MINISTRY OF HEALTH INTER-AGENCY REVIEW CONFERENCE











GHANA TEACHING HOSPITALS JOINT 2021 ANNUAL PERFORMANCE REPORT

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DATE: 6TH & 7TH APRIL, 2022 VENUE: MINISTRY OF HEALTH AUDITORIUM, ACCRA - GHANA

OUTLINE OF PRESENTATION

- Introduction
- Background Information
- 2021 Annual THs Key Performance
- Key Challenges
- Outlook For 2022
- Acknowledgement
- Appendix Other THs KPIs

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 2021 annual performance and the key challenges of the five Teaching Hospitals in Ghana under the 63 THs standardized KPIs as a benchmark.

INTRODUCTION – CON'T

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

To comprehensively achieve these objectives, all the teaching hospitals in the country have 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

□ 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

HEALTH SECTOR OBJECTIVES

THs Mandate 1:

Provision of Advanced Tertiary Health Care Services.

☐THs Mandate 2:

Medical Education

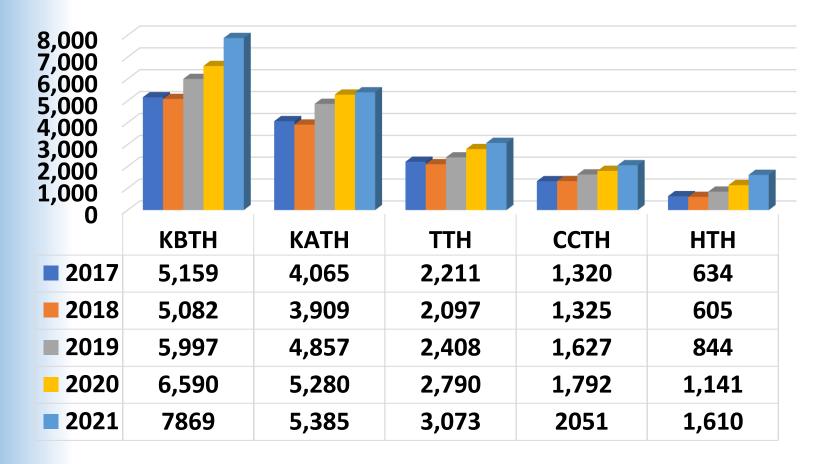
☐THs Mandate 3:

Undertake Research

HUMAN RESOURCES FOR HEALTH(Improve Human Resource Base)

TREND ANALYSIS - TOTAL STAFF

2017 2018 2019 2020 2021



NOTE: BED CAPACITY OF THE TEACHING HOSPITALS:

KBTH = 1538; KATH = 1068; TTH = 812; CCTH = 400; HTH = 306

REMARKS:

• KBTH STAFF =

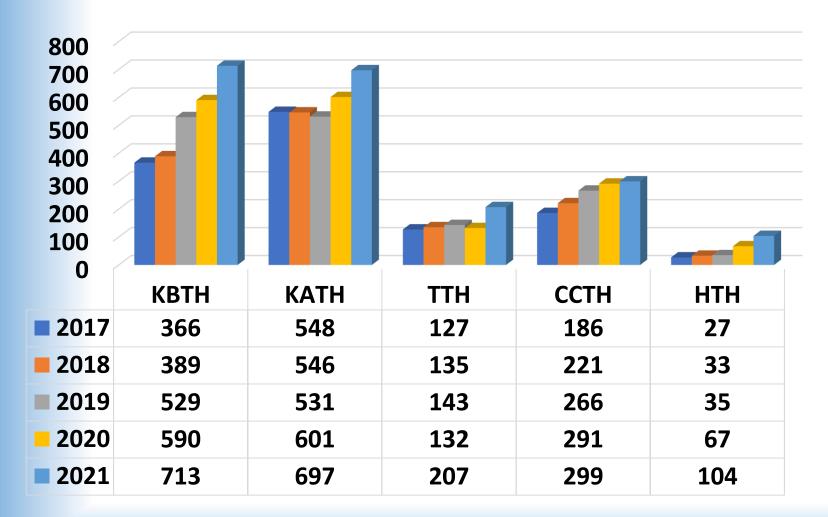
$$2021 = 7,869 (19.4\%\uparrow)$$

 $2020 = 6,590 (9.9\%\uparrow)$

- KATH STAFF = $2021 = 5,385 (1.98\uparrow)$ $2020 = 5,280 (8.71\%\uparrow)$
- TTH STAFF = $2021 = 3,073 (10.1\%\uparrow)$ $2020 = 2,790 (15.9\%\uparrow)$
- CCTH STAFF = 2021 = 2051 (14.5%↑) 2020 = 1,792 (10.1%↑)
- HTH STAFF = $2021 = 1,610 (41.1\% \uparrow)$ $2020 = 1,141 (35.2\% \uparrow)$

TREND ANALYSIS OF TOTAL DOCTORS

■ 2017 **■** 2018 **■** 2019 **■** 2020 **■** 2021



REMARKS:

• KBTH: $2021 = 713 (20.8\% \uparrow)$ $2020 = 590 (11.53\% \uparrow)$

• KATH:

$$2021 = 697 (15.9\uparrow)$$

 $2020 = 601 (13.2\uparrow)$

• TTH:

$$2021 = 207 (56.8\%\uparrow)$$

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

• CCTH:

$$2021 = 299 (2.8\% \uparrow)$$

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

• HTH:

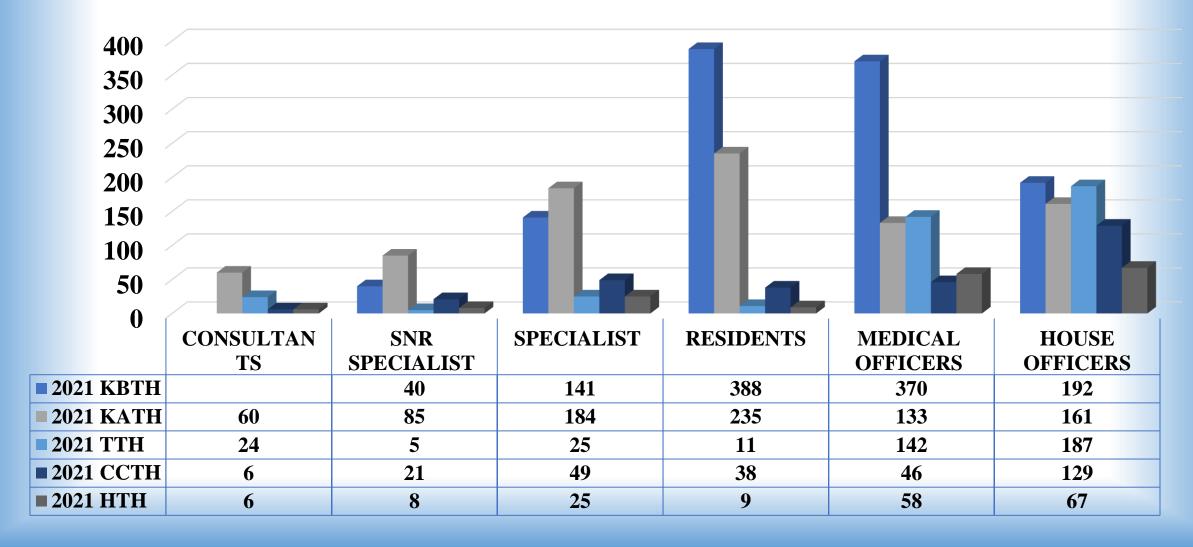
$$2021 = 104 (55.2 \uparrow)$$

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

COMPARATIVE ANALYSIS OF THS

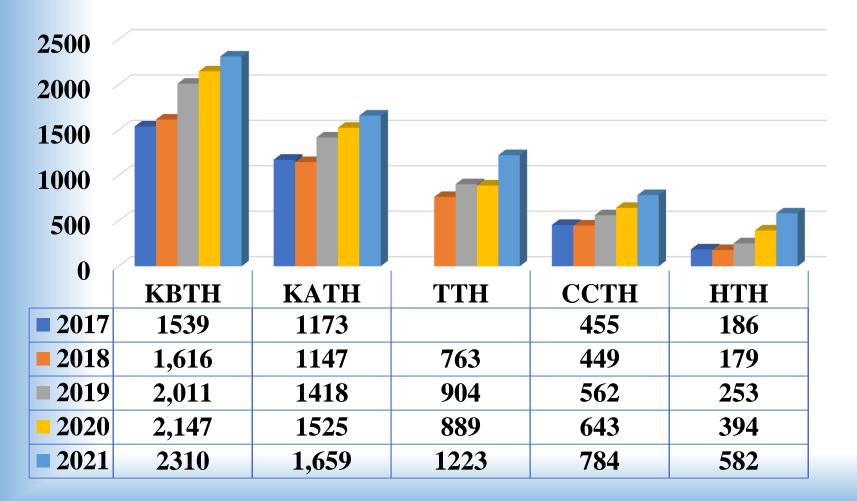
CATEGORY OF DOCTORS IN 2021

■ 2021 KBTH ■ 2021 KATH ■ 2021 TTH ■ 2021 CCTH ■ 2021 HTH



TREND ANALYSIS OF PROFESSIONAL NURSES

2017 2018 2019 2020 2021

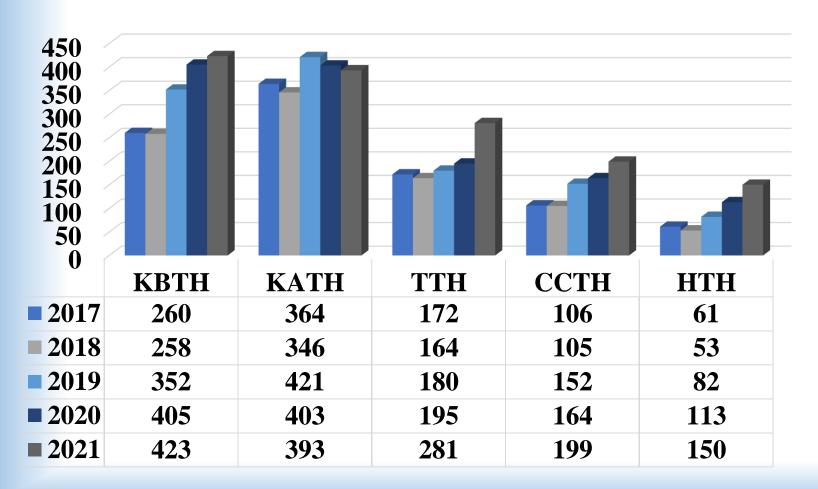


REMARKS:

- KBTH: $2021 = 2310 (7.6\%\%\uparrow)$ $2020 = 2,147 (6.8\%\uparrow)$
- KATH: $2021 = 1,659 (8.79\%\uparrow)$ $2020 = 1525 (7.6\%\uparrow)$
- TTH: $2021 = 1,223 (37.6\%\uparrow)$ $2020 = 889 (1.7\%\downarrow)$
- CCTH: $2021 = 784 (21.9\%\uparrow)$ $2020 = 643 (14.4\%\uparrow)$
- HTH: $2021 = 582 (47.7\% \uparrow)$ $2020 = 394 (55.7\% \uparrow)$

TREND ANALYSIS OF TOTAL NUMBER OF MIDWIVES

2017 2018 2019 2020 2021



REMARKS:

- KBTH: $2021 = 423 (4.4\%\uparrow)$
 - $2020 = 405 (0.3\%\uparrow)$
- KATH:

$$2021 = 393 (2.48\% \downarrow)$$

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

• TTH:

$$2021 = 281(44.1\%\uparrow)$$

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

• CCTH: $2021 = 199 (21.3\%\uparrow)$ $2020 = 164 (7.9\%\uparrow)$

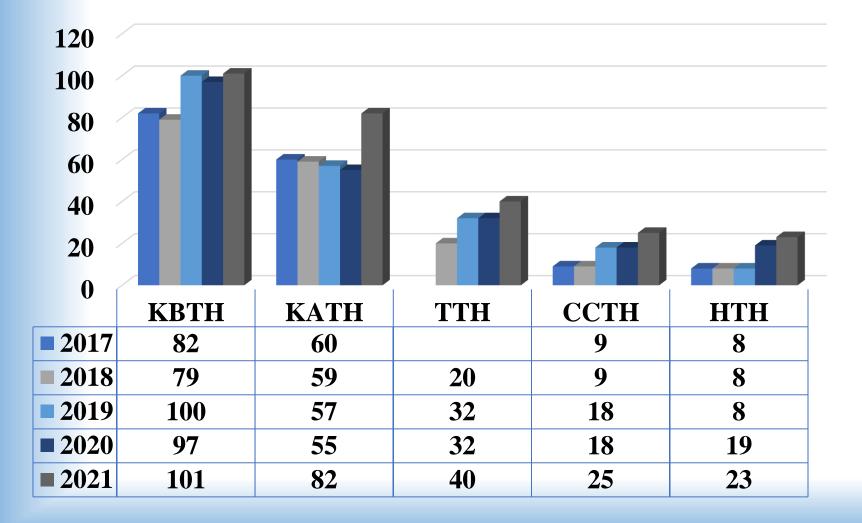
HTH:

$$2021 = 150 (32.7\%\uparrow)$$

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

TREND ANALYSIS OF TOTAL PHARMACISTS AT THS

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 101 = (4\%\uparrow)$$

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

• KATH:

$$2021 = 82 (49.09\%\uparrow)$$

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

TTH:

$$2021 = 40 (90.5\%\uparrow)$$

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

• CCTH:

$$2021 = 25 (66.7\%\uparrow)$$

 $2020 = 18$

HTH:

$$2021 = 23 (21.1\% \uparrow)$$

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

2021 KEY ACHIEVEMENTS

THS MANDATE: PROVISION OF ADVANCED TERTIARY HEALTH SERVICES

KEY ACTIVITY ACHIEVEMENTS IN 2021 - KBTH

- The Hospital operated in industrial peace without serious interruptions from the labour front
- Services of the utility service providers experienced less interruptions
- Construction of the Infection Urology and Nephrology Centre has commenced
- Construction of the Infectious diseases centre has reached an advanced stage
- The digitization programme has covered most clinical areas, the support services are being considered, 80% completed and paperless system

KEY ACTIVITY ACHIEVEMENTS IN 2021 – KBTH – CONT.

- Improved uninterrupted oxygen supply (B5 Support)
- Commissioning of the Rebecca Akufo Addo's Sunshine Hostel Childhood cancer patients Hostel
- * KBTH Webinars series commenced with six episodes
- Fevers Unit major Renovation started
- Complete refurbishment of the laundry unit
- Successfully Carried out Cochlear implantation surgery
- Installation of five Dental Chairs at Maxillofacial Department/renovation
- Installation of Cobas 6800 analyser for COVID and other infectious diseases

KEY ACTIVITY ACHIEVEMENTS IN 2021 – KBTH – CONT.

- Out Patients Dialysis Structure Completed increasing the unit's capacity by fifteen (15) beds
- Patients Relations' waiting Area Shed (Atlantic Lounge) Completed.
- Renovation of Orthopaedic ward D
- Renovation of Children block, 2nd floor
- Establishment of call centre for Cardio
- Digital X Ray Installed
- Development of a 5 year comprehensive training plan
- Implementation of electronic adverse event reporting system
- Introduction of peer review and training of 161 staff to strengthen M&E

KEY ACTIVITY ACHIEVEMENTS IN 2021 - KATH

- Neonatal hearing screening programme started at the ENT Unit introduced
- Nurses trained on Nursmid documentation and knowledge acquired been applied
- Standard operation procedure drafted for nursing practice in the ICU and recovery wards
- Emergency drug packs introduced
- Red stamp on laboratory and radiological investigations introduced
- Asthma care integrated into chronic care clinic at Family Medicine Directorate
- Risk assessment form for new admissions to prevent legal issues developed.

KEY ACTIVITY ACHIEVEMENTS IN 2021 – KATH CONT.

- Pace maker implantation started
- Infectious disease and research laboratory (COVID 19 lab) set up and operational
- Renovation of bacteriology labs done
- Extension of central oxygen lines to Infectious Disease Holding Area
- All Mercuric equipment phased out of the system
- Training done for Nurses and Midwives on ethical legal issues in nursing and midwifery.
- Theatre management training for all theatre in-charges and staff.
- Leadership training for the 2021 Best Nurses and Midwives done.

KEY ACTIVITY ACHIEVEMENTS IN 2021 – KATH CONT.

- Reactivation of the Maternity and Children's Block project
- Formalization and approval of contract for construction of Patients relative hostel
- Establishment of National Laparoscopic Surgery and Training Centre

KEY ACTIVITY ACHIEVEMENTS IN 2021 - TTH

- Piloted Biometric Attendance System expanded to all staff of the Hospital
- Ninety (90) staff (doctors, nurses, Health Management Information Staff, Biomedical Scientists, Disease Control Officers, Child Welfare Clinic Staff) trained in Malaria Case Management with the support of the National Malaria Control Programme.
- Ninety (90) nurses across the Hospital trained in Public Health Emergencies in collaboration with Spanish General Council of Nursing ,Foundation for Women in Africa and WILDAF.

KEY ACTIVITY ACHIEVEMENTS IN 2021 - TTH

- Trained 110 Traditional Bone Setters (TBS) in the three regions namely Northern, Savannah and North-East and 40 TBS in Ashanti Region in collaboration with Komfo Anokye Teaching Hospital with sponsorship from AO Alliance
- 806 Nurses & Midwife trained on substance abuse and addiction management
- Trained 10 Pharmacists on Pharmacovigilance with support from the FDA.
- Facilitated training of Oncology staff on the use of infusion pumps and Herceptin Injection with support from Roche

KEY ACTIVITY ACHIEVEMENTS IN 2021 - CCTH

- ❖ 94% (1042) of COVID-19 confirmed cases have recovered/discharged out of the 1,108 confirmed cases directly managed by CCTH with 6% (67) death recorded in 2021
- *Reduced the number of elective surgeries cancelations by 90%
- ❖ Introduced 4 additional specialised services
 - Reproductive Endocrinology and Fertility Services
 - Gynae. Oncology Services
 - Orthodontist services
- Scaled up implementation of appointment system at all specialist clinics
- New Autoclaves installed to improve CSSD services with the support from the MOH
- Expansion of Chemotherapy Services with support from Roche Products Ltd

KEY ACTIVITY ACHIEVEMENTS IN 2021 – CCTH - CONT.

- Completed and operationalized the blood bank with the support of MTN Ghana
- CCTH-Roche collaboration in Oncology Services launched
- ❖ Collaborated with Himalayan Cataract Project to conduct eye screening for 18,103 people and performed 2,083 eye surgeries under the project.
- Collaborated with Operation-Smile Ghana to provide free Cleft lip and palate surgeries (29 surgeries)
- Strengthened health promotion activities at the facility including IPC practices

KEY ACTIVITY ACHIEVEMENTS IN 2021 - HTH

- Launched a Fundraising Project for Cardiothoracic Theatre Equipment and expansion of Services
- Expansion of Chemotherapy Services with support from Roche Products Ltd
- ➤ Increased Percentage Tracer Medicine Availability from 86.6 to 92.5% which is above the 90% target for THs
- ➤ Increased Tracer Emergency Medicine Availability from 92.5% to 93.8% which is above the 90% target for THs
- ➤ Introduced Uro-gynaecology and Gynae-Oncology Services

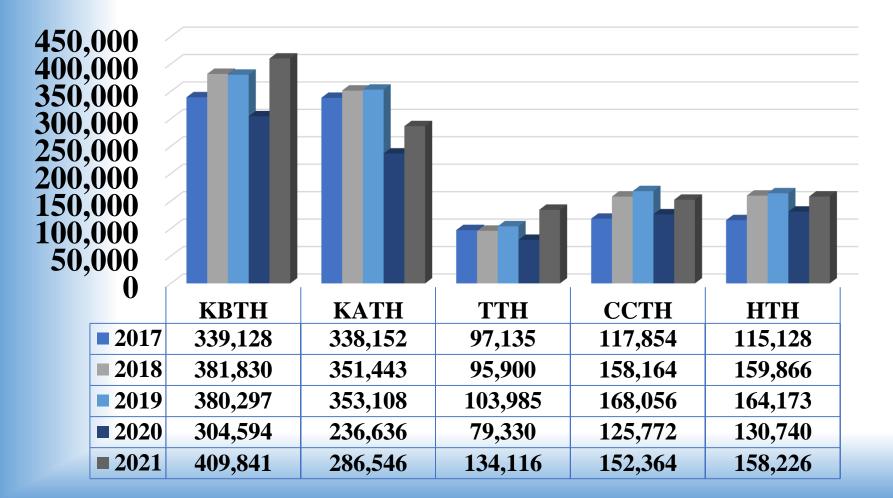
KEY OUTPUTS ACHIEVEMENTS

PROVISION OF OUT-PATIENT SERVICES

Provide Outpatient Services

TREND ANALYSIS OF TOTAL OPD ATTENDANCE

2017 2018 2019 2020 2021



REMARKS:

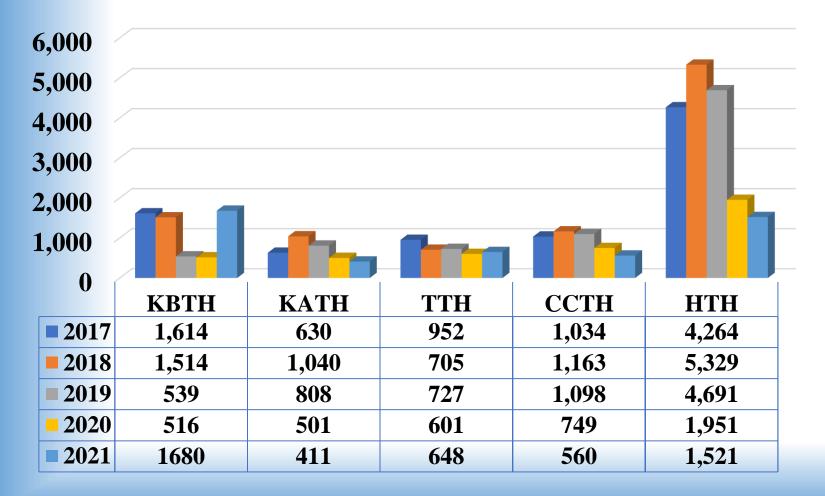
- KBTH: $2021 = 409,841 (34.6\%\uparrow)$ $2020 = 304,594 (19.9\%\downarrow)$
- KATH: 2021= 286,546 (21.1%↑) 2020 = 236,636 (33%↓)
- TTH: $2021 = 134,116 (69.1\%\uparrow)$ $2020 = 79,330 (23.7\%\downarrow)$
- CCTH: $2021=152,364 (21.1\%\uparrow)$ $2020=125,772 (25.2\%\downarrow)$
- HTH: $2021 = 158,226 (21.0\% \uparrow)$ $2020 = 130,740 (20.4\% \downarrow)$

Provide Outpatient Services

OPD CASES SEEN PER DOCTOR (RATIO)

THs Target = 1:1080

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 1:1680 (\uparrow)$$

 $2020 = 1:516 (\downarrow)$

• KATH:

$$2021 = 1:411 (\downarrow)$$

 $2020 = 1:501 (\downarrow)$

• TTH:

$$2021 = 1:648 (\uparrow)$$

 $2020 = 1:601 (\downarrow)$

CCTH:

$$2021 = 1:560 (\downarrow)$$

 $2020 = 1:749 (\downarrow)$

• HTH:

$$2021 = 1:1,521 (\downarrow)$$

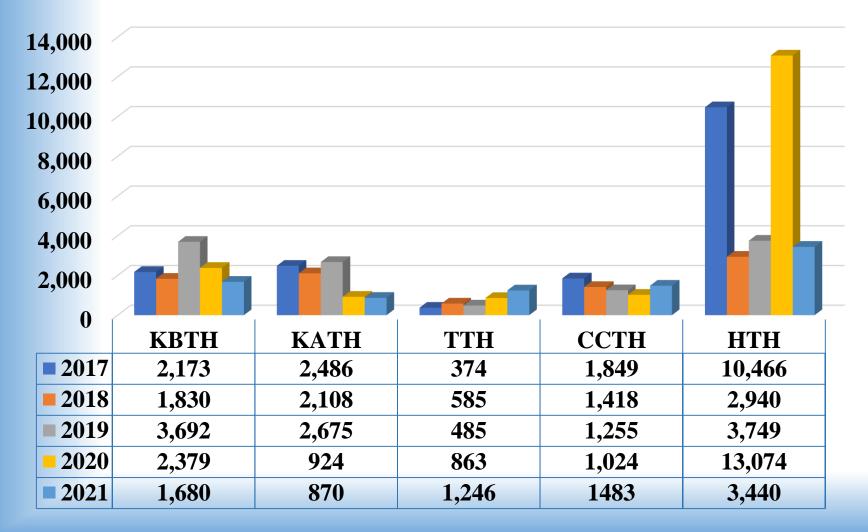
 $2020 = 1:1,951 (\downarrow)$

Provide Outpatient Services

OPD CASES SEEN PER SPECIALIST (RATIO)

THs Target = 1:1200

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 1:1,680 (\downarrow)$$

 $2020 = 1:2,379 (\downarrow)$

• KATH:

$$2021 = 1:870 (\downarrow)$$

 $2020 = 1:924 (\downarrow)$

• TTH:

$$2021 = 1:1,246 (\uparrow)$$

 $2020 = 1:863 (\uparrow)$

• CCTH:

$$2021 = 1:1483 (\uparrow)$$

 $2020 = 1:1024 (\downarrow)$

• HTH:

$$2021 = 1:3,440 (\uparrow)$$

 $2020 = 1:13,074 (\downarrow)$

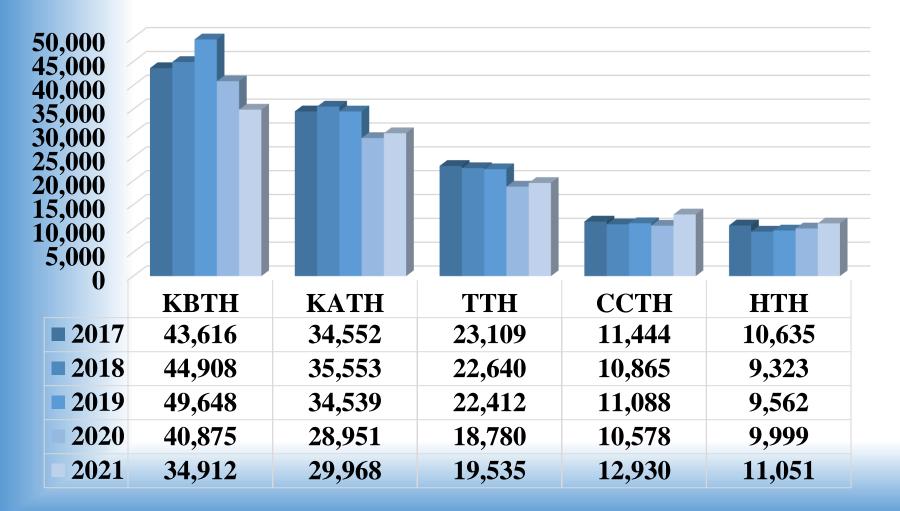
PROVISION OF IN-PATIENT SERVICES

Provide Inpatient Services

TREND ANALYSIS OF TOTAL ADMISSIONS

THs Target = 12,000

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 34,912 (11.1\% \downarrow)$$

 $2020 = 40,875 (17.7\% \downarrow)$

• KATH:

$$2021 = 29,968 (3.51\uparrow)$$

 $2020 = 28,951 (16.2\% \downarrow)$

• TTH:

$$2021 = 19,535 (4\%\uparrow)$$

 $2020 = 18,780 (16.2\%\downarrow)$

• CCTH:

$$2021 = 12,930 (22.2\% \uparrow)$$

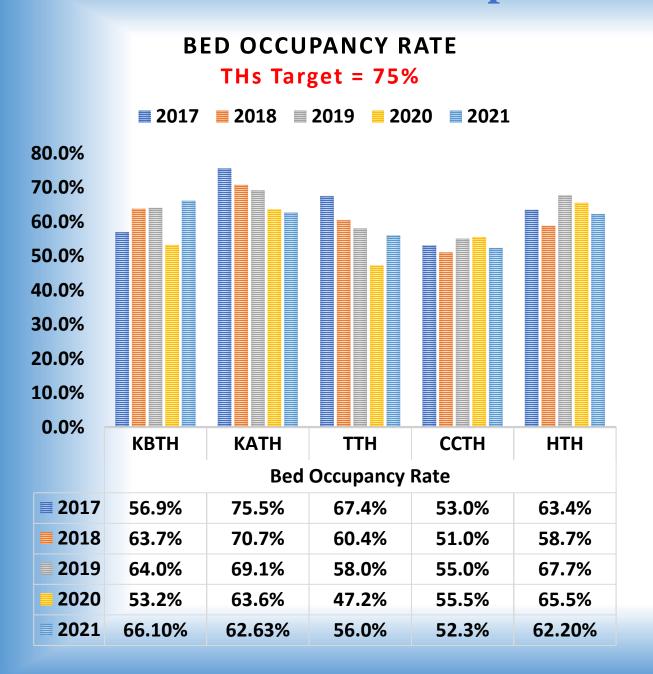
 $2020 = 10,578 (4.6\% \downarrow)$

• HTH:

$$2021 = 11,051 (10.5 \uparrow)$$

 $2020 = 9,999 (4.6\% \uparrow)$

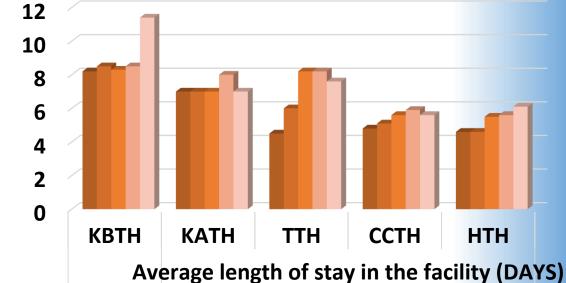
Provide Inpatient Services Cont.



AVERAGE LENGTH OF STAY IN THE HOSPITAL (DAYS)

THs Target = 6 Days

2017 2018 2019 2020 2021

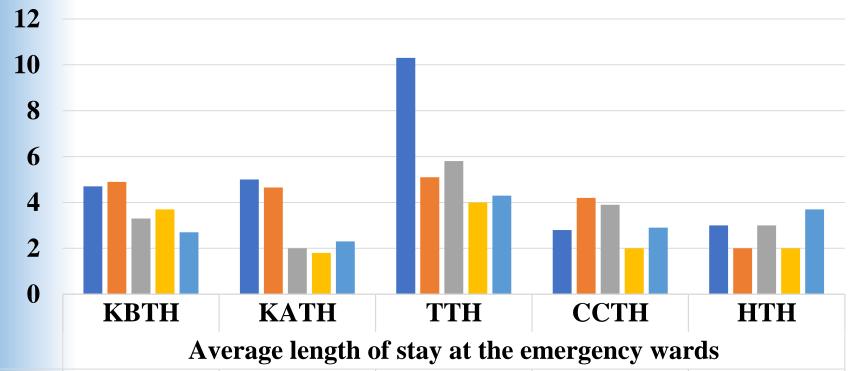


2017 8.2 4.8 4.5 4.6 **2018** 8.5 6 5.1 4.6 **2019** 7 5.5 8.3 8.2 5.6 2020 8.5 8 5.6 8.2 5.9 2021 11.4 7 7.6 5.6 6.1

AVERAGE LENGTH OF STAY AT THE EMEGENCY WARD

THs Target = 2 Days





2017	4.7	5	10.3	2.8	3
2018	4.9	4.65	5.1	4.2	2
2019	3.3	2	5.8	3.9	3
2020	3.7	1.8	4	2	2
2021	2.7	2.3	4.3	2.9	3.7

REMARKS:

• KBTH:

$$2021 = 2.7 (\downarrow)$$

 $2020 = 3.7 (\uparrow)$

• KATH:

$$2021 = 2.3 (\uparrow)$$

 $2020 = 1.8 (\downarrow)$

• TTH:

$$2021 = 4.3 (\uparrow)$$

 $2020 = 4.0 (\downarrow)$

• CCTH:

$$2021 = 2.9 (\uparrow)$$

 $2020 = 2 (\downarrow)$

• HTH:

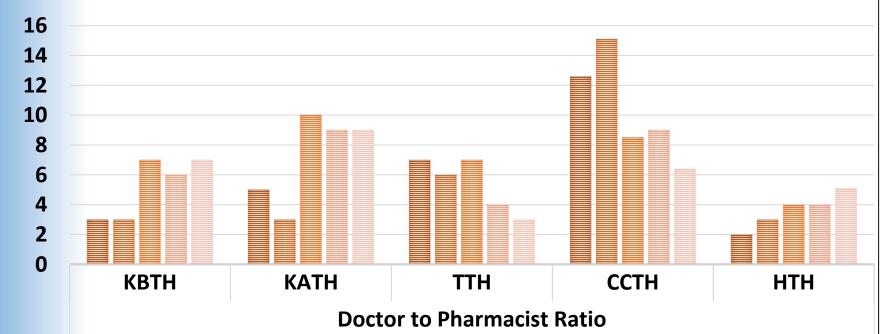
$$2021 = 3.7 (\uparrow)$$

 $2020 = 2 (\downarrow)$

DOCTOR TO PHARMACIST RATIO

TH TARGET = 10:1





2017	3	5	7	12.6	2
2018	3	3	6	15.1	3
2019	7	10	7	8.5	4
2020	6	9	4	9	4
2021	7	9	3	6.4	5.1

REMARKS:

• KBTH:

$$2021 = 7:1 (\uparrow)$$

 $2020 = 6:1 (\downarrow)$

• KATH:

$$2021 = 9:1 (\uparrow)$$

 $2020 = 9:1 (\downarrow)$

• TTH:

$$2021 = 3:1 (\downarrow)$$

 $2020 = 9:1 (\uparrow)$

• CCTH:

$$2021 = 6.4:1 (\downarrow)$$

 $2020 = 9:1 (\uparrow)$

• HTH:

$$2021 = 5.1 (\uparrow)$$

 $2020 = 4:1$

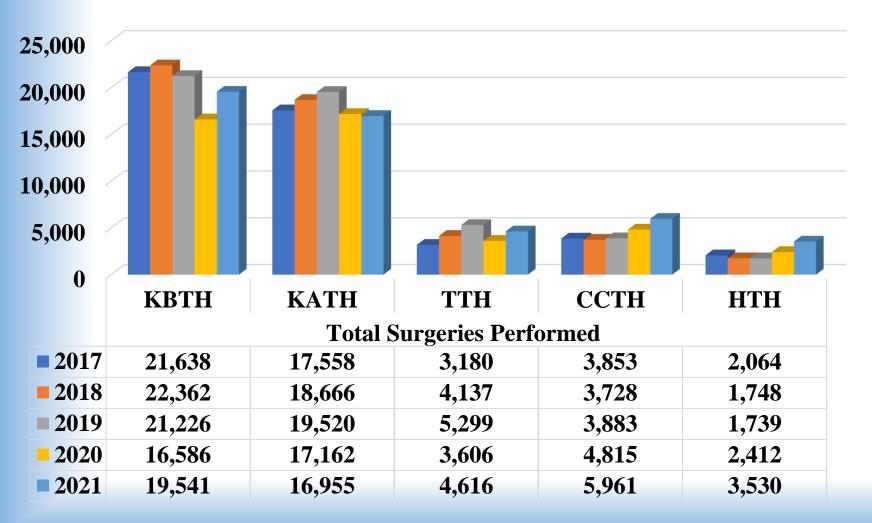
Provide Inpatient Services Cont.

KEY PERFORMANCE					THS	MEASUREMENT	
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Nurse and Midwife to Admission	1:85 (↑) 1:13 (↓) 1:18 (↓) 1:35 (↓) 1:36 = 2017	1:15 (↓) 1:16 (↓) 1:19 (↓) 1:37 (↑) 1:19 = 2017	1:19 (↑) 1:15 (↓) 1:18 (↓) 1:23 (↓) 1:24 = 2017	1:13 1:13 (↓) 1:16 (↓) 1:20 (-) 1:20 = 2017	1:15 (\psi) 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
Ratio Proportion Of In-patients Managed On Nursing And Midwives' Care Plan	58% (↑) 53% (↑) 52% (↑) 50% = 2018 50% = 2017	95.6% (↑) 57.65% (↑) 35.12% = 2019 -= 2018 -= 2017	60% (\psi) 100% (\frac{1}{1}) 85% = 2019 -= 2018 -= 2017	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	65%	No. of admissions with care plan/ Total admissions * 100
Surgery - Surgeon Ratio	= 2021 61:1(\downarrow) 81:1(\downarrow) 191:1(\uparrow) 149:1 = 2017	52:1(\downarrow) 67:1(\downarrow) 78:1(\downarrow) 267:1(\uparrow) 266:1 = 2017	220:1 (\uparrow) 150:1 (\downarrow) 220:1 (\downarrow) 172: (\uparrow) 127:1 = 2017	199:1 (†) 108:1 (\downarrow) 127:1 (\downarrow) 133:1 (\downarrow) 154:1 = 2017	208:1 (†) 121:1 (†) 73:1 (↓) 77:1 (↓) 131:1= 2017	250:1	Total no. of surgeries performed / total no. of Surgeons

Provide Surgical Services

TREND ANALYSIS OF TOTAL SURGERIES PERFORMED



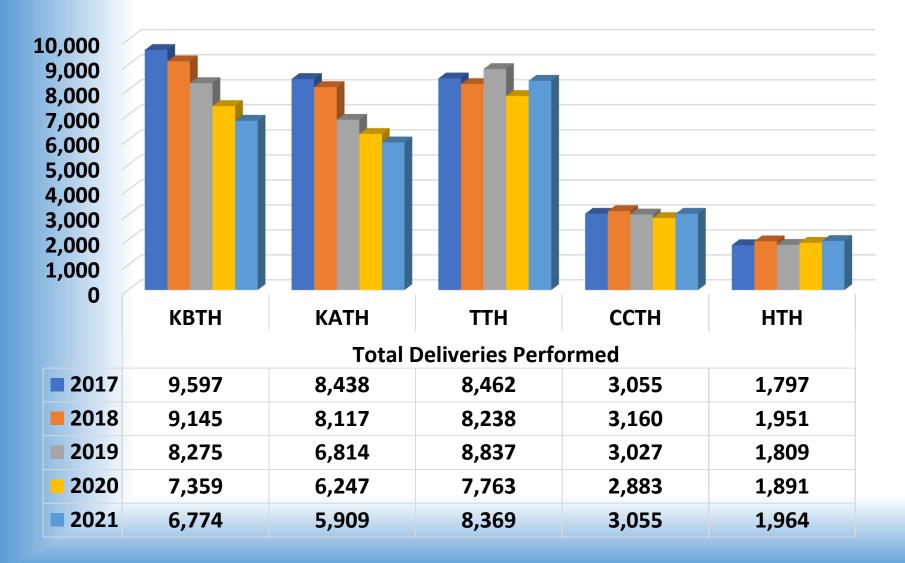


REMARKS:

- KBTH: $2021 = 19,541 (11.1\%\uparrow)$ $2020 = 16,586 (21.9\% \downarrow)$
 - KATH: $2021 = 16,955 (1.2\% \downarrow)$ $2020 = 17,162 (12.1\% \downarrow)$
 - TTH: $2021 = 4,616 (28\% \uparrow)$ $2020 = 3,606 (32\% \downarrow)$
- CCTH: $2021 = 5,961 (24\% \uparrow)$ $2020 = 4,815 (24\% \uparrow)$
- HTH: $2021 = 3,530 (46.4\% \uparrow)$ $2020 = 2,412 (38.7\% \uparrow)$

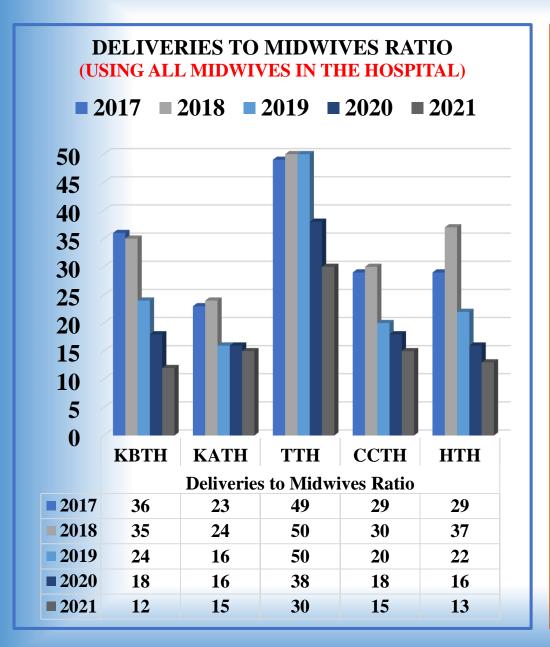
TOTAL DELIVERIES PERFORMED

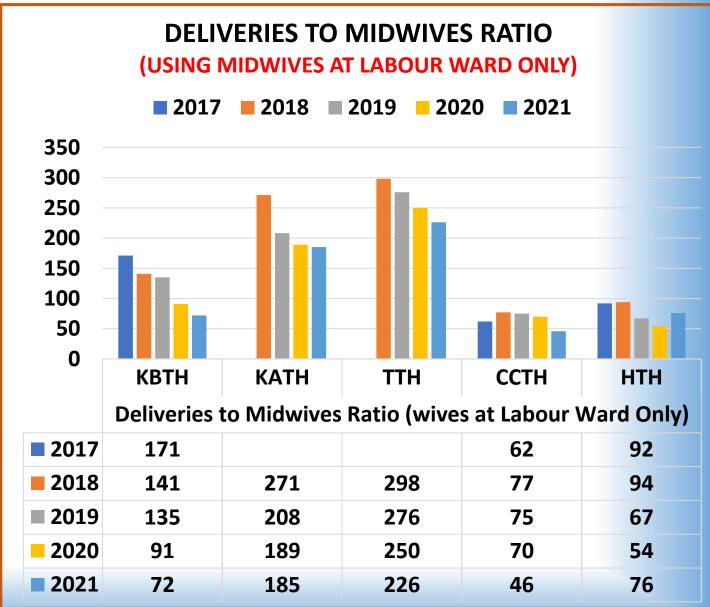




REMARKS:

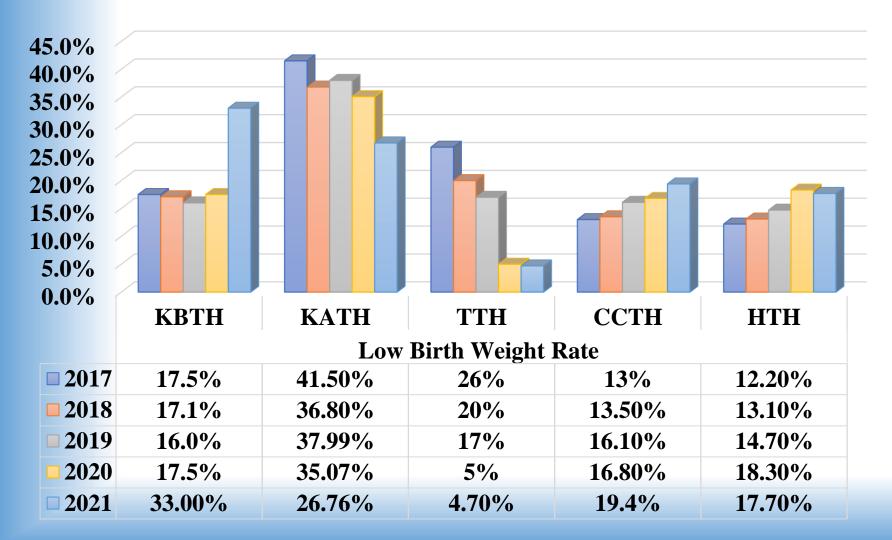
- KBTH: $2021 = 6,774 (7.9\% \downarrow)$
 - $2021 = 6,774 (7.9\% \downarrow)$ $2020 = 7,359 (11.1\% \downarrow)$
- KATH: 2021 = 5,909 (5.4%)2020 = 6,247 (8.3%)
- TTH: $2021 = 8,369 (7.8\% \uparrow)$ $2020 = 7,763 (12.2\% \downarrow)$
- CCTH: $2021 = 3,055 (6\% \uparrow)$ $2020 = 2,883 (4.8\% \downarrow)$
- HTH: $2021 = 1,964 (3.9\% \uparrow)$ $2020 = 1,891(4.5\% \uparrow)$





TREND ANALYSIS OF LOW BIRTH WEIGHT (<2.5kg) RATE THS Target = 12%

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 33.0\% (\uparrow)$$

 $2020 = 17.5\% (\uparrow)$

• KATH:

$$2021 = 26.76 (\downarrow)$$

 $2020 = 35.07(\downarrow)$

TTH:

$$2021 = 4.7\% (\downarrow)$$

 $2020 = 5\% (\downarrow)$

• CCTH:

$$2021 = 19.4\% (\uparrow)$$

 $2020 = 16.8\% (\uparrow)$

HTH:

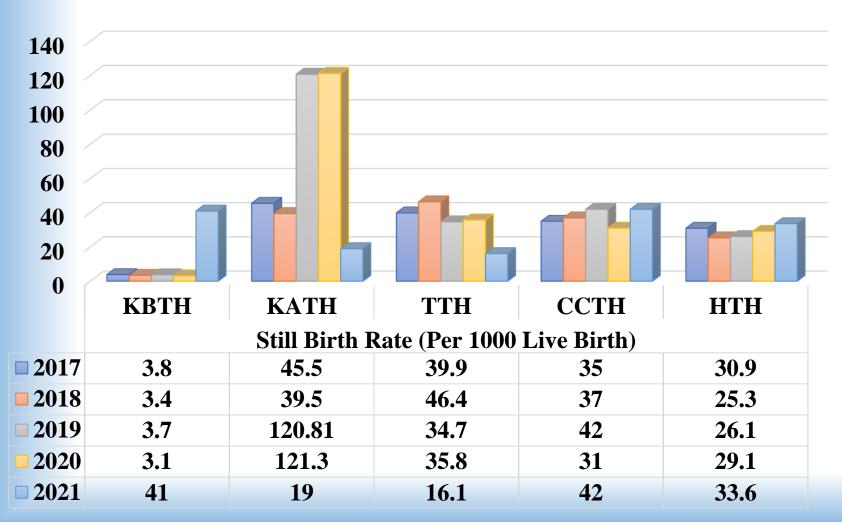
$$2021 = 17.7 (\downarrow)$$

 $2020 = 18.3(\uparrow)$

STILL BIRTH RATE (PER 1000 LIVE BIRTHS)

THs Target = 15/1000LB





REMARKS:

• KBTH:

$$2021 = 41 (\uparrow)$$

 $2020 = 31 (\downarrow)$

• KATH:

$$2021 = 19 (\downarrow)$$

 $2020 = 121.30 (\uparrow)$

• TTH:

2021 =16.1 (
$$\downarrow$$
)
2020 = 35.8 (\uparrow)

• CCTH:

$$2021 = 42 (\uparrow)$$

 $2020 = 31 (\downarrow)$

• HTH:

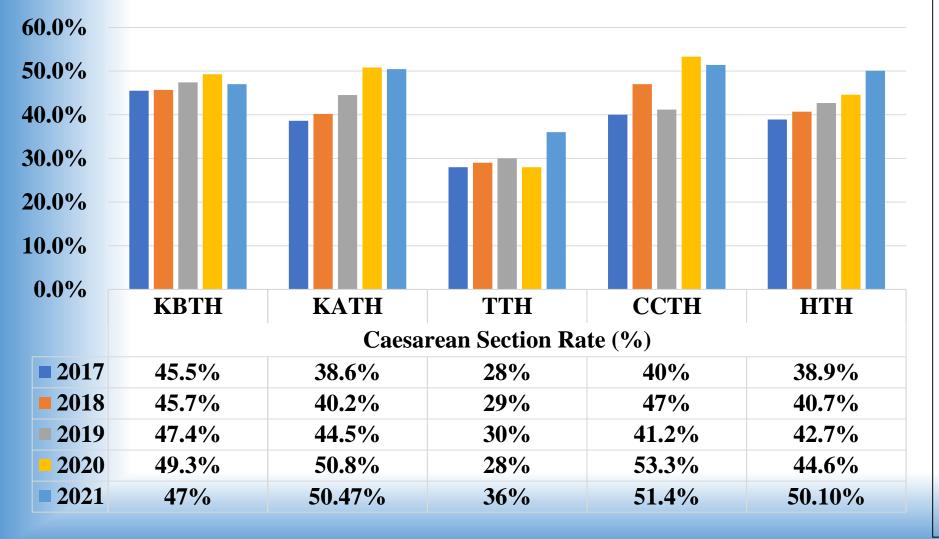
$$2021 = 33.6 (\uparrow)$$

 $2020 = 29.1 (\uparrow)$

CAESAREAN SECTION RATE (%)

THs Target = 40%





REMARKS:

• KBTH:

$$2021 = 47\% (\uparrow)$$

 $2020 = 49.3\% (\uparrow)$

• KATH:

$$2021 = 50.47\% (\downarrow)$$

 $2020 = 50.81\% (\uparrow)$

• TTH:

$$2021 = 36\% (\uparrow)$$

 $2020 = 28\% (\downarrow)$

• CCTH:

$$2021 = 51.4\% (\downarrow)$$

 $2020 = 53.3\% (\uparrow)$

• HTH:

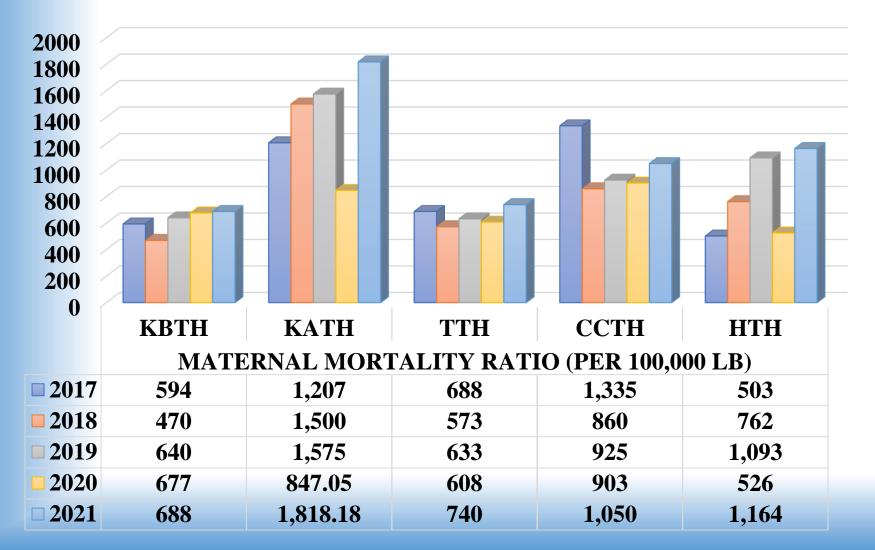
$$2021 = 50.1\% (\uparrow)$$

 $2020 = 44.6\% (\uparrow)$

MATERNAL MORTALITY RATIO (PER 100,000LB)

THs Target = 300/100,000LB

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 688 (\downarrow)$$

 $2020 = 677 (\uparrow)$

• KATH:

$$2021 = 1,818.18 (\uparrow)$$

 $2020 = 847.05 (\downarrow)$

• TTH:

$$2021 = 740 (\uparrow)$$

 $2020 = 608 (\downarrow)$

• CCTH:

$$2021 = 1,050 (\uparrow)$$

 $2020 = 903 (\downarrow)$

HTH:

$$2021 = 1,164 (\uparrow)$$

 $2020 = 526 (\downarrow)$

THS TOP FIVE CAUSES OF MATERNAL DEATH

KBTH	KATH	TTH	ССТН	HTH
Hypertensive diseases in pregnancy = 23 (52.3%)	Hypertensive diseases in pregnancy = 22 (21.2%)	Hypertensive diseases in pregnancy = 24 (42.1%)	Hypertensive diseases in pregnancy (Eclampsia) = 13 (40.6%)	Hypertensive diseases in pregnancy = 7 (30.4%)
Haemorrhage = 9 (20.55%)	Haemorrhage = 21 (20.2%)	Haemorrhage = 7 (12.3%)	Sickle Cell = 5 (15.6%)	Hemorrhage = 5 (21.7%)
Congestive Cardiac Failure = 2 (4.5%)	Sepsis = 11 (10.6%)	Sickle Cell Disease = 6 (11.5%)	Acute Kidney Injury = 5 (15.6%)	Sepsis = 3 (13.0%)
Sepsis = 1 (2.3%)	Acute Respiratory Distress Syndrome = 7 (6.7%)	Acute Kidney Injury = 3 (5.3%)	Anaemia in Pregnancy = 2 (6.25%)	Pulmonary Embolism = 3(13.0%)
Pulmonary Embolism = 1 (2.3%)	Pneumonia = 6 (6.2%	Genital Tract Sepsis = 2 (3.5%)	Pneumonia = 2 (6.25%)	Acute Kidney Injury = 3 (13.0%)

Provide Maternal Health Services BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

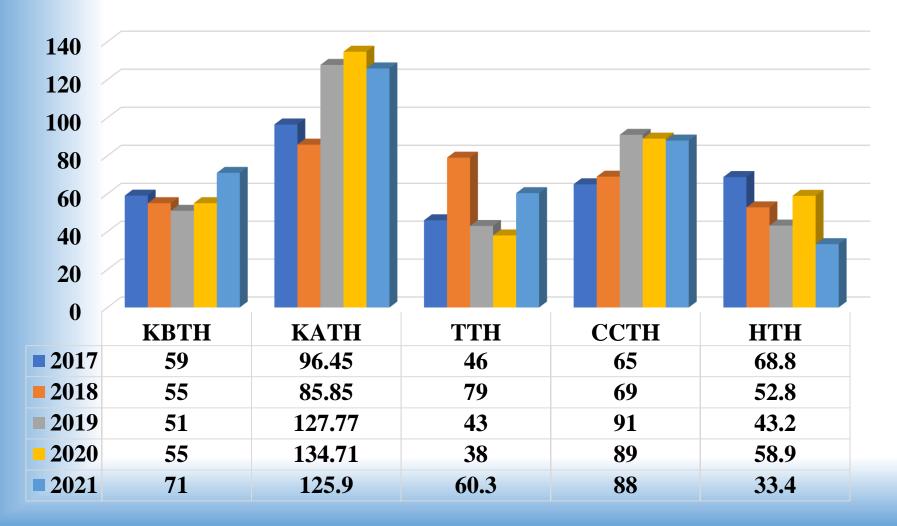
KEY	PERFORMANCE					THS	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	CCTH	HTH	TARGETS	
Couple Year Protection	9,688 (↓) 10, 993 (↓) 45,111 (↓) 45,432 (↑) 39,372 = 2017	6,064.71(\psi) 6,362.48 (\psi) 8,588.67 (\psi) 6,410.22 (\psi) 7,329.79 = 2017	1,229.74 (↓) 2,258.91 (↓) 6,409 (↑) 2,284 (↓) 2,371 = 2017	820.15 (↓) 1,891.2 (↑) 1,562.5 (↑) 1,521.6 (↑) 1,507 = 2017	1,835.9 (↑) 1,134.1(↓) 1,582.3 (↑) 1,531.8 (↑) 1,441.3= 2017	,	Total No. of Commodities dispensed / CYP factor

Provide Child Health Services

INSTITUTIONAL INFANT MORTALITY RATE

THs Target = 15/1000LB

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 71 (\uparrow)$$

 $2020 = 55 (\uparrow)$

• KATH:

$$2021 = 125.9 (\downarrow)$$

 $2020 = 134.71 (\uparrow)$

• TTH:

$$2021 = 60.3 (\uparrow)$$

 $2020 = 38 (\downarrow)$

• CCTH:

$$2021 = 88 (\downarrow)$$

 $2020 = 89 (\downarrow)$

• HTH:

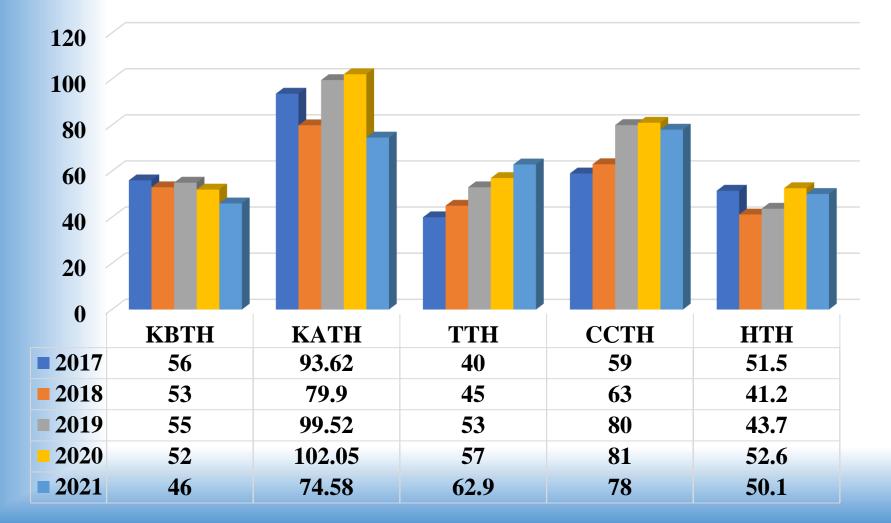
$$2021 = 33.4 (\downarrow)$$

 $2020 = 58.9 (\uparrow)$

Provide Child Health Services

INSTITUTIONAL NEONATAL MORTALITY RATE THs Target = 25/1000 LB

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 46 (\downarrow)$$

 $2020 = 52 (\downarrow)$

• KATH:

$$2021 = 74.58 (\downarrow)$$

 $2020 = 102.05 (\uparrow)$

TTH:

$$2021 = 62.9 (\uparrow)$$

 $2020 = 57 (\uparrow)$

• CCTH:

$$2021 = 78 (\downarrow)$$

 $2020 = 81 (\uparrow)$

HTH:

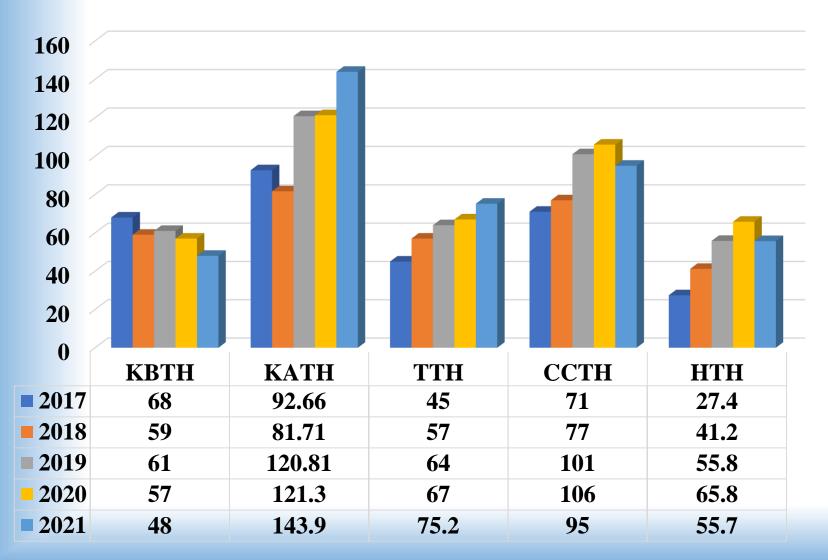
$$2021 = 50.1 (\downarrow)$$

 $2020 = 52.6 (\uparrow)$

Provide Child Health Services

INSTITUTIONAL UNDER-FIVE MORTALITY RATE





REMARKS:

• KBTH:

$$2021 = 48 (\downarrow)$$

 $2020 = 57 (\downarrow)$

• KATH:

$$2021 = 143.9 (\uparrow)$$

 $2020 = 121.30 (\uparrow)$

TTH:

$$2021 = 75.2 (\uparrow)$$

 $2020 = 67 (\uparrow)$

• CCTH:

$$2021 = 95 (\downarrow)$$

 $2020 = 106 (\uparrow)$

• HTH:

$$2021 = 55.7 (\downarrow)$$

 $2020 = 65.8 (\uparrow)$

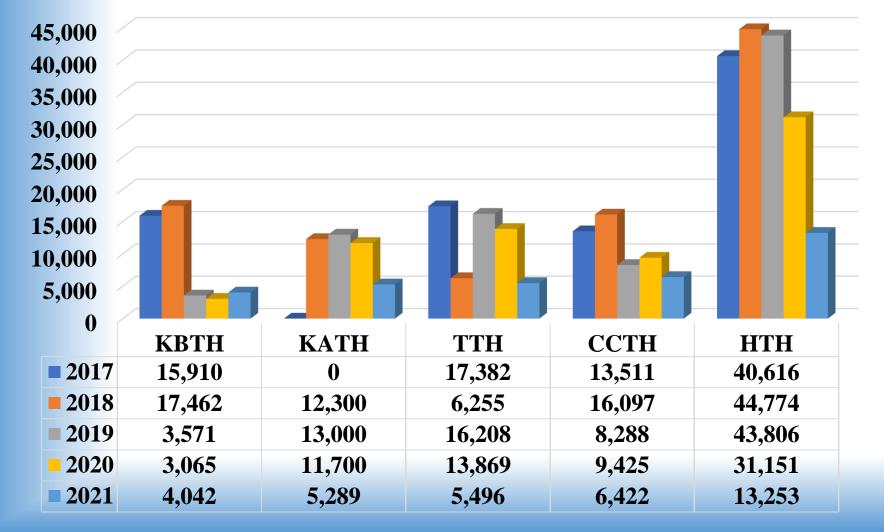
THS TOP FIVE CAUSES OF UNDER-FIVE CHILD DEATH

KBTH	KATH	TTH	CCTH	нтн
Preterm = 203 (37%)	Preterm = 205 (30.5%)	Preterm = 130 (17.8%)	Respiratory Distress Syndrome (RDS) = 70 (24.1%)	Respiratory Distress Syndrome = 53 (25%)
Birth Asphyxia = 186 (33.9%)	Birth Asphyxia = 137 (20.4%)	Birth Asphyxia = 105 (14.3%)	Birth Asphyxia = 60 (20.7%)	Preterm = 48 (23%)
Respiratory Failure = 33 (6.0%)	Respiratory Distress = 76 (11.3%)	Sepsis = 92 (12.6%)	Sepsis = 38 (13.1%)	Sepsis = 37 (17%)
Heart Disease = 24 (5.2%)	Pneumonia = 26 (8.4%)	Respiratory Distress Syndrome = 76 (10.4%)	Bilirubin-Induced Neurologic Dysfunction (BIND) = 22 (7.6%)	Hypoxic Ischaemic Encephalopathy = 30 (14%)
Others = 75 (4.3%)	Heart Diseases = 51 (7.6%)	Severe Acute Malnutrition = 43 (5.9%)	Respiratory Failure = 17 (5.9%)	Congenital Malformations = 14 (7%)

PRESCRIPTION TO PHARMACIST RATIO

THs Target = 12000:1





REMARKS:

• KBTH:

$$2021 = 1:4,042 (\uparrow)$$

 $2020 = 1:3,065(\downarrow)$

• KATH:

$$2021 = 1:5,289 (\downarrow)$$

 $2020 = 1:11,700 (\downarrow)$

• TTH:

$$2021 = 1:5,496 (\downarrow)$$

 $2020 = 1:13,869(\downarrow)$

• CCTH:

$$2021 = 1:6,422 (\downarrow)$$

 $2020 = 1:9,425:1 (\uparrow)$

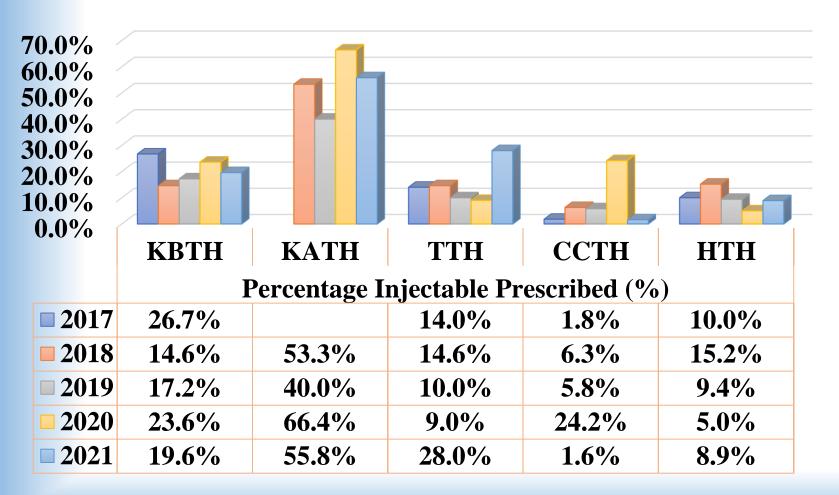
• HTH:

$$2021 = 1;13,253 (\downarrow)$$

 $2020 = 1:31,151(\downarrow)$

PERCENTAGE OF INJECTABLE PRESCRIBED THs Target = 10%

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 19.6\% (\downarrow)$$

 $2020 = 23.6\% (\uparrow)$

• KATH:

$$2021 = 55.8\% (\downarrow)$$

 $2020 = 66.4\% (\uparrow)$

• TTH:

$$2021 = 28.0\% (\uparrow)$$

 $2020 = 9\% (\downarrow)$

• CCTH:

$$2021 = 1.6\% (\downarrow)$$

 $2020 = 24.2\% (\uparrow)$

• HTH:

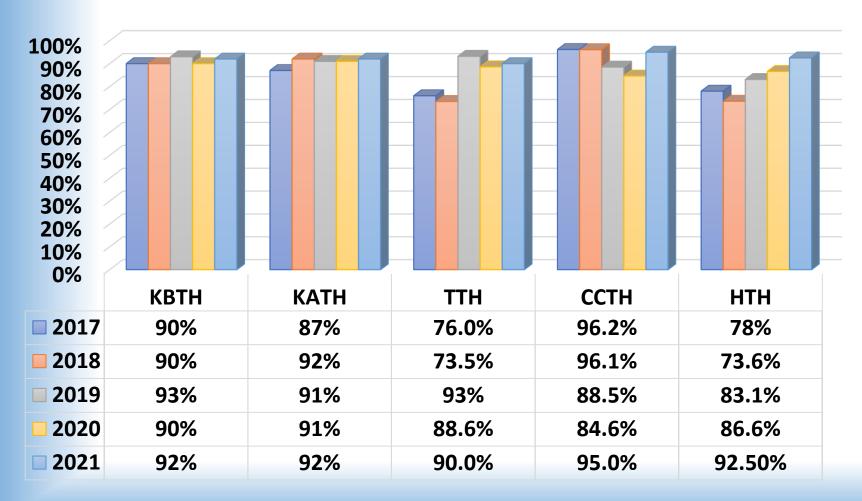
$$2021 = 8.9 (\uparrow)$$

 $2020 = 5\% (\downarrow)$

TRACER DRUG AVAILABILITY (%)

TH target = 90%

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 92\% (\uparrow)$$

 $2020 = 90\% (\downarrow)$

• KATH:

$$2021 = 92\% (\uparrow)$$

 $2020 = 91\%$

• TTH:

$$2021 = 90.0\%(\uparrow)$$

 $2020 = 88.6\%(\downarrow)$

• CCTH:

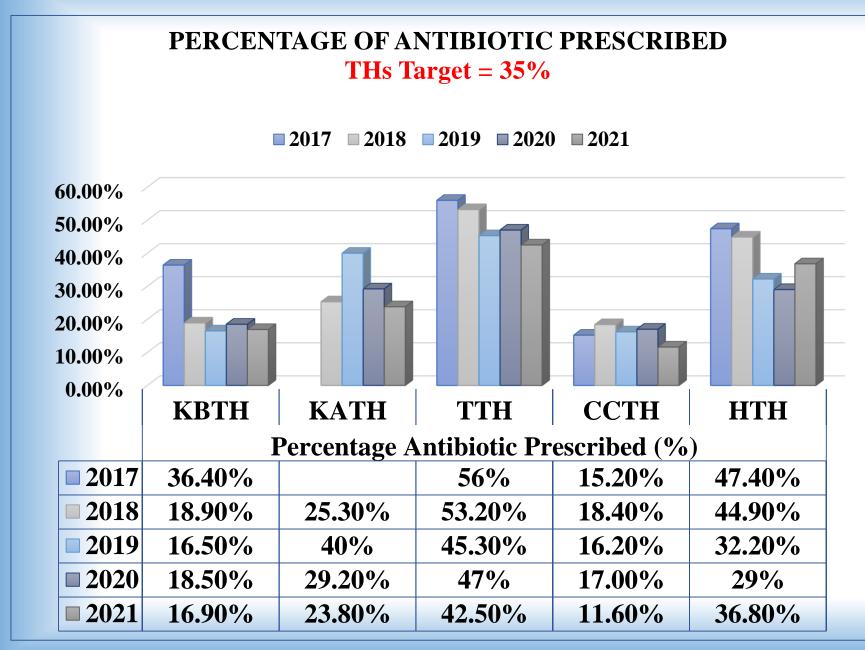
$$2021 = 95\% (\uparrow)$$

 $2020 = 84.62\% (\downarrow)$

• HTH:

$$2021 = 92.5\% (\uparrow)$$

 $2020 = 86.6\% (\uparrow)$



REMARKS:

• KBTH:

$$2021 = 16.9\% (\downarrow)$$

 $2020 = 18.5\% (\uparrow)$

• KATH:

$$2021 = 23.8\% (\downarrow)$$

 $2020 = 29.2\% (\downarrow)$

• TTH:

$$2021 = 42.5\% (\downarrow)$$

 $2020 = 47\% (\uparrow)$

• CCTH:

$$2021 = 11.6\% (\downarrow)$$

 $2020 = 17.\% (\uparrow)$

HTH:

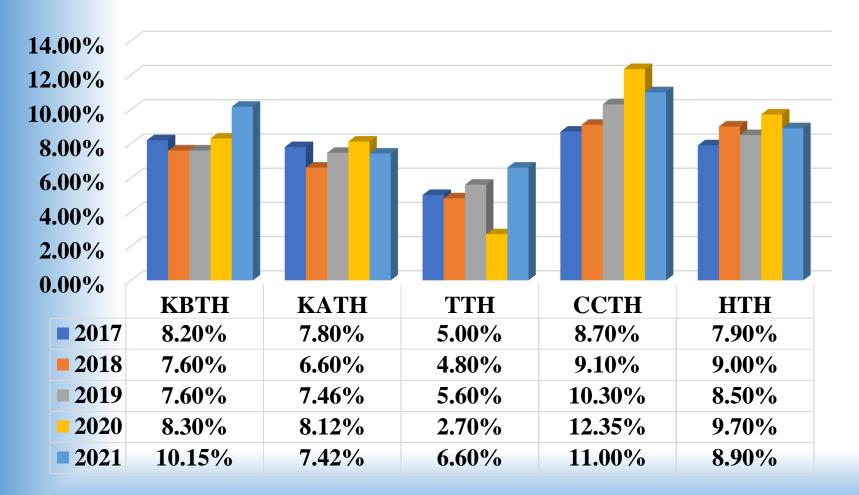
$$2021 = 36.8\% (\uparrow)$$

 $2020 = 29\% (\downarrow)$

Provide Pathological & Mortuary Services

INSTITUTIONAL ALL-CAUSE MORTALITY RATE THs Target = 5%

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 10.15\% (\uparrow)$$

 $2020 = 8.3\% (\uparrow)$

• KATH:

$$2021 = 7.42 (\downarrow)$$

 $2020 = 8.12\% (\uparrow)$

TTH:

$$2021 = 6.6\% (\uparrow)$$

 $2020 = 2.7\% (\downarrow)$

• CCTH:

$$2021 = 11.\% (\downarrow)$$

 $2020 = 12.35\% (\uparrow)$

HTH:

$$2021 = 8.9\% (\downarrow)$$

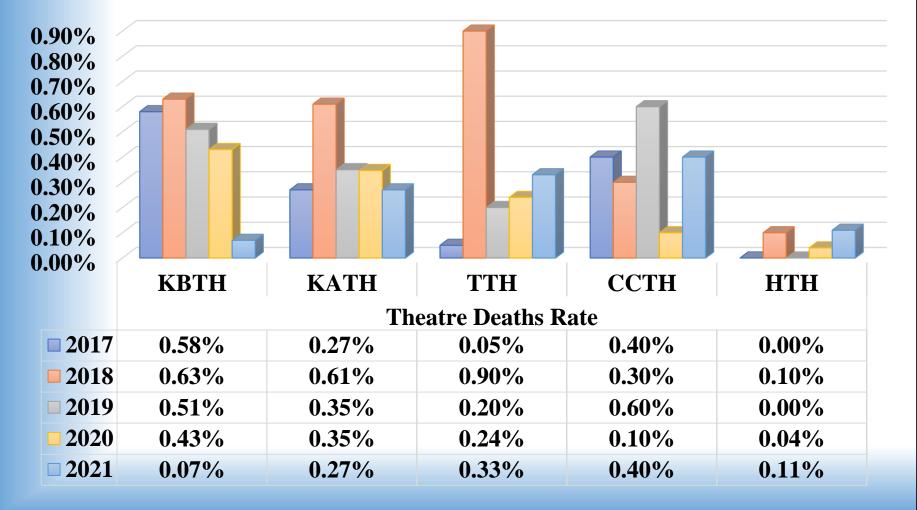
 $2020 = 9.7\% (\uparrow)$

Provide Pathological & Mortuary Services

THEATER DEATH RATE

THs Target = 0.5%

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 0.07\% (\downarrow)$$

 $2020 = 0.43\% (\downarrow)$

• KATH:

$$2021 = 0.27\% (\downarrow)$$

 $2020 = 0.347\% (\downarrow)$

• TTH:

$$2021 = 0.33\% (\uparrow)$$

 $2020 = 0.24\% (\uparrow)$

• CCTH:

$$2021 = 0.4\% (\uparrow)$$

 $2020 = 0.1\% (\downarrow)$

HTH:

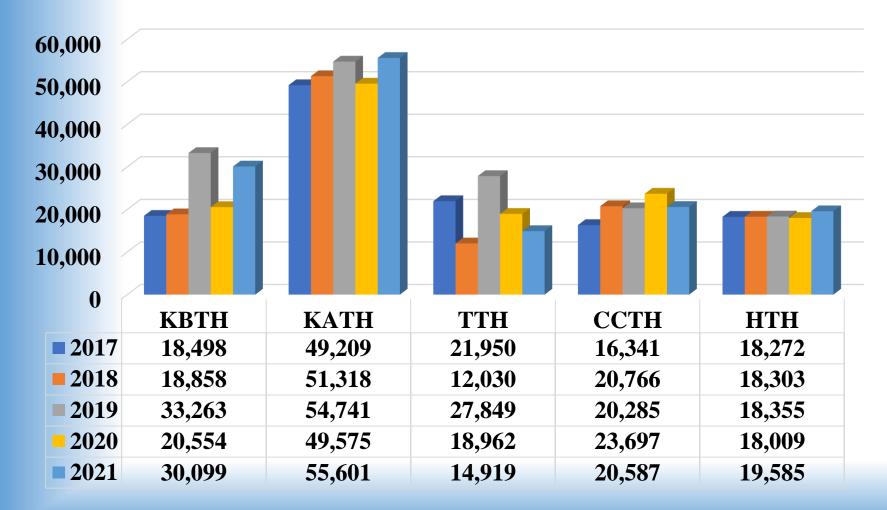
$$2021 = 0.11\% (\uparrow)$$

 $2020 = 0.04\% (\uparrow)$

Provide Diagnostics Services

TREND ANALYSIS OF TOTAL RADIOLOGY INVESTIGATIONS

2017 2018 2019 2020 2021



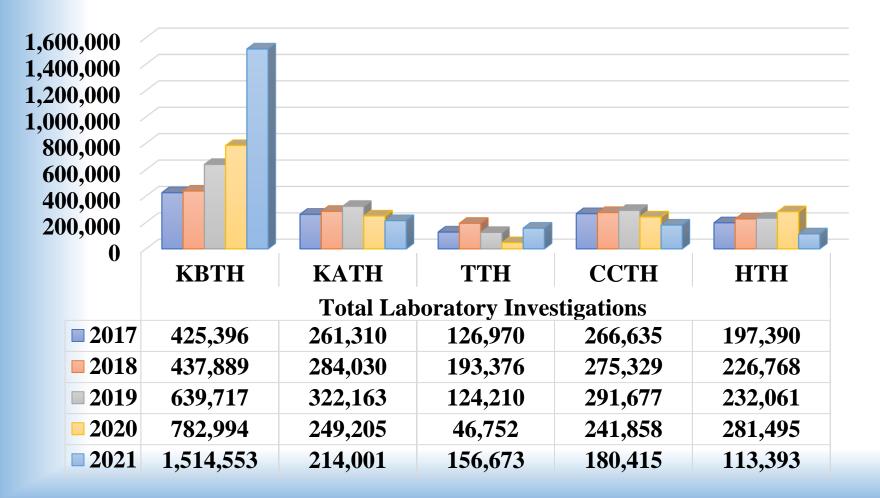
REMARKS:

- KBTH: $2021 = 30,099 (46.4\%\uparrow)$ $2020 = 20,554 (38.2\%\downarrow)$
 - KATH: $2021 = 55,601 (12.16 \uparrow)$ $2020 = 49,575 (9.4\% \downarrow)$
 - TTH: $2021 = 14,919 (21.3\% \downarrow)$ $2020 = 18,962 (32.5\% \downarrow)$
- CCTH: $2021 = 20,587 (13.1\% \downarrow)$ $2020 = 23,697 (16.8\% \uparrow)$
- HTH: $2021 = 19,585 (8.8\% \uparrow)$ $2020 = 18,009 (1.9\% \downarrow)$

Provide Diagnostics Services

TREND ANALYSIS OF TOTAL LABORATORY INVESTIGATION





REMARKS:

- KBTH: $2021 = 1,514,553 (93.4\%\uparrow)$ $2020 = 782,994 (22.4\%\uparrow)$
- KATH: $2021 = 214,001(14.13\% \downarrow)$ $2020 = 249,205(22.6\% \downarrow)$
- TTH: $2021 = 156,673 (235.1\% \uparrow)$ $2020 = 46,752 (62.4\% \downarrow)$
- CCTH: $2021 = 180,415 (25.4\% \downarrow)$ $2020 = 241,858 (17.1\% \downarrow)$
- HTH: $2021 = 113,393 (59.7\% \downarrow)$ $2020 = 281,495 (21.3\% \uparrow)$

Provide Diagnostics Services

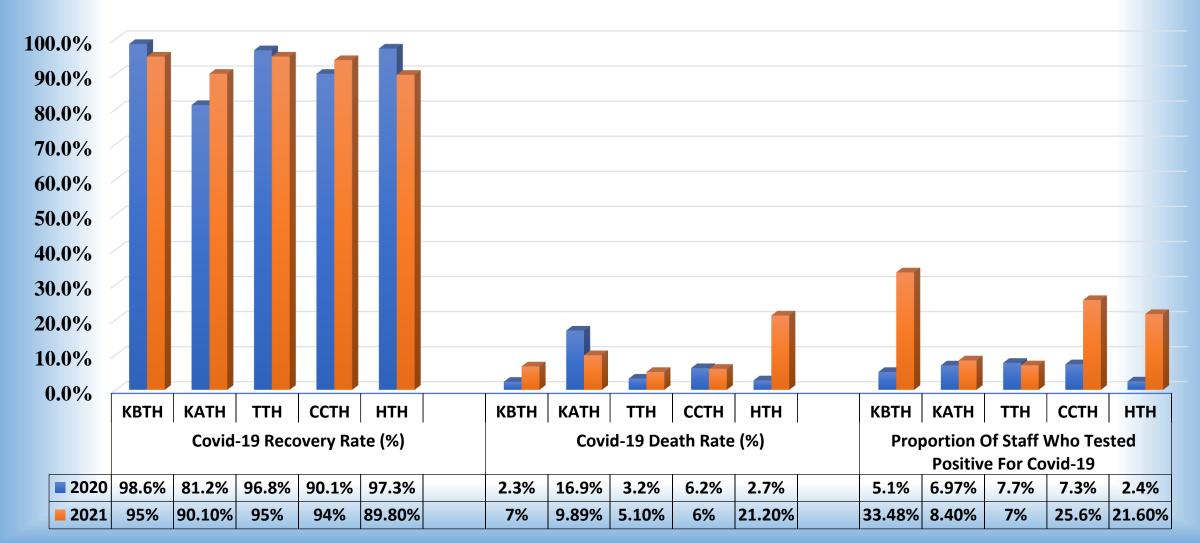
KEY INDICATO	PERFORMANCE						MEASUR EMENT
RS	KBTH	KATH	TTH	CCTH	HTH	S	
Utilization Radiological services	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	88.30% (↑) 77.7% (Aug-Dec) -= 2019 -= 2018 -= 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	87% (↓) 530.7% (↑) 86.9% (↑) 79.4% = 2018 -= 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017		Total Radiologica l Investigatio ns / Total Radio. request * 100
Utilization of Laboratory Services	= 2021 = 2020 = 2019 = 2018 = 2017	76% = 2021 - = 2020 - = 2019 - = 2018 - = 2017	= 2021 -= 2020 -= 2019 -= 2018 -= 2017	221.3% (\) 260.3% (\) 62.5% (\) 78% = 2018 -= 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017		Total Laboratory Investigatio ns / Total Radio. request * 100

COVID-19 Pandemic Response By THs

COVID-19 Response By THs

OUTCOME OF COVID-19 CASES MANAGED BY THS

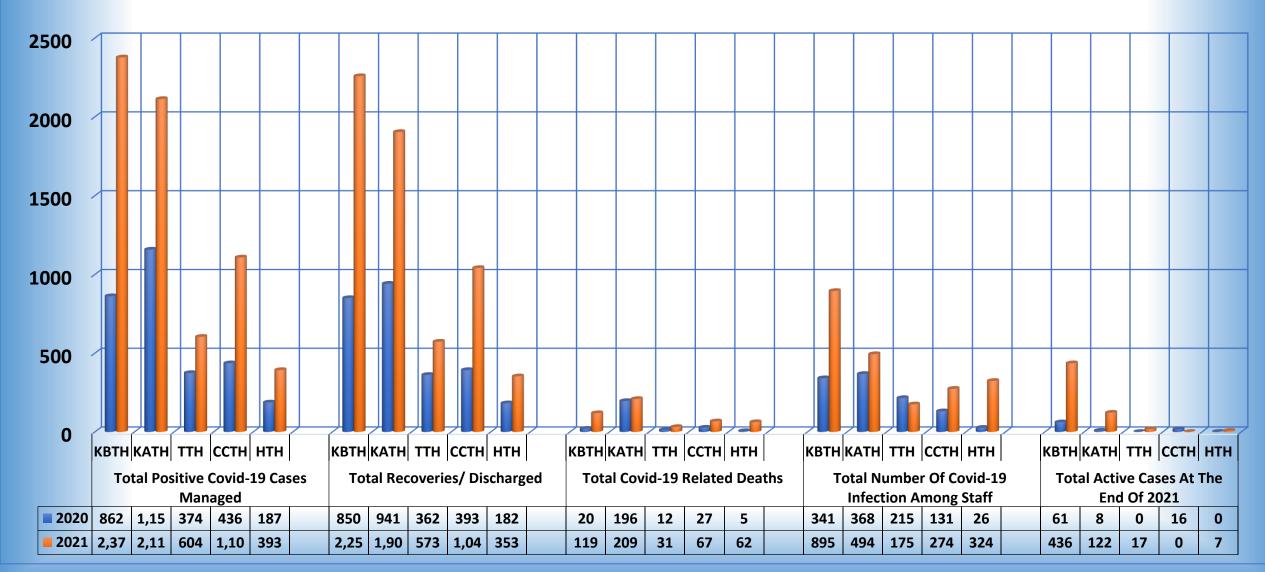
2020 2021



COVID-19 Response By THs in 2021

TOTAL NUMBER OF COVID-19 CASES MANAGED BY THS

2020 2021



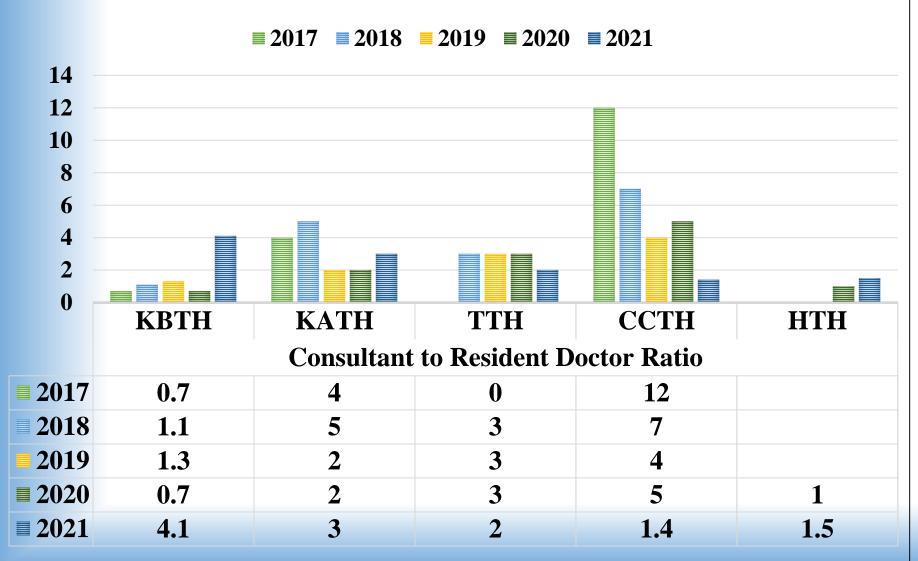
THs Mandate 2: TRAINING

THs Mandate 2: Training

THs	KEYACHIEVEMENT
KBTH	> 388 Residents undergoing residency programmes
	> 85% total pass rate for Residents in postgraduate training was recorded
KATH	 66% of fellowship applications approved for fellowship. 235 Residents undergoing residency programmes 136 Staff Enrolled In Postgraduate Colleges Have Accreditation for various residency training programmes
TTH	 11 Residents undergoing residency programmes MoUs signed with Key Training Institutions 89 Staff Enrolled In Postgraduate Colleges
ССТН	 38 Residents undergoing residency programmes 91% Pass Rate for Residents in postgraduate training was recorded Group Accreditation for Family Medicine (Cluster of Hospitals), Received Accreditation in Radiology & Paedics 38 Staff Enrolled in Postgraduate Colleges
HTH	 9 Residents undergoing residency programmes Obtained accreditation for Residency training for OBGY and initiated the Process for Internal Medicine

Provide Staff Development & Training & Staff Welfare Support

CONSULTANT TO RESIDENT DOCTOR RATIO TH TARGET = 1:3



REMARKS:

• KBTH:

$$2021 = 1:4.1 (\uparrow)$$

 $2020 = 1:0.7 (\downarrow)$

• KATH:

$$2021 = 1:3 (\uparrow)$$

 $2020 = 1:2$

• TTH:

$$2021 = 1:2 (\downarrow)$$

 $2020 = 1:3$

• CCTH:

$$2021 = 1:1.4 (\downarrow)$$

 $2020 = 1:5 (\uparrow)$

• HTH:

$$2021 = 1:1.5 (\uparrow)$$

 $2020 = 1:1$

Support Teaching And Training Of Health Professionals

KEY INDICATOR	PERFORMANCE						MEASUREMEN T
S	KBTH	KATH	TTH	CCTH	HTH	TARGET S	
Residents pass rate	85% (\) 95% (\) 91% (\) 80.2% (\) 79.3% = 2017	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	94% = 2021 - = 2020 - = 2019 93% = 2018 - = 2017	91% = 2021 - = 2020 100% (†) 90% = 2018 - = 2017	N/A = 2021 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
Number of Staff Enrolled In Postgraduat e Colleges	10 001	$136 (68\%\uparrow)$ $81(70\%\uparrow)$ $30 (70.3\%\downarrow)$ $101 = 2018$ $- = 2017$	89 (178.1% ↑) 32 (54.3%↓) 70 (27.8%↓) 97 = 2018 -= 2017	$38 (65.2\% \uparrow)$ $23 (52\% \downarrow)$ $48 (9.4\% \downarrow)$ $53 = 2018$ $- = 2017$	31 (47.7% ↑) 21= 2020 N/A= 2019 N/A= 2018 N/A= 2017	-	nursing students)

THS MANDATE 3: UNDERTAKE RESEARCH

UNDERTAKE RESEARCH

THs	KEYACHIEVEMENT
KBTH	> Introduction of Research Grant, Two teams awarded
KATH	 Research capacity among improved Increased number of published research. Organized research ethics workshop for staff of the hospital. Revised KATH R&D registration IRB application fees resulting increase revenue.
TTH	> Re-constituted the Institutional Ethical Review Board
CCTH	 89.6% of research applications received were approved by the Institutional Ethical Review Board Research capacity and activity among staff improved Trained Midwifery Staff on Research to improve capacity
HTH	➤ Constituted Institutional Ethical Review Board

Support Teaching And Training Of Health Professionals

KEY INDICATORS		PER	CE		THs TARGETS	MEASUREM T	IEN	
INDICATORS	KBTH	KATH	TTH	CCTH	HTH	micelia		
	Uno	dertake Rese	earch Activ	ities				
Operational research	$26 (13.3\% \downarrow)$ $30(45.5\%)$ $55 (5.8\%\uparrow)$ $52(10.6\%)$ $47 = 2017$	7 (53.3% \downarrow) 15 (150% \uparrow) 6 (20% \uparrow) 5 (25% \uparrow) 4 = 2017	$2 = 2021$ $2 (77.8\% \downarrow)$ $9 (350\% \uparrow)$ $2 (33.3\% \downarrow)$ $3 = 2017$	14 (600% \downarrow) 2 (66.7% \downarrow) 6 (100% \uparrow) 3 (50% \uparrow) 2 = 2017	5 = 2021 2= 2020 N/A= 2019 N/A= 2018 N/A= 2017	4	Number of operational research carried out/operational research planned for period	
Number of Research	42 (133.3% ↑) 18 (37.9%↓) 29 (7.4%↑)	140 (14.8%↑) 122 (713%↑) 15 (16.7%↓)	26 (53% ↑) 17 (6.3%↑) 16 (46.7%↓)	12 (20% ↓) 15 (50%↑) 10 (9.1%↓)	7 = 2021 0 (↓) 2 (↑)	20		
published	$27 (15.6\% \downarrow) 32 = 2017$	$ \begin{array}{c} 13 (10.7 / 6 \downarrow) \\ 18 (18.2 \% \downarrow) \\ 22 = 2017 \end{array} $	$30 = 2018 \\ - = 2017$	$ \begin{array}{c} 10 & (9.176\downarrow) \\ 11 = 2018 \\ - = 2017 \end{array} $	0= 2018 0= 2017			

KEY ACHIEVEMENTS - Governance

KEY ACTIVITY ACHIEVEMENTS IN 2021 - KBTH

- Continue to Strengthen Capacity of the Leadership In Governance And Management to support Quality and Safe Health Care Delivery
- Commencement of Construction Works of New Maternity Block
- Institutionalized Peer Review system in the Hospital

KEY ACTIVITY ACHIEVEMENTS IN 2021 - KATH

☐ Institution of special audit and re-organization of KATH's pharmaceutical services resulting in improved drug availability and good financial outcomes Implementation of paperless "Electronic Medical Record System (EMRS) project of the MOH KATH being the first Teaching Hospital to be accredited by HeFRA with the highest score to date ☐ Re-Introduction of the long service and Best staff Awards Adoption of KATH Staff Retiree Policy Renovation of KATH Guest House Mechanized embalming machine procured for mortuary Reconstruction and asphalting of hospital's roads and car park Establishment Secured an MOU and Funding for the construction of Cleft Care Centre

KEY ACTIVITY ACHIEVEMENTS IN 2021 - TTH

□ 4th Governing Board and Relevant Board Committees Reconstituted & Inaugurated ☐ Reconstitution of the Quality Management Team with the inclusion of a community representative ■ Inauguration of the House Committee ☐ Draft Occupational Health & Safety Policy developed Draft Staff Healthcare Policy Developed ☐ Draft Code of Conduct & Disciplinary Procedures developed ■ Enhanced partnerships with AMPATH/KOIC/US-CDC for support in the areas of service delivery, training and research

KEY ACTIVITY ACHIEVEMENTS IN 2021 – TTH – CONT.

□ Signed agreement for the placement of Radiology & Laboratory equipment □ Collaborations ongoing with the Academic Model for The Provision of Access To Healthcare (AMPATH) in the areas of training, research and health service delivery ☐ Free gynaecological surgeries conducted for 99 patients under the Czech Republic **MEDEVAC-TTH** partnership ☐ Local Lightwave e-Health Information Management System (LHIMS) Committee activities on-going to monitor and optimise the utilisation of LHIMS. □ 155 permanent staff appointed ,138 temporary staff (IGF staff) also recruited Consultative meeting held with staff and other key stakeholders on the provision of a Provident Fund for Staff

KEY ACTIVITY ACHIEVEMENTS IN 2021 – TTH – CONT.

□ 155 permanent staff appointed ,138 temporary staff (IGF staff) also recruited A total of 478 staff were fully mechanized in 2021 Consultative meeting held with staff and other key stakeholders on the provision of a Provident Fund for Staff

KEY ACTIVITY ACHIEVEMENTS IN 2021 - CCTH

- Developed a comprehensive Human-Plan to improve HR base with the support of stakeholders.
- Awards received for the acquisition of 2 Pickups for the Hospital (but still inadequate).
- Organised training workshop on "Leadership and Management" for Senior Managers in the Hospital.
- Received the various key medical equipment from six (6) organizations namely; NMIMR, GHS/USAID, Africa Health Supply, CMS/MOH, Roche Ltd and Sismex Company
- Upgraded the hospital's wireless network connectivity to improve access

- Secured funding from USAID-ASHA & Himalayan Cataract Project (USA NGO) for the construction of a new Eye Centre
- Pharmaceutical Ware house constructed and operationalized
- Cold Room constructed for the storage of cold chain medications
- Construction of an infectious disease centre on-going (Building at about 75% completion stage)
- Construction work commenced for the expansion of the existing Accident and Emergency Centre
- Three Boreholes drilled at the hospital's staff residence to ensure continuous water supply
- CCTH-Roche collaboration in Oncology Services launched - governance

KEY ACTIVITY ACHIEVEMENTS IN 2021 - CCTH

- Strategic partnership unit created
- ❖ PCR machine installation near completion
- ❖ Installation of 3 new dental chairs completed,

KEY ACTIVITY ACHIEVEMENTS IN 2021 - CCTH

Institutional Policies developed & Approved

- 1. Policy on performance related allowance (PRA) & Service Improvement Levy (SIL)
- 2. Guidelines on Petty Cash and other Minor funds Request
- 3. Transfusion medicine policy
- 4. Covid-19 guidelines and strategy
- 5. Sick Staff Policy
- 6. Promotion
- 7. Internal audit charter
- 8. Donation Policy

 On Internal Management P
- 9. Internal Management Policy on sub-BMC and units10. Staff Accommodation Policy
- 11. Correspondence Management
- 12. Feeding Incentive Policy
- 13. Dress code policy14. OPD triaging Policy

- Policies Drafted;1. Institutional Research
 - Policy
 2. Policy on quality assurance
 - VVIP Services Policy
 - 4. Transport Policy

5. Institutional Policy

- Guideline on Asset Management
- 6. Institutional ICT Policy

7. Data Backup Policy was

- 80%8. Institutional Monitoring and
- Evaluation Policy
- 9. Risk Management Policy and Charter
- 10. Policy on job planning for doctors adopted

KEY ACTIVITY ACHIEVEMENTS IN 2021 - HTH

- Organized a Board and Management Retreat to refresh the Hospital's Strategic Plan –
 Sponsored by the WHO
- Sponsored some Sub-BMC Management members to GIMPA for HAM Programme
- Moved 99.6% IGF (Temporary/ Casual) staff successfully onto government payroll.
- All newly recruited staff received their salary within three (3) months and those promoted received their new salary within one (1) month.

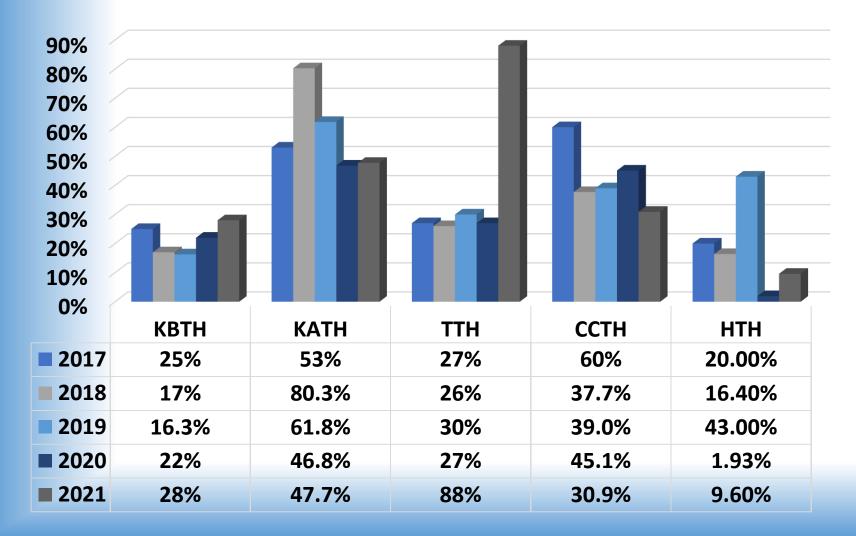
KEY OUTPUTS ACHIEVEMENTS

Provide Staff Development & Training & Staff Welfare Support

PROPORTION OF STAFF APPRAISED

THs Target = 100%

■ 2017 **■** 2018 **■** 2019 **■** 2020 **■** 2021



REMARKS:

• KBTH:

$$2021 = 28\% (\uparrow)$$

 $2020 = 22\% (\uparrow)$

• KATH:

$$2021 = 47.73 (\uparrow)$$

 $2020 = 46.8\% (\downarrow)$

• TTH:

$$2021 = 5\% (\downarrow)$$

 $2020 = 27\% (\downarrow)$

• CCTH:

$$2021 = 30.9\% (\downarrow)$$

 $2020 = 45.1\% (\uparrow)$

• HTH:

$$2021 = 9.6\% (\uparrow)$$

 $2020 = 1.93\% (\downarrow)$

Recommendation:

Provide Technical Services and Logistical Support Services

KEY INDICATORS	PERFORMANCE			PERFORMANCE		THs TARGETS	MEASUREMEN T
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	IARGEIS	
Equipment down time Proxy:	7% (↓) 8.3% (↑) 5% (↓) 12% (↑) 10% = 2017	8.2% (\) 11.9% (\) 10.55% (\) 33.5% (\) 26.8% = 2017	61.6% (\) 73.3%= 2020 -= 2019 29% = 2018 -= 2017	82.5% = 2021 0% = 2020 0% (\frac{1}{2}) 7.69% (\frac{1}{2}) 1.92% = 2017	N/A = 2021 N/A = 2020 N/A = 2019 N/A = 2018 N/A = 2017	5%	Average downtime/Total productive hours Total productive hours (12 per day) *100
PPM output achieved	60% (†) 40% (↓) 90% (†) 60% (↓) 80%= 2017	89.7% (↑) 86.8% 86.8% (↑) 75% (↑) 68.5% = 2017	= 2021 92% (†) 87% (↓) 90% (†) 85.5%= 2017	61.7% (\(\)) 75% (\(\)) 80% (\(\)) 62% (\(\)) 60% = 2017	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	80%	PPM executed / PPM *100
Equipment Utilisation Proxy: CT SCAN	92% (\) 98% (\) 85% (\) 70% (\) 98% = 2017	91.8% (↑) 88.5% (↓) 88.7% (↑) 69.5% (↑) 64.45% = 2017	38.4% (↑) 28% (↑) 15% (↓) 67% (↓) 80% = 2017	21.4% (\) 98.7% (\) 83.1% (\) 74.2% (\) 34.8% = 2017	N/A = 2021 N/A = 2020 N/A = 2019 N/A = 2018 N/A = 2017	90%	operation hour*100/avai lable hours

Undertake Financial Audit and Administrative Activities

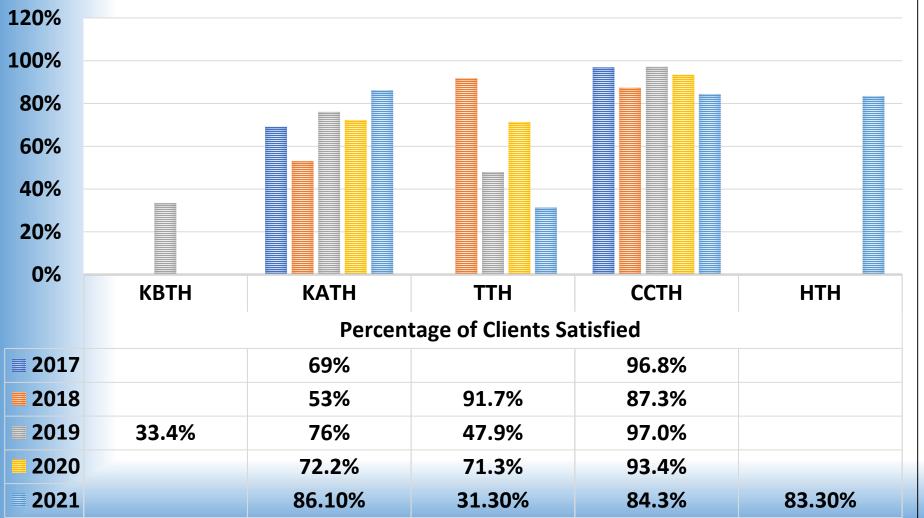
KEY INDICATORS	PERFORMANCE				THs TARGETS	MEASUREMEN T	
Indications	KBTH	KATH	TTH	CCTH	НТН	micelia	
Proportion Audit recommendation	N/A = 2021 $N/A = 2020$ $N/A = 2019$ $100% = 2018$	100%= 2021 100%= 2020 100%= 2019 100% = 2018	100% = 2021 100% = 2020 100% = 2019 100% = 2018	100% = 2021 100% = 2020 100% = 2019 100% = 2018	100% = 2021 $100% = 2020$ $100% = 2019$ $100% = 2018$	100%	Total audit recommendatio ns implemented / Total Audit
s implemented	100% = 2017	100% = 2017	100% = 2017	100%= 2017	100% = 2017		Recommendations
Number of ARIC Meetings (Audit Committee meetings)	4 = 2021 $5 = 2020$ $- = 2019$ $- = 2018$ $- = 2017$	9 (↑) 8 (↓) 10 (↑) 8 = 2018 = 2017	4 (†) 2 = 2020 2 = 2019 N/A = 2018 N/A = 2017	$4 = 2021$ $4 (\downarrow)$ $5 (\uparrow)$ $4 = 2018$ $- = 2017$	4 = 2021 $4 = 2020$ $4 = 2019$ $4 = 2018$ $4 = 2017$	4	Total Meetings Organized / Total meetings planned
Number of Board Meetings	3 (↓) 14 (↑) 13 (↑) 8 (↑) 0 = 2017	12 (↑) 11 (↓) 12 (↓) 13 = 2018 -= 2017	1 (\psi) 3 (\psi) 6 = 2019 N/A - = 2018 N/A = 2017	1 (↓) 4 (↓) 5 (↓) 6 (↑) 1 = 2017	2 = 2021 1 = 2020 N/A = 2019 N/A = 2018 N/A = 2017	-	Total Board Meetings organized / Total Board Meetings Planned

OCCUPATIONAL HEALTH AND SAFETY & & QUALITY ASSURANCE

Provide OHS/ QA Services Cont.

PERCENTAGE OF CLIENTS SATISFIED WITH SERVICES THs Target = 95%





REMARKS:

• KBTH:

$$2021 = 2020 = -$$

• KATH:

$$2021 = 86.1\% (\uparrow)$$

 $2020 = 72.2\% (\downarrow)$

• TTH:

$$2021 = 31.30\% (\downarrow)$$

 $2020 = 71.3\% (\uparrow)$

• CCTH:

$$2021 = 84.3\% (\downarrow)$$

 $2020 = 93.4\% (\downarrow)$

• HTH:

$$2021 = 83.3\%$$
 $2020 = -$

Recommendation:

Provide OHS/ QA Services

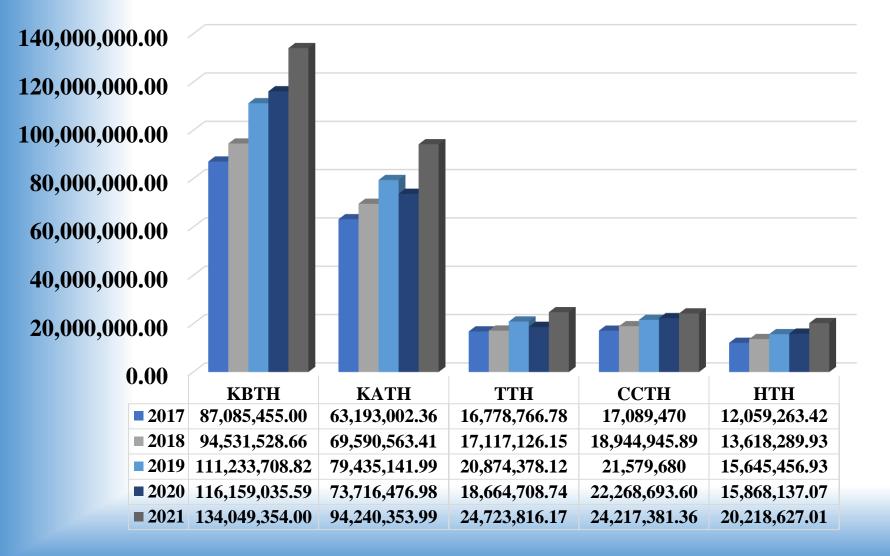
KEY INDICATORS	PERFORMANCE			THs TARGETS	MEASUREMEN T		
	KBTH	KATH	TTH	ССТН	HTH	minders	
Work place related injuries resulting in death or incapacitation	-= 2021 -= 2020 -= 2019 0 = 2018 1= 2017	0%= 2021 0%= 2020 0%= 2019 0%= 2018 -= 2017	0 = 2021 $0 = 2020$ $0 = 2019$ $0 = 2018$ $0 = 2017$	0% = 2021 0% = 2020 0% = 2019 0% = 2018 0% = 2017	0% = 2021 0% = 2020 0% = 2019 0% = 2018 0% = 2017	1%	Total work place injuries resulting in deaths or incapacitation / total injuries
Percentage of Staff satisfied	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	75.8% $- = 2020$ $39.7\% (\downarrow)$ $54\% (\downarrow)$ $55\% = 2017$	= 2021 48.9% = 2020 -= 2019 33.3% (\bigcup) 50.4% = 2017	$-= 2021$ $46.5\% (\downarrow)$ $62.5\% (\uparrow)$ $36.5\% (\downarrow)$ $55.9\% = 2017$	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	70%	Total no. of workers surveyed who are satisfied with work / total no. of workers surveyed * 100
Total no. of workers reported with needle prick		$75 (1.4\%\uparrow)$ $23 (32.4\%\downarrow)$ $34 (51.4\%\downarrow)$ $70 = 2018$ $- = 2017$	$17 (32 \downarrow)$ $25 (26.5\% \downarrow)$ $34 (61.9\% \uparrow)$ $21 = 2018$ $- = 2017$	23 (91.7% \uparrow) 12 (\uparrow) 1 (80% \downarrow) 5 (37.5% \downarrow) 8 = 2017	39 (200↑) 13 (160%↑) 5 (25% ↑) 4 = 2018 - = 2017	-	

FINANCIAL PERFORMANCE

Revenue Mobilization & Financial Monitoring Support Services

ANALYSIS OF IGF REVENUE (GHC)

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 15\% (\uparrow)$$

 $2020 = 4.4\%\uparrow$

• KATH:

$$2021 = 27.84\% \uparrow$$

 $2020 = 7.2\% \downarrow$

• TTH:

$$2021 = 32.5\% \uparrow$$

 $2020 = 10.6\% \downarrow$

• CCTH:

$$2021 = 8.8\% \uparrow$$

 $2020 = 3.2\% \uparrow$

• HTH:

$$2021 = 27.4\% \uparrow$$

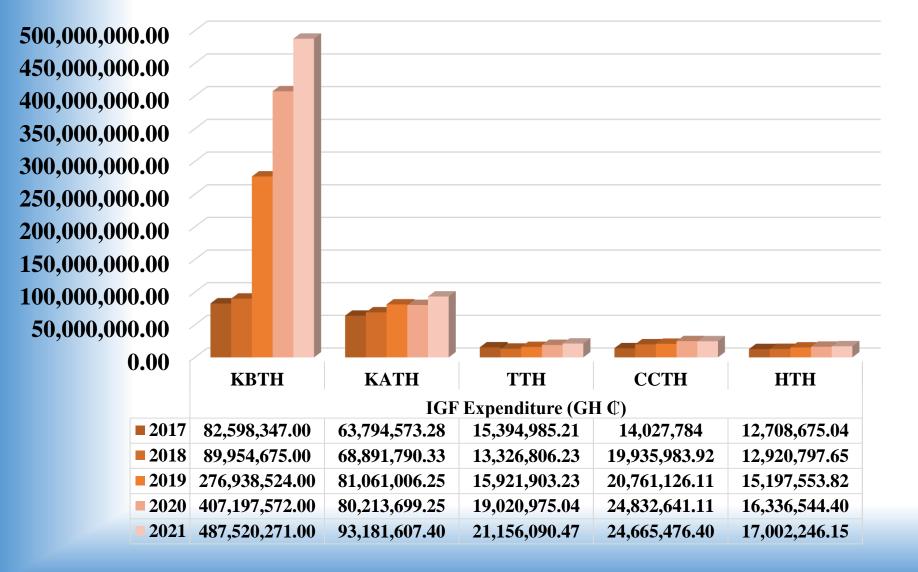
 $2020 = 1.4\% \uparrow$

Recommendation:

Revenue Mobilization & Financial Monitoring Support Services

ANALYSIS OF IGF EXPENDITURE (GHC)

2017 2018 2019 2020 2021



REMARKS:

• KBTH:

$$2021 = 23\% \uparrow$$

 $2020 = 47\% \uparrow$

• KATH:

$$2021 = 16.17\% \uparrow$$

 $2020 = 1.05\% \downarrow$

TTH:

$$2021 = 11.2\% \uparrow$$

 $2020 = 19.46\% \uparrow$

• CCTH:

$$2021 = 0.7\% \downarrow$$

 $2020 = 19.6\% \uparrow$

• HTH:

$$2021 = 2.4\% \uparrow$$

 $2020 = 7.5\% \uparrow$

Recommendation:

Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMEN T
	KBTH	KATH	TTH	CCTH	НТН	IAKGEIS	
NHIS Claims	96% (†)	44.14% (↓)	52.6% (↓)	52.1% (↑)	41.18% (↓)	75%	Total insurance
Reimbursement	51% (†)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (†)		claims
Rate (submitted	47 % (↓)	18.42% (↓)	33 % (↓)	21.89% (†)	23.62% (↓)		reimbursed/total
	96.28% (↑)	28.20% (↓)	34% (↓)	20.88% (↓)	29.41% (\()		insurance claims
claims paid	96.08% = 2017	41.10% = 2017	68% = 2017	58.68% = 2017	51.23% = 2017		submitted
No Of Month	6 = 2021	7= 2021	6 (↑)	6 = 2021	7 (↑)		
Outstanding	6 (\psi)	5 (\psi)	5 (\psi)	$6 (\downarrow) = 2020$	4 (↓)		
Outstanding	9	9 (†)	8 (↑)	8	8		
	9 (†)	6 (9)	6	8 (↑)	8 (↑)		
	8 = 2017	6 = 2017	6 = 2017	6 = 2017	4 = 2017		
Proportion of	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (\1)	5%	total amount spend
IGF revenue	7.2% (↓)	6.87% (↑)	5.45% (†)	3.51% (↓)	1.49% (†)		on PPM/total IGF
spent on PPM	10.2% (†)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
	5.9% (†)	4% (↓)	4% (†)	3.52% (↓)	1.32% (†)		
	3.1% = 2017	4.61% = 2017	3% = 2017	4.13% = 2017	1.18%= 2017		

SUPPORT TO PERIPHERAL INSTITUTIONS

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

THs	KEYACHIEVEMENT
KBTH	> 55 Outreach programmes were conducted by clinicians for people in deprived communities outside the Greater Accra Region.
KATH	Continue to support peripheral facilities to improve their capacity
TTH	_
CCTH	 Collaborated with regional health directorate on some outreach and monitoring exercises in the region. Provided Mentorship support in pharmaceutical services
HTH	➤ Mobile outreach van has been acquired through collaboration with Rotary Club of Ho, Anglican Diocese of Ho, Rotary Club of Grand Manan, New Brunswick, and Rotary International. It is expected to arrive in Ghana on 24th April, 2022.

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR		PERFORMANCE					MEASUREMEN T
	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
	- = 2021	26= 2021	= 2021	406 (147.6% ↑)	- = 2021	-	
Total number	-= 2020	18 (2.7%↓)	- = 2020	164 (5.8%↓)	-= 2020		
of facilities	- = 2019	23 (9.5%↑)	- = 2019	174 (↑)	- = 2019		
visited	27 (50% ↑)	21 (5%↑)	- = 2018	17 = 2018	- = 2018		
	18 = 2017	20 = 2017	- = 2017	- = 2017	- = 2017		
	95 = 2021	31= 2021	= 2021	406 (147.6% ↑)	- = 2021	-	
	12 = 2020	21(8.7%↓)	- = 2020	164 (5.8%↓)	- = 2020		
Number of	- = 2019	23 (15%↑)	- = 2019	174 (↑)	- = 2019		
visits planned	- = 2018	20 = 2018	- = 2018	17 = 2018	- = 2018		
	- = 2017	- = 2017	-=2017	- = 2017	- = 2017		
	558 (78 ↓)	27, 859	= 2021	20,955 (153.2 ↑)	- = 2021	11,215	Total Number
Number of	2,606 = 2020	(206%↑)= 2021	- = 2020	8,276 (40.4% ↓)	-= 2020		of clients seen
Beneficiaries	- = 2019	9,101 (13.3%↑)	- = 2019	13,873 (†)	- = 2019		
recorded	561 (31.4% ↑)	8,034 (74.9% ↓)	- = 2018	1,062 (55%↓)	- = 2018		
recorded	427 = 2017	32,022 = 2018	- = 2017	2,359 = 2017	- = 2017		
		- = 2017	- 2017				

KEY CHALLENGES

CHALLENGES FOR ALL THs IN 2021

CHALLENGES	THs
☐ Covid-19 pandemic affected delivery of routine essential health services e.g. Oxygen supply	ALL THs
☐ High Institutional Maternal and Neonatal Mortality	ALL THs
☐ Inadequate Accommodation for Staff	ALL THs
□ Delays in NHIS Claims Reimbursement and low tariffs	ALL THs
☐ Inadequate and Ageing Vehicles and equipment	ALL THs
☐ Inadequate Staff Accommodation	ALL THs
☐ Absence of a Patients-Relatives' Hostel	ALL THs
☐ MRI machine still not functioning and handed over	TTH, KATH & CCTH
☐ 10% Retention of NHIS claims by NHIA	TTH, KATH & CCTH

CHALLENGES – KBTH

CHALLENGES

High Utility Tariffs (Legacy Bills: Water &

ECG)

Old Sewage system

 Sub optimal outcomes of referred cases due to late arrival 	Strengthen and engagement with peripheral facilities to influence timely access to high quality care
 Sub optimal patients waiting time 	Develop a Process Map for all service delivery points
 E-Health Infrastructure, software and security issues 	Resolve systematic bottle necks and uncertainty in the processes
 Cost Recovery for specialized and advanced health care packages issues 	Procure computers and strengthen stakeholders engagement
Delay in reporting and issues of data quality	 Guides Directorates and UDS,s to align and budget for all activities including trainings and procurements Develop a comprehensive Monitoring and Evaluations Plan for the Hospital and ensure effective implementation Continue to implement the Peer Review data validation exercises in KBTH
 No policy repository 	Establish a policy repository, provide guidelines for internal policy development and review; and monitor and evaluate policy implementation in KBTH

Adapt Water and energy conservation measures

Rehabilitation of sewage system

MITIGATING STRATEGIES

CHALLENGES – KATH

CHALLENGES	MITIGATION STRATEGIES
High Institutional Maternal Mortality	Undertaking of outreach support programmes Improving communication systems between KATH and Peripheral Institutions
 Late Referrals of patients or presentation of cases at advanced state 	Increase awareness in early attendance and referral by intensifying collaboration and communication systems between KATH and Peripheral Institutions
 Inadequate and ageing infrastructure needed for quality patient care 	Continue lobbying MOH for replacement of obsolete equipment and retooling of the theaters and A&E Centre
Delays in the payment of health insurance claims/unrealistic tariffs/withheld NHIS claims	Continue dialogue with NHIA to reduce the delays in the payment of claims and agree on realistic tariffs for services
Increasing number of paupers	Identify institutions and individuals to support patients who are not able to pay their bills
 Inadequate clinical staff, particularly in Pharmacy and Radiology 	Continuous discussion with Ministry of Health for financial clearance to recruit
The ever increasing number of clinical students who use KATH for clinical training	Continue dialogue with the primary training facilities to manage the large numbers

CHALLENGES – TTH

CHALLENGES	MITIGATION STRATEGIES
Late/poor referral of cases from peripheral facilities	
➤ Inconsistent water supply from GWCL resulting in high costs of purchasing water	
➤ High costs of renting residential accommodation for key staff	
➤ Unavailability of patients' relatives/mothers' hostel for the Hospital	
➤ Inadequate storage capacity affecting the supply chain management system in the Hospital	
➤ Challenges with the implementation of LHIMS including difficulties in data retrieval and report generation.	
Delays in NHIA claims reimbursements	
➤ Intermittent breakdown of critical and essential equipment	
➤ Increased institutional maternal mortality and neonatal mortality rates	

CHALLENGES – CCTH

CHALLENGES	MITIGATION STRATEGIES
➤ Absence of NICU and PICU	
High Institutional Maternal Mortality and Neonatal Deaths	Dialogue with GHS to support periphery referring facilities through training and MOs support
 Inadequate space for Clinical Services (Inadequate Infrastructure) 	Adopted the use of virtual platforms (e.g. zoom) to organize meetings
Disruption of execution of planned activities (Annual Program of Work)	Prioritized activities
Delay in NHIS reimbursement	Continuous dialogue with NHIA
Illegal sale, development and encroachment of hospital lands	Continue with court issue and others measures to prevent illegal developments on the hospital land
➤ Inadequate Staff Accommodation	Pursue the PPP agreement for the construction of 270 accommodation units
Inadequate and ageing equipment e.g. Power Generators, Laundry and CSSD equipment, etc.	Work with MOH for replacement of obsolete equipment and machinery (Laundry, CSSD, Generator Sets).

CHALLENGES – HTH

CHALLENGES	WITTIGATION STRATEGIES
 Inadequate Space for Service delivery, Administrative Services, Training and Research activities 	Enhance specialist support outreaches to peripheral facilities
Inadequate Accommodation for Staff	Continue engagements with utility service providers for enhanced services
• Increased consumption of oxygen in the midst of the covid-19 pandemic	Engage MoH to complete outstanding Phase II residential facilities

panuenne Inadequate equipment and Technology e.g CT Scan, MRI, etc. Engage Private Partners & Corporate organizations to support construction

Pursue MoH for the construction of Phase III of the **Inadequate Medical Officer** expansion

Inadequate funding for Research activities Engage MoH and software developers to address challenges with LHIMS

Outstanding claims reimbursement (July–Nov. 2021). Continue engagements with NHIA as THs

High expenditure on chemicals and consumables. Enter into PPPs for equipment placement arrangements

Marginal increase in the rate of NHIS claims rejection. Enhance specialist support outreaches to peripheral

facilities

Non-realistic Fees and Charges for Service delivery

Delay/Inability to resolve data management challenges

KEY STRATEGIES PLANNED FOR 2022

OUT LOOK FOR 2022 FOR ALL THS

PLAN	THs
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 2022 – KBTH

- ➤ Continue Strengthening Capacity of Leadership In Governance And Management to support Quality and Safe Health Care Delivery
- ➤ Renovation of Staff Accommodation
- ➤ Continue Efforts At Re Branding And Transforming KBTH
- > Staff Transport
- > Staff 100% Medicare
- ➤ Commencement of Construction Works (New Maternity Block)
- > Diversify revenue sources, introduction of new services and realistic
- > Submit to parliament for upwards review of charges
- > Renovation reposition of building
- ➤ Adapt Water and energy conservation measures
- > Strengthening of information and construction of NOC
- ➤ Rehabilitation of sewage system
- > Conduct operational research into emerging diseases

OUT LOOK FOR 2022 – KATH

WAY FORWARD/OUTLOOK FOR 2022

Continue the provision of quality health care, leading to better health outcomes, especially in maternal and child health

- ➤ Operationalization of the expanded National Nuclear and Radiotherapy Centre (Oncology)
- > Strengthen outreach services
- > Strengthen collaboration with other institutions
- ➤ Continue to provide support for facilities within our catchment area
- ➤ Conduct operational research into emerging diseases
- > Commence operations of the Fertility Centre
- > Set up a Renal Centre
- > Set up a Cardio Centre

OUT LOOK FOR 2022 – TTH

- Ensure optimal utilisation of EHR software (LHIMS) through regular training and supervision and continuous engagements with the software developers.
- Enhance and expand collaborations and partnerships with institutions such and scout for new collaborative opportunities as well.
- Improve processes for staff performance management
- Continue engagements to enter PPPs for placement of equipment and construction of residential accommodation
- Continue engagements for construction of a patients' relative hostel and Patient Relative Washroom facility
- Scale up specialist outreach support services (including Pharmacy outreaches) & improve referrals
- Ensure drug availability of 92% of essential medicines
- Establish additional specialties/sub-specialties/departments/units e.g. establishment of the Therapeutic Drug Monitoring Unit
- **Increase Operational Research Capacity**
- Improve Residency Training and Pursue Accreditation for Residency Training in Internal Medicine and Paediatrics.

OUT LOOK FOR 2022 – CCTH

- Increase access to specialist services
- Improve the quality of care at the hospital
- Improve the infrastructure and equipment base for the delivery of quality services
- Strengthen the governance system
- Improve health research
- Improve capacity of staff
- Improve residency training
- Intensify support to the lower level of health facilities

OUT LOOK FOR 2022 – HTH

- > Strengthen Sub-BMC Management systems
- ➤ Continue to implement the Peer Review Programme
- ➤ Continue with the Fundraising programme for the Cardiothoracic Theatre Equipment
- > Continue to collaborate with relevant stakeholders for a Hospital Expansion Programme
- ➤ Build capacity of staff for Research
- Conduct Outreach Services in collaboration with Rotary Club of Ho and the Anglican Church, Ho Diocese
- ➤ Organize regular Management Retreats

ACKNOWLEDGEMENT

- Ministry of Health
- All Regional Coordinating Council
- Partners
- Regional Health Administrations
- All Medical Schools
- All 2021 Boards Members
- All Hospital Management Members
- Hardworking Staffs
- COVID-19 Task Team Members
- All other institutions / stakeholders / Partners /Philanthropists etc.

THANK YOU (End of Presentation)



See Appendix Below For Performance on other THs KPIs

Appendix - Other THs KPIs

TTH

3,073 (10.1%↑)

2,790 (15.9% ↑)

2,408 (14.8%)

2,097 (5.2% ↓)

2,211 = **2017**

207 (56.8%[↑])

132 (7.7%↓)

143 (**5.93%**↑)

135 (**6.3**%↑)

127 = 2017

54 (58.8%↑)

34 (5.6%\(\)

36 (10% \(\))

40 = 2018

- = **2017**

24 (1100%↑)

2 = 2020

2 = 2019

2 = 2018

- = 2017

BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

HTH

1,610 (41.1% 1)

1,141 (35.2%\(\dagger)\)

844 (39.5%)

605 (4.6%)

634= 2017

104 (%↑)

67 (**91.4%**↑)

35 (**6.1**%↑)

33 (22.3%↑)

27=2017

46 (360% ↑)

10 (25%↑)

8 (20%)

10 (9.1%)

11= 2017

6 (200% ↑)

2 (100%[†])

 $1 (\uparrow) = 2019$

0 = 2018

0 = 2017

CCTH

2,051 (14.5%[↑])

1,792 (10.1%[↑])

1,627 (22.8%†)

1,325 (0.4%[↑])

1,320 = 2017

299 (2.8%[↑])

291 (**9.4%** ↑)

266 (**20.4%**↑)

221 (18.8%[↑])

186 = 2017

76 (11.8%↑)

68 (5.6% \lambda)

72 (35.8%↑)

53 (17.8% ↑)

45 = 2017

6 (**50%**↑)

4 = 2020

4 = 2019

4 = 2018

4 = 2017

4,857 (24.3%†)

3,909 (**3.8%**↑)

4,065 = 2017

697 (15.9%↑)

601 (**13.2**↑)

531 (2.8%↓)

546 (**0.4**%↓)

548= 2017

329(28.52%↑)

256 (**16.9%**↑)

219 (4.8%\(\)

230 (0.9%↑)

228= **2017**

 $60 (1.6\% \downarrow)$

61 (**13**%↑)

54 (**3.9**%↑)

52 (3.7%↓)

54= 2017

	SELECTE	D HR TREND
CADRE	KBTH	KATH

	SELECTE	D HR I KEND
CADRE	KBTH	KATH
Total Staff	7,869 = (19%↑)	5,385 (1.98% ↑)
	6,590 (9.9 %↑)	5,280 (8.71% ↑)

5,997 (18%↑)

5,082 (1.5\(\))

5,159 = 2017

589= (15%↑)

590 (**11.53**%↑)

529 (35.99%↑)

389 96.3%↑)

366 = 2017

 $219 = (36.87\%\uparrow)$

160 (27.9%↓)

222 (27.7%↓)

307 (9.6%)

280 = 2017

= 2021

150 (0%)

150 (**4.9%**↑)

143 (0%)

143 = 2017

Total

Doctors

Consultant,

specialists

Consultants

Specialist and

Senior

SELECTED HR TREND

CADRE	KBTH	KATH	TTH	ССТН	HTH
Senior	40 (14.89%)	85 (19.7% ↑)	5 (16.7%↓)	21 (113%↑)	8 (100% ↑)
	48 (2.1% ↑)	71 (9% ↓)	6 (50% ↑)	9 (12.5%↑)	4 = 2020
Specialist	47 (9.3%↑)	78	4 = 2019	8 (100% ↑)	4 (33.3%↑)
	43 (7.5%↑)	78 (9.9% ↑)	4 = 2018	4 (300↑)	3 = 2018
	40= 2017	71= 2017	- = 2017	1 = 2017	3= 2017
Specialist	141(80.76%↑)	184 (48.29% ↑)	25 (3.8% ↓)	49 (10.9%↓)	25 (525% ↑)
Specialist	78 (39.3 %↑)	124 (6%↑)	26 (13.3%↓)	55 (8.3% ↓)	4 (33.3%↑)
	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	388 (240%↑)	235 (22.40%)	11 (57.14%↑)	38 (38.7%↓)	9 (350% ↑)
Residents	114 (44.4%↓)	192 (5.9%↓)	7 = 2020	62 (29.2% ↓)	2 = 2020
	205 (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

SELECTED HR TREND

CADRE	KBTH	KATH	TTH	ССТН	HTH
Medical Officers	370 (704%↑) 46 (42.5%↓) 80 (166.7%↑) 30 (36.4%↑) 22= 2017	133 (13.07%↓) 153 (41.6%↑) 108 (21.4%↑) 89 (9.9%↑) 81= 2017	142 (56.04%↑) 91 (16.7%↑) 78 (6.9%↑) 73 -= 2017	46 (21.1%↑) 38 (15.2%↑) 33 (13.8%↑) 29 (58%↓) 69 = 2017	58 (1.8%↑) 57 (111.1%↑) 27 (17.4%↑) 23 (43.8%↑) 16= 2017
House Officers	$192=2021$ $179 (6.6\%\uparrow)$ $168 (21.7\%\uparrow)$ $138 = 2018$ $138 = 2017$	161 (7.33%↑) 150 (0%) 150 (2.0%↓) 153 ((0.6%↑) 162= 2017	$187 (32.6\%\uparrow)$ $141 (31.6\%\downarrow)$ $206 (52.6\%\uparrow)$ $135 = 2018$ $- = 2017$	129 (25.2% \uparrow) 123 (8.9% \uparrow) 113 (68.7% \uparrow) 67 (26.4% \downarrow) 91 = 2017	67 (15.2%↓) 79 (16.2%↑) 68 (23.6%↑) 55 (16.7%↓) 66 = 2017

CADRE	KBTH	KATH	TTH	ССТН	HTH
CIDAL		137111	1111		
Professional Nurses	$2310=(7.5\%\uparrow)$ $2,147 (6.8\%\uparrow)$ $2,011 (24.4\%\uparrow)$ $1,616 (5\%\uparrow)$ $1,539 = 2017$	1,659 (8.79%↑) 1,525 (7.6%↑) 1,418 (23.6%↑) 1,147(2.2%↓) 1,173= 2017	1,223 (37.6% \uparrow) 889 (1.7% \downarrow) 904 (18.5% \uparrow) 763 = 2018 -= 2017	784 (21.9%↑) 643 (14.4%↑) 562 (25.2%↑) 449 (1.3%↓) 455= 2017	582(47.7%↑) 394 (55.7%↑) 253 (41.3%↑) 179 (3.8%↓) 186= 2017
Enrolled Nurses	431 = (10.5%) $482 (26.2%)$ $382(32.9%)$ $569 (3.2%)$ $588 = 2017$	$201(12.23\%\downarrow)$ $229 (9.8\%\downarrow)$ $254(19.8\%\uparrow)$ $212 (12.4\%\downarrow)$ $242=2017$	175 (3.54% \uparrow) 169 (3.4% \downarrow) 175 (196.6% \uparrow) 59 = 2018 -= 2017	71 (1.4% \uparrow) 70 (17.7% \downarrow) 85 (12.4% \downarrow) 97 (2.0% \downarrow) 99 = 2017	164 (28.1↑) 128 (1.5%↓) 130 (150%↑) 52 (8.8%↓) 57= 2017
Midwives	$423 = (4.4\%\uparrow)$ $405 (0.3\%\uparrow)$ $352 (36.4\%\uparrow)$ $258 (0.8\%\downarrow)$ $260 = 2017$	$393(2.48\%\downarrow)$ $403(4.3\%\downarrow)$ $421(21.7\%\uparrow)$ $346(5\%\downarrow)$ $364 = 2017$	$281 (44.1\%\uparrow)$ $195 (8.3\%\uparrow)$ $180 (9.8\%\uparrow)$ $164 (4.7\%\downarrow)$ $172 = 2017$	199 (21.3% \uparrow) 164 (7.9% \uparrow) 152 44.8% \uparrow) 105 (0.9% \downarrow) 106 = 2017	150 (32.7%↑) 113 (37.8%↑) 82 (54.7%↑) 53 (13.1%↓) 61= 2017

SELECTED HR TREND

CADRE	KBTH	KATH	TTH	CCTH	HTH
Pharmacist	$101 = (4\%\uparrow)$ $97 (3\%\downarrow)$ $100 (26.6\%\uparrow)$ $79 (3.7\%\downarrow)$ $82 = 2017$	82(49.09% \uparrow) 55 (3.5% \downarrow) 57 (3.4% \downarrow) 59 (1.7% \downarrow) 60 = 2017	40 (90.5%↑) 21 (4.5%↓) 22 (4.8%↑) 21 (10.5%↑) 19= 2017	$25 (66.7\%\uparrow)$ $18 = 2020$ $18 (100\%\uparrow)$ $9 = 2018$ $9 = 2017$	23 (21.01%↑) 19 (137.5%↑) 8 = 2019 8 = 2018 8 = 2017
Pharmacy Technicians	$59=(1.7\%\downarrow)$ $58 (3.3\%\downarrow)$ $60 (27.7\%\uparrow)$ $47 (6.8\%\uparrow)$ $44 = 2017$	$67 (31.37\%\uparrow)$ $51 (7.3\%\downarrow)$ $55 (5.2\%\downarrow)$ $58 = 2018$ $58 = 2017$	$38 (40.7\%\uparrow)$ $27 = 2020$ $27 (59.3\%\uparrow)$ $11 (50\%\downarrow)$ $22 = 2017$	$7 = 2021$ $7 = 2020$ $7 (16.7\%\uparrow)$ $6 = 2018$ $6 = 2017$	$2 = 2021$ $2 (100\%\uparrow)$ $1 (100\%\downarrow)$ $2 (33.3\%\downarrow)$ $3 = 2017$
Others	$224 = (20\%\uparrow)$ $2,786 (28.7\%\uparrow)$ $2,164 (3.3\%\downarrow)$ $2,239 (0.1\%\downarrow)$ $2,241 = 2017$	$2,286 (0.9\%\uparrow)$ $2,266 (15\%\uparrow)$ $1,971 (41.4\%\uparrow)$ $1,394 (22\%\downarrow)$ $1,792 = 2017$	922 (14.9% \uparrow) 1,083 (20.1% \uparrow) 902 (2.5% \downarrow) 925 (9.8% \downarrow) 1,025 = 2017	666 (9.4% \uparrow) 609 (11.3% \uparrow) 547 (7.1% \uparrow) 511 (3.8% \downarrow) 531 = 2017	$585 (71.6\% \uparrow)$ $341 (8.3\% \downarrow)$ $372 (57.6\% \uparrow)$ $236 (7.1\% \downarrow)$ $254 = 2017$

Provide Inpatient Services

KEY INDICATORS		P	ERFORMAN	ICE		THs TARGET	MEASUREMEN T
	KBTH	KATH	TTH	CCTH	HTH	S	
Number of	34,912 (11.1%)	29,968(3.51%↑)	19,535 (4%↑)	12,930 (22.2%↑)	11,051 (10.5% ↑)	12,000	Total no. of clients
admissions	40,875 (17.7%↓)	28,951 (16.2%↓)	18,780 (16.2%↓)	10,578 (4.6%↓)	9,999 (4.6% [†])		admitted.
	49,648 (10.6% ↑)	34,539 (2.9% ↓)	22,412 (1%↓)	11,088 (2.1%↑)	9,562 (2.7%↑)		
	44,908 (3%↑)	35,553 (2.9%↑)	22,640 (2.1%↓)	10,865 (5.1%↓)	9,323 (12.3%↓)		
	43,616 = 2017	34,552 = 2017	23,109 = 2017	11,444 = 2017	10,635= 2017		
% of patients	- = 2021	- = 2021	- = 2021	68.2% (↑)	19.9% (↑)	_	No. of Patients
	- = 2020	- = 2020	- = 2020	21.6% (\)	5.48% = 2020		admissions due to
admitted due to	- = 2019	- = 2019	- = 2019	40.4% (↑)	- = 2019		external referrals /
external	- = 2018	$(\uparrow) = 2018$	- = 2018	25.8% (↓)	- = 2018		Total admissions *
referrals	- = 2017	63%= 2017	- = 2017	35 % = 2017	- = 2017		100
% of Neonatal	52.8% (↓)	47.00%= 2021	37.4% (↓)	15% (↓)	22.4 % (↓)	30%	No. of Neonatal
Admissions due	55% % (↑)	47.49% = 2020	48.3 (↓)	25.5% (↓)	24.1% (\()		admissions due to
to external	42% % (↑)	45.05%= 2019	51.2 % (↑)	27.2% (↑)	34.7% (↑)		referrals / Total
Referrals	40% % (↑)	- = 2018	18.8 = 2018	26.1% (↓)	28.8% (↓)		neonatal
Referrals	35% = 2017	- = 2017	- = 2017	28% = 2017	30.5%= 2017		admissions * 100
% of Maternal	81.2% (†)	= 2021	56.5% (↑)	23% (↑)	21.6%((↑)	60%	No. of Maternal
Admissions due	80.8% (\)	- = 2020	34% (↑)	21.2% (↓)	21.0% (↓)		admissions due to
to external	86.3% (↑)	- = 2019	25% (↓)	27.2% (↓)	21.3% (†)		referrals / Total
Referrals	84.7% (↑)	79.41% (†)	26% = 2018	41.4% (↓)	15.8% (↓)		maternal
TOTOTION	60.9% = 2017	63% = 2017	- = 2017	49% = 2017	20.7%= 2017		admissions

Provide Inpatient Services Cont.

KEY INDICATORS		PE	PERFORMANCE				MEASUREMENT
INDICATIONS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Nurse and Midwife to admission ratio Bed occupancy rate	1:85 (\uparrow) 1:13 (\downarrow) 1:18 (\downarrow) 1:35 (\downarrow) 1:36 = 2017 66.1% (\uparrow) 53.2% (\downarrow) 64% (\uparrow) 63.7% (\uparrow)	1:15 (\downarrow) 1:16 (\downarrow) 1:19 (\downarrow) 1:37 (\uparrow) 1:19 = 2017 62.63%(\downarrow) 63.58%(\downarrow) 69.14% (\downarrow) 70.68%(\downarrow)	1:19 (\uparrow) 1:15 (\downarrow) 1:18 (\downarrow) 1:23 (\downarrow) 1:24 = 2017 56% (\uparrow) 47.2%(\downarrow) 58.0% (\downarrow) 60.4% (\downarrow)	1:13 1:13 (\downarrow) 1:16 (\downarrow) 1:20 (-) 1:20 = 2017 52.2% (\downarrow) 55.5% (\uparrow) 55% (\downarrow) 51% (\downarrow)	$\begin{array}{c} 1:15 \ (\downarrow) \\ 1:16 \ (\downarrow) \\ 1:21 \ (\downarrow) \\ 1:41 \ (\downarrow) \\ 1:44=2017 \\ \hline 62.2 \ (\downarrow) \\ 65.5\% \ (\downarrow) \\ 67.7\% \ (\uparrow) \\ 58.7\% \ (\downarrow) \\ \end{array}$	1:25 75%	Total no. of clients admitted / total no. of nurses and midwives No. of client days / No. of beds * No of days in the period
Average length of stay in the facility	56.9% = 2017 11.4 (↑) 8.5 (↑) 8.3 (↓) 8.5 (↑) 8.2 = 2017	75.5% = 2017 7 (\$\perp)=2021 8 (\$\perp)=2020 7= 2019 7 = 2018 7 = 2017	$67.4\% = 2017$ $7.6 (\downarrow)$ $8.2 = 2020$ $8.2 (\uparrow)$ $6 (\uparrow)$ $4.5 = 2017$	$53\% = 2017$ $5.6 (\downarrow)$ $5.9 (\uparrow)$ $5.6 (\uparrow)$ $5.1 (\uparrow)$ $4.8 = 2017$	63.4%= 2017 6.1 (↑) 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	58% (↑) 53% (↑) 52% (↑) 50% = 2018 50% = 2017	95.6% (↑) 57.65% (↑) 35.12% = 2019 - = 2018 - = 2017	60% (↓) 100% (↑) 85% = 2019 -= 2018 -= 2017	- = 2021 - = 2020 - = 2019 - = 2018 - = 2017	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	65%	No. of admissions with care plan/ Total admissions * 100

Provide Emergency Services

KEY		P	ERFORMANCE			THs	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	нтн	TARGETS	
Average length	7.7 (↑)	2.3 (↑)	4.3 (↑)	2.9 (↑)	3.7 (↑)	2	No. of client days /
	3.7 (↑)	1.8 (↓)	4.0 (↓)	2.0 (↓)	2 (1)		No. of emergency
of stay at the	3.3 (↓)	2 (1)	5.8 (↑)	3.9 (↓)	3 (↑)		discharges and death
emergency	4.9 (↑)	4.65 (↓)	5.1 (↓)	4.2 (↑)	2 (1)		distinates and death
wards	4.7 = 2017	5 = 2017	10.3 = 2017	2.8 = 2017	3 = 2017		
		Pı	rovide Surgic	al Operations			
Surgical site	- = 2021	= 2021	2.0% (↓)	- = 2021	- = 2021	5%	
	-= 2020	-= 2020	2.4% (↑)	12.61% (†)	- = 2020	0,0	Total infected wounds
infection rate	- = 2019	-= 2019	0.9% (†)	0.27% = 2019	- = 2019		within 10 days / Total
	- = 2018	- = 2018	0.7% (↑)	- = 2018	- = 2018		Surgeries * 100
	-= 2017	- = 2017	0.6% = 2017	- = 2017	- = 2017		S
	19,541 (11.1% ↑)	16,955 (1.2% ↓)	4,616 (28% ↑)	5,961 (53.5 % ↑)	3,530 (46.4% ↑)	-	
	$16,586 (21.9\% \downarrow)$	17,162 (12.1% ↓)	3,606 (32% ↓)	4,815 (24% ↑)	2,412 (38.7% ↑)		Total number of
Total Surgeries	21,226 (5.1% ↓)	19,520 (4.6% ↑)	5,299 (28.1%↑)	3,883 (4.2% ↑)	1,739 (0.5%↓)		
	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		
	= 2021	52:1(↓)	220:1 (↑)	199:1 (†)	208:1 (†)	250:1	
Surgery -	61:1(↓)	67:1 (↓)	150:1 (↓)	108:1 (↓)	121:1 (†)		Total no. of surgeries
	81:1 (↓)	78:1 (↓)	220:1 (↓)	127:1 (↓)	73:1 (↓)		performed / total no.
Surgeon Ratio	191:1 (↑)	267:1 (↑)	172: (↑)	133:1 (↓)	77:1 (↓)		of Surgeons
	149:1 = 2017	266:1 = 2017	127:1 = 2017	154:1 = 2017	131:1= 2017		- C
Total Number	= 2021	329 (28.5% ↑)	21 (\psi)	30 (↓)	17 (↓)	_	
	270 (3.5%↑)	256 (2.4% ↑)	24 (0%)	36 (5.3%↓)	20 (13%↓)		
of Surgeons	261 (0.8% ↑)	250 (257.1% ↑)	24 (0%)	38 (35.7%↑)	23 (4.6%↑)		
	259 = 2018	70 (21.4% ↓)	24 (4.2%↓)	28 (12% ↑)	22 (46.7% ↑)		
	259 = 2017	89 = 2017	25 = 2017	25 = 2017	15= 2017		

Provide Maternal Health Services

KEY		PE	RFORMANC	E		THs TARGET	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	НТН	S	
Total Deliveries	6,774 (7.9% ↓)	5,909 (5.4% ↓)	8,369 (7.8% ↑)	3,055 (6% ↑)	1,964 (3.9% ↑)	-	Total No. of
	7,359 (11.1%↓)	6,247 (8.3%↓)	7,763 (12.2% ↓)	2,883 (4.8% ↓)	1,891(4.5% ↑)		Deliveries
	8,275 (9.5%↓)	6,814 (16.1% ↓)	8,837 (7.3 %↑)	$3,027(4.2\%\downarrow)$	1,809(7.3%↓)		undertaken
	9,145 (4.7%↓)	8,117 (3.8%↓)	8,238 (2.7%↓)	3,160 (3.4 %↑)	1,951(8.6% ↑)		
	9,597 = 2017	8,438 = 2017	8,462 = 2017	3,055 = 2017	1,797= 2017		
Deliveries to	16:1(↓)	15:1 (↓)	30:1 (↓)	15:1 (↓)	13:1 (↓)	-	Total Number of
midwives ratio	18:1(↓)	16:1	38:1 (↓)	18:1 (↓)	16:1(↓)		deliveries / Total
(TOTAL	24:1 (↓)	16:1	50:1	20:1 (↓)	22:1 (↓)		No. of midwives
MIDWIVES IN	35:1(↓)	24:1 (†)	50:1 (↑)	30:1 (↑)	37:1 (↑)		1 (o. or mawryes
THE HOSPITAL)	36:1= 2017	23:1 = 2017	49:1 = 2017	29:1 = 2017	29:1 = 2017		
Deliveries to	1:12 (↓)	185:1 (↓)	226:1 (↓)	46:1 (↓)	76:1 (↑)	-	Total Number of
midwives ratio	1:91 (†)	189:1(↓)	250:1 (↓)	70:1 (↓)	54:1(↓)		deliveries / Total
(TOTAL	135:1 (↓)	208:1(↓)	276:1 (↓)	75:1 (↓)	67:1 (↓)		No. of midwives
MIDWIVES IN	141 :1(↓)	271:1(-)	298:1(-)	77:1 (↑)	94:1 (↑)		
THE DELIVERY SUITE)	171:1 = 2017	- = 2017	- = 2017	62:1 = 2017	92:1= 2017		
Partograph	100% (↑)	44.4% (↓)	100%	48.5% (↓)	100%	60%	Deliveries done
use rate	50.3% (↓)	74% (↓)	100%	48.7% (†)	100%		with use or support
	50.4% (↓)	94.1% (-)	100%	46.1% (†)	100% (↑)		of Partograph /
	60% (↑)	- = 2018	100%	40.8%	95% (-)		Total deliveries *
	45% = 2017	- = 2017	100%	- = 2017	- = 2017		100

Provide Maternal Health Services BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

KEY		PEI	RFORMANC	CE CE		THS	MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Low birth rate	33.0%(↑)	26.76% (\)	4.7% (↓)	19.4% (↑)	17.7 (↓)	12%	Total no. of babies
	17.5% (↑)	35.07%(↓)	5% (↓)	16.8% (†)	18.3 (↑)		< 2.5kg/ Total live
	16 5(↓)	37.99% (↑)	17% (↓)	16.1% (†)	14.7 (↑)		births *100
	17.1% (↓)	36.8% (↓)	20 % (↓)	13.5% (↑)	13.1 (↑)		
	17.5% = 2017	41.5% = 2017	26% = 2017	13% = 2017	12.2= 2017		
Still birth rate	41 (↑)	19 (↓)	16.1 (↓)	42 (↑)	33.6 (†)	15/1000L	No. of babies born
/ 1000 Birth	31 (↓)	121.30 (†)	35.8 (↑)	31 (↓)	29.1 (↑)	${f B}$	with no signs of life /
7 1000 Bitti	37 (↑)	120.81 (†)	34.7 (↓)	42 (↑)	26.1 (↑)		Total no. of birth in
	34 (↓)	39.5 (↓)	46.4 (†)	37 (↑)	25.3(↓)		the specific period
	38 = 2017	45.5 = 2017	39.9 = 2017	35 = 2017	30.9= 2017		
Caesarean	49.9% (↑)	50.47 (↓)	36% (↑)	51.4% (↓)	50.1% (↑)	40%	No. of women
Section Rate	49.3% (†)	50.81 (↑)	28% (↓)	53.3% (†)	44.6% (↑)		delivered by CS in a
	47.4% (↑)	44.51 (↑)	30% (↑)	41.2% (↓)	42.7% (↑)		specified time period /
(%)	45.7% (↑)	40.2 (↑)	29% (†)	47% (↑)	40.7% (↑)		Total no. deliveries
	45.5% = 2017	38.6= 2017	28% = 2017	40% = 2017	38.9% = 2017		within a specified
							time period
Couple year	9,688 (\)	6,064.71(↓)	1,229.74 (↓)	820.15 (↓)	1,835.9 (†)	2,500	Total No. of
protection	10, 993 (↓)	6,362.48 (↓)	2,258.91 (\psi)	1,891.2 (†)	1,134.1(↓)		Commodities
Protection	45,111 (↓)	8,588.67 (↑)	6,409 (†)	1,562.5 (†)	1,582.3 (†)		dispensed / CYP
	45,432 (↑)	6,410.22 (↓)	2,284 (↓)	1,521.6 (†)	1,531.8 (†)		factor
	39,372 = 2017	7,329.79 =	2,371 = 2017	1,507 = 2017	1,441.3= 2017		140101
		2017					

Provide Maternal Health Services BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

KEY INDICATORS		PEI	RFORMANC	CE		THs TARGET	MEASUREMENT
	KBTH	KATH	TTH	ССТН	HTH	S	
Institutional Maternal Mortality Ratio (/ 100,000 LB)	688 (†) 677 (†) 640 (†) 470 (↓) 594 = 2017	1,818.18 (↑) 847.05 (↓) 1,575 (↑) 1,500 (↑) 1,207 = 2017	940 (†) 608 (↓) 633 (†) 573 (↓) 688 = 2017	$1050 (\uparrow)$ $903 (\downarrow)$ $925 (\uparrow)$ $860 (\downarrow)$ $1335 = 2017$	1,164 (↑) 526 (↓) 1093 (↑) 762 (↑) 503 = 2017	300/100, 000	No of maternal deaths / total live births * 100 000
Maternal deaths audited (%)	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	100%= 2021 100%= 2020 100%= 2019 100%= 2018 100%= 2017	100%= 2021 100%= 2020 100%= 2019 100%= 2018 100% = 2017	100% = 2020 100% = 2019 100% = 2018	$100\% (\uparrow)$ $87.5 (\downarrow)$ $100 = 2019$ $100 (\uparrow)$ $77.8 = 2017$	100%	No. of reported maternal deaths audited according to established guidelines. / total no. of reported maternal deaths within a specified period * 100

Provide Maternal Health Services

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

Provide Child Health Services

KEY		PE	RFORMAN	CE		THS	MEASUREME NT
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	141
T 1	71 (↑)	125.9 (\psi)	60.3 (↑)	88 (↓)	33.4 (↓)	15/1000L	No. of children
Institutional	55 (↑)	134.71 (†)	38 (↓)	89 (\()	58.9 (†)	В	dying under
Infant	51 (↑)	127.77 (↑)	43 (↓)	91 (†)	43.2 (↓)		one year of
mortality	55 (↓)	85.85 (\psi)	79 (↑)	69 (↑)	52.8 (↓)		age during a
rate /1,000	59 = 2017	96.45 = 2017	46 = 2017	65 = 2017	68.8 = 2017		year / Total
							live births in a
LB							year * 1000
Institutional	46 (↓)	74.58 (\psi)	62.9 (↑)	78 (↓)	50.1 (↓)	25/1000L	NI CD (1
	52 (↓)	102.05 (↑)	57 (↑)	81 (↑)	52.6 (†)	В	No. of Deaths
Neonatal	55 (↑)	99.52 (†)	53 (↑)	80 (↑)	43.7 (↑)		from 0-28
mortality	53 (↓)	79.9 (↓)	45 (↑)	63 (↑)	41.2 (↓)		days / Total
rate /1,000	56 = 2017	93.62 = 2017	40 = 2017	59 = 2017	51.5 = 2017		No. of live
LB							births
Infant Death	539 (21.8%↓)	720 (8.40 ↓)	464(64.5%↑)	267 (6% ↓)	55.7 (42.6%)		
	690 (29% ↑)	786 (12.7% ↓)	282 (25%↓)	284 (4.4% ↑)	97 (51.6% ↑)		
	535 (23.9% ↓)	900 (27.8%↑)	376(39.3%↓)	272 (25.9%↑)	64 (30.4%↓)		
	703 (2.2% ↓)	704 (13.6%↓)	619 = 2018	216 (7.5%↑)	92 (15.6%↓)		
	719 = 2017	815 = 2017	- = 2017	201 = 2017	109 = 2017		

Provide Child Health Services

KEY INDICATORS		PE	ERFORMAN	CE		MEASUREMENT
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	
Neonatal	68 (30% ↑)	571(13.8%↓)	484 (13.9%↑)	239 (2.6% ↑)	76 (13.4% ↑)	_
Death	52 (5.5%↓)	662 (20.8%↑)	425 (8.4% ↓)	233 (2.5%↓)	67 (16.3%↓)	
	55 (3.8%↑)	548 (15.3%↓)	464 (29.4% ↑)	239 (23.1%↑)	80 (1.2% ↓)	
	53 (5.4%↓)	647 (17.1%↓)	359 = 2018	197 (9.4% ↑)	81 (12% ↓)	
	56 = 2017	780 = 2017	- = 2017	180 = 2017	92= 2017	
Number of	678 (4.64%)	823 (8.4% ↑)	579 (7.4% ↑)	290 (5.5% ↑)	- = 2021	_
under five	711(4.1% ↓)	759 (10.8% ↓)	539 (5.1%↓)	233 (2.5%↓)	129 (46.6% ↑)	
	741 (1.1%↓)	851 (27% ↑)	568(26.2% ↑)	239 (1.2%↓)	88 (307% ↓)	
deaths-	749 (6.1% ↓)	670 (14.4%↓)	450 23.3% ↑)	242 (10.5%↑)	127 (11.2% ↓)	
Institutional	798 = 2017	783 = 2017	365 = 2017	219 = 2017	143= 2017	
Under Five	48 (↓)	143.9 (↑)	75.2 (†)	95 (↓)	55.7 (\psi)	-
Mortality Rate	57 (↓)	121.30 (†)	67 (↑)	106 (↑)	65.8 (↑)	
	61 (†)	120.81 (↑)	64 (↑)	101 (↑)	55.8 (↑)	
(/1000LB	59 (↓)	81.71 (↓)	57 (↑)	77 (↑)	41.2 (↑)	
	68 = 2017	92.66 = 2017	45 = 2017	71 = 2017	27.4= 2017	

Provide Pharmaceutical Services

KEY		P	ERFORMANO	CE		THs	MEASUREM
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	ENT
Tracer Drug	92.3% (†)	92% (↑)	90.0% (†)	95% (†)	92.5% (↑)	90%	Tracer
availability	90% (↓)	91% = 2020	88.6% (↓)	84.62% (\)	86.6% (†)		Medicines
(%)	93% (†)	$91\% (\downarrow) = 2019$	93.2% (↑)	88.5% (↓)	83.1% (↑)		available / Total
(70)	90% = 2018	92% (↑)	73.5 (↓)	96.10% (\1)	73.6% (↓)		medicines in the
	90% = 2017	87 = 2017	76 = 2017	96.15% = 2017	78% = 2017		tracer medicines
							list * 100
Prescription to	1:4,042 (↑)	1:5,289(↓)	1:5,496(↓)	6,422:1 (↓)	1: 13,253 (\psi)	12000:1	Total no. of
Pharmacist	1:3,065 (↓)	1:11,700 (↓)	1:13,869 (↓)	9,425:1 (†)	1:31,151(↓)		prescription
	1:3,571 (\psi)	1:13,000 (\psi)	1:16,208 (↑)	8,288:1 (↓)	1:43,806 (↓)		served / total no.
Ratio	1:17,462 (†)	1:12,300	1:6,255 (\psi)	16,097:1 (↑)	1:44,774(↑)		of pharmacists
	1:15,910	- = 2017	1:17,382	13,511:1	1:40,616		•
Percentage	16.9% (↓)	23.8% (\)	42.5% (↓)	11.6% (\psi)	36.8 (↑)	35%	Total number of
antibiotic	18.5% (↑)	29.2% (\)	47% (↑)	17.% (↑)	29% (↓)		antibiotic / Total
prescribed	16.5% (↓)	40% (↑)	45.3% (↓)	16.2% (↓)	32.2%(↓)		of medicines on
*	18.9% (\)	25.3% = 2018	53.2% (\)	18.4% (↑)	44.9% (\)		a prescription *
(%)	36.4% = 2017	- = 2017	56% = 2017	15.2% = 2017	47.4% = 2017		100
Percentage	19.6% (↓)	55.8% (\1)	28.0% (†)	1.6% (\psi)	8.9% (↑)	10%	Total number of
injectable	23.6% (†)	66.4% (†)	9% (↓)	24.2% (†)	5% (\(\)		injectable / Total
prescribed	17.2% (↑)	40% (↓)	10% (↓)	5.8%	9.4% (↓)		of medicines on
•	14.6% (↓)	53.3% = 2018	14.6%	6.3% (†)	15.2% (↑)		a prescription *
(%)	26.7% = 2017	- = 2017	14% = 2017	1.8%	10%		100

Provide Pharmaceutical Services Cont. BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

KEY INDICATORS		PEI		THs TARGETS	MEASUREMENT		
	KBTH	KATH	TTH	ССТН	HTH		
Utilization of Pharmaceutic al Care interventions	26.2 (\uparrow) 20.6% (\downarrow) 21% (\uparrow) 20.9% (\downarrow) 24.6% = 2017	18% = 2021 $16% = 2020$ $17% = 2019$ $- = 2018$ $- = 2017$	95% (↑) 76% (↓) 78% = 2019 78% (↑) 50% = 2017	21.2% (↑) 11.5% (↓) 99% (↑) 97.3% (↑) 79.2% = 2017	88.4% (†) 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	= 2021 -= 2020 -= 2019 -= 2018 -= 2017	80%= 2021 75%= 2020 80%= 2019 -= 2018 -= 2017	95% (↑) 93% (↑) 85% = 2019 85% (↑) 55% = 2017	100% 89.3% = 2020 - = 2019 80% = 2018 -= 2017	94% (\bigcup) 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

KEY INDICATORS		PE		THs TARGET S	MEASUREMEN T		
	KBTH	KATH	TTH	CCTH	HTH	ъ	
Institutional All-cause mortality rate	10.15% (†) 8.3% (†) 7.6% 7.6% (↓) 8.2% = 2017	7.42% (\downarrow) 8.12% (\uparrow) 7.46% (\uparrow) 6.6% (\downarrow) 7.8%= 2017	6.6% (↑) 2.7% (↓) 5.6% (↑) 4.8% (↓) 5.0% = 2017	11.% (\downarrow) 12.35% (\uparrow) 10.3% (\uparrow) 9.1% (\uparrow) 8.7% = 2017	8.9% (\psi) 9.7% (\psi) 8.5%(\psi) 9.0% (\psi) 7.9% = 2017	5%	Total death /(Discharges + deaths) * 100
Theatre Deaths Rate	0.07% (\) 0.43% (\) 0.51% (\) 0.63% (\) 0.58%	$0.27\% (\downarrow)$ $0.347\% (\downarrow)$ $0.35\% (\downarrow)$ $0.61\% (\uparrow)$ $0.27\% = 2017$	0.33% (†) 0.24% (†) 0.2% (↓) 0.9% (†) 0.05%= 2017	0.4% (↑) 0.1% (↓) 0.6% (↑) 0.3% (↓) 0.4% = 2017	0.11% (\uparrow) 0.04% (\uparrow) 0 (\downarrow) 0.1% (\uparrow) 0 = 2017	0.5%	Total No. of deaths at the theatre (Including Recovery Wards) / Total Surgeries * 100

Provide Diagnostics Services

KEY INDICATO		PE	ERFORMANC	CE		THs TARGET	MEASUR EMENT
RS	KBTH	KATH	TTH	ССТН	HTH	S	
Utilization Radiological services	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	88.30% (↑) 77.7% (Aug-Dec) -= 2019 -= 2018 -= 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	87% (↓) 530.7% (↑) 86.9% (↑) 79.4% = 2018 - = 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	60%	Total Radiologica l Investigatio ns / Total
							Radio. request * 100
Total Radiology Investigations	$30,099 (46.43\%\uparrow)$ $20,554 (38.2\%\downarrow)$ $33,263 (76.6\%\uparrow)$ $18,858 (1.9\%\uparrow)$ $18,498 = 2017$	$55,601 (12.16\uparrow)$ $49,575 (9.4\%\downarrow)$ $54,741 (6.7\%\uparrow)$ $51,318 (4.3\%\uparrow)$ $49,209 = 2017$	$14,919 (21.3\% \downarrow)$ $18,962 (32.5\% \downarrow)$ $27,849 (131.5\% \uparrow)$ $12,030 (45.2\% \downarrow)$ $21,950 = 2017$	$20,587 (13.1\% \downarrow)$ $23,697 (16.8\% \uparrow)$ $20,285 (2.3\% \downarrow)$ $20,766 (27.1\% \uparrow)$ $16,341 = 2017$	$19,585 (8.8\%\uparrow)$ $18,009 (1.9\%\downarrow)$ $18,355 (0.3\%\uparrow)$ $18,303 (0.2\%\uparrow)$ $18,272 = 2017$	-	
Total Radio. request	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	62,964 (132.9% ↑) 27,034 (Aug-Dec.) -= 2019 -= 2018 -= 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	17,962 (302.1% \uparrow) 4,465 (74.7% \downarrow) 17,624 (6.9% \uparrow) 16,482 (1.3% \downarrow) 16,694 = 2017	= 2021 - = 2020 - = 2019 - = 2018 - = 2017	-	

Provide Diagnostics Services

KEY	<u> Diagnosuc</u>		EODMANIO	T.		THs	MEASUREMEN
INDICAT		PER	FORMANC	L		TARGET	T
ORS	KBTH	KATH	TTH	ССТН	HTH	S	
Utilization of Laboratory Services <i>Total</i>	$= 2021$ $= 2020$ $= 2019$ $= 2018$ $= 2017$ $1,514,553 (93.43\%\uparrow)$ $782,994 (22.4\%\uparrow)$	$76\% = 2021$ $- = 2020$ $- = 2019$ $- = 2018$ $- = 2017$ $214,001 (14.1\% \downarrow)$ $249,205 (22.6\% \downarrow)$	$= 2021$ $- = 2020$ $- = 2019$ $- = 2018$ $- = 2017$ $156,673 (235.1\% \uparrow)$ $46,752 (62.4\% \downarrow)$	$221.3\% (\downarrow)$ $260.3\% (\uparrow)$ $62.5\% (\downarrow)$ $78\% = 2018$ $-= 2017$ $180,415 25.4\% \downarrow)$ $241,858 (17.1\% \downarrow)$	$= 2021$ $- = 2020$ $- = 2019$ $- = 2018$ $- = 2017$ $113,393 (59.7\% \downarrow)$ $281,495 (21.3\% \uparrow)$	60%	Total Laboratory Investigations / Total Radio. request * 100
laboratory Investigatio ns Total Lab request	$639,717 (45.9\%\uparrow)$ $437,889 (2.9\%\uparrow)$ $425,396=2017$ $= 2021$ $-= 2020$ $-= 2019$ $-= 2018$	$322,163 (13.4\%\uparrow)$ $284,030 (8.7\%\uparrow)$ $261,310=2017$ $281,605=2021$ $-=2020$ $-=2019$ $-=2018$	$124, 210 (35.8\% \downarrow)$ $193,376 (52.3\% \uparrow)$ $126,970 = 2017$ $= 2021$ $-= 2020$ $-= 2019$ $-= 2018$	291,677 $(4.4\%\uparrow)$ 275,329 $(3.4\%\uparrow)$ 266,635 = 2017 73,953 $(20.40\%\downarrow)$ 92,907 $(50.1\%\uparrow)$ 61,900 $(4.1\%\uparrow)$ 59,478 = 2018	$232,061 (2.3\%\uparrow)$ $226,768 (14.9\%\uparrow)$ $197,390 = 2017$ $-= 2021$ $-= 2020$ $-= 2019$ $-= 2018$	-	
Availability of non-drug consumable s	-= 2017 = 2021 -= 2020 -= 2019 -= 2018 -= 2017	-= 2017 = 2021 -= 2020 -= 2019 -= 2018 -= 2017	-= 2017 = 2021 -= 2020 -= 2019 -= 2018 -= 2017	-= 2017 73.1% (↑) 68.34% (↓) 96.37% (↑) 95.85% = 2018 -= 2017	-= 2017 = 2021 87.5%= 2020 82.1%= 2019 85.7%= 2018 75%= 2017		Non-drug consumables available / Total non-drug consumables in the baskets (Baskets to be determined e.g. Gloves, gauze, syringes etc.)

COVID-19 Pandemic Response By THs

COVID-19 Response By THs

KEY INDICATORS	PERFORMANCE							
	KBTH	KATH	TTH	CCTH	HTH			
Total Positive Covid-19 Cases	2377= 2021	2,113 = 2021	604 = 2021	1108 = 2021	393= 2021			
Managed	862 = 2020	1,158 = 2020	374 = 2020	436 = 2020	187 = 2020			
Total Recoveries/ Discharged	2258= 2021	1,904 = 2021	573 = 2021	1042 = 2021	353= 2021			
	850 = 2020	941 = 2020	362 = 2020	393 = 2020	182 = 2020			
Covid-19 Recovery Rate (%) -	95%= 2021	90.1% = 2021	95%= 2021	94% = 2021	89.8%= 2021			
Institutional	98.6%= 2020	81.2% = 2020	96.8% = 2020	90.1% = 2020	97.3% = 2020			
Total Covid-19 Related Deaths	119= 2021	209 = 2021	31 = 2021	67 = 2021	62 = 2021			
	20 = 2020	196 = 2020	12 = 2020	27 = 2020	5 = 2020			
Covid-19 Death Rate (%) -	6.7% = 2021	9.89% = 2021	5.1% = 2021	6% = 2021	21.2%= 2021			
Institutional	2.3% = 2020	16.9% = 2020	3.2%= 2020	6.2%= 2020	2.7%= 2020			
Total Number Of Covid-19	895= 2021	494 = 2021	175 = 2021	284 = 2021	324= 2021			
Infection Among Staff	341 = 2020	368 = 2020	215 = 2020	131 = 2020	26 = 2020			
Proportion of Total Staff Who	33.48% =2021	8.4% = 2021	7% = 2021	25.6% = 2021	21.6%= 2021			
Tested Positive for Covid-19	5.1% = 2020	6.97% = 2020	7.7% = 2020	7.3% = 2020	2.4% = 2020			
Total Active Cases At The End	436= 2021	122= 2021	17 = 2021	0 = 2021	7= 2021			
of Year	61= 2020	8 = 2020	-= 2020	16 = 2020	0 = 2020			

OCCUPATIONAL HEALTH AND SAFETY & & QUALITY ASSURANCE

Provide OHS/ QA Services

KEY INDICATORS		PER	FORMAN	CE		THs TARGETS	MEASUREMEN T
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	IAKGEIS	
Work place	= 2021	0%= 2021	0 = 2021	0% = 2021	0% = 2021	1%	Total work place
related injuries	- = 2020	0% = 2020	0 = 2020	0% = 2020	0%= 2020		injuries resulting
resulting in	- = 2019	0%= 2019	0 = 2019	0% = 2019	0%= 2019		in deaths or
death or	0 = 2018	0%= 2018	0 = 2018	0%= 2018	0%= 2018		incapacitation /
incapacitation	1= 2017	- = 2017	0 = 2017	0%= 2017	0%= 2017		total injuries
							recorded
Total Staff	= 2021	= 2021	= 2021	24 (0.6% ↑)	39 (8.3% ↑)	-	
injuries	- = 2020	- = 2020	- = 2020	15 (25%↓)	36 (23.4%↓)		
recorded	- = 2019	- = 2019	- = 2019	20 (150%↑)	47 (20.5%↑)		
	- = 2018	- = 2018	- = 2018	8 (38.5%↓)	39 = 2018		
	- = 2017	- = 2017	- = 2017	13 = 2017	- = 2017		
Percentage of	= 2021	= 2021	= 2021	100% = 2021	100% = 2021	100%	
Health Workers	- = 2020	0.08% (\)	215 = 2020	100% = 2020	100%= 2020		Total no. of staff
who benefited	- = 2019	1.52% (↑)	- = 2019	100% = 2019	100%= 2019		benefiting from
from	16 (↓)	0.67% = 2018	- = 2018	100% = 2018	100%= 2018		OHS
Occupational	25 = 2017	- = 2017	- = 2017	100% = 2017	- = 2017		interventions/Tot
health and							al no. of staff *
safety							100
interventions							

BLACK = 2021, RED = 2020, GREEN = 2019, PURPLE = 2018, BLUE = 2017

Provide OHS/ QA Services Cont.

KEY INDICATORS				THS	MEASUREMENT		
INDICATORS	KBTH	KATH	TTH	ССТН	HTH	TARGETS	
Percentage of clients satisfied	-= 2021 -= 2020 33.4% = 2019 -= 2018 -= 2017	86.1%(↑) 72.2% (↓) 76% (↑) 53% (↓) 69%	31.30% (↓) 71.3% (↑) 47.9% (↓) 91.7% = 2018 - = 2017	84.3% (\) 93.4% (\) 97% (\) 87.3% (\) 96.8% = 2017	83.3% = 2021 - = 2020 - = 2019 - = 2018 - = 2017	95%	Total no. of client surveyed who are satisfied with health care services / total no. client surveyed * 100
Percentage of Staff satisfied	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	75.8% $- = 2020$ $39.7\% (\downarrow)$ $54\% (\downarrow)$ $55\% = 2017$	$= 2021$ $48.9\% = 2020$ $- = 2019$ $33.3\% (\downarrow)$ $50.4\% = 2017$	= 2021 46.5% (\psi) 62.5% (\psi) 36.5% (\psi) 55.9% = 2017	-= 2021 -= 2020 -= 2019 -= 2018 -= 2017	70%	Total no. of workers surveyed who are satisfied with work / total no. of workers surveyed * 100
Work place accident using needle stick injury as a proxy	0.33% = 2021 -= 2020 -= 2019 9.8 % (↑) 11.2% = 2017	1.4% (\downarrow) 0.70% (\downarrow) 1.79% = 2018 - = 2017	$0.65\% (\downarrow)$ $0.9\% (\downarrow)$ $1.6\% (\uparrow)$ $0.9\% = 2018$ $- = 2017$	1.1% (\uparrow) 0.67% (\uparrow) 0.06% (\downarrow) 0.4% (\downarrow) 0.6% = 2017	2.4% (†) 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	$26 = 2021$ $- = 2020$ $- = 2019$ $313 (18.7\% \downarrow)$ $385 = 2017$	75 (1.4% \uparrow) 23 (32.4% \downarrow) 34 (51.4% \downarrow) 70 = 2018 -= 2017	$17 (32\downarrow)$ $25 (26.5\%\downarrow)$ $34 (61.9\%\uparrow)$ $21 = 2018$ $- = 2017$	23 (91.7% \uparrow) 12 (\uparrow) 1 (80% \downarrow) 5 (37.5% \downarrow) 8 = 2017	39 (200↑) 13 (160%↑) 5 (25%↑) 4 = 2018 -= 2017	-	

Provide OHS/ QA Services Cont.

KEY INDICATOR		PE	RFORMANC	E		THs TARGETS	MEASURE MENT
S	KBTH	KATH	TTH	ССТН	HTH		
Availability of toilet facilities	1:5 = 2021 1:5 (↑) 1:4 = 2019 1:4 = 2018 = 2017	1:2= 2021 1:1.85 (\psi) 1:1.98 = 2019 1:1.98 (\psi) 1:1.66= 2017	1:6 (\uparrow) 1:7 = 2020 1:7 (\uparrow) 1:5 (\uparrow) 1:4 = 2017	$0.42 (\downarrow)$ $0.43 (\uparrow)$ $0.23 = 2019$ $0.23 = 2018$ $0.23 = 2017$	1:0.5 = 2021 1:0.5 = 2020 1:0.5 (↑) 1:0.5 = 2018 - = 2017		Total number of functionin g toilets / Average bed capacity
Total number of toilets Facility	456 (2.2% ↑) 446 (9.9%↑) 406 (7.1%↑) 379(15.7%↑) 325= 2017	494 = 2021 494 = 2020 494 = 2019 494 (4.9%↑) 471= 2017	$132 = (10\% \uparrow)$ $120 = 2020$ $120 = 2019$ $120(4.3\% \uparrow)$ $115 = 2017$	169 $(2.3\% \downarrow)$ 173 $(88\%\uparrow)$ 92 = 2019 92 = 2018 92 = 2017	$160 = 2021$ $160 = 2020$ $160 (2.6\%\uparrow)$ $156 = 2018$ $156 = 2017$	-	

Provide OHS/ QA Services Cont.

KEY		PF	ERFORMANCE	1		THs	MEASUREME
INDICATO RS	KBTH	KATH	TTH	ССТН	нтн	TARGETS	NT
Availability of	0.35 (†)	0.19 (\psi)	- = 2021	0.18 (↓)	0.23 (↑)	-	Number of wash
Hand hygiene	0.25 (†)	0.21 (\psi)	1:19 (†)	0.43 (†)	0.21 (↑)		basin / Number
facilities using	0.22 (↑)	0.22 (↓)	1:16 (†)	0.23 = 2019	0.15 (↑)		of staff
wash basins	0.17 (↓)	0.28 (↑)	1:15 (↓)	0.23 = 2018	0.8 (\psi)		
and bed	0.19 = 2017	0.25 = 2017	1:30 = 2017	0.23= 2017	0.18 = 2017		
capacity as	1	1	1	1	1		
proxy					<u> </u>		
Total number	1,350 (0.7% ↑)	1,008 = 2021	154 = 2021	368 = 2021	380= 2021	-	
of wash	1,341 (21.4% ↑)	1,089 = 2020	154 = 2020	368 (53.3%↑)	375 = 2020		
basins	1,105 (7.2% ↑)	1,089 = 2019	154 = 2019	240 = 2019	375 = 2019		
	1,031 (4.5% ↑)	1,089 (8.3% ↑)	154 (105.3% ↑)	240 = 2018	375 = 2018		
	987 = 2017	1,006= 2017	75 = 2017	240 = 2017	375 = 2017		
Adverse	= 2021	74= 2021	- = 2021	46 (71.1% ↓)	24 (33.3%↓)	40	Total number of
Events	- = 2020	17(55.3%↓)	17 (6.3%↑)	159 (3.9% ↑)	36 (140%↓)		incidents reported
	- = 2019	38 (2.6%↓)	16 (23.1% ↑)	153 (54.5% ↑)	15		
	- = 2018	39 (26.4%↓)	13 (18.2%↑)	99 (19.3%↑)	- = 2018		
	- = 2017	53= 2017	11 = 2017	83 = 2017	- = 2017		

Provide Staff Development & Training & Staff Welfare Support

KEY INDICATOR		PEF	RFORMAN	CE		THs TARGETS	MEASUREMEN T
S	KBTH	KATH	TTH	ССТН	HTH	THE CLIP	
Proportion of	28% (↑)	47.73% (↑)	5% (↓)	30.86% (\)	9.6% (†)	100%	Number of staff
staff	22% (↑)	46.8% (↓)	27% (↓)	45.1% (†)	1.93% (↓)		appraised / total
Appraised	16.3% (↓)	61.8% (↓)	30% (↑)	39% (↑)	43.0% (↑)		number of staff
	17% (↓)	80.25 % (↑)	26% (↓)	37.7% (↓)	16.4% (\)		* 100
	25% = 2017	53% = 2017	27% = 2017	60% = 2017	20.0% = 2017		
Consultant to	1:4.1 (†)	1:3 (↑)	1:2 (↓)	1:1.4 (↓)	1:1.5 (†)	1:3	Number of
Resident	1:0.7 (↓)	1:2= 2020	1:3 = 2020	1:5 (↑)	1:1= 2020		Consultant and
Doctor ratio	1:1.3 (†)	1:2 (↓)	1:3 = 2019	1:4 (↓)	N/A = 2019		Senior
	1:1.1 (†)	1:5 (↑)	1:3 = 2018	1:7 (↓)	N/A = 2018		Specialist / total
	1:0.7 = 2017	1:4 = 2017	N/A= 2017	1:12 = 2017	N/A = 2017		number of
							Resident
							Doctors
Doctor to	= 2021	1:3 (↓)	1:7 (↓)	1:7 (↑)	1:7 (↓)	1:5	Total number of
Nurse/Midwif	1:5 = 2020	1:5 (†)	1:9 = 2020	1:5 = 2020	1:9 (\1)		Doctors in the
e Ratio	1:5 (↓)	1:4 (↓)	1:9 (†)	1:5 (†)	1:13 (†)		hospital / Total
	1:7 = 2018	1:5 (↑)	1:8 = (↑)	1:4 (↓)	1:8 (↓)		of Nurses
	1:7 = 2017	1:3 = 2017	1:6 = 2017	1:5 = 2017	1:11= 2017		OT THUISOS

Provide Staff Development & Training & Staff Welfare Support

KEY INDICATORS		PE		THs TARGETS	MEASUREMEN T		
I Water one	KBTH	KATH	TTH	ССТН	HTH		
Doctor:	7:1 (↑)	9:1 (†)	3:1 (↓)	6.4:1 (↓)	5:1 (↑)	10:1	Total number
Pharmacist	6:1 (↓)	9:1 (↓)	4:1 (↓)	9:1 (†)	4:1= 2020		of Doctors in
Ratio	7:1 (↑)	10:1 (†)	7:1 (↑)	8.5:1 (↓)	4:1 (↑)		the hospital /
	3:1 = 2018	3:1 (↓)	6:1 (\big\)	15.1:1 (†)	3:1 (↑)		Total number
	3:1 = 2017	5:1 = 2017	7: 1 = 2017	12.6:1 = 2017	2:1= 2017		of pharmacist
No. Of welfare	7= 2021	7= 2021	3 = 2021	2 = 2021	1 = 2021	-	Total Number
packages	2 = 2020	7= 2020	3 = 2020	3 = 2020	1 = 2020		of welfare
available	2 = 2019	7 = 2019	2 = 2019	2 = 2019	1 = 2019		packages
	2 = 2018	7 = 2018	2 = 2018	2 = 2018	1= 2018		provided for
	2 = 2017	7 = 2017	2 = 2017	2 = 2017	1=2017		staff

KEY ACHIEVEMENTS - FINANCE

Revenue Mobilization & Financial Monitoring Support Services

KEY			PERFORMANCE			THs	MEASUREME
INDICATORS	KBTH	KATH	TTH	ССТН	нтн	TARGETS	NT
IGF	134,049,354.00	94,240,353.99	24,723,816.17	24,217,381.36	20,218,627.01	-	Total revenue
Revenue	116,159,035.59	73,716,476.98	18,664,708.74	22,268,693.6	15,868,137.07		collected
	111,233,708.82	79,435,141.99	20,874,378.12	21,579,680	15,645,456.93		
	94,531,528.66	69,590,563.41	17,117,126.15	18,944,945.89	13,618,289.93		
	87,085,455.00	63,193,002.36	16,778,766.78	17,089,470	12,059,263.42		
IGF	487,520,271.00	93,181,607.40	21,156,090.47	24,665,476.40	17,002,246.15	-	Total
Expenditure	4407,197,572	80,213,699.25	19,020,975.04	24,832,641.11	16,336,544.40		expenditure
Expellulture	276,938,524	81,061,006.25	15,921,903.23	20,761,126.11	15,197,553.82		
	89,954,675.00	68,891,790.33	13,326,806.23	19,935,983.92	12,920,797.65		made
	82,598,347.00	63,794,573.28	15,394,985.21	14,027,784	12,708,675.04		
		R	EMARKS	S			
<i>IGF</i>	2021 = 15% (↑)	2021= 27.84% ↑	2021 = 32.5% ↑	2021 = 8.8% ↑	2021 = 27.4% ↑		
Revenue	2020 = 4.4% ↑	2020 = 7.2% ↓	2020 = 10.6 %↓	2020 = 3.2 %↑	2020 = 1.4% ↑		
Kevenue	2019 = 17.7% ↑	2019 = 14.1% ↑	2019 = 22% ↑	2019 = 13.9% ↑	2019 = 14.9% ↑		
	2018 = 8.6 %↑	2018 = 12.1% ↑	2018 = 2 %↑	2018 = 10.9% ↑	2018 = 12.9% ↑		
<i>IGF</i>	2021 = 23 % ↑	2021=16.17%↑	2021 = 11.2% ↑	2021 = 0.7% ↓	2021 =4.1% ↑		
Expenditure	2020 = 47% ↑	$2020 = 1.05\% \downarrow$	2020 = 19.46% ↑	2020 = 19.6% ↑	2020 = 7.5% ↑		
Expenditure	2019 = 207.9% ↑	2019 = 17.7% ↑	2019 = 19.47% ↑	2019 = 4.13% ↑	2019 = 17.6% ↑		
	2018 = 8.9 %↑	2018 = 7.99% ↑	2018 = 13.43%↓	2018 = 42.1% ↑	2018 = 1.67% ↑		

Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS		P	ERFORMANCE			THS	MEASUREMEN T
HOLLIONS	KBTH	KATH	TTH	ССТН	НТН	TARGETS	1
NHIS Claims	96% (↑)	44.14% (\)	52.6% (↓)	52.1% (↑)	41.18% (↓)	75%	Total insurance
Reimbursement	51% (†)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (†)		claims
Rate (submitted	47% (↓)	18.42% (↓)	33 % (↓)	21.89% (†)	23.62% (↓)		reimbursed/total
	96.28% (†)	28.20% (↓)	34% (↓)	20.88% (\)	29.41% (↓)		insurance claims
claims paid	96.08% = 2017	41.10% = 2017	68% = 2017	58.68% = 2017	51.23% = 2017		submitted
Debtors days	196 (↑)	168 (↓)	212 (↓)	194 (↓)	242 (†)	90	Debtors / Total
	192 (↑)	197 (↓)	239 (\psi)	215 (↓)	102 (↓)		Credit Revenue *
	184 (↓)	298 (†)	241 (↓)	393 (↑)	208 (†)		365
	273 (↑)	262 (↓)	406 (↑)	346.29 (†)	204 (†)		
	247 = 2017	275 = 2017	149 = 2017	283.22 = 2017	122 = 2017		
Creditors days	128 (↑)	130 (↓)	194 (†)	224.8 (†)	130 (↓)	120	Creditors / Total
	106 (↓)	133 (↑)	111 (↓)	182 (†)	153 (†)		Credit Purchases *
	108 (↓)	132 (↑)	184 (↓)	175 (↑)	147 (↓)		365
	172 (↑)	131 (↓)	360 (↑)	100.82 (↓)	157 (↑)		
	169 = 2017	162 = 2017	125 = 2017	184.73 = 2017	150 = 2017		
Proportion of	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (\)	5%	total amount spend
IGF revenue	7.2% (↓)	6.87% (↑)	5.45% (↑)	3.51% (\)	1.49% (†)		on PPM/total IGF
spent on PPM	10.2% (↑)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
Spont on 1 1 W	5.9% (↑)	4% (↓)	4% (↑)	3.52% (\)	1.32% (†)		
	3.1% = 2017	4.61% = 2017	3% = 2017	4.13% = 2017	1.18%= 2017		

Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS		PE		THs TARGET S	MEASURE MENT		
	KBTH	KATH	TTH	ССТН	нтн	ъ	
Percentage IGF paid as compensation	$14\% (\downarrow)$ $22.3\% (\uparrow)$ $20.6\% (\uparrow)$ $20.3\% (\downarrow)$ $22\% = 2017$	6.76%(\big) 7.76% (\big) 6.07% (\big) 16% (\big) 14.97% = 2017	$14.1\% (\downarrow)$ $15.3\% (\uparrow)$ $14.5\% (\downarrow)$ $16\% (\uparrow)$ $12.4\% = 2017$	$7.8\% (\downarrow)$ $10.82\% (\uparrow)$ $9.55\% (\downarrow)$ $9.68\% (\downarrow)$ $11.47\% = 2017$	2.32% (\) 5.95 % (\) 6.12 % (\) 7.27 % (\) 9.69 % = 2017	10%	total amount spend on salaries /total IGF
Ratio of cash revenue to NHIA reimbursement	1:0.17 (\downarrow) 1:0.23 (\uparrow) 1:0.14 (\uparrow) 1:0.21 (\downarrow) 1:1.22 = 2017	2.66:1 2.66:1(↑) 2.33:1(↑) 1.99:1 (↑) 1.49:1 = 2017	0.12:1 (\psi) 0.4:1 (\psi) 0.7:1 (\psi) 1.5:1 (\psi) 0.4:1= 2017	1.1:1 (↑) 0.85:1 (↓) 1.32:1 (↑) 0.66:1 = 2018 -= 2017	$0.94:1(\uparrow)$ $0.89:1(\uparrow)$ $0.76:1(\downarrow)$ $0.88:1(\downarrow)$ $1.01:1=2017$	-	Cash Revenue/ NHIS revenue reimbursem ent

STATUS OF NHIA CLAIMS

KEY INDICATOR		PER	FORMAN	CE		THs TARGETS	MEASUREMEN T
S	KBTH	KATH	TTH	ССТН	НТН	IARGEIS	
Percentage of NHIA Claims Submitted on time	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	100% = 2021 100% = 2020 100% = 2019 100% = 2018 100% = 2017	100%=2021 75% =2020 100%= 2019 100%= 2018 100%= 2017	-	Total number of claims submitted to NHIS at the end of the ensuing month / Total Number of claims submitted to
Percentage of rejection on claims	3.1% (\(\psi\) 3.2% (\(\psi\) 3.4% (\(\psi\) 3.72% (\(\psi\)	3.95% (\1) 4.19% (\1) 3.59% (\1) 5% = 2018	0% = 2021 - = 2020 - = 2019 - = 2018	0% = 2021 $0% = 2020$ $0% = 2019$ $0% = 2018$	5.74% (↑) 3.44% (↑) 2.92% (↓) 9.86% (↓)	-	NHIA by all facilities * 100 Total number of rejected claims received from NHIS / Total
submitted to NHIS	3.92% = 2017	5% = 2017	-= 2017	0% = 2017	10%= 2017		Number of claims submitted to NHIA by all facilities * 100

STATUS OF NHIA CLAIMS

KEY INDICATORS		PE	RFORMANCI	E	
INDICATORS	KBTH	KATH	TTH	CCTH	HTH
Unpaid Claims Bal B/F	11,631,852.73 15,948,982.36	15,039,866.36 22,661,681.81	13,010,758.48 16,858,427.96	11,416,564 12,643,564	5,595,977.49 5,720,134.10
	9,363,691.5 8,368,205.03 11,959,148.85	18,489,499.30 14,510,720.16 17,689,233.47	12,188,627.96 6,711,309.40 5,810,803.39	8,276,944 8,041,108.90 6,613,799.00	4,857,387.52 2,315,338.16 2,805,060.85
Claims Submitted	21,715,905.93 23,380,084.47 21,459,429.64	24,918,331.50 19,967,749.69 23,535,307.72	14,440,672.23 12,091,438.38 14,526,312.09	12,304,287.46 11,368,136 11,734,191.92	10,500,578.30 7,695,973.22 8,168,487.24
	16,260,621.98 15,456,089.52	22,310,669.71 21,613,761.16	11,173,862.27 11,409,035.29	9,629,551.55 10,549,108	7,233,580.26 6,459,913.11
		REMA	KKS		
Unpaid Claims Bal B/F	$2021 = 33.77\%$ \\ $2020 = 70.3\%$ \\ $2019 = 11.9\%$ \\ $2018 = 42.9\%$ \\	$2021 = 33.6\% \downarrow$ $2020 = 22.6\% \uparrow$ $2019 = 27.4\% \uparrow$ $2018 = 18\% \downarrow$	$2021 = 47.4\%$ \\ $2020 = 38.3\%$ \\ $2019 = 81.6\%$ \\ $2018 = 15.5\%$ \\	$2021 = 9.7\% \uparrow$ $2020 = 52.8\% \uparrow$ $2019 = 2.9\% \uparrow$ $2018 = 21\% \uparrow$	$2021 = 2.2\%$ \\ $2020 = 17.8\%$ \\ $2019 = 110\%$ \\ $2018 = 17.5\%$ \\
Claims Submitted	$= 2021$ $2020 = 9\%\uparrow$ $2019 = 32\%\uparrow$ $2018 = 5.2\%\uparrow$	$2021=24.8\%\uparrow$ $2020=15.2\%\downarrow$ $2019=5.5\%\uparrow$ $2018=3.2\%\uparrow$	$2021 = 52.6\% \uparrow$ $2020 = 16.8\% \downarrow$ $2019 = 30\% \uparrow$ $2018 = 2.1\% \downarrow$	$2021 = 8.2\% \uparrow$ $2020 = 3.1\% \downarrow$ $2019 = 21.9\% \uparrow$ $2018 = 8.7\% \downarrow$	$2021=36.4\%\uparrow$ $2020=5.8\%\downarrow$ $2019=12\%\uparrow$ $2018=12\%\uparrow$

STATUS OF NHIA CLAIMS

KEY INDICATORS			PERFORMANCE		
	KBTH	KATH	TTH	ССТН	HTH
Claims Paid	23,241,956.40	22,246,751.82	14,440,672.23	10,748,624.26	6,665.345.90
Claims I ald	27,149,506.51	30,050,902.49	16,736,620.00	12,715,888	9,994,263.53
	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 At	9,890,453.07	16,881,427.66	13,010,758.48	6,795,023.32	5,595,977.49
	16,713,814.50	10,429,983.32	13,407,963	11,416,143	2,622,589.53
end of the year	12,179,560.32	21,385,995.36	16,858,427.96	12,643,564.86	5,720,134.10
	9,363,691.53	18,503,027.46	12,188,627.56	8,276,944.34	4,857,387.52
	8,368,205.03	14,510,720.16	6,711,309.40	8,041,109	2,315,338.16
		REMA	RKS		
Claims Paid	$2021 = (67\% \downarrow)$	$2021 = (55.6\% \downarrow)$	$2021 = (52.6\% \downarrow)$	$2021 = (15.5\% \downarrow)$	$2-21 = (33.3\% \downarrow)$
Ciaims I aia	2020 = (80.6%)	$2020 = (58.4\%\uparrow)$	$2020 = (71.6\%\uparrow)$	$2020 = (72.6\%\uparrow)$	$2020 = (61.8\%\uparrow)$
	2019 = (1.5%)	$2019 = (9.5\%\uparrow)$	2019 = (57.7%↑)	$2019 = (21.6\% \downarrow)$	$2019 = (33.2\%\uparrow)$
	$2018 = (14.9\% \downarrow)$	$2018 = (25.8\% \downarrow)$	2018 = (64%)	2018 = (3%)	2018 = (20.5%)
Outstanding As At	$2021 = (23\% \downarrow)$	$2021 = (42.2\% \downarrow)$	$2021 = (47.4\% \downarrow)$	$2021 = (40.5\% \downarrow)$	2021 = 113.4% ↑)
	$2020 = (37.2\%\uparrow)$	$2020 = (51.2\% \downarrow)$	$2020 = (20.5\% \downarrow)$	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%)	$2019 = (17.8\%\uparrow)$
	$2018 = (11.9\%\uparrow)$	$2018 = (27.5\%\uparrow)$	$2018 = (81.6\%\uparrow)$	$2018 = (2.9\%\uparrow)$	$2018 = (109.8\%\uparrow)$
No Of Month	6 = 2021	7= 2021	6 (†)	6 = 2021	7 (1)
	6 (↓)	5 (↓)	5 (\psi)	$6 (\downarrow) = 2020$	4 (↓)
Outstanding	9	9 (†)	8 (↑)	8	8
	9 (†)	6 (9)	6	8 (↑)	8 (↑)
	8 = 2017	6 = 2017	6 = 2017	6 = 2017	4 = 2017

SUPPORT TO PERIPHERAL INSTITUTIONS

Key Activity Achievements in 2021

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

KEY OUTPUTS ACHIEVEMENTS

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR		PER		THs TARGETS	MEASUREMEN T		
S	KBTH	KATH	TTH	ССТН	HTH		
Proportion of	= 2021	84%= 2021	= 2021	100% (↑)	- = 2021	70%	Number of district
planned	- = 2020	- = 2020	-= 2020	50%	- = 2020		and regional
specialist	- = 2019	- = 2019	- = 2019	50% (↓)	- = 2019		hospitals
outreach	- = 2018	- = 2018	- = 2018	150% (↑)	- = 2018		supported with
support to	- = 2017	- = 2017	- = 2017	100% =	- = 2017		specialist outreach
facilities				2017	_ 5 _ 7		visits as planned /
carried out.							Number of
carred out.							regional and
							district hospitals
							planned to be
							covered with
							Specialist
							outreach visits
Outreach	= 2021	26 = 2021	= 2021	100%	- = 2021	16%	Total number of
visits carried	-= 2020	- = 2020	- = 2020	100%	- = 2020		outreach visits
out	- = 2019	- = 2019	- = 2019	100%	- = 2019		carried out / Total
	- = 2018	26 = 2018	- = 2018	100%	- = 2018		visit planned *100
	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR		PER		THs TARGETS	MEASUREMEN T		
	KBTH	KATH	TTH	ССТН	HTH		
	= 2021	26= 2021	= 2021	406 (147.6% ↑)	- = 2021	-	
Total number	-= 2020	18 (2.7%↓)	- = 2020	164 (5.8%↓)	-= 2020		
of facilities	- = 2019	23 (9.5%↑)	- = 2019	174 (↑)	- = 2019		
visited	27 (50% ↑)	21 (5%↑)	- = 2018	17 = 2018	- = 2018		
	18 = 2017	20 = 2017	- = 2017	- = 2017	- = 2017		
	= 2021	31= 2021	= 2021	406 (147.6% ↑)	-= 2021	-	
	12 = 2020	21(8.7% ↓)	- = 2020	164 (5.8%↓)	-= 2020		
Number of	- = 2019	23 (15%↑)	- = 2019	174 (↑)	- = 2019		
visits planned	- = 2018	20 = 2018	- = 2018	17 = 2018	- = 2018		
	- = 2017	- = 2017	-=2017	- = 2017	- = 2017		
	= 2021	27, 859	= 2021	20,955 (153.2 ↑)	- = 2021	11,215	Total Number
Number of	2,606 = 2020	(206%↑)= 2021	- = 2020	8,276 (40.4% ↓)	-= 2020		of clients seen
Beneficiaries	- = 2019	9,101 (13.3%↑)	- = 2019	13,873 (†)	- = 2019		
recorded	561 (31.4% ↑)	8,034 (74.9%↓)	- = 2018	1,062 (55%↓)	-= 2018		
	427 = 2017	32,022 = 2018	- = 2017	2,359 = 2017	- = 2017		
		- = 2017					

SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEASUREMEN T
S	KBTH	KATH	TTH	ССТН	HTH		
Number of	= 2021 $10 = 2020$	26= 2021 18=2020	= 2021 -= 2020	406 (↑) 164 (↓)	- = 2021 - = 2020	-	
visits carried	- = 2019	23=2019	-= 2019	174 (†)	- = 2019		
out	- = 2018	26 = 2018	- = 2018	17 = 2018	- = 2018		
	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		
Outreach to	= 2021	242= 2021	= 2021	398 (↑)	- = 2021	-	
communities	27 = 2020	207 (↓)	- = 2020	102 (↓)	-= 2020		
	- = 2019	438 (↑)	- = 2019	168 (†)	- = 2019		
(no. of	- = 2018	16 = 2018	- = 2018	8 = 2018	- = 2018		
comm.)	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		
Outreach to schools	= 2021	14= 2021	= 2021	3 (↓)	- = 2021	-	
	- = 2020	4 (↓)	- = 2020	8 (↑)	- = 2020		
	- = 2019	24 (↑)	- = 2019	6	- = 2019		
	- = 2018	17 = 2018	- = 2018	6	- = 2018		
	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		
Surgical	= 2021	3= 2021	= 2021	1 = 2021	- = 2021	-	
	1 = 2020	2 (\psi)	- = 2020	$1 (\downarrow) = 2020$	- = 2020		
Outreach to	- = 2019	4 (\psi)	- = 2019	4 (↑) = 2019	- = 2019		
facilities	- = 2018	6 = 2018	- = 2018	2 = 2018	- = 2018		
Judinies	- = 2017	- = 2017	- = 2017	- = 2017	- = 2017		