2019 = 83.1\% (\uparrow)$

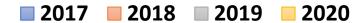


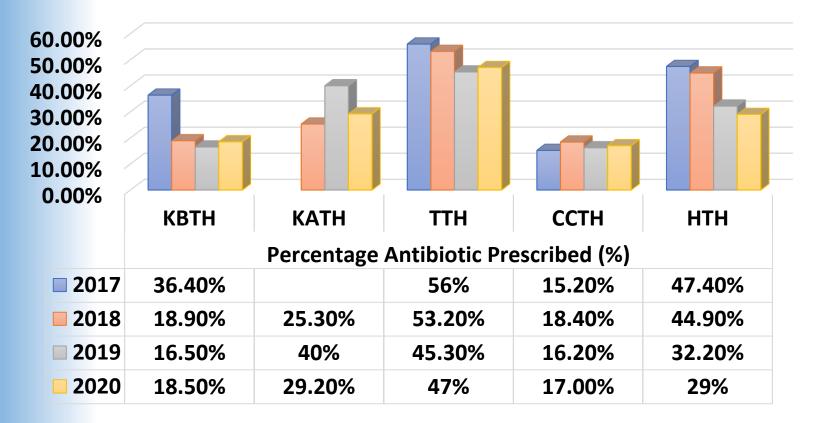
REMARKS:

- KBTH: Target Not Achieved 2020 = 1:3,065(↓) 2019 = 1:3,571 (↓)
- KATH: Target Not Achieved 2020 = 1:11,700 (↓) 2019 = 1:13,000 (↓)
- TTH: Exceeded Target $2020 = 1:13,869(\downarrow)$ $2019 = 1:16,208(\uparrow)$
- CCTH: Target Not Achieved $2020 = 9,425:1 (\uparrow)$ $2019 = 8,288:1 (\downarrow)$
- HTH: Exceeded Target $2020 = 1:31,151(\downarrow)$ $2019 = 1:43,806(\downarrow)$

Percentage of Antibiotic Prescribed

THs Target = 35%



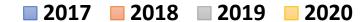


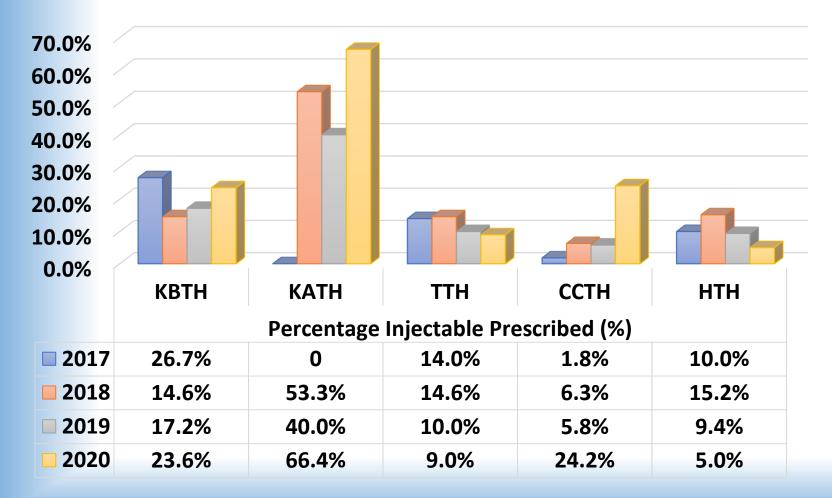
REMARKS:

- KBTH: Target Achieved 2020 = 18.5% (↑) 2019 = 16.5% (↓)
- KATH: Target Achieved 2020 = 29.2% (↓) 2019 = 40% (↑)
- TTH: Target Not Achieved 2020 = 47% (↑) 2019 = 45.3% (↓)
- CCTH: Target Achieved 2020 = 17.% (†) 2019 = 16.2% (\downarrow)
- HTH: Target Achieved $2020 = 29\% (\downarrow)$ $2019 = 32.2\%(\downarrow)$

Percentage of Injectable Prescribed

THs Target = 10%





REMARKS:

- KBTH: Target Not Achieved 2020 = 23.6% (↑) 2019 = 17.2% (↑)
- KATH: Target Not Achieved $2020 = 66.4\% (\uparrow)$ $2019 = 40\% (\downarrow)$
- TTH: Target Achieved $2020 = 9\% (\downarrow)$ $2019 = 10\% (\downarrow)$
- CCTH: Target Not Achieved $2020 = 24.2\% (\uparrow)$ $2019 = 5.8\% (\downarrow)$
- HTH: Target Achieved $2020 = 5\% (\downarrow)$ 2019 = 9.4%

KEY INDICATORS		PEI	RFORMAN	NCE		THs TARGETS	MEASUREME NT
INDICITIONS	KBTH	KATH	TTH	ССТН	HTH	minders	
Tracer Drug	90% (↓)	91%	88.6%	84.62% (\)	86.6% (†)	90%	Tracer
availability	93% (↑)	91% (\)	93.2% (↑)	88.5% (\lambda)	83.1% (↑)		Medicines
(%)	90% = 2018	92% (↑)	73.5 (↓)	96.10% (\)	73.6% (↓)		available / Total
(70)	90% = 2017	87 = 2017	76 = 2017	96.15% =	78% = 2017		medicines in the
				2017			tracer medicines
	4 - 0 ()	1 11 = 0 0 (1)	1.12.0.(1)				list * 100
Prescription to	1:3,065(↓)	1:11,700 (↓)	1:13,869(↓)	9,425:1 (†)	1:31,151(↓)	12000:1	Total no. of
Pharmacist	1:3,571 (↓)	1:13,000 (\psi)	1:16,208 (↑)	8,288:1 (↓)	1:43,806 (↓)		prescription
Ratio	1:17,462 (†)	1:12,300	1:6,255 (\psi)	16,097:1 (†)	1:44,774(↑)		served / total no.
	1:15,910	- = 2017	1:17,382	13,511:1	1:40,616		of pharmacists
Percentage	18.5% (↑)	29.2% (\)	47% (↑)	17.% (↑)	29% (↓)	35%	Total number of
antibiotic	16.5% (↓)	40% (↑)	45.3% (↓)	16.2% (\psi)	$32.2\%(\downarrow)$		antibiotic / Total
prescribed	18.9% (\psi)	25.3% = 2018	53.2% (↓)	18.4% (†)	44.9% (↓)		of medicines on
(%)	36.4% = 2017	- = 2017	56% = 2017	15.2% = 2017	47.4% = 2017		a prescription *
(70)							100
Percentage	23.6% (↑)	66.4% (†)	9%	24.2%	5%	10%	Total number of
injectable	17.2% (↑)	40% (↓)	10%	5.8%	9.4%		injectable / Total
prescribed	14.6% (↓)	53.3% = 2018	14.6%	6.3%	15.2%		of medicines on
(%)	26.7% = 2017	-= 2017	14% = 2017	1.8%	10%		a prescription *
(70)							100

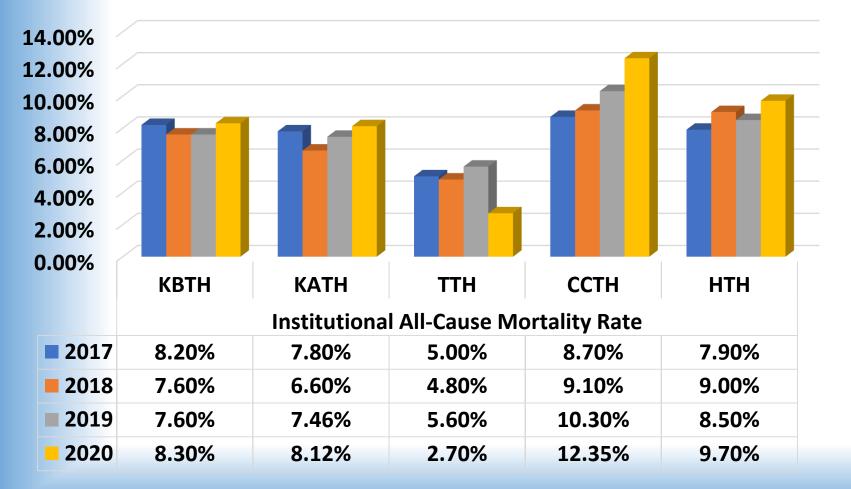
KEY INDICATORS		PER	THs TARGET	MEASUREMENT			
	KBTH	KATH	TTH	ССТН	HTH	S	
Utilization of Pharmaceutic al Care interventions	20.6% (\psi) 21% (\frac{1}{2}) 20.9% (\psi) 24.6% = 2017	16% = 2020 17% = 2019 -= 2018 -= 2017	$76\% (\downarrow)$ $78\% = 2019$ $78\% (\uparrow)$ $50\% = 2017$	11.5% (\) 99% (\) 97.3% (\) 79.2% = 2017	83.3% (↑) 82%= 2019 N/A= 2018 N/A= 2017	30%	Number of interventions / cases seen * 100
Proportion of ward round inputs by clinical pharmacist utilised	-= 2020 -= 2019 -= 2018 -= 2017	75%= 2020 80%= 2019 -= 2018 -= 2017	93% (†) 85% = 2019 85% (†) 55% = 2017	89.3% = 2020 -= 2019 80% = 2018 -= 2017	100% = 2020 N/A= 2019 N/A= 2018 N/A= 2017		Number of clinical pharmacist inputs utilised / Total number of inputs

Provide Pathological & Mortuary Services

Institutional All-Cause Mortality Rate

THs Target = 5%

■ 2017 **■** 2018 **■** 2019 **■** 2020



REMARKS:

• KBTH: Target Achieved 2020 = 8.3% (↑) 2019 = 7.6%

• KATH: Target Achieved $2020 = 8.12\% (\uparrow)$ $2019 = 7.46\% (\uparrow)$

• TTH: Target Achieved $2020 = 2.7\% (\downarrow)$ $2019 = 5.6\% (\uparrow)$

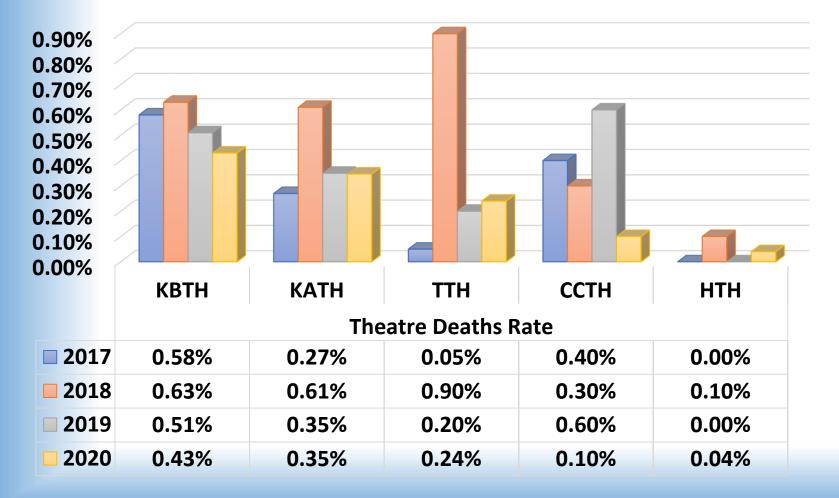
- CCTH: Target Not Achieved 2020 = 12.35% (↑) 2019 = 10.3% (↑)
- HTH: Target Achieved $2020 = 9.7\% (\uparrow)$ $2019 = 8.5\%(\downarrow)$

Provide Pathological & Mortuary Services



THs Target = 0.5%

2017 2018 2019 2020

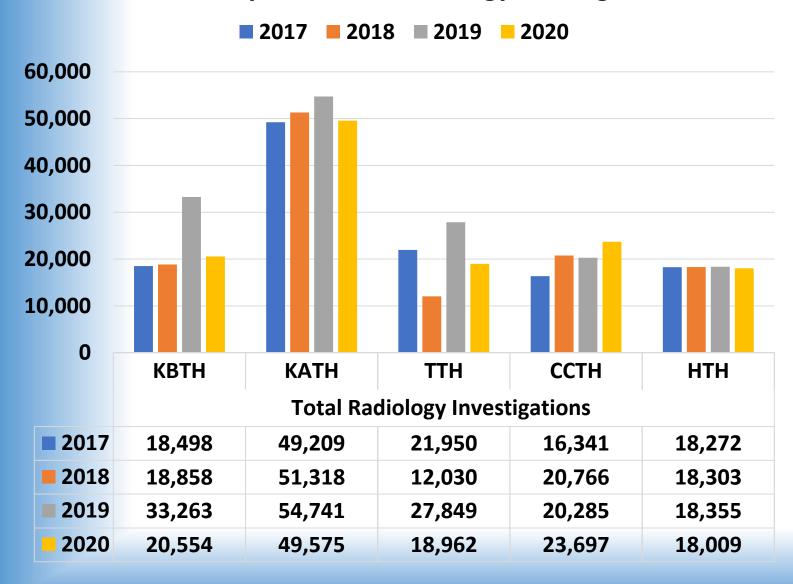


REMARKS:

- KBTH: Target Achieved $2020 = 0.43\% (\downarrow)$ $2019 = 0.51\% (\downarrow)$
- KATH: Target Achieved $2020 = 0.347\% (\downarrow)$ $2019 = 0.35\% (\downarrow)$
- TTH: Target Achieved 2020 = 0.24% (†) 2019 = 0.2% (\downarrow)
- CCTH: Target Achieved 2020 = 0.1% (\downarrow) 2019 = 0.6% (\uparrow)
- HTH: Target Achieved $2020 = 0.04\% (\uparrow)$ $2019 = 0 (\downarrow)$

KEY INDICATORS		PER		THs TARGETS	MEASUREMEN T		
	KBTH	KATH	TTH	CCTH	нтн		
Institutional All-cause mortality rate	8.3% (†) 7.6% 7.6% (↓) 8.2% = 2017	8.12% (↑) 7.46% (↑) 6.6% (↓) 7.8%= 2017	2.7% (\) 5.6% (\) 4.8% (\) 5.0% = 2017	12.35% (†) 10.3% (†) 9.1% (†) 8.7% = 2017	9.7% (↑) 8.5%(↓) 9.0% (↑) 7.9% = 2017	5%	Total death /(Discharges + deaths) * 100
Theatre Deaths Rate	0.43% (\psi) 0.51% (\psi) 0.63% (\psi) 0.58%	$0.347\% (\downarrow)$ $0.35\% (\downarrow)$ $0.61\% (\uparrow)$ $0.27\% = 2017$	0.24% (↑) 0.2% (↓) 0.9% (↑) 0.05%= 2017	0.1% (\) 0.6% (\) 0.3% (\) 0.4% = 2017	0.04% (↑) 0 (↓) 0.1% (↑) 0 = 2017	0.5%	Total No. of deaths at the theatre (Including Recovery Wards) / Total Surgeries * 100

Trend Analysis of Total Radiology Investigations



REMARKS:

• KBTH:

$$2020 = 20,554 (38.2\%\downarrow)$$

 $2019 = 33,263 (76.6\%\uparrow)$

• KATH:

$$2020 = 49,575 (9.4\% \downarrow)$$

 $2019 = 54,741 (6.7\% \uparrow)$

• TTH:

$$2020 = 18,962 (32.5\% \downarrow)$$

 $2019 = 27,849 (131.5\% \uparrow)$

• CCTH:

$$2020 = 23,697 (16.8\%\uparrow)$$

 $2019 = 20,285 (2.3\%\downarrow)$

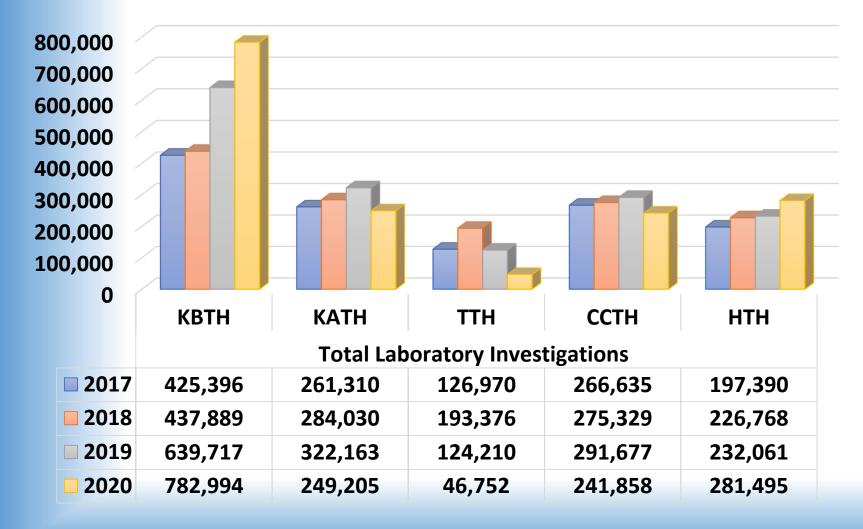
HTH:

$$2020 = 18,009 (1.9\% \downarrow)$$

 $2019 = 18,355 (0.3\% \uparrow)$

Trend Analysis of Total Laboratory Investigation





REMARKS:

- KBTH: $2020 = 782,994 (22.4\%\uparrow)$ $2019 = 639,717 (45.9\%\uparrow)$
- KATH: $2020 = 249,205 (22.6\% \downarrow)$ $2019 = 322,163 (13.4\% \uparrow)$
- TTH: $2020 = 46,752 (62.4\% \downarrow)$ $2019 = 124,210 (35.8\% \downarrow)$
- CCTH: $2020 = 241,858 (17.1\% \downarrow)$ $2019 = 291,677 (4.4\% \uparrow)$
- HTH: $2020 = 281,495 (21.3\%\uparrow)$ $2019 = 232,061 (2.3\%\uparrow)$

KEY INDICATO		PEI		THs TARGETS	MEASUREME NT		
RS	KBTH	KATH	TTH	ССТН	HTH		
Utilization	-= 2020	77.7% (Aug-Dec)	- = 2020	530.7% (↑)	- = 2020 2010	60%	Total
Radiological	- = 2019 - = 2018	- = 2019 - = 2018	- = 2019 - = 2018	86.9% (↑) 79.4% = 2018	- = 2019 - = 2018		Radiological
services	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		Investigations /
					- Difficult to get the # of total request		Total Radio. request * 100
Total Radiology Investigations	20,554 (38.2%↓) 33,263 (76.6%↑) 18,858 (1.9%↑) 18,498 = 2017	$49,575 (9.4\% \downarrow)$ $54,741 (6.7\% \uparrow)$ $51,318 (4.3\% \uparrow)$ $49,209 = 2017$	$18,962 (32.5\% \downarrow)$ $27,849 (131.5\% \uparrow)$ $12,030 (45.2\% \downarrow)$ $21,950 = 2017$	$23,697 (16.8\%\uparrow)$ $20,285 (2.3\%\downarrow)$ $20,766 (27.1\%\uparrow)$ $16,341 = 2017$	18,009 (1.9%↓) 18,355 (0.3%↑) 18,303 (0.2%↑) 18,272 = 2017	-	
Total Radio. request	-= 2020 -= 2019 -= 2018 -= 2017	27,034 (Aug-Dec.) -= 2019 -= 2018 -= 2017	-= 2020 -= 2019 -= 2018 -= 2017	4,465 (74.7%↓) 17,624 (6.9%↑) 16,482 (1.3%↓) 16,694 = 2017	-= 2020 -= 2019 -= 2018 -= 2017 - Difficult to get the # of total request	-	

KEY INDICATORS		PER	THs TARGET	MEASUREMENT							
II (BICITIONS	KBTH	KATH	TTH	CCTH	HTH	S					
Utilization of Laboratory Services	= 2020 = 2019 = 2018 = 2017	- = 2020 - = 2019 - = 2018 - = 2017	-= 2020 -= 2019 -= 2018 -= 2017	260.3% (†) 62.5% (↓) 78% = 2018 -= 2017	-= 2020 -= 2019 -= 2018 -= 2017	60%	Total Laboratory Investigations / Total Radio. request * 100				
Total laboratory Investigations	782,994 (22.4%↑) 639,717 (45.9%↑) 437,889 (2.9%↑) 425,396= 2017	249,205 (22.6%↓) 322,163 (13.4%↑) 284,030 (8.7%↑) 261,310= 2017	46,752 (62.4%↓) 124, 210 (35.8%↓) 193,376 (52.3%↑) 126,970= 2017	241,858 (17.1% \downarrow) 291,677 (4.4% \uparrow) 275,329 (3.4% \uparrow) 266,635 = 2017	281,495 (21.3%↑) 232,061 (2.3%↑) 226,768 (14.9%↑) 197,390 = 2017	-					
Total Lab request	-= 2020 -= 2019 -= 2018 -= 2017	- = 2020 - = 2019 - = 2018 - = 2017	- = 2020 - = 2019 - = 2018 - = 2017	92,907 (50.1%↑) 61,900 (4.1%↑) 59,478 = 2018 -= 2017	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-					
Availability of non-drug consumables	-= 2020 -= 2019 -= 2018 -= 2017	- = 2020 - = 2019 - = 2018 - = 2017	-= 2020 -= 2019 -= 2018 -= 2017	68.34% (\) 96.37% (\) 95.85% = 2018 - = 2017	87.5%= 2020 82.1%= 2019 85.7%= 2018 75%= 2017	90%	Non-drug consumables available / Total non-drug consumables in the baskets (Baskets to be determined e.g. Gloves, gauze, syringes etc.)				

S.O. 3:

Ensure Efficiency In Governance And Management Of Health Systems

S.O. 4:

Intensify Prevention And Control Of Communicable Diseases

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KBTH

- 75% of the work is completed for the complete digitization of the Hospital (Network Infrastructure, Joint Application Development (JAD), User Acceptance Test (UAT), and Various Training have been carried out).
- Support the sister institutions with Expertise, Logistics and Personnel in managing COVID-19
- Construction of the KBTH Infectious Diseases Centre is under way.
- Asphalting of the Korle Bu Teaching Hospital (KBTH) roads in the clinical areas has been done.
- ➤ Implementation of 2020-2024 Strategic Plan has commenced.

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KBTH

- Construction of gas plant underway.
- Uninterrupted oxygen supply
- Accident and Emergency decongested (CDC) to solve no bed syndrome
- First phase of mortuary rehabilitation completed
- Acquisition of Equipment for Specialized Services (Fluoroscopy Machine, C-Arm, Mammogram, Digital X-Ray, Patient Monitors, Ventilators)

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KATH

- Establishment of proper offices for diet therapy services
- > Intensified research activities
- Reactivation of completion of the Maternity and Children's block
- Creation of blood sample collection and results point at the diabetic Centre
- Commissioned new premises for 24 hour Pharmacy

KEY ACTIVITY ACHIEVEMENTS IN 2020 - TTH

- 1. Finalized the Medium Term Strategic Plan (2020-2024)
- 2. Revised the Hospital's Accommodation Policy
- 3. DTC Policies rolled out
- 4. 1 Resident in training WACP, 3 Residents with the GCP
- 5. A total of 100 trainees of different levels under the pharmacy directorate
- 6. 38 doctors in training with the GCPS
- 7. 12 nurses in training with the GCNM
- 8. A total of 141 House-officers received training
- 9. Ethical Review Board reconstituted and inaugurated
- 10. Thirty (30) staff trained in health systems research
- 11. 152 research proposals approved to be carried out in the Hospitals

KEY ACTIVITY ACHIEVEMENTS IN 2020 - CCTH

- Established two new sub-BMCs
 (Anesthesia & critical care sub-BMC and imaging Sub-BMC) and a Resource
 Mobilization Unit
- Organized One week training for Senior
 Managers on Enterprise Risk Management
 from 14th to 18th September, 2021
- ➤ Organized two Zoom Webinar to sensitize staff on the Covid-19 situation at CCTH and also educate staff on the appropriate use of personal protective equipment (PPEs)
- ➤ Insured the hospital's medicine stores with

 State Insurance Company (SIC)

- ➤ Collaborated with the following institutions in 2020:
 - ❖ MTN Foundation to complete the construction of a blood bank
 - Himalayan Cataract Project/ National Cataract Outreach
 Programme to screen 4,982 people and also conduct 262
 Surgeries in February, 2020 despite Covid-19 pandemic.
 - ❖ Collaborated with Operation-Smile Ghana to perform 17 free Cleft lip and palate-surgeries
 - University of UTAH, USA to perform 22 ENT surgeries
 - ❖ Ghana Registered Nurses and Midwifery Association to secure their hostel for exposed staff under quarantine
 - UCC-SMS
 - Collaborated with private and internal security to improve security of hospital staff, clients and properties

KEY ACTIVITY ACHIEVEMENTS IN 2020 - CCTH

- Some <u>Key Institutional Policies Drafted</u> includes;
 - Covid-19 guidelines and strategy
 - Risk Management Policy and Charter
 - ❖ Developed a VVIP Service Policy Guideline
 - Sick Staff Policy
 - Promotion
 - ❖ Internal audit charter
 - Policy on job planning for doctors adopted
 - Donation Policy
 - Internal Management Policy on sub-BMC and units
 - Staff Accommodation Policy
 - ***** Correspondence Management
 - **❖** Feeding Incentive Policy
 - Dress code policy
 - OPD triaging Policy
 - * Research & Ethics Policy
 - **❖** ICT Policy

- Also developed Strategic Plan and other Internal/Local Policies to enhance efficiency in Management and Governance of the Hospital. They include;
 - ❖ Code of Conduct & Disciplinary Procedures
 - ❖ HTH Internal Policy for Staff & Services
 - ❖ Standard Operating Procedures for HTHERC
 - ❖ Job Plan for UHAS Consultants
 - **❖** Administrative Manual
 - Operational Guidelines for Financial decentralization

KEY ACTIVITY ACHIEVEMENTS IN 2020 - HTH

- Sub-BMCs established and given orientation
- Capacity Building on Planning & Budget for the Sub-BMCs Heads and Accountants
- Key Management Committees constituted including Quality Management, Research & Ethics, Data Quality Audit, New Services & Innovation, Fixed Assets, etc.
- Acquired a Mini-Bus and a Pick-up to enhance COVID-19 Management (Courtesy MOH/WB)
- Acquired additional equipment to enhance service delivery (Infusion Pump, Ultrasound Machine, Suction Machine, Theatre Beds, Autoclaves, ECG Machine, Operating Lights, C-PAP (Donated by Rotary Club of Ho)

- Covid-19 Task Team set up to effectively respond to the pandemic
- ➤ Re-constituted the Drug and Therapeutic

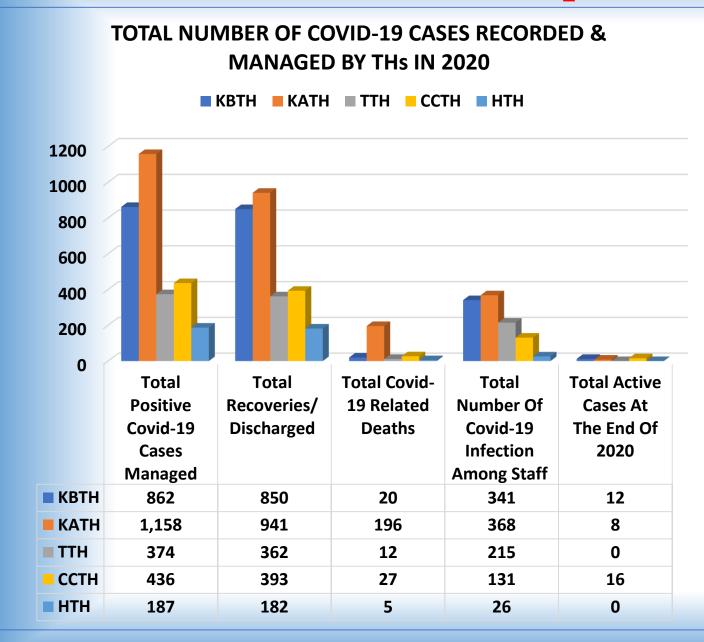
 Committee
- ➤ Sick Staff Policy Implementation rolled out

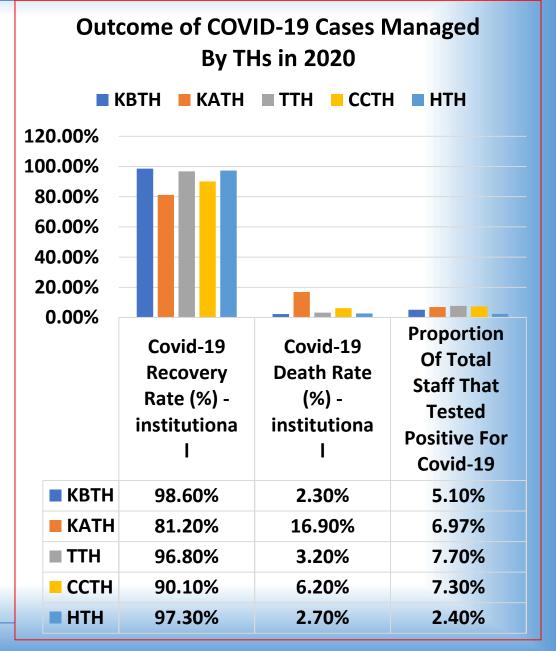
KEY OUTPUTS ACHIEVEMENTS

S.O 4: Intensify Prevention And Control Of Communicable Diseases

COVID-19 Pandemic Response By THs

COVID-19 Response By THs in 2020





COVID-19 Response By THs in 2020

KEY INDICATORS	PERFORMANCE							
	KBTH	KATH	TTH	CCTH	HTH			
Total Positive Covid-19 Cases Managed	862	1,158	374	436	187			
Total Recoveries/ Discharged	850	941	362	393	182			
Covid-19 Recovery Rate (%) -	98.6%	81.2%	96.8%	90.1%	97.3%			
institutional								
Total Covid-19 Related Deaths	20	196	12	27	5			
Covid-19 Death Rate (%) - institutional	2.3%	16.9%	3.2%	6.2%	2.7%			
Total Number Of Covid-19 Infection	341	368	215	131	26			
Among Staff								
Proportion Of Total Staff That Tested	5.1%	6.97%	7.7%	7.3%	2.4%			
Positive For Covid-19								
Total Active Cases At The End Of 2020	12	8	-	16	0			

QUALITY ASSURANCE

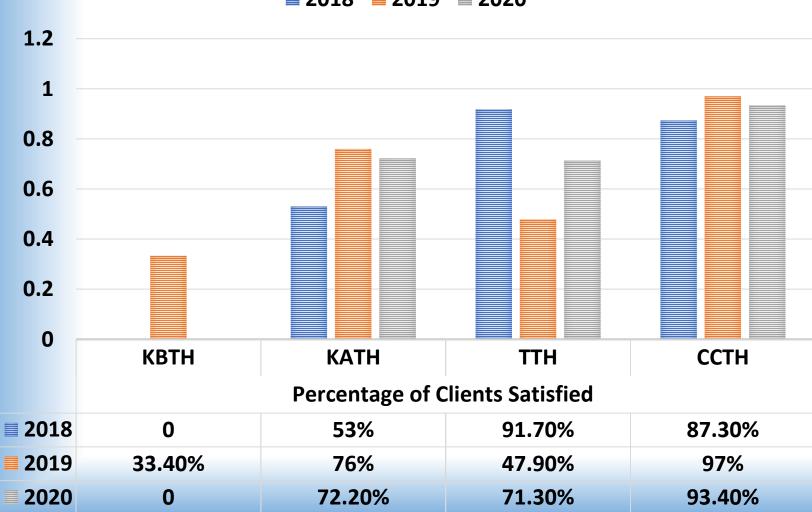
Provide OHS/ QA Services

KEY INDICATORS		PER		THs TARGETS	MEASUREMEN T		
	KBTH	KATH	TTH	ССТН	HTH	modis	
Work place related injuries resulting in death or incapacitation Total Staff injuries	-= 2020 -= 2019 0 = 2018 1= 2017 -= 2020 -= 2019	0%= 2020 0%= 2019 0%= 2018 -= 2017 -= 2020 -= 2019	0 = 2020 $0 = 2019$ $0 = 2018$ $0 = 2017$ $0 = 2019$ $0 = 2019$	0%= 2020 0%= 2019 0%= 2018 0%= 2017 15 (25%↓) 20 (150%↑)	0%= 2020 0%= 2019 0%= 2018 0%= 2017 36 (23.4%↓) 47 (20.5%↑)	1%	Total work place injuries resulting in deaths or incapacitation / total injuries recorded
recorded Health Workers	-= 2018 -= 2017 -= 2020	$-= 2018 \\ -= 2017 \\ 0.08\% (\downarrow)$ 1.529((1))	$ \begin{array}{r} - = 2018 \\ - = 2017 \\ \hline 215 = 2020 \\ - 2010 \end{array} $	8 (38.5%) $13 = 2017$ $100% = 2020$ $100% = 2019$	39 = 2018 $- = 2017$ $100% = 2020$ $1000% = 2010$	100%	Total no. of staff
who benefited from Occupational health and safety interventions	$-= 2019$ $16 (\downarrow)$ $25 = 2017$	1.52% (↑) 0.67% = 2018 -= 2017	- = 2019 - = 2018 - = 2017	100% = 2019 100% = 2018 100% = 2017	100%= 2019 100%= 2018 -= 2017		benefiting from OHS interventions/Tot al no. of staff * 100

TREND ANALYSIS OF PERCENTAGE OF CLIENTS SATISFIED

TH TARGET = 95%





REMARKS:

• KBTH:

$$2020 = 2019 = 33.4\%$$

• KATH: Target Not Achieved

$$2020 = 72.2\% (\downarrow)$$

 $2019 = 76\% (\uparrow)$

• TTH:

$$2020 = 71.3\% (\uparrow)$$

 $2019 = 47.9\% (\downarrow)$

• CCTH: Target Not Achieved 2020 = 93.4% (\downarrow) 2019 = 97% (\uparrow)

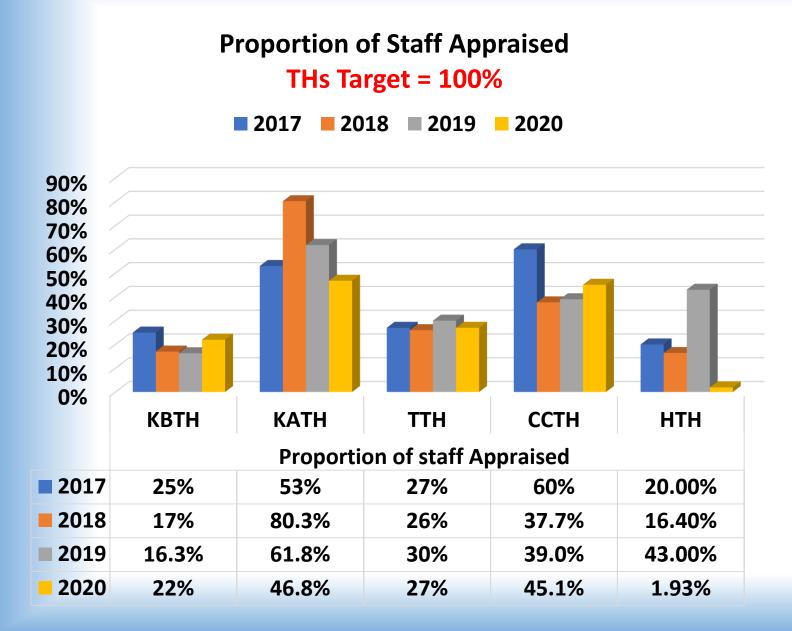
• HTH:

Recommendation:

KEY INDICATOR		PEI	RFORMAN	CE		THs TARGETS	MEASUREMEN T
S	KBTH	KATH	TTH	ССТН	HTH	IARGEIS	
Percentage of clients satisfied Percentage of	N/A = 2020 33.4% = 2019 N/A = 2018 N/A = 2017 - = 2020	$72.2\% (\downarrow)$ $76\% (\uparrow)$ $53\% (\downarrow)$ $69\% = 2017$ $- = 2020$	71.3% (↑) 47.9% (↓) 91.7% = 2018 - = 2017 48.9% = 2020	93.4% (↓) 97% (↑) 87.3% (↓) 96.8% = 2017 46.5% (↓)	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017 N/A= 2020	95% 70%	Total no. of client surveyed who are satisfied with health care services / total no. client surveyed * 100 Total no. of workers
Staff satisfied	- = 2019 - = 2018 - = 2017	$39.7\% (\downarrow)$ $54\% (\downarrow)$ $55\% = 2017$	$-= 2019$ $33.3\% (\downarrow)$ $50.4\% = 2017$	62.5% (\uparrow) 36.5% (\downarrow) 55.9% = 2017	N/A= 2019 N/A= 2018 N/A= 2017		surveyed who are satisfied with work / total no. of workers surveyed * 100
Work place accident using needle stick injury as a proxy	$-= 2020$ $-= 2019$ 9.8 % (\uparrow) 11.2% = 2017	0.44% (↓) 0.70% (↓) 1.79% = 2018 -= 2017	0.9% (\) 1.6% (\) 0.9% = 2018 -= 2017	$0.67\% (\uparrow)$ $0.06\% (\downarrow)$ $0.4\% (\downarrow)$ $0.6\% = 2017$	1.14% (\) 0.59% (\) 0.66% 0%	1%	Total no. of workers reported with needle prick / total no. of workers * 100
Total no. of workers reported with needle prick	$-= 2020$ $-= 2019$ $313 (18.7\% \downarrow)$ $385 = 2017$	$23 (32.4\% \downarrow)$ $34 (51.4\% \downarrow)$ $70 = 2018$ $- = 2017$	$25 (26.5\% \downarrow)$ $34 (61.9\% \uparrow)$ $21 = 2018$ $- = 2017$	12 (\uparrow) 1 (80% \downarrow) 5 (37.5% \downarrow) 8 = 2017	13 (160%↑) 5 (25% ↑) 4 = 2018 -= 2017	-	

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEA	SUREMEN T
S	KBTH	KATH	TTH	ССТН	HTH			
Availability of toilet facilities	1:5 (†) 1:4 = 2019 1:4 = 2018 = 2017	1:1.85 (↓) 1:1.98 = 2019 1:1.98 (↑) 1:1.66= 2017	1:7 = 2020 1:7 (†) 1:5 (†) 1:4 = 2017	$0.43 (\uparrow)$ $0.23 = 2019$ $0.23 = 2018$ $0.23 = 2017$	160= 2020 160 (↑) 156= 2018 -= 2017	1:-25	of func toile	rage bed
Total number of toilets Facility	446 (9.9%↑) 406 (7.1%↑) 379 (15.7%↑) 325= 2017	531(7.5% 494 = 2019 494 (4.9%↑) 471= 2017	$120 = 2020$ $120 = 2019$ 120 $(4.3\%\uparrow)$ $115 = 2017$	173 (88%↑) 92 = 2019 92 = 2018 92 = 2017	$160 = 2020$ 160 $(2.6\%\uparrow)$ $156 = 2018$ $156 = 2017$	-		

KEY INDICATORS		PER		THs TARGETS	MEASUREMEN T		
II (DIC/II OR)	KBTH	KATH	TTH	ССТН	HTH		
Availability of	0.25 (†)	0.21 (↓)	1:19 (↑)	0.43 (↑)	0.21 (†)	_	Number of
Hand hygiene	0.22 (†)	0.22 (↓)	1:16 (↑)	0.23 = 2019	0.15 (†)		wash basin /
facilities using	0.17 (↓)	0.28 (↑)	1:15 (\dagger)	0.23 = 2018	0.8 (\)		Number of staff
wash basins	0.19 = 2017	0.25 = 2017	1:30 = 2017	0.23= 2017	0.18 = 2017		
and bed							
capacity as							
proxy							
Total number	1,341	1,089 = 2020	154 = 2020	368 (53.3%↑)	375 = 2020	-	
of wash basins	(21.4%↑)	1,089 = 2019	154 = 2019	240 = 2019	375 = 2019		
	1,105	1,089 (8.3% ↑)	154	240 = 2018	375 = 2018		
	(7.2% ↑)	1,006= 2017	(105.3%↑)	240 = 2017	375 = 2017		
	1,031		75 = 2017				
	(4.5%↑)						
	987 = 2017						
Adverse	- = 2020	17(55.3%↓)	17 (6.3%↑)	159 (3.9% ↑)	0 = 2020	40	Total number of
Events	- = 2019	38 (2.6 %↓)	16 (23.1% ↑)	153 (54.5% ↑)	0 = 2019		incidents
	- = 2018	39 (26.4%↓)	13 (18.2% ↑)	99 (19.3% ↑)	0 = 2018		reported
	- = 2017	53= 2017	11 = 2017	83 = 2017	0 = 2017		



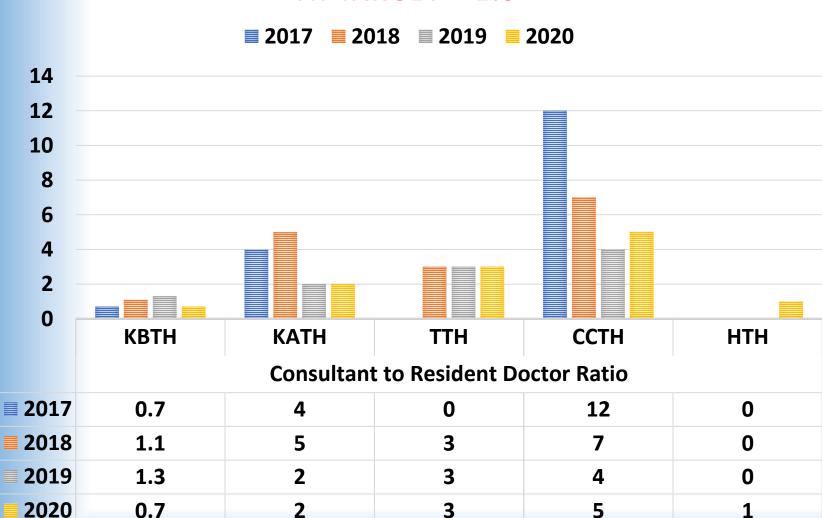
REMARKS:

- KBTH: Target Not Achieved 2020 = 22% (↑) 2019 = 16.3% (↓)
- KATH: Target Not Achieved $2020 = 46.8\% (\downarrow)$ $2019 = 61.8\% (\downarrow)$
- TTH: Target Not Achieved $2020 = 27\% (\downarrow)$ $2019 = 30\% (\uparrow)$
- CCTH: Target Not Achieved 2020 = 45.1% (†) 2019 = 39% (†)
- HTH: Target Not Achieved 2020 = 1.93% (↓) 2019 = 43.0% (↑)

Recommendation:

CONSULTANT TO RESIDENT DOCTOR RATIO

TH TARGET = 1:3

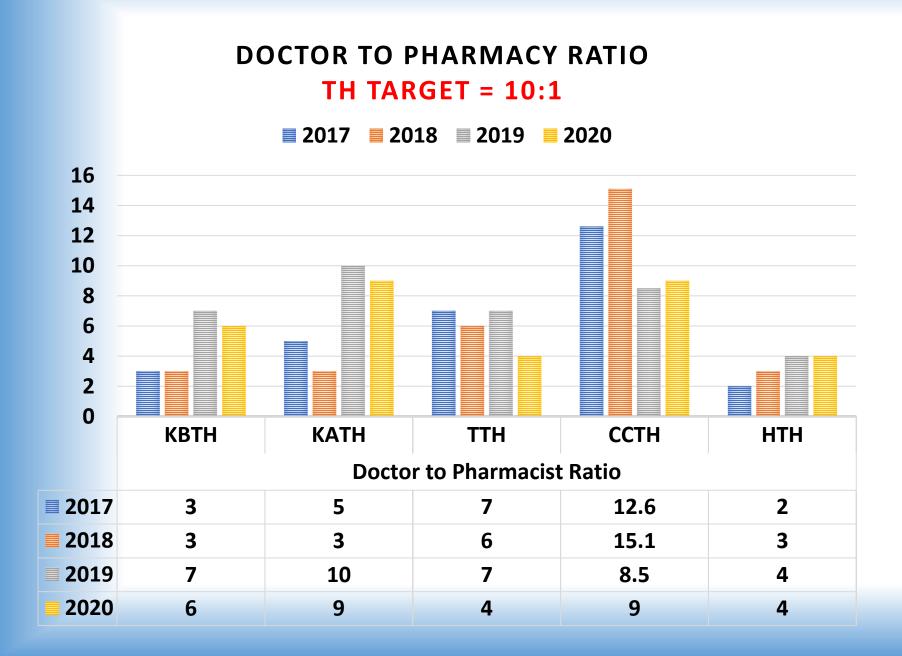


REMARKS:

- KBTH: Target Not Achieved 2020 = 1:0.7 (↓) 2019 = 1:1.3 (↑)
- KATH: Target Not Achieved 2020 = 1:2 2019 = 1:2 (↓)
- TTH: Target Achieved 2020 = 1:3 2019 = 1:3
- CCTH: Exceeded Target 2020 = 1:5 (↑) 2019 = 1:4 (↓)
- HTH: Target Not Achieved 2020 = 1:1 2019 = -

Recommendation:

KEY INDICATOR		PER		THs TARGETS	MEASUREMEN T		
S	KBTH	KATH	TTH	ССТН	HTH	minders	
Proportion of staff Appraised Consultant to	$22\% (\uparrow)$ $16.3\% (\downarrow)$ $17\% (\downarrow)$ $25\% = 2017$ $1:0.7 (\downarrow)$	$46.8\% (\downarrow)$ $61.8\% (\downarrow)$ $80.25\% (\uparrow)$ $53\% = 2017$ $1:2=2020$	$27\% (\downarrow)$ $30\% (\uparrow)$ $26\% (\downarrow)$ $27\% = 2017$ $1:3 = 2020$	45.1% (\uparrow) 39% (\uparrow) 37.7% (\downarrow) 60% = 2017	$1.93\% (\downarrow)$ $43.0\% (\uparrow)$ $16.4\% (\downarrow)$ $20.0\% = 2017$ $1:1=2020$	1:3	Number of staff appraised / total number of staff * 100 Number of
Resident Doctor ratio	1:1.3 (†) 1:1.1 (†) 1:0.7 = 2017	1:2 (↓) 1:5 (↑) 1:4 = 2017	1:3 = 2019 1:3 = 2018 N/A= 2017	1:4 (\downarrow) 1:7 (\downarrow) 1:12 = 2017	N/A = 2019 N/A = 2018 N/A = 2017		Consultant and Senior Specialist / total number of Resident Doctors
Doctor to Nurse/Midwif e Ratio	1:5 = 2020 1:5 (\psi) 1:7 = 2018 1:7 = 2017	1:5 (↑) 1:4 (↓) 1:5 (↑) 1:3 = 2017	1:9 = 2020 1:9 (↑) 1:8 = (↑) 1:6 = 2017	1:5 = 2020 1:5 (\uparrow) 1:4 (\downarrow) 1:5 = 2017	1:9 (↓) 1:13 (↑) 1:8 (↓) 1:11= 2017	1:5	Total number of Doctors in the hospital / Total of Nurses



REMARKS:

- KBTH: Target Not Achieved $2020 = 6:1 (\downarrow)$ $2019 = 7:1 (\uparrow)$
- KATH: Target Not Achieved 2020 = 9:1 (↓) 2019 = 10:1 (↑)
- TTH: Target Not Achieved 2020 = 9:1 (↑) 2019 = 8.5:1 (↓)
- CCTH: Target Not Achieved 2020 = 9:1 (↑) 2019 = 8.5:1 (↓)
- HTH: Target Not Achieved 2020 = 4:1 2019 = 4:1

Recommendation:

KEY INDICATORS		PEI	THs TARGETS	MEASUREMEN T			
INDICITIONS	KBTH	KATH	TTH	ССТН	HTH	IMMOLIS	
Doctor:	6:1 (↓)	9:1 (\psi)	4:1 (↓)	9:1 (†)	4:1= 2020	10:1	Total number
Pharmacist	7:1 (↑)	10:1 (†)	7:1 (↑)	8.5:1 (↓)	4:1 (†)		of Doctors in
Ratio	3:1 = 2018	3:1 (↓)	6:1 (↓)	15.1:1 (†)	3:1 (↑)		the hospital /
	3:1 = 2017	5:1 = 2017	7:1 = 2017	12.6:1 = 2017	2:1= 2017		Total number
		l					of pharmacist
No. Of welfare	2 = 2020	7= 2020	3 (†)	3 (†)	1 = 2020	-	Total Number
packages	2 = 2019	7= 2019	2 = 2019	1 = 2019	1 = 2019		of welfare
available	2 = 2018	7 = 2018	2 = 2018	1 = 2018	1= 2018		packages
	2 = 2017	7 = 2017	2 = 2017	1 = 2017	1 = 2017		provided for
		l					staff

Provide Technical Services and Logistical Support Services

KEY INDICATORS		PEI		THs TARGETS	MEASUREMEN T		
I (DICITION)	KBTH	KATH	TTH	CCTH	HTH	11113218	
Equipment	8.3% (↑)	11.9% (↑)	73.3%= 2020	0% = 2020	N/A= 2020	5%	Average
down time	5% (↓)	10.55% (↓)	- = 2019	0% (↓)	N/A = 2019		downtime/Total
Proxy:	12% (↑)	33.5% (↑)	29% = 2018	7.69% (↑)	N/A = 2018		productive
CT SCAN	10% = 2017	26.8% = 2017	- = 2017	1.92% = 2017	N/A = 2017		hours Total
							productive
							hours (12 per
							day) *100
PPM output	40% (↓)	86.8% = 2020	92% (†)	75% (\lambda)	- = 2020	80%	
achieved	90% (†)	86.8% (†)	87% (↓)	80% (↑)	N/A = 2019		PPM executed /
	60% (↓)	75% (↑)	90% (↑)	62% (↑)	N/A = 2018		PPM *100
	80%= 2017	68.5% = 2017	85.5% = 2017	60% = 2017	N/A = 2017		
Equipment	98% (†)	88.5% (↓)	28% (†)	98.7% (†)	N/A = 2020	90%	operation
Utilisation	85% (↑)	88.7% (↑)	15% (↓)	83.1% (†)	N/A = 2019		hour*100/avai
Proxy:	70% (↓)	69.5% (↑)	67% (↓)	74.2% (↑)	N/A = 2018		lable hours
CT SCAN	98% = 2017	64.45% = 2017	80% = 2017	34.8% = 2017	N/A = 2017		

Support Teaching And Training Of Health Professionals

KEY INDICATOR S	KBTH	PER KATH	FORMANO TTH	СЕ	НТН	THs TARGETS	MEASUREMEN T
Residents pass rate	95% (†) 91% (†) 80.2% (†) 79.3% = 2017	- = 2020 - = 2019 - = 2018 - = 2017	-= 2020 -= 2019 93% = 2018 -= 2017	-= 2020 100% (↑) 90% = 2018 -= 2017	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017	60%	Percentage of final year professional passes / Total number of students enrolled (proxy: medical and nursing students)
Number enrolled in postgraduat e colleges	$109 (47.1\% \downarrow)$ $206 (255.2\% \uparrow)$ $58 (205.3\% \uparrow)$ $19 = 2017$	$81(170\%\uparrow)$ $30(70.3\%\downarrow)$ $101 = 2018$ $- = 2017$	32 (54.3%↓) 70 (27.8%↓) 97 = 2018 -= 2017	$23 (52\% \downarrow)$ $48 (9.4\% \downarrow)$ $53 = 2018$ $- = 2017$	21= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-	-

Support Teaching And Training Of Health Professionals

KEY INDICATORS		PEI		THs TARGETS	MEA	SUREMEN T		
INDIC/III ONS	KBTH	KATH	TTH	CCTH	HTH	micolin		
		Undertake Reso	earch Activiti	es				
Operational	30	15 (150% ↑)	2 (77.8%↓)	2 (66.7%↓)	2= 2020	4	Num	nber of
	(45.5%↓)	6 (20%↑)	9 (350%↑)	6 (100%↑)	N/A= 2019		oper	ational
research	55 (5.8% ↑)	$5 (25\%\uparrow)$ $4 = 2017$	$\begin{array}{c} 2 & (33.3\% \downarrow) \\ 3 = 2017 \end{array}$	$3 (50\%\uparrow)$ 2 = 2017	N/A= 2018 N/A= 2017		resea	arch
	52	4 = 2017	3 = 2017	Z = 2017	N/A= 2017			ed out/
	(10.6% ↑)						1 -	ational
	47 = 2017						resea	
							*	ned for
	10 (27 00 (1))		1= (5.22())		2 (1)		perio	od
Number of	18 (37.9%↓)	122 (†)	17 (6.3%↑)	15 (50%↑) 10 (0.18(+))	0 (1)	20		
Research	29 (7.4%↑) 27 (15.6%↓)	$15 (16.7\% \downarrow)$ $18 (18.2\% \downarrow)$	$ \begin{array}{c c} 16 & (46.7\% \downarrow) \\ 30 &= 2018 \end{array} $	$10 (9.1\% \downarrow)$ $11 = 2018$	2 (↑) 0= 2018			
published	32 = 2017	22 = 2017	- = 2017	-=2018	0= 2017			
published								

S.O. 3:

Ensure efficiency in governance and management of health systems

Undertake Financial Audit and Administrative Activities

KEY INDICATORS		PEI		THs TARGETS	MEASUREMEN T		
	KBTH	KATH	TTH	CCTH	HTH		
Proportion Audit recommendation s implemented	N/A= 2020 N/A= 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100%= 2020 100%= 2019 100%= 2018 100%= 2017	100%	Total audit recommendatio ns implemented / Total Audit Recommendatio
Number of ARIC Meetings (Audit Committee meetings)	5 = 2020 - = 2019 - = 2018 - = 2017	8 (↓) 10 (↑) 8 = 2018 = 2017	2 = 2020 2 = 2019 N/A= 2018 N/A = 2017	4 (↓) 5 (↑) 4 = 2018 - = 2017	4= 2020 4= 2019 4= 2018 4= 2017	4	ns Total Meetings Organized / Total meetings planned
Number of Board Meeting	14 (↑) 13 (↑) 8 (↑) 0 = 2017	11 (↓) 12 (↓) 13 = 2018 -= 2017	3 (\psi) 6 = 2019 N/A - = 2018 N/A = 2017	4 (↓) 5 (↓) 6 (↑) 1 = 2017	1= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-	Total Board Meetings organized / Total Board Meetings Planned

KEY ACTIVITY ACHIEVEMENTS – ALL THS

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
2	Follow up on and address all audit observations from both internal and external audit reports	ALL THs
3	All financial data validated and submitted to MOH & MOFEP	ALL THs

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KBTH

- Recorded IGF Revenue growth of 4% over that of 2019
- IGF revenue budget performance of 95% irrespective of the

COVID 19 pandemic

• 65% LHIMS coverage across the Hospital

KEY ACTIVITY ACHIEVEMENTS IN 2020 - KATH

- Streamlined procurement processes for supplies earlier in the year to avoid or reduce open market purchases
- Continuous education on documentation on NHIA claims to reduce adjustment and queries.
- Streamlined issuing medical and non medical supplies to service centres
- Expedite the deployment of the LHIMS which helped in data collection and records keeping
- Control measures of issuing of medical supplies to service points were improved
- Continuous monitoring of wards stores to check overstock of consumables

KEY ACTIVITY ACHIEVEMENTS IN 2020 - TTH

- 1. Successfully deployed LHIMS
- 2. Finalized and completed all protocols to change banks from Republic Bank to CBG per GoG directive.
- 3. Trained Sub-BMC finance heads on financial reporting
- 4. All audit queries were appropriately responded to
- 5. Timely preparation and submission of financial reports

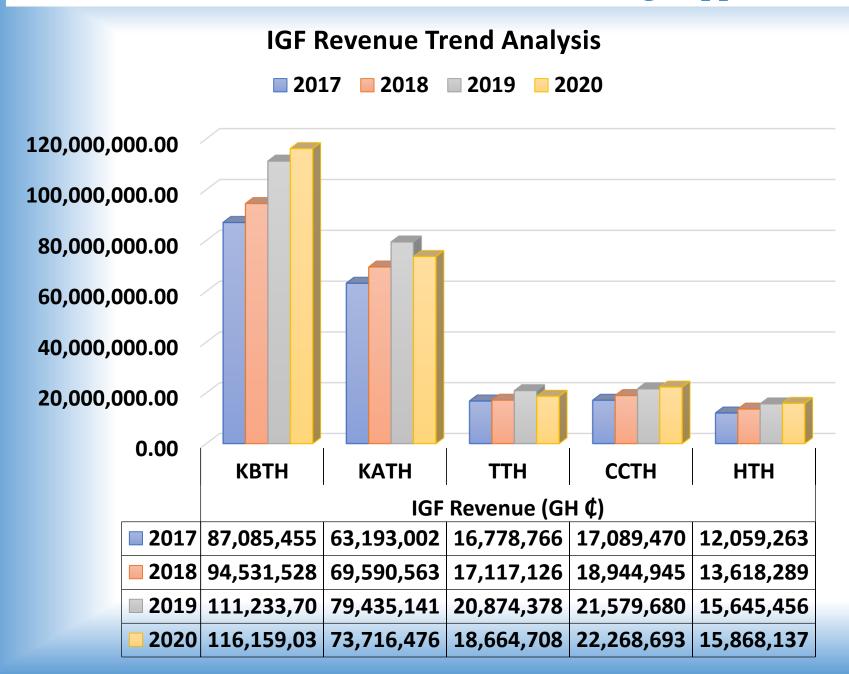
KEY ACTIVITY ACHIEVEMENTS IN 2020 - CCTH

- > Full implementation of GIFMIS.
- Conducted periodic reviews to ensure expenditure are within budgetary limits.

KEY ACTIVITY ACHIEVEMENTS IN 2020 - HTH

Retraining of Key Staff on the use of GIFMIS

KEY OUTPUTS ACHIEVEMENTS



REMARKS:

• KBTH:

$$2020 = 4.4\%\uparrow$$

 $2019 = 17.7\%\uparrow$

• KATH:

$$2020 = 7.2\%$$
 \\ $2019 = 14.1\%$ \\ \\

• TTH:

$$2020 = 10.6\%$$
 \\ $2019 = 22\%$ \\ \\

• CCTH:

$$2020 = 3.2\% \uparrow$$

 $2019 = 13.9\% \uparrow$

• HTH:

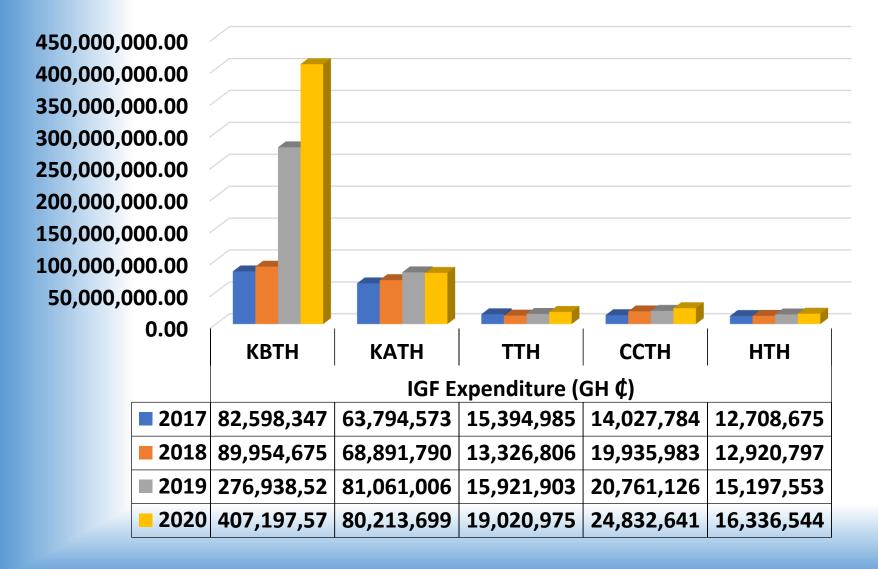
$$2020 = 1.4\% \uparrow$$

 $2019 = 14.9\% \uparrow$

Recommendation:

IGF Expenditure Trend





REMARKS:

• KBTH:

$$2020 = 47\%\uparrow$$

 $2019 = 207.9\%\uparrow$

• KATH:

$$2020 = 1.05\%$$
 \\ $2019 = 17.7\%$ \\ \\

• TTH:

$$2020 = 19.46\%\uparrow$$

 $2019 = 19.47\%\uparrow$

• CCTH:

$$2020 = 19.6\% \uparrow$$

 $2019 = 4.13\% \uparrow$

• HTH:

$$2020 = 7.5\% \uparrow$$

 $2019 = 17.6\% \uparrow$

Recommendation:

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMEN T
	KBTH	KATH	TTH	CCTH	HTH		
IGF Revenue	116,159,035.59	73,716,476.98	18,664,708.74	22,268,693.6	15,868,137.07	-	Total revenue
	111,233,708.82	79,435,141.99	20,874,378.12	21,579,680	15,645,456.93		collected
	94,531,528.66	69,590,563.41	17,117,126.15	18,944,945.89	13,618,289.93		Conceted
	87,085,455.00	63,193,002.36	16,778,766.78	17,089,470	12,059,263.42		
IGF	407,197,572	80,213,699.25	19,020,975.04	24,832,641.11	16,336,544.40	-	Total
Expenditure	276,938,524	81,061,006.25	15,921,903.23	20,761,126.11	15,197,553.82		expenditure
Expenditure	89,954,675.00	68,891,790.33	13,326,806.23	19,935,983.92	12,920,797.65		•
	82,598,347.00	63,794,573.28	15,394,985.21	14,027,784	12,708,675.04		made
	REMARKS						
IGF Revenue	2020 = 4.4%↑	2020 = 7.2% ↓	2020 =	2020 = 3.2%↑	2020 = 1.4% ↑		
	2019 =	2019 = 14.1% ↑	10.6%↓	2019 = 13.9% ↑	2019 = 14.9% ↑		
	17.7%↑	2018 = 12.1%↑	2019 = 22% ↑	2018 = 10.9% ↑	2018 = 12.9 %↑		
	2018 = 8.6 %↑		2018 = 2%				
IGF	2020 = 47%↑	2020 = 1.05%	2020 =	2020 = 19.6% ↑	2020 = 7.5% ↑		
	2019 =	2019 = 17.7% ↑	19.46%↑	2019 = 4.13% ↑	2019 = 17.6% ↑		
Expenditure	207.9%↑	2018 = 7.99%	2019 =	2018 = 42.1% ↑	2018 = 1.67%↑		
	2018 = 8.9% ↑		19.47%↑				
			2018 =				
			13.43%↓				

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMEN T	
	KBTH	KATH	TTH	CCTH	HTH			
NHIS Claims Reimbursemen t Rate (submitted claims paid	51% (†) 47% (↓) 96.28% (†) 96.08% = 2017	50.27% (↑) 18.42% (↓) 28.20% (↓) 41.10% = 2017	56% (↑) 33% (↓) 34% (↓) 68% = 2017	11.2% (\psi) 21.89% (\frac{1}{2}) 20.88% (\psi) 58.68% = 2017	58.07% (↑) 23.62% (↓) 29.41% (↓) 51.23% = 2017	75%	Total insurance claims reimbursed/tota l insurance claims submitted	
Debtors days	192 (↑) 184 (↓) 273 (↑) 247= 2017	197 (\downarrow) 298 (\uparrow) 262 (\downarrow) 275 = 2017	239 (\psi) 241 (\psi) 406 (\psi) 149 = 2017	215 (\downarrow) 393 (\uparrow) 346.29 (\uparrow) 283.22 = 2017	$ \begin{array}{c} 102 (\downarrow) \\ 208 (\uparrow) \\ 204 (\uparrow) \\ 122 = 2017 \end{array} $	90	Debtors / Total Credit Revenue * 365	
Creditors days	106 (↓) 108 (↓) 172 (↑) 169 = 2017	133 (↑) 132 (↑) 131 (↓) 162 = 2017	111 (\downarrow) 184 (\downarrow) 360 (\uparrow) 125 = 2017	$182 (\uparrow)$ $175 (\uparrow)$ $100.82 (\downarrow)$ $184.73 = 2017$	153 (↑) 147 (↓) 157 (↑) 150 = 2017	120	Creditors / Total Credit Purchases * 365	
Proportion of IGF revenue spent on PPM	7.2% (\) 10.2% (\) 5.9% (\) 3.1% = 2017	6.87% (↑) 2.66% (↓) 4% (↓) 4.61% = 2017	5.45% (†) 2.5% (↓) 4% (†) 3% = 2017	3.51% (\) 3.8% (\) 3.52% (\) 4.13% = 2017	1.49% (↑) 1.42% (↑) 1.32% (↑) 1.18%= 2017	5%	total amount spend on PPM/total IGF	

KEY INDICATORS	PERFURINCE						MEAS	UREMEN T
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS		
Percentage	22.3% (†)	7.76% (↑)	15.3% (†)	10.82% (↑)	5.95 % (↓)	10%		unt spend on
IGF paid as	20.6% (†)	6.07% (\)	14.5% (\)	9.55% (\)	6.12 % (↓)		salaries /t	total IGF
compensation	20.3% (\)	16% (†)	16% (†)	9.68% (\psi)	7.27 % (\big)			
1	$\frac{22\% = 2017}{1:0.23 (\uparrow)}$	$\frac{14.97\% = 2017}{2.66:1(\uparrow)}$	$12.4\% = 2017 0.4:1 (\downarrow)$	$11.47\% = 2017 \\ 0.85:1 (\downarrow)$	9.69 % = 2017 $0.98:1 (\uparrow)$		Cash Re	venue/
Ratio of cash	1:0.14 (†)	2.33:1(↑)	0.7.1 (↓) 0.7:1 (↓)	1.32:1 (↑)	0.76:1 (\psi)	-	NHIS re	
revenue to	1:0.21 (\psi)	1.99:1 (↑)	1.5:1 (↑)	0.66:1 = 2018	0.88:1 (1)		reimburs	
NHIA	1:1.22 = 2017	1.49:1 = 2017	0.4:1= 2017	- = 2017	1.01:1 = 2017			
reimbursement								

STATUS OF NHIA CLAIMS

KEY INDICATOR		PERFORMANCE				THs TARGETS	MEA	SUREMEN T
S	KBTH	KATH	TTH	CCTH	HTH			
Percentage of NHIA Claims Submitted on time	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100%= 2020 100%= 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018 100% = 2017	75% (\) 100%= 2019 100%= 2018 100%= 2017	-	to NH of the month Numb submi	number of submitted as submitted as submitted as at the end ensuing a / Total er of claims atted to a by all ies * 100
Percentage of rejection on claims submitted to NHIS	3.2% (\) 3.4% (\) 3.72% (\) 3.72% (\) 3.92% = 2017	4.19% (†) 3.59% (↓) 5% = 2018 5% = 2017	-= 2020 -= 2019 -= 2018 -= 2017	0% = 2020 0% = 2019 0% = 2018 0% = 2017	3.44% (↑) 2.92% (↓) 9.86% (↓) 10%= 2017	-	Total rejectoreceiv NHIS Numb submi	number of ed claims ed from / Total eer of claims tted to by all ies * 100

KEY INDICATORS					
INDICATIONS	KBTH	KATH	TTH	CCTH	HTH
Unpaid Claims Bal B/F Claims Submitted	15,948,982.36 9,363,691.5 8,368,205.03 11,959,148.85 23,380,084.47 21,459,429.64 16,260,621.98	22,661,681.81 18,489,499.30 14,510,720.16 17,689,233.47 19,967,749.69 23,535,307.72 22,310,669.71	16,858,427.96 12,188,627.96 6,711,309.40 5,810,803.39 12,091,438.38 14,526,312.09 11,173,862.27	12,643,564 8,276,944 8,041,108.90 6,613,799.00 11,368,136 11,734,191.92 9,629,551.55	5,720,134.10 4,857,387.52 2,315,338.16 2,805,060.85 7,695,973.22 8,168,487.24 7,233,580.26
	15,456,089.52	21,613,761.16 REMA	11,409,035.29 RKS	10,549,108	6,459,913.11
Unpaid Claims Bal B/F	$2020 = (70.3\%\uparrow)$ $2019 = (11.9\%\uparrow)$ $2018 = (42.9\%\downarrow)$	$2020 = (22.6\%\uparrow)$ $2019 = (27.4\%\uparrow)$ $2018 = (18\%\downarrow)$	$2020 = (38.3\%\uparrow)$ $2019 = (81.6\%\uparrow)$ $2018 = (15.5\%\uparrow)$	2020 (52.8% \uparrow) 2019 = (2.9% \uparrow) 2018 = (21% \uparrow)	$2020 = (17.8\%\uparrow)$ $2019 = (110\%\uparrow)$ $2018 = (17.5\%\downarrow)$
Claims Submitted	$2020 = (9\%\uparrow)$ $2019 = (32\%\uparrow)$ $2018 = (5.2\%\uparrow)$	$2020 = (15.2\% \downarrow)$ $2019 = (5.5\% \uparrow)$ $2018 = (3.2\% \uparrow)$	$2020 = (16.8\% \downarrow)$ $2019 = (30\% \uparrow)$ $2018 = (2.1\% \downarrow)$	$2020 = (3.1\% \downarrow)$ $2019 = (21.9\% \uparrow)$ $2018 = (8.7\% \downarrow)$	$2020 = (5.8\% \downarrow)$ $2019 = (12\% \uparrow)$ $2018 = (12\% \uparrow)$

STATUS OF NHIA CLAIMS

KEY INDICATORS	PERFORMANCE							
INDICATORS	KBTH	KATH	TTH	ССТН	HTH			
Claims Paid	27,149,506.51	30,050,902.49	16,736,620.00	12,715,888	9,994,263.53			
Ciamis i aid	15,034,473.08	18,966,566.26	9,756,149.00	7,367,571.40	6,177,539.77			
	15,265,135.48	17,315,822.96	3,785,896.26	9,393,716.11	4,636,410.59			
	17,938,513.18	23,328,148.54	10,508,529.28	9,121,870 = 2017	5,833,592.60			
Outstanding As	16,713,814.50	10,429,983.32	13,407,963	11,416,143	2,622,589.53			
At end of the	12,179,560.32	21,385,995.36	16,858,427.96	12,643,564.86	5,720,134.10			
At end of the	9,363,691.53	18,503,027.46	12,188,627.56	8,276,944.34 = 2018	4,857,387.52			
year	8,368,205.03	14,510,720.16	6,711,309.40	8,041,109 = 2017	2,315,338.16			
		REMA	RKS					
Claims Paid	2020 = (80.6%↑)	2020 = (58.4%↑)	2020 = (71.6%↑)	$2020 = (72.6\%\uparrow)$	2020 = (61.8%↑)			
	$2019 = (1.5\% \downarrow)$	$2019 = (9.5\%\uparrow)$	2019 = (57.7%↑)	$2019 = (21.6\% \downarrow)$	2019 = (33.2% ↑)			
	$2018 = (14.9\% \downarrow)$	$2018 = (25.8\% \downarrow)$	2018 = (64%)	2018 = (3%)	$2018 = (20.5\% \downarrow)$			
Outstanding As At	2020 = (37.2%↑)	$2020 = (51.2\% \downarrow)$	$2020 = (20.5\% \downarrow)$	2020 = (9.7%)	$2020 = (54.2\%\downarrow)$			
end of the year	$2019 = (30.1\%\uparrow)$	$2019 = (15.6\%\uparrow)$	$2019 = (38.3\%\uparrow)$	2019 = (52.8%)	2019 = (17.8%↑)			
	2018 = (11.9%↑)	$2018 = (27.5\%\uparrow)$	2018 = (81.6%↑)	$2018 = (2.9\%\uparrow)$	2018 = (109.8% ↑)			
No Of Month	6 (↓)	5 (\psi)	5 (↓)	6 (\psi)	4 (↓)			
Outstanding	9	9 (↑)	8 (↑)	8	8			
- Catolanding	9 (†)	6 (9)	6	8 (†)	8 (↑)			
	8 = 2017	6 = 2017	6 = 2017	6 = 2017	4 = 2017			

S.O. 1: Ensure Sustainable Affordable, Equitable And Easily Accessible Healthcare Services

Key Activity Achievements in 2020

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

KEY OUTPUTS ACHIEVEMENTS

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

BLACK = 2020, RED = 2019, GREEN = 2018, BLUE = 2017

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEASUREMEN T
S	KBTH	KATH	TTH	CCTH	HTH		
Proportion of	- = 2020	- = 2020	- = 2020	50%	N/A= 2020	70%	Number of district
planned	- = 2019	- = 2019	- = 2019	50% (↓)	N/A = 2019		and regional
specialist	- = 2018	- = 2018	- = 2018	150% (↑)	N/A = 2018		hospitals
outreach	- = 2017	- = 2017	- = 2017	100% =	N/A = 2017		supported with
support to				2017			specialist outreach
facilities							visits as planned /
carried out.							Number of
carried out.							regional and
							district hospitals
							planned to be
							covered with
							Specialist
							outreach visits
Number of	- = 2020	- = 2020	- = 2020	100%	N/A = 2020	16%	Total number of
	- = 2019	- = 2019	- = 2019	100%	N/A = 2019		outreach visits
outreach visits	- = 2018	26 = 2018	- = 2018	100%	N/A = 2018		carried out / Total
carried out	- = 2017	- = 2017	- = 2017	- = 2017	N/A= 2017		visit planned

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

BLACK = 2020, RED = 2019, GREEN = 2018, BLUE = 2017

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEAS	SUREMEN T
MDICATOR	KBTH	KATH	TTH	ССТН	HTH	IARGEIS		
Total number of facilities visited	$-= 2020$ $-= 2019$ $27 (50\% \uparrow)$ $18 = 2017$	18 $(2.7\% \downarrow)$ 23 $(9.5\% \uparrow)$ 21 $(5\% \uparrow)$ 20 = 2017	-= 2020 -= 2019 -= 2018 -= 2017	164 (5.8%↓) 174 (↑) 17 = 2018 -= 2017	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-		
Number of visits planned	12 = 2020 - = 2019 - = 2018 - = 2017	$21(8.7\%\downarrow)$ $23 (15\%\uparrow)$ $20 = 2018$ $- = 2017$	- = 2020 - = 2019 - = 2018 - = 2017	164 (5.8%↓) 174 (↑) 17 = 2018 -= 2017	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-		
Number of Beneficiaries recorded	$2,606 = 2020$ $- = 2019$ $561 (31.4\%\uparrow)$ $427 = 2017$	9,101 (13.3% \uparrow) 8,034 (74.9% \downarrow) 32,022 = 2018 -= 2017	-= 2020 -= 2019 -= 2018 -= 2017	$8,276 (40.4\% \downarrow)$ $13,873 (\uparrow)$ $1,062 (55\% \downarrow)$ $2,359 = 2017$	N/A= 2020 N/A= 2019 N/A= 2018 N/A= 2017	11,215		Number ents seen

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

BLACK = 2020, RED = 2019, GREEN = 2018, BLUE = 2017

KEY INDICATOR	PERFORMANCE						MEASUREMEN T
S	KBTH	KATH	TTH	CCTH	HTH	TARGETS	
Number of	10 = 2020	211 (\psi)	- = 2020	164 (↓)	N/A= 2020	-	
visits carried	- = 2019	462 (↑)	- = 2019	174 (↑)	N/A = 2019		
	- = 2018	26 = 2018	- = 2018	17 = 2018	N/A = 2018		
out	- = 2017	- = 2017	- = 2017	- = 2017	N/A= 2017		
Outreach to	27 = 2020	207 (↓)	- = 2020	102 (↓)	N/A = 2020	-	
communities	- = 2019	438 (↑)	- = 2019	168 (↑)	N/A = 2019		
	- = 2018	16 = 2018	- = 2018	8 = 2018	N/A = 2018		
(no. of	- = 2017	- = 2017	- = 2017	- = 2017	N/A = 2017		
comm.)							
	- = 2020	4 (↓)	- = 2020	8 (↑)	N/A = 2020	-	
Outreach to	- = 2019	24 (↑)	- = 2019	6	N/A = 2019		
schools	- = 2018	17 = 2018	- = 2018	6	N/A = 2018		
	- = 2017	-= 2017	- = 2017	- = 2017	N/A= 2017		
Surgical	1 = 2020	2 (\psi)	- = 2020	1 (↓)	N/A = 2020	-	
Outreach to	- = 2019	4 (↓)	- = 2019	4 (†)	N/A = 2019		
	- = 2018	6 = 2018	- = 2018	2 = 2018	N/A = 2018		
facilities	- = 2017	- = 2017	- = 2017	- = 2017	N/A= 2017		

KEY CHALLENGES

CHALLENGES FOR ALL THs IN 2020

CHALLENGES	TH HSP
Covid-19 pandemic affected delivery of routine essential health services	ALL THs
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	TTH, KATH & CCTH
10% Retention of NHIS claims by NHIA	TTH, KATH & CCTH

CHALLENGES – KBTH

CHALLENGES	REMARKS
Over dependence on IGF	
Unrealistic service tariffs	
Delivering modern health services in a century old facility	
High utility tariff	
• Delays in the implementation of the complete end to end paperless system in the hospital.	
Construction of Water-farm yet to be commence.	
• COVID -19 effects on service delivery and internally generated fund (IGF).	
Financially Burdening IGF Payroll	
Sections of the road network requires serious rehabilitation	

CHALLENGES – KATH

CHALLENGES	REMARKS
1. High Institutional Maternal and Neonatal Mortality	
2. Inadequate and ageing equipment in laundry, CSSD, Imaging and Lab services and associated high maintenance costs.	
3. Delays in the payment of health insurance claims/unrealistic tariffs/withheld NHIS claims	
4. Late referrals of patients or presentation of cases at advanced state	
5. Increasing number of Paupers	
6. Inadequate clinical staff, particularly in Pharmacy, Diagnostics	
7. Lack of financing module for emergency cases	

CHALLENGES – TTH

CHALLENGES	REMARKS
➤ Disruption in service delivery as a result of the COVID-19 pandemic	
➤ Delays in receiving payments from NHIA, which forms about 70% of	
our revenue.	
➤ High costs of renting residential accommodation for staff	
Late/poor referral of cases from peripheral facilities	
> Shortages and inadequate supply of logistics and consumables	
➤ Inadequate funding for specialist support outreaches	
> Frequent equipment breakdown (MRI, CT, Ultrasound Machines)	
> Frequent power outages leading to high fuel costs, disruption of	
services and equipment breakdown	
➤ Disruption in water supply affecting service delivery.	
➤ Unavailability of patient's relative/mothers' hostel	

CHALLENGES – CCTH

CHALLENGES	REMARKS
Disruption of clinical, mortality and other meetings	
Disruption of execution of planned activities (Annual Program of Work)	
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. Power Generators, Laundry and CSSD equipment, etc.	
➤ Inadequate funds to timely execute the APOW and covid-19 planned activities	
Decline/Loss of Revenues	
➤ Increased Cost of Service	
> Shortages of Essential Medical Supplies due to the pandemic	
➤ High oxygen consumption by critical Covid-19 Patients and the associated cost	

CHALLENGES – HTH

CHALLENGES	REMARKS
Inadequate vehicles to go on outreach Programmes	
 Inadequate Space at the Accident and Emergency Department 	
• Inadequate Diagnostic Equipment such as MRI machine and CT Scan	
No Oxygen Plant	
Erratic reimbursement by the NHIA	
Inadequate Staff Accommodation	
Aged Gen Sets	
 Inadequate Vehicles and Aging nature of the existing Vehicles 	
Inadequate Office Space	
 Inadequate space for service delivery-Need for expansion of 	
Infrastructure	

SUMMARY OF KEY ACTIVITIES & PROJECTS PLANNED FOR 2021

OUT LOOK FOR 2021 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	TTH, KATH & CCTH

OUT LOOK FOR 2021 – KBTH

WAY FORWARD/OUTLOOK FOR 2021

- ➤ Total Digitization of operations and processes / Paperless System
- Established of data centre/NOC
- > Construction new maternity block
- ➤ Repair/reconstruction of the sewage system
- ➤ Construction of the main surgical annex
- > Construction of the Urology and Nephrology centre
- > Construction of the trauma and acute pain centre
- ➤ Pursue the programme on the PPP mortuary and prosector/undertaker training centre
- > Rehabilitate the current mortuary
- ➤ Consider proposals for the 700 car capacity parking

WAY FORWARD/OUTLOOK FOR 2021

- > Continue efforts at rebranding and transforming KBTH
- ➤ Meet the needs and expectations of clients
- Continue strengthening Capacity of Leadership in Governance and Management to support quality and safe health care delivery.
- ➤ Capacity Building (Human Resource Development)
- ➤ Engage staff in improving cohesion, team work and client centered care
- > Renovation of Staff Accommodation
- ➤ Be responsive to public Financial Management / Procurement Acts towards protecting the public purse.
- > Repair of the oxygen plant / Increase capacity
- > Staff Transport
- > Staff 100% Medicare

OUT LOOK FOR 2021 – KATH

WAY FORWARD/OUTLOOK FOR 2021

- ➤ Quality health care delivery leading to better health outcome especially in maternal and Child Health
- > Expansion of Nuclear and Radiotherapy Centre (Oncology)
- > Strengthen outreach services
- > Strengthen collaboration with other institutions
- ➤ Continue efforts to complete the 44-year old Children and Maternity block
- > Complete and operationalize the Fertility centre
- > Continue to provide support for facilities within our catchment area
- > Expedite the construction of the patient relative hostel
- > Construction of a waiting room for mothers
- > Establish a Renal Centre
- > Establish a CathLab
- ➤ Continue negotiations for a Cardio centre

OUT LOOK FOR 2021 – TTH

WAY FORWARD/OUTLOOK FOR 2021

- Continue engagements with NHIA to improve claims repayment
- Establish additional specialties/sub-specialties such as oncology and strengthen residency training
- Scale-up planned preventive maintenance for all infrastructure to reduce high equipment downtime
- Strengthen decentralized management systems
- Improve nursing and midwifery practices i.e establish total nursing care in all wards
- Expand patient advisory and support services (PASS) and set client complaints office
- Ensure drug availability of 90% of essential medicines
- > Equip drug manufacturing unit and scale up operations

WAY FORWARD/OUTLOOK FOR 2021

- Pursue patient safety policy and strengthen quality management systems
- Ensure optimal utilization of EHR software (LHIMS) through regular training and supervision
- ➤ Develop a compendium of key operational policies for the Hospital
- Continue engagements for the construction of a patient's relatives hostel
- Scale-up implementation of agreed conditions of service for staff
- ➤ Enhance specialist support services
- > Expand storage capacity for the Hospital

OUT LOOK FOR 2021 – CCTH

WAY FORWARD/OUTLOOK FOR 2021

To increase access to specialist services

To improve the quality of care at the hospital

To improve the infrastructure and equipment base for the delivery of quality services

To strengthen the governance system

To improve health research

To improve capacity of staff

To improve residency training

To intensify support to the lower level of health facilities

OUT LOOK FOR 2021 – HTH

OUTLOOK

- Strengthen the Capacity of the Sub-BMCs Management Teams
- Complete the Family Medicine Clinic Project and operationalize it
- Acquisition of Mobile Clinic Van to facilitate Support service to peripheral facilities and communities
- Pursue vigorously the revamp of the MRI and the acquisition of CT Scan
- Expand Oncology Service and the Cancer Registry
- Collaborate with Private Investors for construction of Residential Accommodation for Staff
- Continue training of staff in the various specialties to enable us introduce new services

ACKNOWLEDGEMENT

- Ministry of Health
- All Regional Coordinating Council
- Partners
- Regional Health Administrations
- All Medical Schools
- All 2020 Boards Members
- Hospital Management
- Hardworking staffs
- Covid-19 Task Team Members
- All other institutions / stakeholders / Partners /Philanthropists etc.

THANK YOU

