

# MINISTRY OF HEALTH INTER-AGENCY REVIEW CONFERENCE



## ***GHANA TEACHING HOSPITALS JOINT 2022 ANNUAL PERFORMANCE REPORT***

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(on Behalf of all Teaching Hospitals in Ghana)***

***DATE: 12TH & 13TH APRIL, 2023***

***VENUE: MINISTRY OF HEALTH AUDITORIUM, ACCRA - GHANA***

## OUTLINE OF PRESENTATION

- Introduction**
- Background Information**
- 2022 THs Annual Performance Under Standardized Key Performance Indicators**
- Key Challenges**
- Outlook For 2023**
- 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 THs, and
2. Aid in standardized reporting to the Ministry of Health for its monitoring and performance review activities and holistic assessment reporting.
3. Inform and guide Policy decisions and strategic planning of tertiary healthcare in Ghana.

**This presentation reviews the 2022 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.

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## HEALTH SECTOR POLICY OBJECTIVES (S.O)

- HEALTH SECTOR OBJECTIVE 1:**  
Universal access to better and efficiently managed quality healthcare services
- HEALTH SECTOR OBJECTIVE 2:**  
Reduce avoidable maternal, adolescent and child deaths and disabilities
- HEALTH SECTOR OBJECTIVE 3:**  
Increase access to responsive clinical and public health emergency services

## THs MANDATE

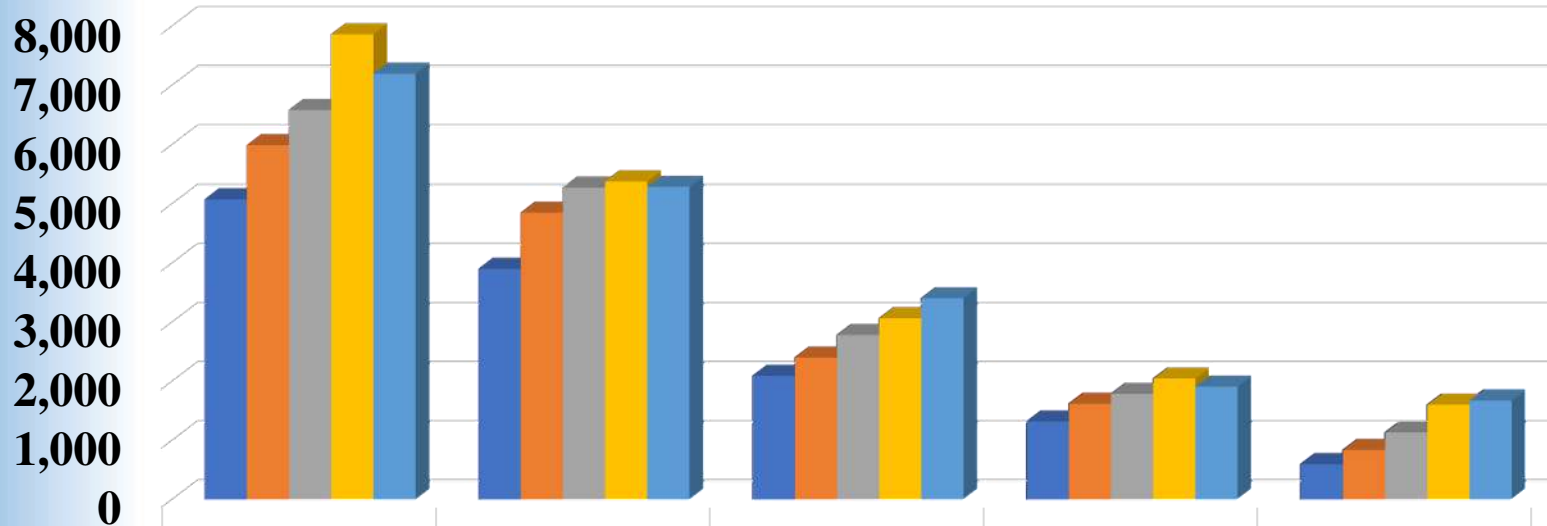
- THs Mandate 1:**  
Provision of Advanced Tertiary Health Care Services.
- THs Mandate 2:**  
Medical Education
- THs Mandate 3:**  
Undertake Research

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

# SELECTED HR TREND

## TREND ANALYSIS - TOTAL STAFF

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	5,082	3,909	2,097	1,325	605
■ 2019	5,997	4,857	2,408	1,627	844
■ 2020	6,590	5,280	2,790	1,792	1,141
■ 2021	7,869	5,385	3,073	2,051	1,610
■ 2022	7,204	5,293	3,411	1,915	1,682

### REMARKS :

- **KBTH STAFF =**  
 2022 = 7,204 (8.5% ↓)  
 2021 = 7,869 (19.4% ↑)  
 2020 = 6,590 (9.9% ↑)
- **KATH STAFF =**  
 2022 = 5,293 (1.71% ↓)  
 2021 = 5,385 (1.98% ↑)  
 2020 = 5,280 (8.71% ↑)
- **TTH STAFF =**  
 2022 = 3,411 (11% ↑)  
 2021 = 3,073 (10.1% ↑)  
 2020 = 2,790 (15.9% ↑)
- **CCTH STAFF =**  
 2022 = 1,915 (6.6% ↓)  
 2021 = 2,051 (14.5% ↑)  
 2020 = 1,792 (10.1% ↑)
- **HTH STAFF =**  
 2022 = 1,682 (4.5% ↑)  
 2021 = 1,610 (41.1% ↑)  
 2020 = 1,141 (35.2% ↑)

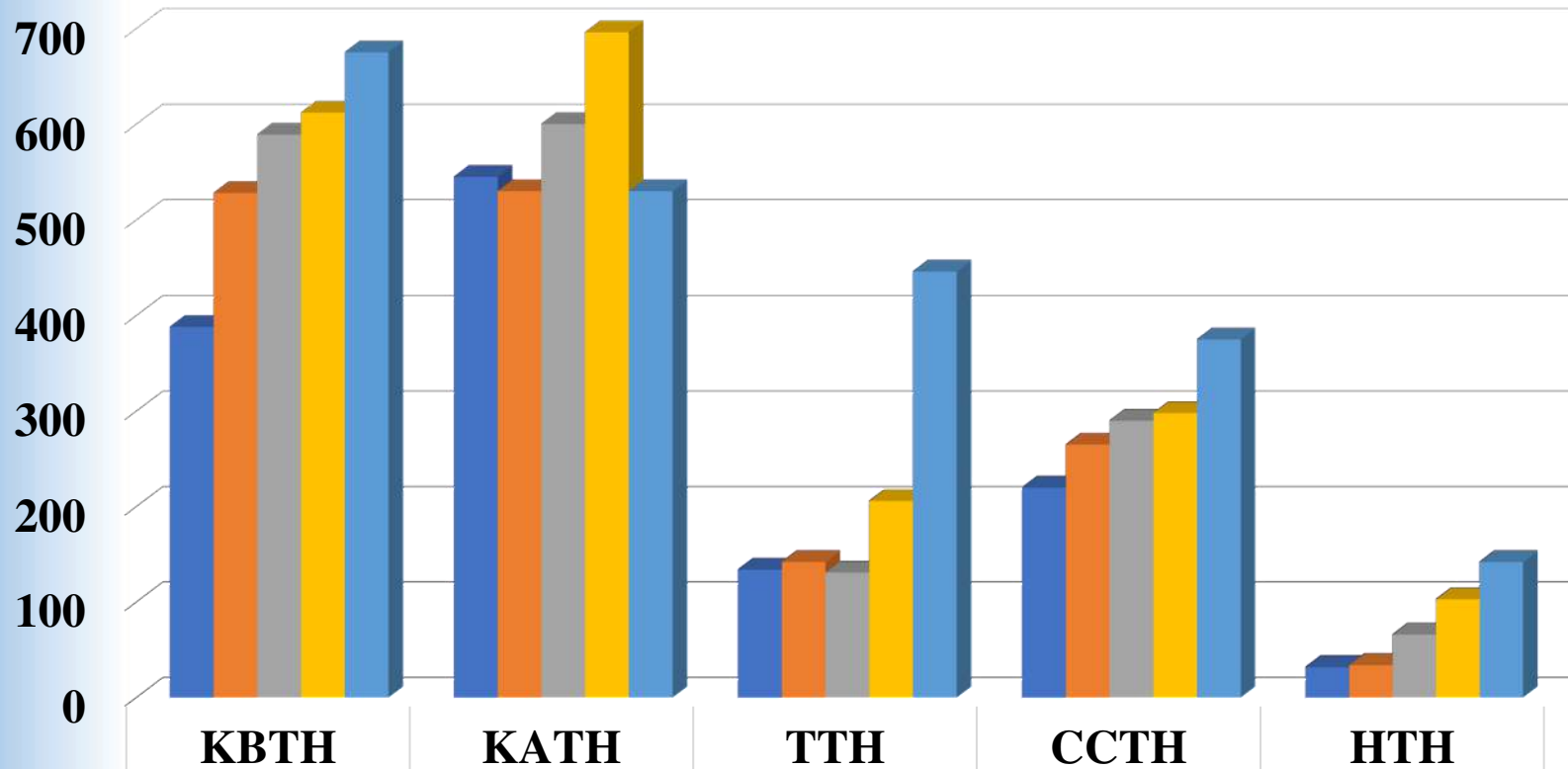
### Recommendation:

**NOTE: BED CAPACITY OF THE TEACHING HOSPITALS:**  
 KBTH = 1538; KATH = 1068; TTH = 852; CCTH = 400; HTH = 306

# SELECTED HR TREND

## TREND ANALYSIS OF TOTAL DOCTORS

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



■ 2018	389	546	135	221	33
■ 2019	529	531	143	266	35
■ 2020	590	601	132	291	67
■ 2021	613	697	207	299	104
■ 2022	676	531	447	376	143

## REMARKS :

- KBTH:**  
 2022 = 676 (10.27%↑)  
 2021 = 613 (3.89 % ↑)  
 2020 = 590 (11.53%↑)
- KATH:**  
 2022 = 531 (23.81% ↓)  
 2021 = 697 (15.9↑)  
 2020 = 601 (13.2↑)
- TTH:**  
 2022 = 447 (116% ↑)  
 2021 = 207 (56.8%↑)  
 2020 = 132 (7.7%↓)
- CCTH:**  
 2022 = 376 (25.75% ↑)  
 2021 = 299 (2.8% ↑)  
 2020 = 291 (9.4% ↑)
- HTH:**  
 2022 = 143 (37.5% ↑)  
 2021 = 104 (55.2 ↑)  
 2020 = 67 (91.4%↑)

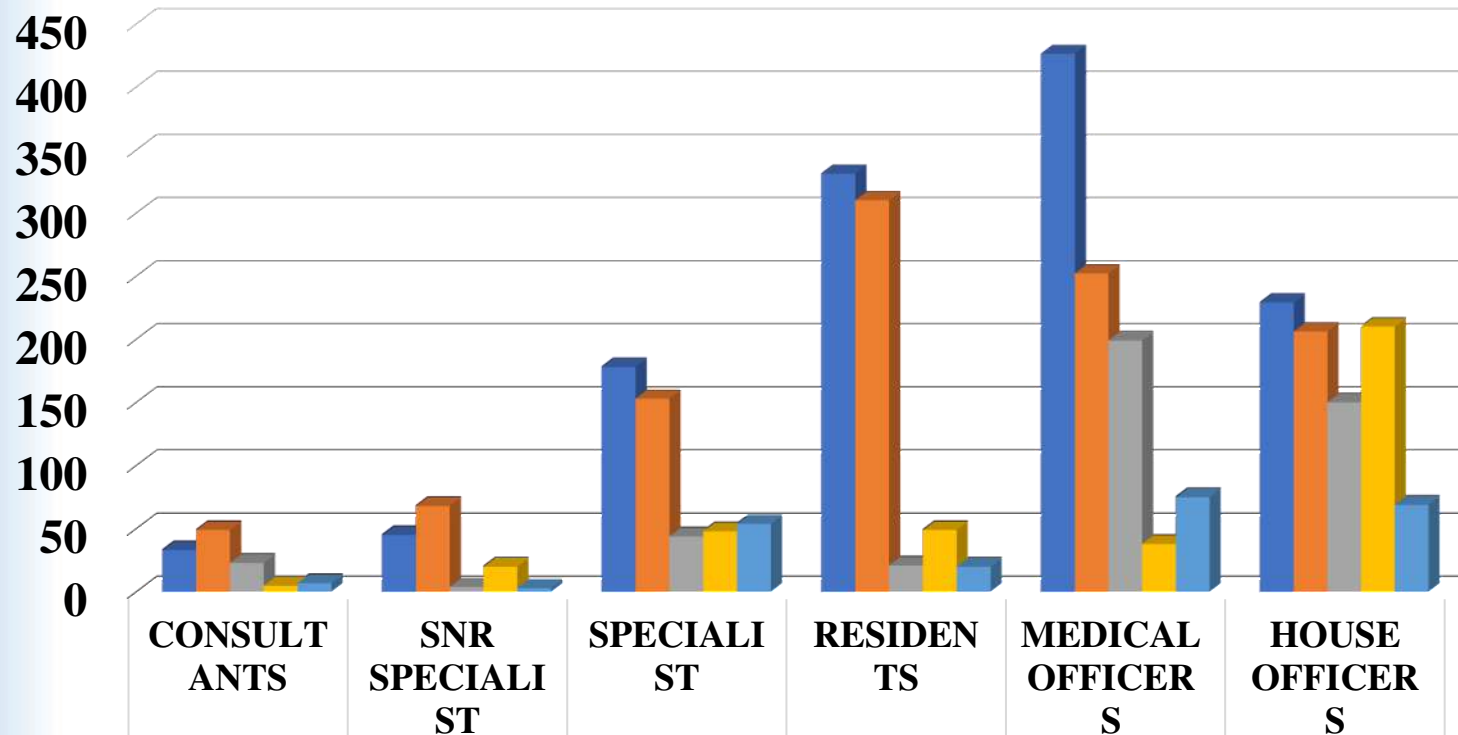
## Recommendation:



# SELECTED HR TREND

## COMPARATIVE ANALYSIS OF CATEGORY OF DOCTORS AT THs IN 2022

■ 2022 KBTH ■ 2022 KATH ■ 2022 TTH ■ 2022 CCTH ■ 2022 HTH



■ 2022 KBTH	34	46	179	332	427	230
■ 2022 KATH	50	69	154	311	253	207
■ 2022 TTH	24	5	45	22	200	151
■ 2022 CCTH	6	21	49	50	39	211
■ 2022 HTH	8	4	55	21	76	70

## REMARKS :

- **Consultants:**  
Highest No. = KATH, 50 (1.7% ↑)  
Least No. = CCTH, 6 (No change)
- **Snr. Specialists:**  
Highest No. = KATH, 78 (8.2% ↓)  
Least No. = HTH, 4 (50% ↓)
- **Specialists:**  
Highest No. = KBTH, 179 (26.95% ↑)  
Least No. = TTH, 45 (89% ↑)
- **Residents:**  
Highest No. = KBTH, 332 (14.43% ↓)  
Least No. = HTH, 21 (133.3% ↑)
- **Medical Officers:**  
Highest No. = KBTH, 427 (15.40% ↑)  
Least No. = CCTH, 39 (15.22% ↓)
- **House Officers:**  
Highest No. = KBTH, 230 (19.79% ↑)  
Least No. = HTH, 70 (9.1% ↓)

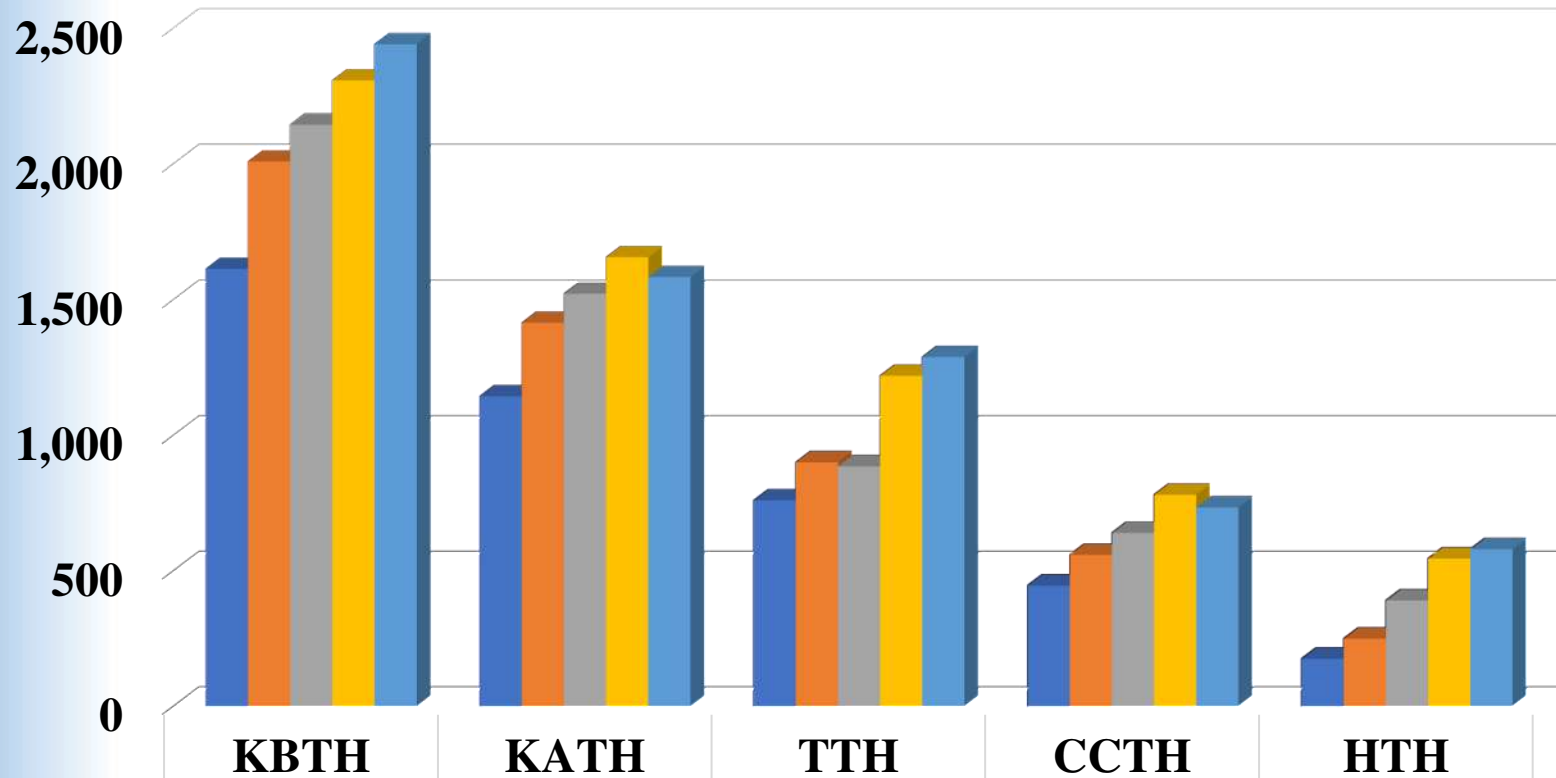
## RECOMMENDATION:

- ✓ Provision of Staff Accommodation via Public Private Partnership (PPP)

# SELECTED HR TREND

## TREND ANALYSIS OF PROFESSIONAL NURSES

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



■ 2018	1,616	1,147	763	449	179
■ 2019	2,011	1,418	904	562	253
■ 2020	2,147	1,525	889	643	394
■ 2021	2,310	1,659	1,223	784	549
■ 2022	2,443	1,586	1,292	737	583

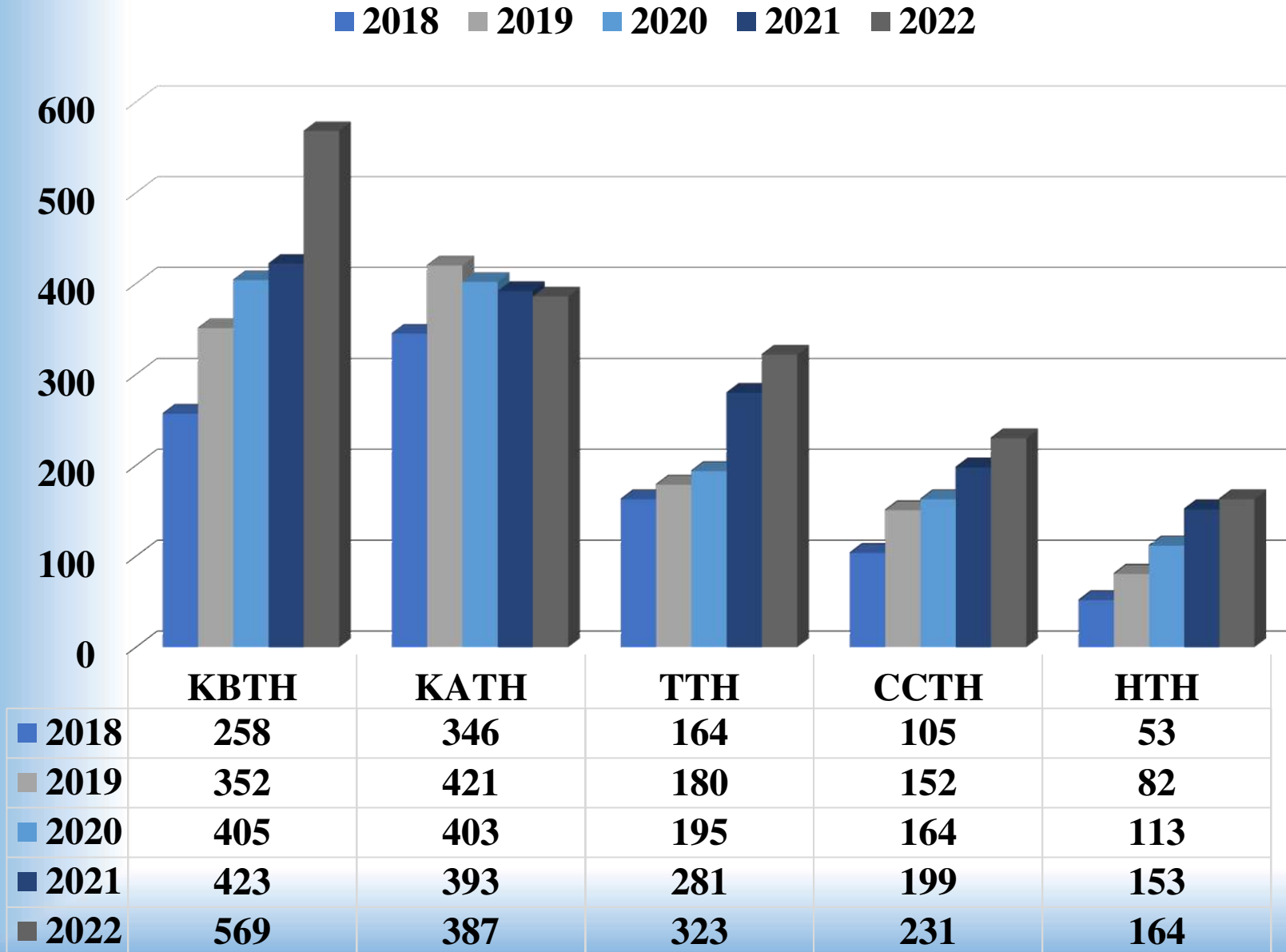
### REMARKS :

- KBTH:**  
 2022 = 2443 (5% ↑)  
 2021 = 2310 (7.6% ↑)  
 2020 = 2,147 (6.8% ↑)
- KATH:**  
 2022 = 1,586 (4.40 ↓)  
 2021 = 1,659 (8.79% ↑)  
 2020 = 1525 (7.6% ↑)
- TTH:**  
 2022 = 1,292 (5.6% ↑)  
 2021 = 1,223 (37.6% ↑)  
 2020 = 889 (1.7% ↓)
- CCTH:**  
 2022 = 737 (6.0% ↓)  
 2021 = 784 (21.9% ↑)  
 2020 = 643 (14.4% ↑)
- HTH:**  
 2022 = 583 (6.1% ↑)  
 2021 = 549 (47.7% ↑)  
 2020 = 394 (55.7% ↑)

### Recommendation:

# SELECTED HR TREND

## TREND ANALYSIS OF TOTAL NUMBER OF MIDWIVES



## REMARKS :

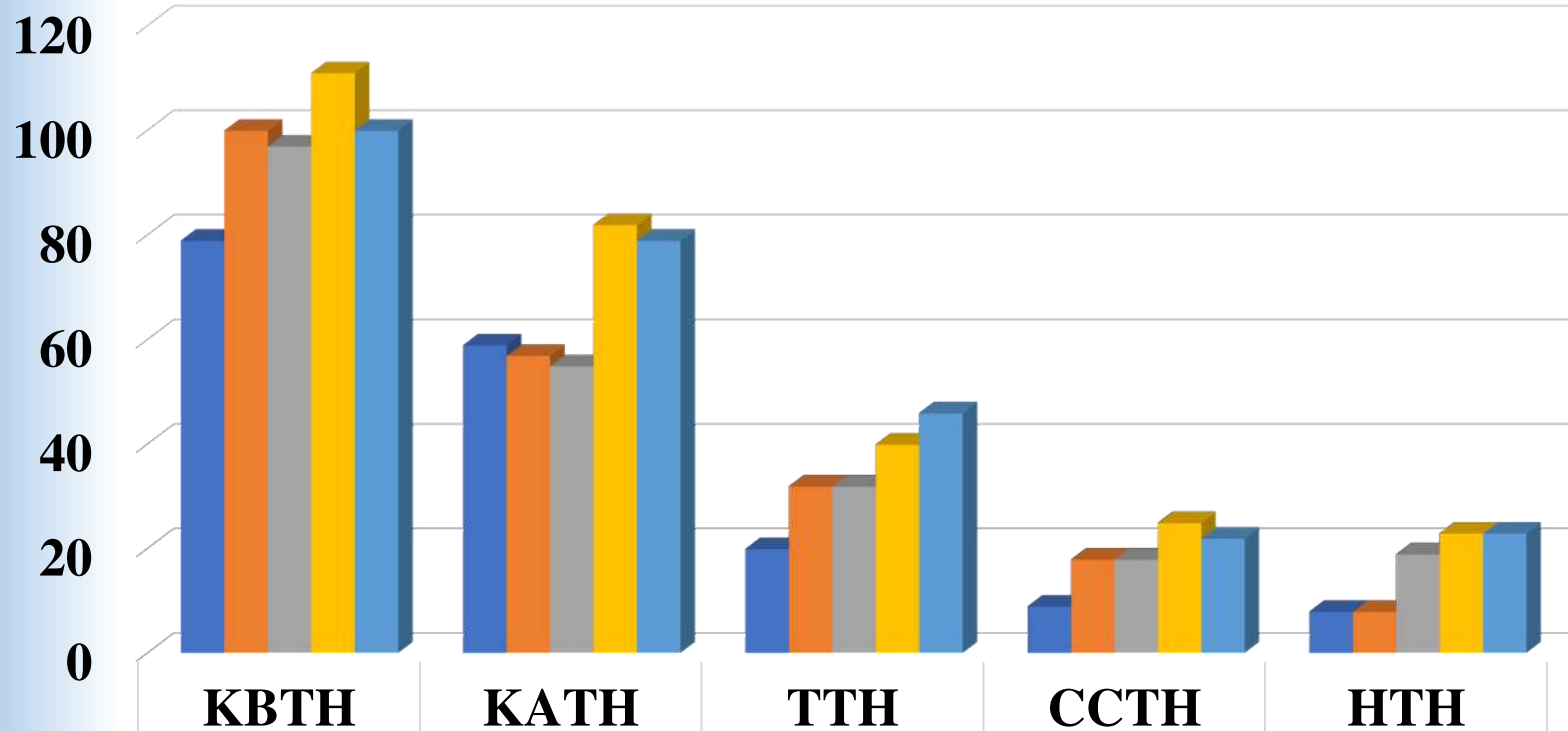
- KBTH:**  
 2022 = 569 (34.51% ↑)  
 2021 = 423 (4.4% ↑)  
 2020 = 405 (0.3% ↑)
- KATH:**  
 2022 = 387 (1.53% ↓)  
 2021 = 393 (2.48% ↓)  
 2020 = 403 (4.3% ↓)
- TTH:**  
 2022 = 323 (14.9% ↓)  
 2021 = 281 (44.1% ↑)  
 2020 = 195 (8.3% ↑)
- CCTH:**  
 2022 = 231 (16.1% ↑)  
 2021 = 199 (21.3% ↑)  
 2020 = 164 (7.9% ↑)
- HTH:**  
 2022 = 164 (7.2%)  
 2021 = 153 (35.4% ↑)  
 2020 = 113 (37.8% ↑)

## Recommendation:

# SELECTED HR TREND

## TREND ANALYSIS OF TOTAL PHARMACISTS AT THs

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



■ 2018	79	59	20	9	8
■ 2019	100	57	32	18	8
■ 2020	97	55	32	18	19
■ 2021	111	82	40	25	23
■ 2022	100	79	46	22	23

## REMARKS :

- KBTH:**  
 2022 = 100 (9.90% ↓)  
 2021 = 111 (4% ↑)  
 2020 = 97 (3% ↓)
- KATH:**  
 2022 = 79 (3.66% ↓)  
 2021 = 82 (49.09% ↑)  
 2020 = 55 (3.5% ↓)
- TTH:**  
 2022 = 46 (15% ↑)  
 2021 = 40 (90.5% ↑)  
 2020 = 21 (4.5% ↓)
- CCTH:**  
 2022 = 22 (12% ↓)  
 2021 = 25 (66.7% ↑)  
 2020 = 18
- HTH:**  
 2022 = 23  
 2021 = 23 (21.1% ↑)  
 2020 = 19 (137.5% ↑)

## Recommendation:

# **2022 KEY ACHIEVEMENTS**

**THs MANDATE:  
PROVISION OF ADVANCED TERTIARY HEALTH SERVICES**

# KEY ACTIVITY ACHIEVEMENTS IN 2022 – KBTH

- ❑ 23 Corneal Transplant surgeries were performed
- ❑ Reconstructive Micro surgeries for over 20 patients
- ❑ Separation of Siamese twins with significant KBTH staff contribution
- ❑ Professional support for COVID-19 care and other National Health Programs across sister institutions
- ❑ Voluntary support to the Sub Region and beyond: includes Malawi, Madagascar, Jordan, Sierra Leone, Liberia, to provide life saving surgeries and services
- ❑ One nurse recognized and awarded a Life Time Achievement by the International Society of Paediatric Oncology (SIOP) for her significant contribution towards childhood cancer care locally and internationally. It was the first award for Africa
- ❑ Establishment of cardiovascular call center to improve communication
- ❑ Major repair works done in the cold rooms at the mortuary
- ❑ Manufacturing of caffeine citrate injection for Neonatal Intensive Care (only site in Ghana) which is 60% cost saving to the patient
- ❑ Manufacturing of Hypertonic Saline for critical surgeries and treatment of Hyponatremia (Only manufacturing site in Ghana) ins on course

# KEY ACTIVITY ACHIEVEMENTS IN 2022 – **KBTH Continued**

- ❑ **Additional key medical equipment installed for advance services.** These are;
  - Fluoroscopy machine installed
  - Cardiac Catheterization Lab installed
  - Installation of 15 Ultrasound machines
  - Installation of Ultrasound 15+7
  - Installation of COBAS 6800 Analyzer
  - Installation of C-ARM
  
- ❑ Laboratory services increased by 46.21%



## KEY ACTIVITY ACHIEVEMENTS IN 2022 - **KATH**

- ❖ Improved **appointment system**
- ❖ **Recreational therapy introduced** for **Psychiatry in-patients** and **relatives** every Friday
- ❖ Training programme (**Postgraduate Diploma**) **set up for new medical officers** posted to the Directorate of Anaesthesia
- ❖ SOPs drafted for nursing practice in the ICU and recovery wards
- ❖ Intensified research activities
- ❖ **Cardiac Angiography introduced** with **two cases** successfully done
- ❖ **DEXA** (Dual Energy X-ray Absorptiometry) **introduced with 13 cases performed** successfully
- ❖ Monthly maternal mortality audits carried out

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - TTH

- ❖ Introduction of **additional clinical sub-specialties**: Endoscopy and Cardiology, Speech and Language Therapy clinic.
- ❖ A **building for Oncology services** was **constructed** through **funding by a philanthropist** and currently in use
- ❖ **Uninterrupted CT-Scan services** over the period.
- ❖ Organised an outreach programme to **mark World Prostate Cancer awareness** month; **screened 129 clients** and **performed 21 surgeries** at the Urology Unit
- ❖ Cardiac Profile Test Services and Coagulation Profile Test Services Introduced.

## KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH

- ❖ General OPD attendance went up by 11.86% (from 152,364 in 2021 to 170,441 in 2022)
- ❖ Total OPD Specialist Clinic Attendance increased by 2.97% in 2022
- ❖ **Strengthened Appointment System for Specialist Clinics** at the OPD level
- ❖ **Introduced the following new services** in 2022;
  - Feto-Maternal Medicine Services (912 Cases Seen)
  - Osteogenesis Imperfecta Multi-disciplinary Service (8 Patients Seen).
  - Paediatric Endocrine Services (17 Cases Seen)
  - **Introduced ten (10) new laboratory tests** (Ca, Mg, P, D-dimer, Insulin, Ferritin, hsCRP, CA-19.9, CA-72.4, Myoglobin)

## KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH Cont'n

- ❖ Collaborated with **Himalayan Cataract Project** to screen 18,103 people with **2415** surgeries performed.
- ❖ Collaborated with **Operation-Smile Ghana** to provide free Cleft lip and palate Surgeries - (**7** surgeries done)
- ❖ Collaborated with **Czech Medevac mission** to perform surgeries;
  - ❑ **27** Plastic surgeries done
  - ❑ **43** Orthopedic surgeries done

## KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH Cont'n

- ❖ Continue to conduct key mortality audits and implement the recommendations
- ❖ Organized in-service training for staff on customer care, quality assurance, **Basic Life Support** and IPC.
- ❖ **Provided digitalized identification cards to patients and retired staff** of the ministry of health
  - Process Commenced in March 2022 .
- ❖ Integrated Clinical Pharmacy practice into general ward rounds
  - 164 General ward rounds done together with medical teams in the various Sub BMC's.
- ❖ Revised and expanded Tracer medicines list for CCTH
  - **Tracer medicine expanded from 52 to 160** by DTC and approved by management.
- ❖ Reinsured all medicines with Insurance Company
  - Approval given, evaluation done and **All Pharmacy stores insured**

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - HTH

- ❖ **Constructed a New Building to house the CT Scan** provided by the MOH
- ❖ Operationalize the CT Scan Services
- ❖ **Facilitated the donation of 10 Point of Care Ultrasound Machines to 10 Health Centres** in collaboration with **Women for Africa Foundation** and **RAAM Foundation**
- ❖ **Commissioned the Mobile Clinic Van** (Collaboration between Rotary & Ho Diocese of the Anglican Church)
- ❖ Re-engineering of Services at the Emergency Department
- ❖ **Obtained accreditation for residency training in Internal Medicine**

# **KEY OUTPUTS ACHIEVEMENTS**

**PROVISION OF  
OUT-PATIENT SERVICES**

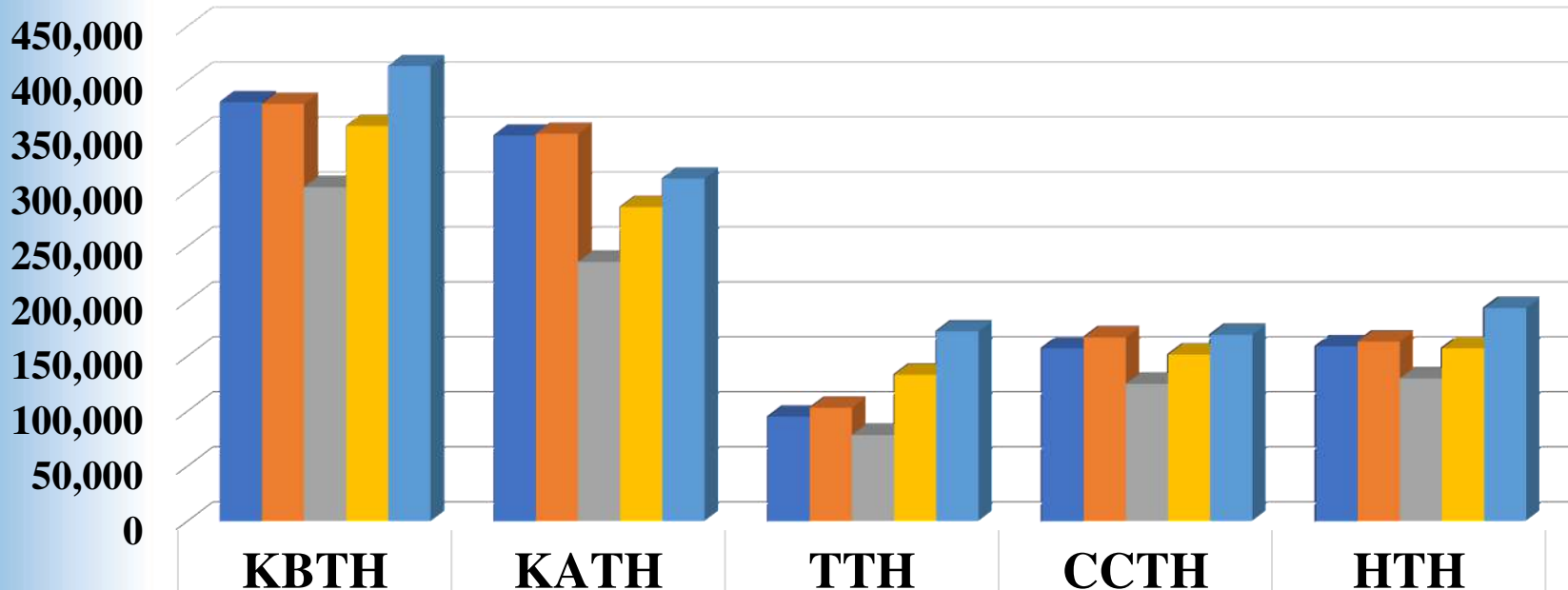


# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Outpatient Services

### TREND ANALYSIS OF TOTAL OPD ATTENDANCE

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	381,830	351,443	95,900	158,164	159,866
■ 2019	380,297	353,108	103,985	168,056	164,173
■ 2020	304,594	236,636	79,330	125,772	130,740
■ 2021	360,245	286,546	134,116	152,364	158,226
■ 2022	414,625	312,305	173,510	170,441	194,717

### REMARKS:

- **KBTH:**  
2022 = 414,625 (1.16%↑)  
2021 = 360,245 (18.27%↑)  
2020 = 304,594 (19.9%↓)
- **KATH:**  
2022 = 312,305 (8.99%↑)  
2021 = 286,546 (21.1%↑)  
2020 = 236,636 (33%↓)
- **TTH:**  
2022 = 173,510 (29.4%↑)  
2021 = 134,116 (69.1%↑)  
2020 = 79,330 (23.7%↓)
- **CCTH:**  
2022 = 170,441 (11.86%↑)  
2021 = 152,364 (21.1%↑)  
2020 = 125,772 (25.2%↓)
- **HTH:**  
2022 = 194,717 (20.4%↑)  
2021 = 158,226 (21.0%↑)  
2020 = 130,740 (20.4%↓)

### Recommendation:

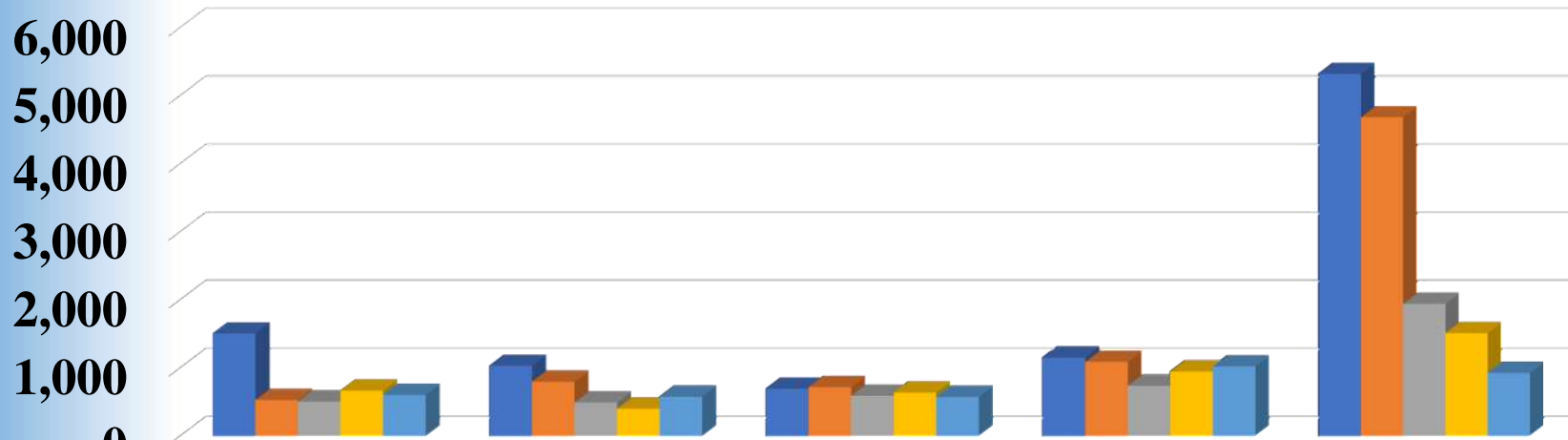
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Outpatient Services

### OPD CASES SEEN PER DOCTOR (RATIO)

**THs Target = 1:1080**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	1,514	1,040	705	1,163	5,329
■ 2019	539	808	727	1,098	4,691
■ 2020	516	501	601	749	1,951
■ 2021	676	411	648	958	1,521
■ 2022	613	588	586	1,033	936

## REMARKS :

- **KBTH:**  
2022 = 1:613 (↓)  
2021 = 1:676 (↑)  
2020 = 1:539 (↓)
- **KATH:**  
2022 = 1:588 (↑)  
2021 = 1:411 (↓)  
2020 = 1:501 (↓)
- **TTH:**  
2022 = 1:388(↑)  
2021 = 1:648 (↑)  
2020 = 1:601 (↓)
- **CCTH:**  
2022 = 1:1033 (↑)  
2021 = 1:952 (↑)  
2020 = 1:749 (↓)
- **HTH:**  
2022 = 1:936 (↓)  
2021 = 1:1,521 (↓)  
2020 = 1:1,951 (↓)

**Recommendation:**

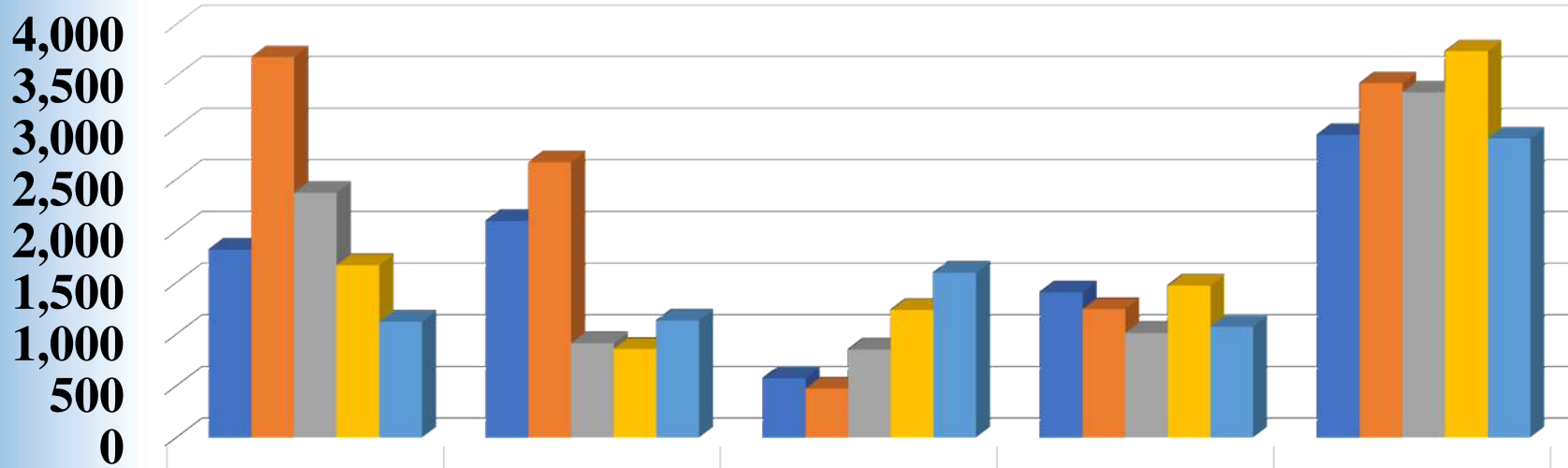
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Outpatient Services

### OPD CASES SEEN PER SPECIALIST (RATIO)

**THs Target = 1:1200**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	1,830	2,108	585	1,418	2,940
■ 2019	3,692	2,675	485	1,255	3,440
■ 2020	2,379	924	863	1,024	3,352
■ 2021	1,680	870	1,246	1,483	3,749
■ 2022	1,132	1,143	1,607	1,085	2,906

### REMARKS :

- **KBTH:**  
2022 = 1:1,132 (↓)  
2021 = 1:1,680 (↓)  
2020 = 1:2,379 (↓)
- **KATH:**  
2022 = 1: 1,143 (↑)  
2021 = 1: 870 (↓)  
2020 = 1:924 (↓)
- **TTH:**  
2022 = 1:1,607(↑)  
2021 = 1:1,246 (↑)  
2020 = 1:863 (↑)
- **CCTH:**  
2022 = 1:1085 (↓)  
2021 =1:1483 (↑)  
2020 = 1:1024 (↓)
- **HTH:**  
2022 = 1:2,906 (↓)  
2021 = 1:3,440 (↑)  
2020 = 1:3,352 (↓)

### Recommendation:

**PROVISION OF  
IN-PATIENT SERVICES**

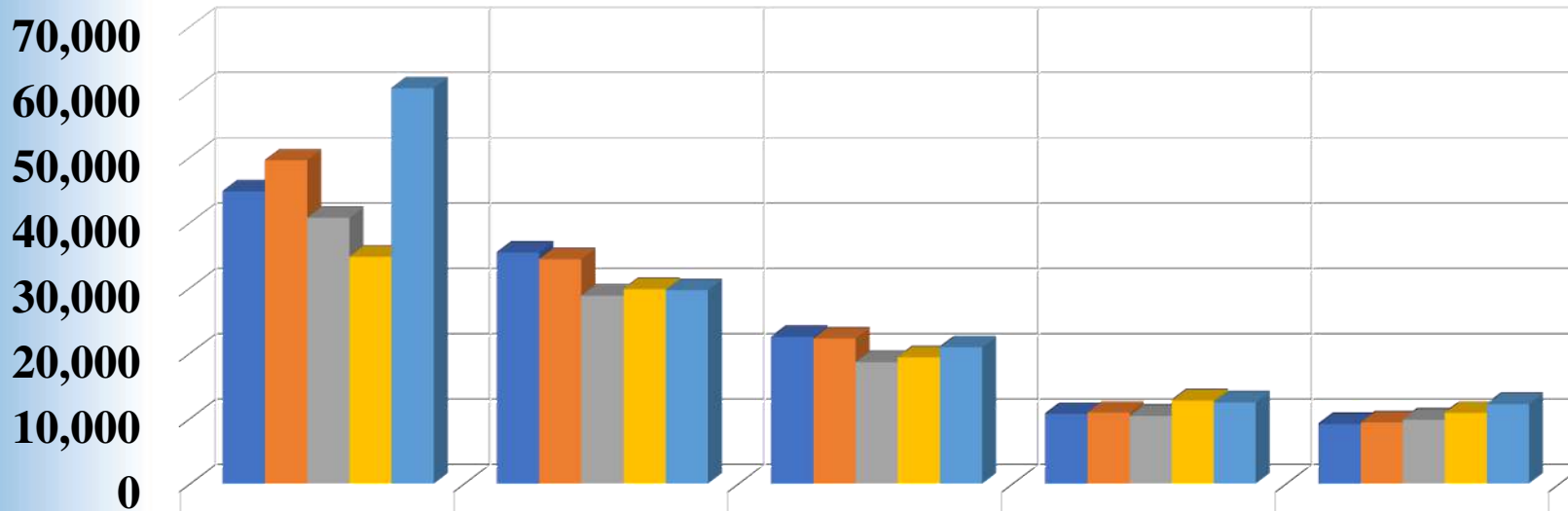
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Inpatient Services

### TREND ANALYSIS OF TOTAL ADMISSIONS

**THs Target = 12,000**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	44,908	35,553	22,640	10,865	9,323
■ 2019	49,648	34,539	22,412	11,088	9,562
■ 2020	40,875	28,951	18,780	10,578	9,999
■ 2021	34,912	29,968	19,535	12,930	11,051
■ 2022	60,689	29,790	21,077	12,622	12,380

### REMARKS :

- **KBTH:**  
2022 = 60,689 (73.83 ↑)  
2021 = 34,912 (11.1%↓)  
2020 = 40,875 (17.7%↓)
- **KATH:**  
2022 = 29,790 (0.60%↓)  
2021 = 29,968 (3.51↑)  
2020 = 28,951 (16.2%↓)
- **TTH:**  
2022 = 21,077 (7.9%↑)  
2021 = 19,535 (4%↑)  
2020 = 18,780 (16.2%↓)
- **CCTH:**  
2022 = 12,622 (2.38%↓)  
2021 = 12,930 (22.2% ↑)  
2020 = 10,578 (4.6% ↓)
- **HTH:**  
2022 = 12,380 (12.0% ↑)  
2021 = 11,051 (10.5 ↑)  
2020 = 9,999 (4.6%↑)

### Recommendation:

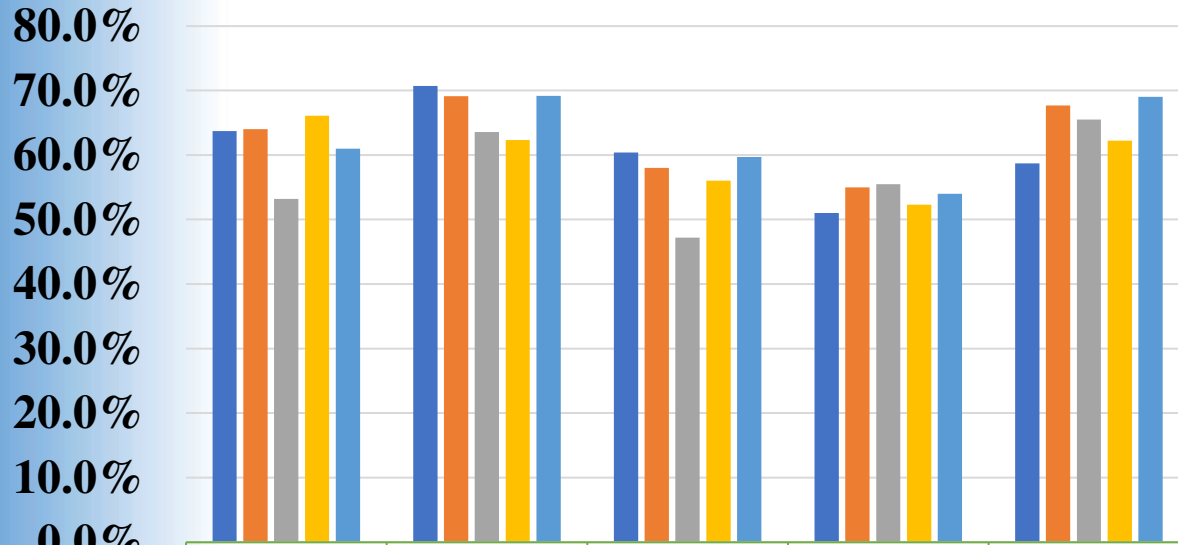
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Inpatient Services Cont.

### BED OCCUPANCY RATE

**THs Target = 75%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022

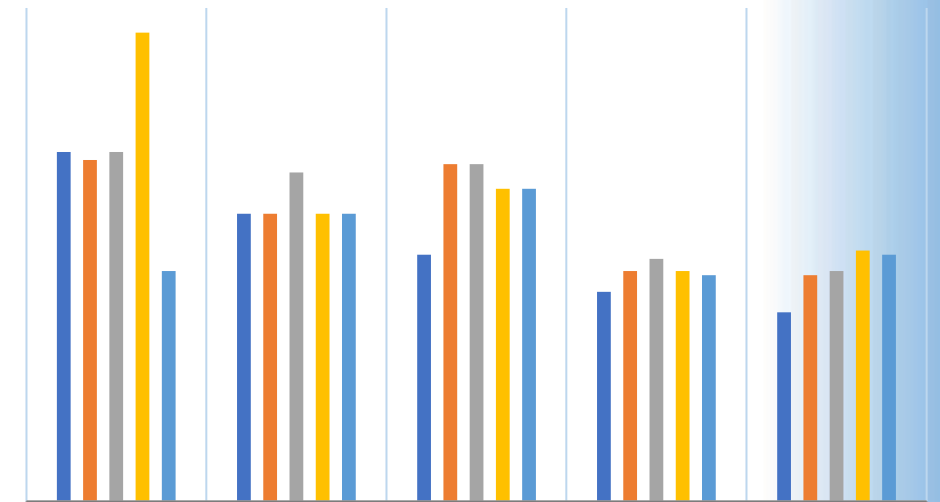


	KBTH	KATH	TTH	CCTH	HTH
■ 2018	63.7%	70.7%	60.4%	51.0%	58.70%
■ 2019	64.0%	69.1%	58.0%	55.0%	67.70%
■ 2020	53.2%	63.6%	47.2%	55.5%	65.50%
■ 2021	66.1%	62.3%	56.0%	52.3%	62.20%
■ 2022	61.00%	69.15%	59.70%	54%	69.00%

### AVERAGE LENGTH OF STAY IN THE HOSPITAL

**THs Target = 6 Days**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



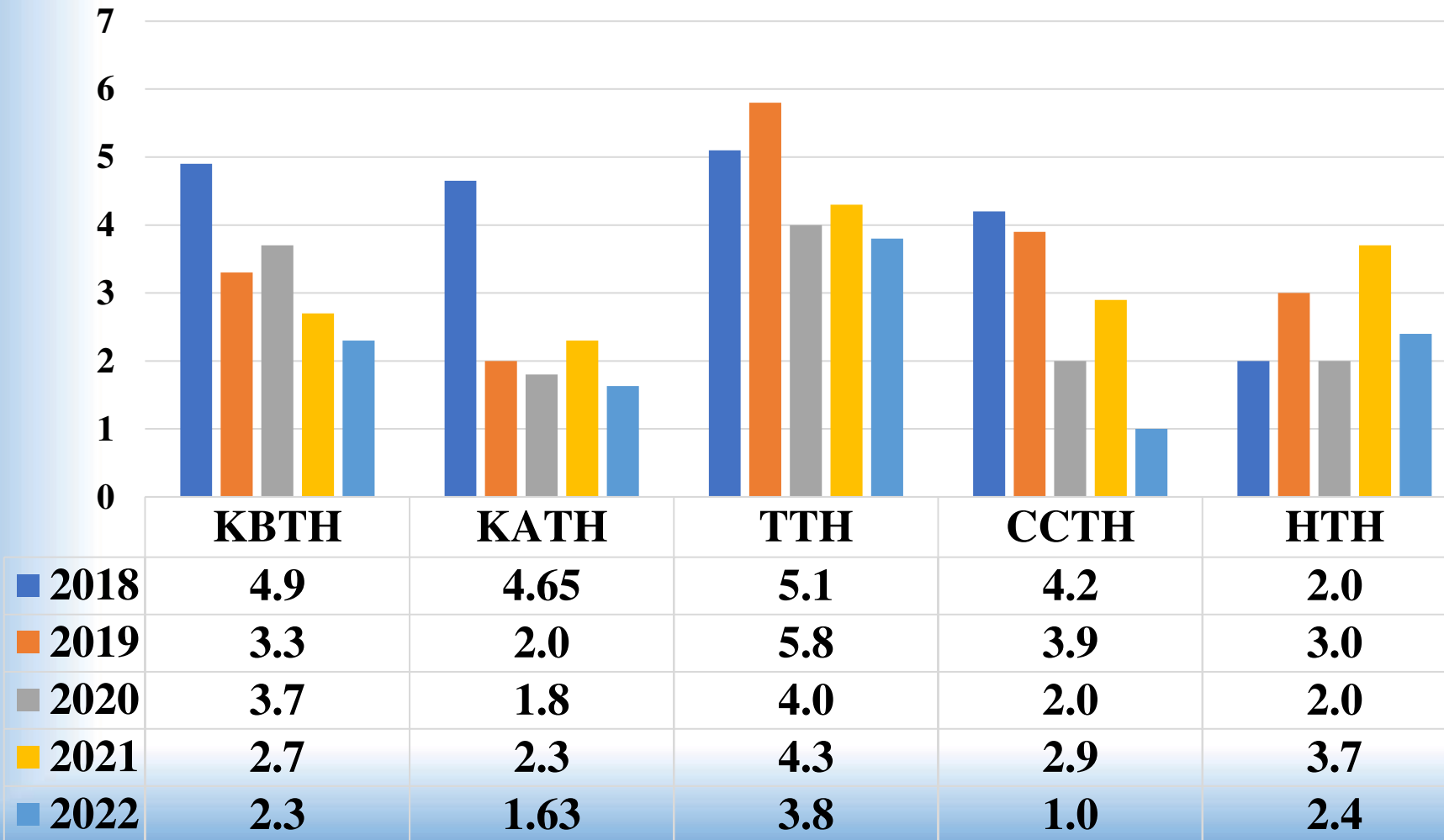
	KBTH	KATH	TTH	CCTH	HTH
■ 2018	8.5	7.0	6	5.1	4.6
■ 2019	8.3	7.0	8.2	5.6	5.5
■ 2020	8.5	8.0	8.2	5.9	5.6
■ 2021	11.4	7.0	7.6	5.6	6.1
■ 2022	5.6	7.0	7.6	5.5	6.0

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## AVERAGE LENGTH OF STAY AT THE EMEGENCY WARD

**THs Target = 2 Days**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



### REMARKS :

- **KBTH:**  
2022 = 2.3 (↓)  
2021 = 2.7 (↓)  
2020 = 3.7 (↑)
- **KATH:**  
2022 = 1.63 (↓)  
2021 = 2.3 (↑)  
2020 = 1.8 (↓)
- **TTH:**  
2022 = 3.8 (↓)  
2021 = 4.3 (↑)  
2020 = 4.0 (↓)
- **CCTH:**  
2022 = 1.0 (↓)  
2021 = 2.9 (↑)  
2020 = 2 (↓)
- **HTH:**  
2022 = 2.4 (↓)  
2021 = 3.7 (↑)  
2020 = 2.0 (↓)

**Recommendation:**

# Provide Inpatient Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGET S	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Nurse and Midwife to admission ratio	1:4 (↓)	1: 14 (↓)	1:13 (↓)	1:13	1:17 (↑)	1:25	Total no. of clients admitted / total no. of nurses and midwives
	1:15 (↑)	1:15 (↓)	1:19 (↑)	1:13	1:15 (↓)		
	1:13 (↓)	1:16 (↓)	1:15 (↓)	1:13 (↓)	1:16 (↓)		
	1:18 (↓)	1:19 (↓)	1:18 (↓)	1:16 (↓)	1:21 (↓)		
	1:35 (↓)	1:37 (↑)	1:23 (↓)	1:20 (-)	1:41 (↓)		
Proportion of in-patients managed on nursing and midwives' care plan	85% (↑)	96.6% (↑)	100% (↑)	- = 2022	100%	65%	No. of admissions with care plan/ Total admissions * 100
	58% (↑)	95.6% (↑)	60% (↓)	- = 2021	100%		
	53% (↑)	57.65% (↑)	100% (↑)	- = 2020	100%		
	52% (↑)	35.12%	85%	- = 2019	100%		
	50%	- = 2018	- = 2018	- = 2018	100%		

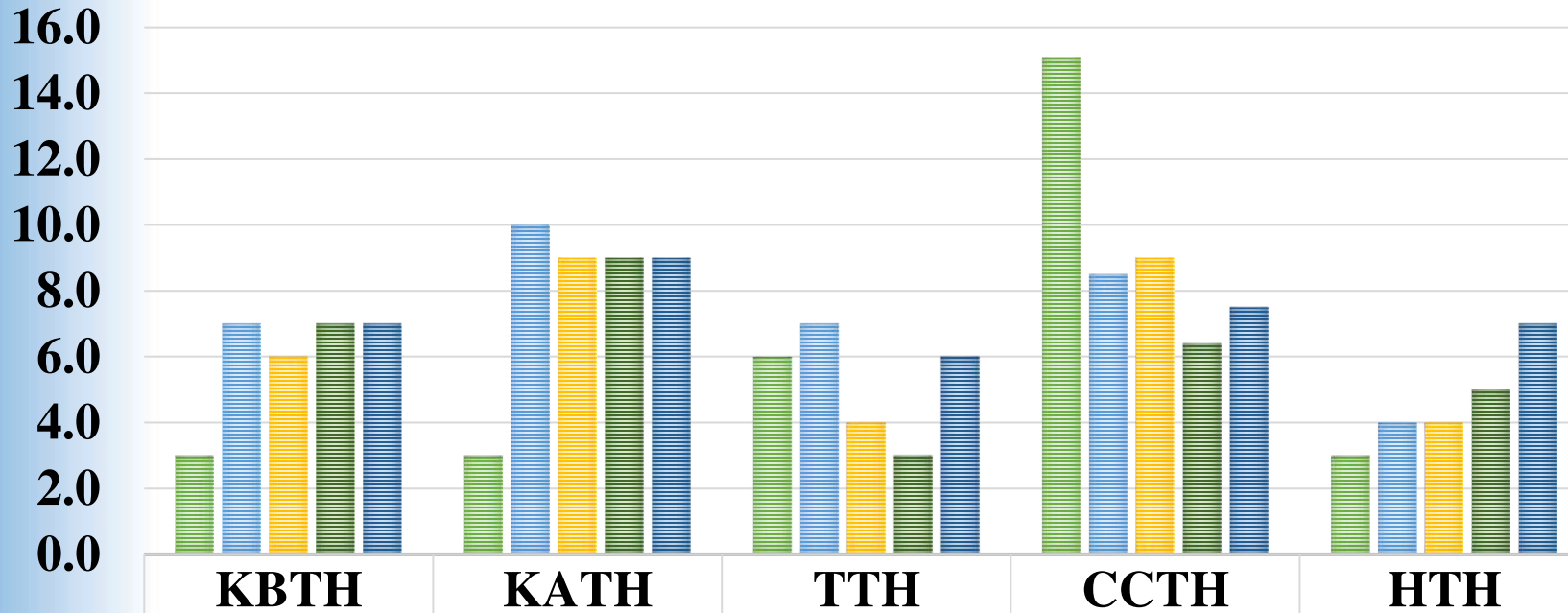


# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## DOCTOR TO PHARMACIST RATIO

**THs Target = 10:1**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	3.0	3.0	6.0	15.1	3.0
■ 2019	7.0	10.0	7.0	8.5	4.0
■ 2020	6.0	9.0	4.0	9.0	4.0
■ 2021	7.0	9.0	3.0	6.4	5.0
■ 2022	7.0	9.0	6.0	7.5	7.0

### REMARKS:

- KBTH:**  
 2022 = 7:1  
 2021 = 7:1 (↑)  
 2020 = 6:1 (↓)
- KATH:**  
 2022 = 9:1  
 2021 = 9:1 (↑)  
 2020 = 9:1 (↓)
- TTH:**  
 2022 = 6:1 (↑)  
 2021 = 3:1 (↓)  
 2020 = 9:1 (↑)
- CCTH:**  
 2022 = 7.5:1 (↑)  
 2021 = 6.4:1 (↓)  
 2020 = 9:1 (↑)
- HTH:**  
 2022 = 7:1 (↑)  
 2021 = 5.1 (↑)  
 2020 = 4:1

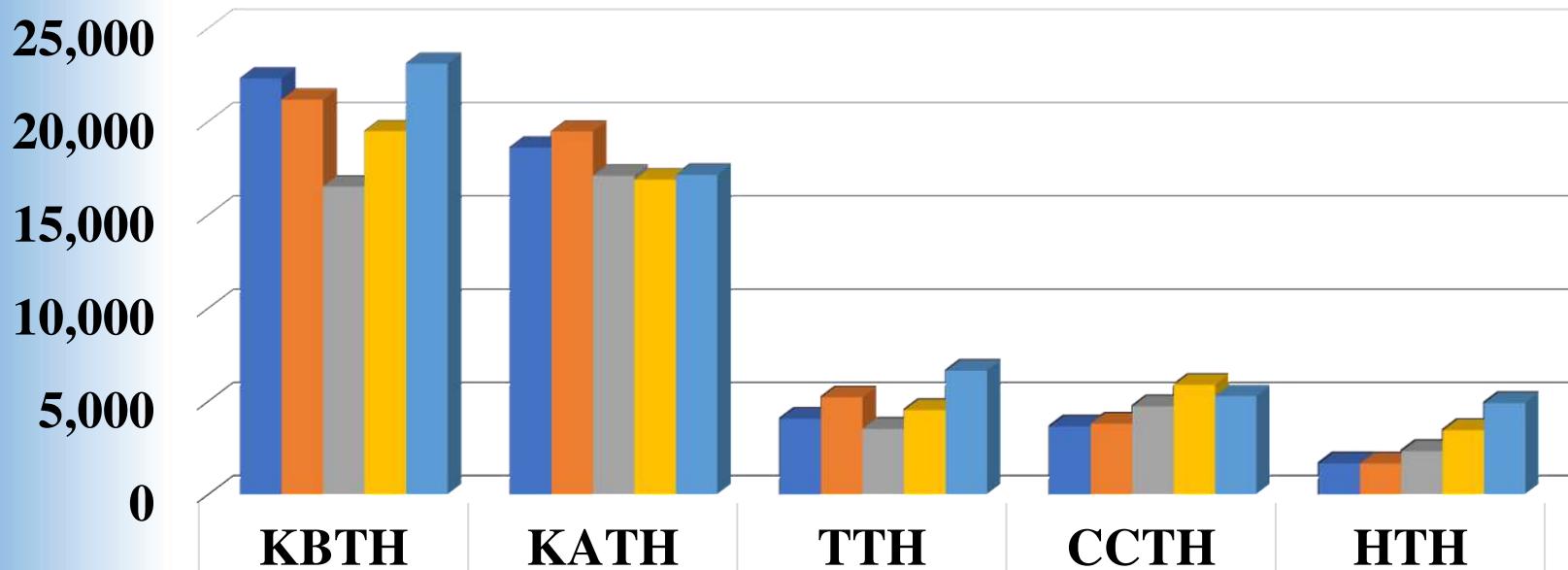
### Recommendation:

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Surgical Services

### TREND ANALYSIS OF TOTAL SURGERIES PERFORMED

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	22,362	18,666	4,137	3,728	1,748
■ 2019	21,226	19,520	5,299	3,883	1,739
■ 2020	16,586	17,162	3,606	4,815	2,412
■ 2021	19,541	16,955	4,616	5,961	3,530
■ 2022	23,152	17,215	6,720	5,357	4,992

### REMARKS :

- **KBTH:**  
2022 = 23,152 (18.48% ↑)  
2021 = 19,541 (11.1% ↑)  
2020 = 16,586 (21.9% ↓)
- **KATH:**  
2022 = 17,215 (1.53% ↑)  
2021 = 16,955 (1.2% ↓)  
2020 = 17,162 (12.1% ↓)
- **TTH:**  
2022 = 6,720 (45.6% ↑)  
2021 = 4,616 (28% ↑)  
2020 = 3,606 (32% ↓)
- **CCTH:**  
2022 = 5,357 (10.13% ↓)  
2021 = 5,961 (24% ↑)  
2020 = 4,815 (24% ↑)
- **HTH:**  
2022 = 4,992 (41.4% ↑)  
2021 = 3,530 (46.4% ↑)  
2020 = 2,412 (38.7% ↑)

### Recommendation:

# Provide Surgical Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

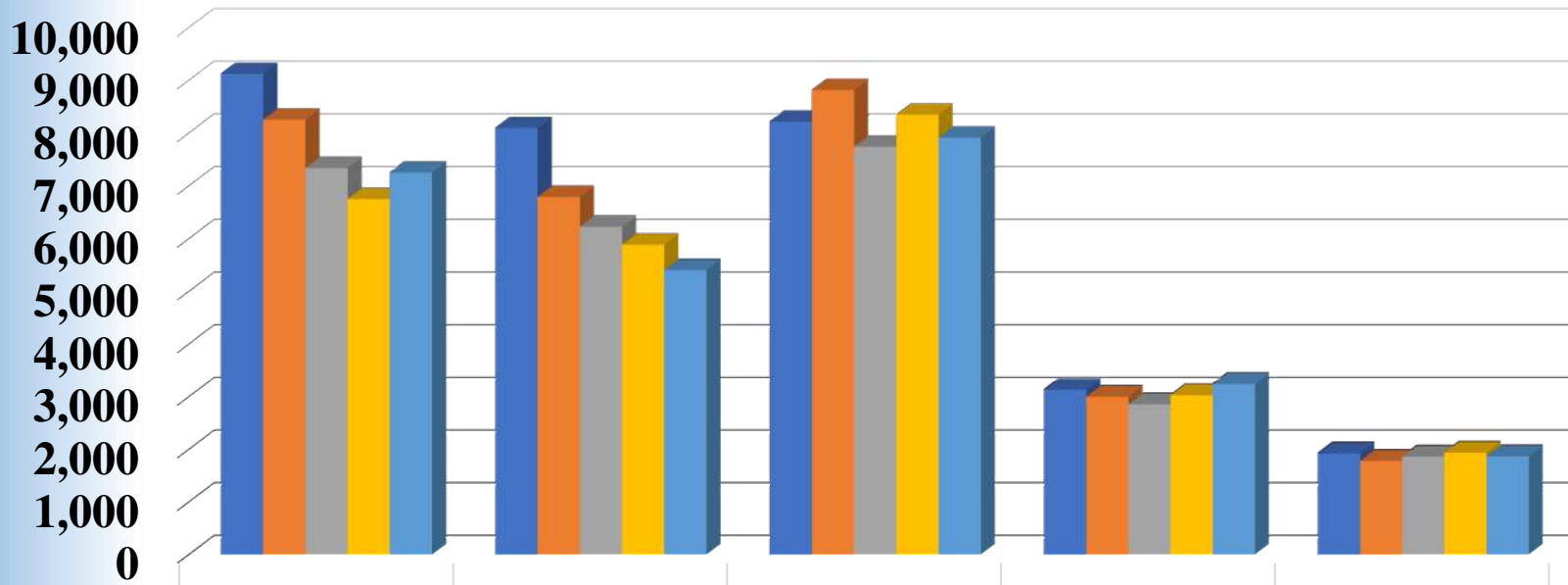
KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Surgical site infection rate	<b>7% = 2022</b> - = 2021 - = 2020 - = 2019 - = 2018	<b>0.84% = 2022</b> - = 2021 - = 2020 - = 2019 - = 2018	<b>0.4% (↓)</b> <b>2.0% (↓)</b> <b>2.4% (↑)</b> <b>0.9% (↑)</b> <b>0.7% (↑)</b>	- = 2022 - = 2021 <b>12.61% (↑)</b> <b>0.27% = 2019</b> - = 2018	<b>4.4 (↓)</b> <b>6.25 = 2021</b> - = 2020 - = 2019 - = 2018	<b>5%</b>	Total infected wounds within 10 days / Total Surgeries * 100
Surgery - Surgeon Ratio	<b>89:1 (↑)</b> <b>68:1 (↑)</b> <b>61:1(↓)</b> <b>81:1 (↓)</b> <b>191:1(↑)</b>	<b>63:1 (↑)</b> <b>52:1(↓)</b> <b>67:1 (↓)</b> <b>78:1 (↓)</b> <b>267:1(↑)</b>	<b>210:1 (↓)</b> <b>220:1 (↑)</b> <b>150:1 (↓)</b> <b>220:1 (↓)</b> <b>172: (↑)</b>	<b>179:1 (↓)</b> <b>199:1 (↑)</b> <b>108:1 (↓)</b> <b>127:1 (↓)</b> <b>133:1 (↓)</b>	<b>250:1(↑)</b> <b>208:1 (↑)</b> <b>121:1 (↑)</b> <b>73:1 (↓)</b> <b>77:1 (↓)</b>	<b>250:1</b>	Total no. of surgeries performed / total no. of Surgeons

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Maternal Health Services

### TOTAL DELIVERIES PERFORMED

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	9,145	8,117	8,238	3,160	1,951
■ 2019	8,275	6,814	8,837	3,027	1,809
■ 2020	7,359	6,247	7,763	2,883	1,891
■ 2021	6,774	5,909	8,369	3,055	1,964
■ 2022	7,273	5,429	7,934	3,269	1,896

### REMARKS :

- KBTH:**  
 2022 = 7,273 (7.3%↑)  
 2021 = 6,774 (7.9% ↓)  
 2020 = 7,359 (11.1%↓)
- KATH:**  
 2022 = 5429 (8.1%↓)  
 2021 = 5,909 (5.4%↓)  
 2020 = 6,247 (8.3%↓)
- TTH:**  
 2022 = 7,934 (5.2%↓)  
 2021 = 8,369 (7.8% ↑)  
 2020 = 7,763 (12.2%↓)
- CCTH:**  
 2022 = 3269 (7.0% ↑)  
 2021 = 3,055 (6% ↑)  
 2020 = 2,883 (4.8%↓)
- HTH:**  
 2022 = 1,896(3.5% ↓)  
 2021 = 1,964 (3.9% ↑)  
 2020 = 1,891(4.5%↑)

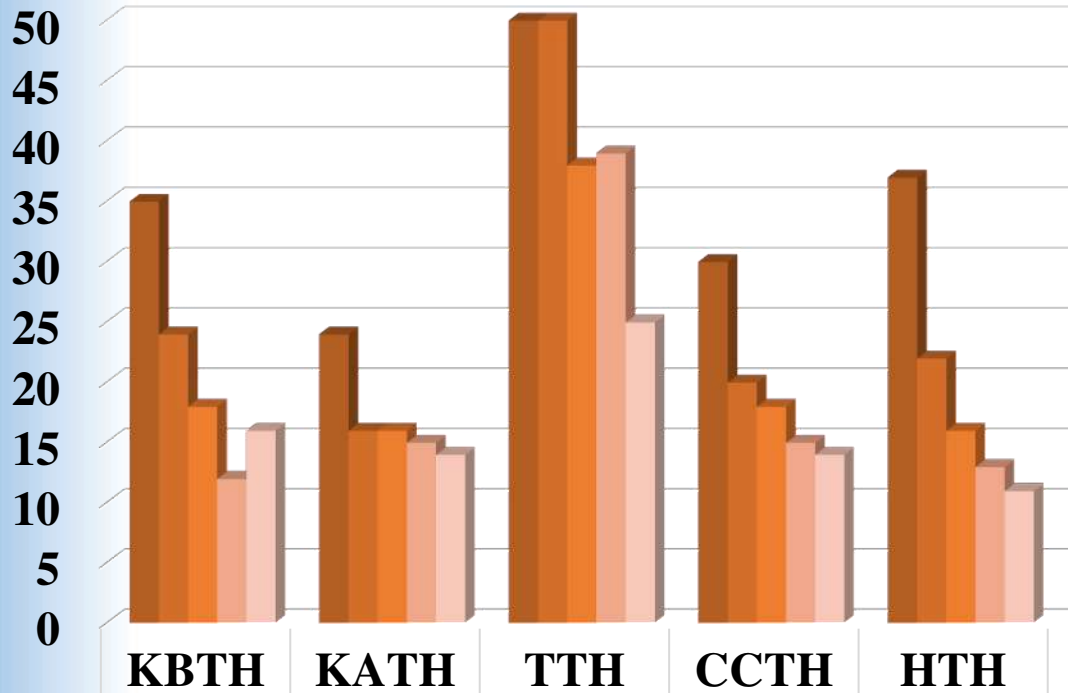
### Recommendation:

# Provide Maternal Health Services

## DELIVERIES TO MIDWIVES RATIO

(Using All Midwives In The Hospital)

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022

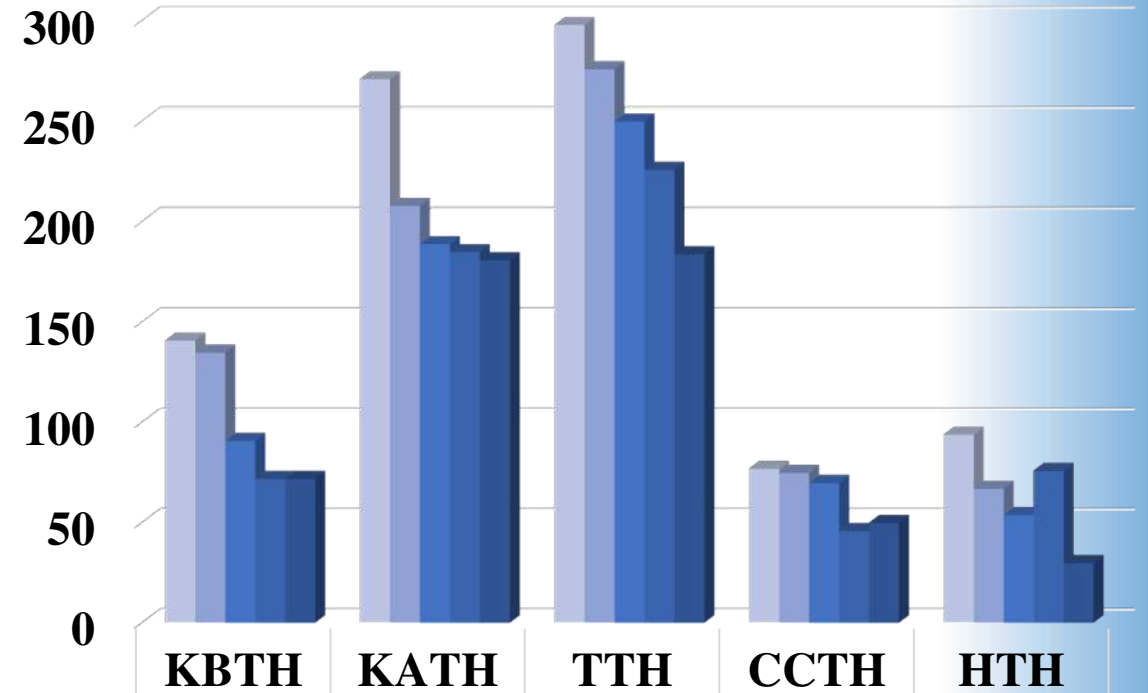


■ 2018	35	24	50	30	37
■ 2019	24	16	50	20	22
■ 2020	18	16	38	18	16
■ 2021	12	15	39	15	13
■ 2022	16	14	25	14	11

## DELIVERIES TO MIDWIVES RATIO

(Using Midwives At Labour Ward Only)

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



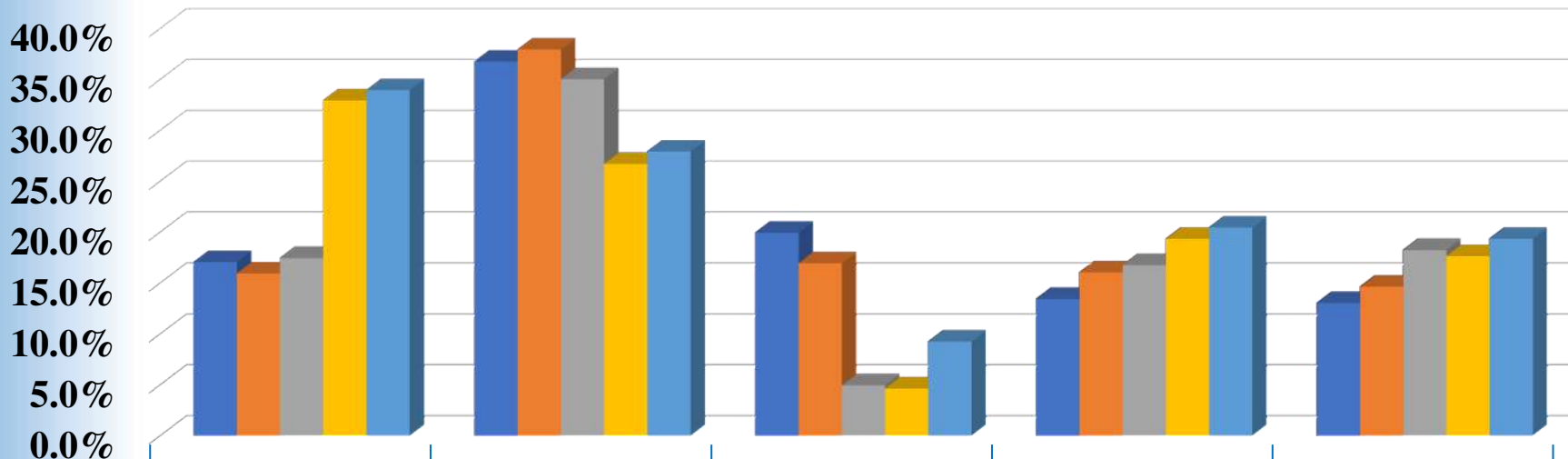
■ 2018	141	271	298	77	94
■ 2019	135	208	276	75	67
■ 2020	91	189	250	70	54
■ 2021	72	185	226	46	76
■ 2022	72	181	184	50	30

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Maternal Health Services

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

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	17.1%	36.80%	20.00%	13.50%	13.10%
■ 2019	16.0%	37.99%	17.00%	16.10%	14.70%
■ 2020	17.5%	35.07%	5.00%	16.80%	18.30%
■ 2021	33.00%	26.76%	4.70%	19.40%	17.70%
■ 2022	34.00%	27.97%	9.30%	20.50%	19.40%

### REMARKS :

- **KBTH:**  
 2022 = 34.0% (↑)  
 2021 = 33.0% (↑)  
 2020 = 17.5% (↑)
- **KATH:**  
 2022 = 27.97% (↑)  
 2021 = 26.76 (↓)  
 2020 = 35.07(↓)
- **TTH:**  
 2022 = 9.30% (↑)  
 2021 = 4.7% (↓)  
 2020 = 5.0% (↓)
- **CCTH:**  
 2022 = 20.5% (↑)  
 2021 = 19.4% (↑)  
 2020 = 16.8% (↑)
- **HTH:**  
 2022 = 19.4%(↑)  
 2021 = 17.7 (↓)  
 2020 = 18.3(↑)

**Recommendation:**

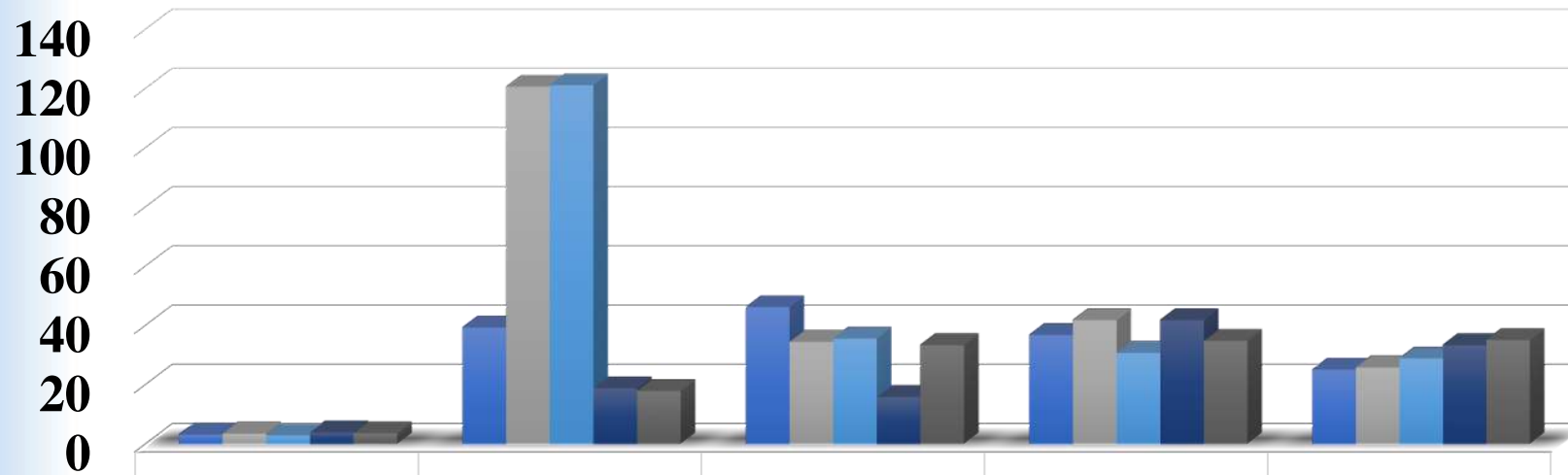
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Maternal Health Services

**STILL BIRTH RATE (PER 1000 LIVE BIRTHS)**

**THs Target = 15/1000LB**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	3.4	39.5	46.4	37	25.3
■ 2019	3.7	120.81	34.7	42	26.1
■ 2020	3.1	121.3	35.8	31	29.1
■ 2021	4.1	19.0	16.1	42	33.6
■ 2022	3.8	18.1	33.6	35	35.3

### REMARKS :

- **KBTH:**  
2022 = 3.8 (↓)  
2021 = 4.1 (↑)  
2020 = 3.1 (↓)
- **KATH:**  
2022 = 18.1 (↓)  
2021 = 19 (↓)  
2020 = 121.30 (↑)
- **TTH:**  
2022 = 33.6 (↑)  
2021 = 16.1 (↓)  
2020 = 35.8 (↑)
- **CCTH:**  
2022 = 35 (↓)  
2021 = 42 (↑)  
2020 = 31 (↓)
- **HTH:**  
2022 = 35.3% (↑)  
2021 = 33.6 (↑)  
2020 = 29.1 (↑)

**Recommendation:**

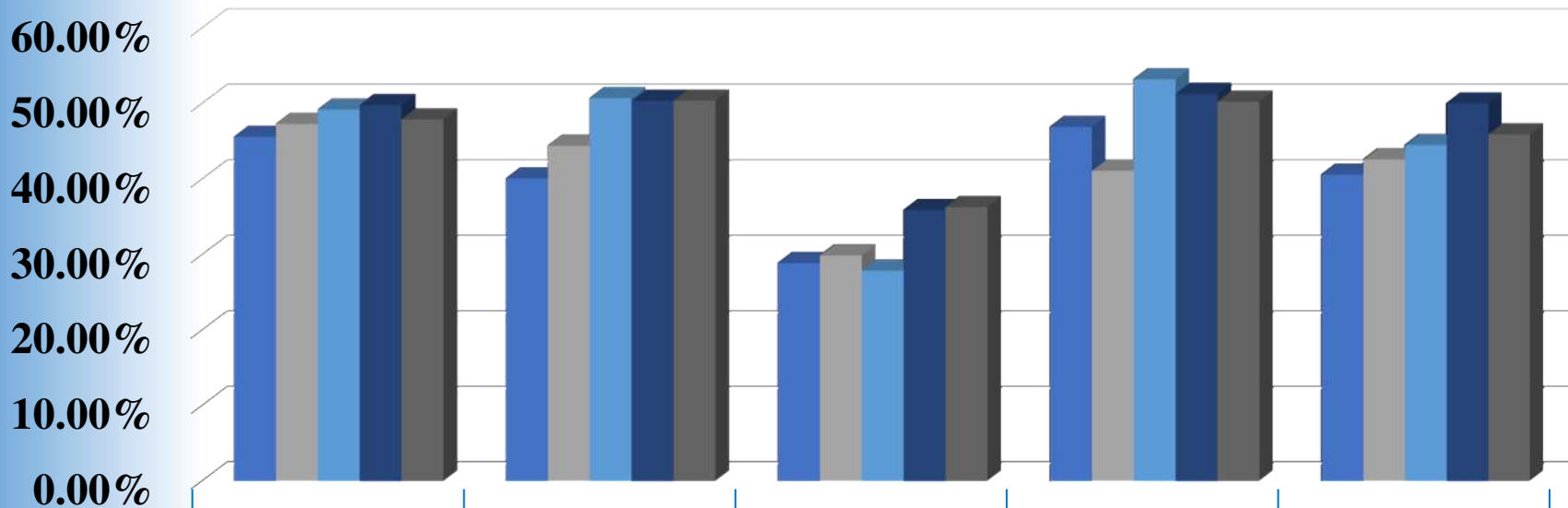
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Maternal Health Services

### CAESAREAN SECTION RATE (%)

**THs Target = 40%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	45.70%	40.20%	29.00%	47%	40.70%
■ 2019	47.40%	44.51%	30.00%	41.20%	42.70%
■ 2020	49.30%	50.81%	28.00%	53.30%	44.60%
■ 2021	49.90%	50.47%	36.00%	51.40%	50.10%
■ 2022	48.00%	50.47%	36.40%	50.35%	46.00%

### REMARKS :

- **KBTH:**  
2022 = 48.0% (↑)  
2021 = 47.0% (↑)  
2020 = 49.3% (↑)
- **KATH:**  
2022 = 50.47%(↓)  
2021 = 50.47% (↓)  
2020 = 50.81% (↑)
- **TTH:**  
2022 = 36.4% (↑)  
2021 = 36% (↑)  
2020 = 28% (↓)
- **CCTH:**  
2022 = 50.35% (↓)  
2021 = 51.4% (↓)  
2020 = 53.3% (↑)
- **HTH:**  
2022 = 46.0% (↓)  
2021 = 50.1% (↑)  
2020 = 44.6% (↑)

### Recommendation:



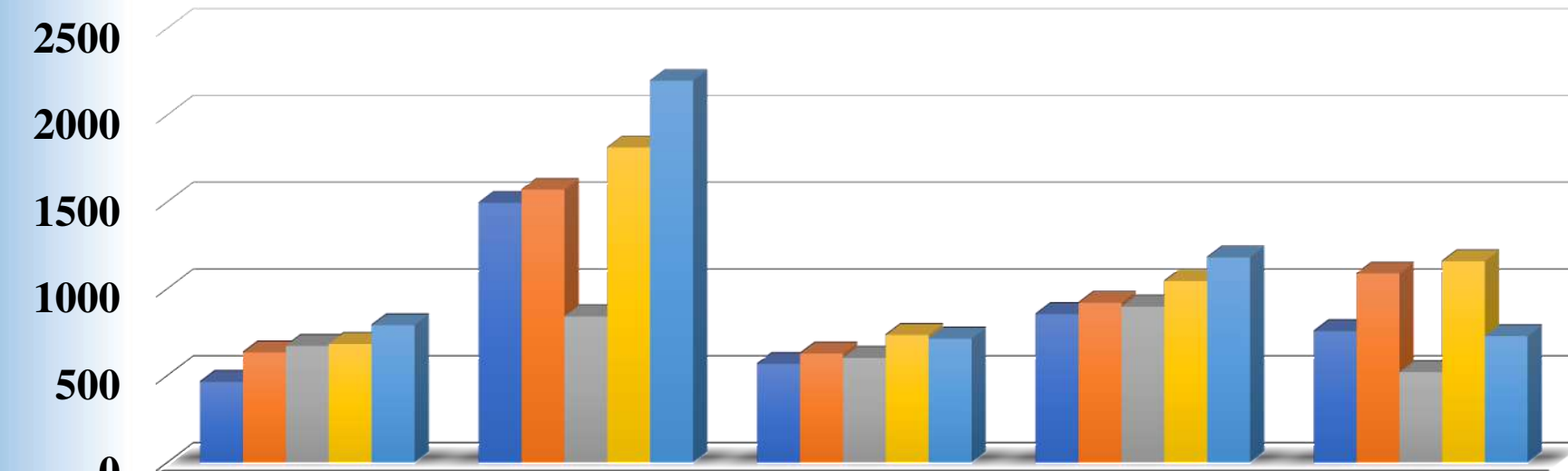
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Maternal Health Services

**MATERNAL MORTALITY RATIO (PER 100,000LB)**

**THs Target = 300/100,000LB**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	470	1,500	573	860	762
■ 2019	640	1,575	633	925	1,093
■ 2020	677	847.05	608	903	526
■ 2021	688	1,818.18	740	1,050	1,164
■ 2022	796	2,202.31	719	1,186	733.4

### REMARKS :

- **KBTH:**  
2022 = 810 (↑)  
2021 = 688 (↓)  
2020 = 677 (↑)
- **KATH:**  
2022 = 2,202.31(↑)  
2021 = 1,818.18 (↑)  
2020 = 847.05 (↓)
- **TTH:**  
2022 = 719 (↓)  
2021 = 740 (↑)  
2020 = 608 (↓)
- **CCTH:**  
2022 = 1,186 (↑)  
2021 = 1,050 (↑)  
2020 = 903 (↓)
- **HTH:**  
2022 = 733.4 (↓)  
2021 = 1,164 (↑)  
2020 = 526 (↓)

**Recommendation:**

# Provide Maternal Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Partograph use rate	60% (↑)	32.2% (↓)	44.4%	47.60% (↓)	100%	60%	Deliveries done with use or support of Partograph / Total deliveries * 100
	52% (↑)	44.4% (↓)	100%	48.5% (↓)	100%		
	50.3% (↓)	74% (↓)	100%	48.7% (↑)	100%		
	50.4% (↓)	94.1% (-)	100%	46.1% (↑)	100% (↑)		
	60% (↑)	- = 2018	100%	40.8%	95% (-)		
Couple year protection	12,043 (↑)	6180.6 (↑)	2,990.7 (↑)	2,626 (↑)	3,827.5 (↑)	2,500	Total No. of Commodities dispensed / CYP factor
	9,688 (↓)	6,064.71 (↓)	1,229.74 (↓)	2,233 (↑)	1,835.9 (↑)		
	10,993 (↓)	6,362.48 (↓)	2,258.91 (↓)	1,891.2 (↑)	1,134.1 (↓)		
	45,111 (↓)	8,588.67 (↑)	6,409 (↑)	1,562.5 (↑)	1,582.3 (↑)		
	45,432 (↑)	6,410.22 (↓)	2,284 (↓)	1,521.6 (↑)	1,531.8 (↑)		
Maternal deaths audited (%)	100%	100%	100%	100%	100%	100%	No. of reported maternal deaths audited according to established guidelines. / total no. of reported maternal deaths within a specified period * 100
	100%	100%	100%	100%	100% (↑)		
	100%	100%	100%	100%	87.5% (↓)		
	100%	100%	100%	100%	100% %		
	100%	100%	100%	100%	100 (↑)		

# THs TOP FIVE CAUSES OF MATERNAL DEATH

KBTH	KATH	TTH	CCTH	HTH
PPH = 12 (20.3%)	HPT Disorders = 37 (31.36%)	Hypertension = 9(25.7%)	Sepsis = 12 (30.8%)	Hypertensive diseases in pregnancy = 6 (42.86%)
Severe Preeclampsia = 7 (11.9%)	Obstetric Haemorrhage = 27 (22.88%)	Severe Anaemia = 6 (17.1%)	Obstetric Hemorrhage = 11 (28.2%)	Haemorrhage = 4 (28.57%)
Eclampsia = 7 (11.9%)	Sepsis Related = 9 (7.62%)	Sickle Cell Disease = 4 (11.4%)	Hypertensive Disorders in Pregnancy = 9 (23.1%)	Sepsis = 3 (21.43%)
Sickle Cell Disease = 5 (8.5%)	Meningitis 5 (4.23%)	Antepartum cardiomyopathy = 4 (11.4%)	Embolism = 2 (5.1%)	Others =1 (7.14%)
Septic Abortion = 3(5.1%)	Acute Kidney Injury 5 (4.23%)	Puerperal Sepsis = 3 (8.6%)	Metastatic Gall Bladder Cancer = 1 (2.56%)	

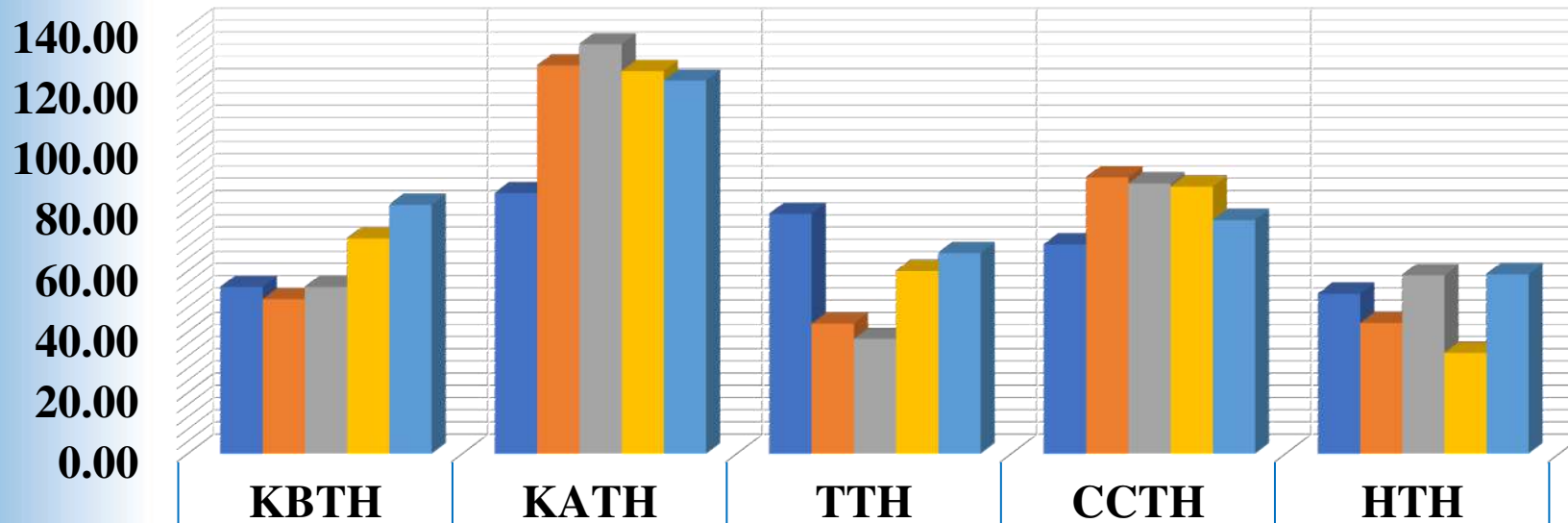
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Child Health Services

### INSTITUTIONAL INFANT MORTALITY RATE

**THs Target = 15/1000LB**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	55.00	85.85	79.00	69.0	52.80
■ 2019	51.00	127.77	43.00	91.0	43.20
■ 2020	55.00	134.71	38.00	89.0	58.90
■ 2021	71.00	125.9	60.3	88.0	33.40
■ 2022	82.00	122.81	66.2	77.0	59.20

### REMARKS :

- **KBTH:**  
2022 = 82 (↑)  
2021 = 71 (↑)  
2020 = 55 (↑)
- **KATH:**  
2022 = 122.81(↓)  
2021 = 125.9 (↓)  
2020 = 134.71 (↑)
- **TTH:**  
2022 = 66.2 (↑)  
2021 = 60.3 (↑)  
2020 = 38 (↓)
- **CCTH:**  
2022 = 77 (↓)  
2021 = 88 (↓)  
2020 = 89 (↓)
- **HTH:**  
2022 = 59.2(↑)  
2021 = 33.4 (↓)  
2020 = 58.9 (↑)

### Recommendation:

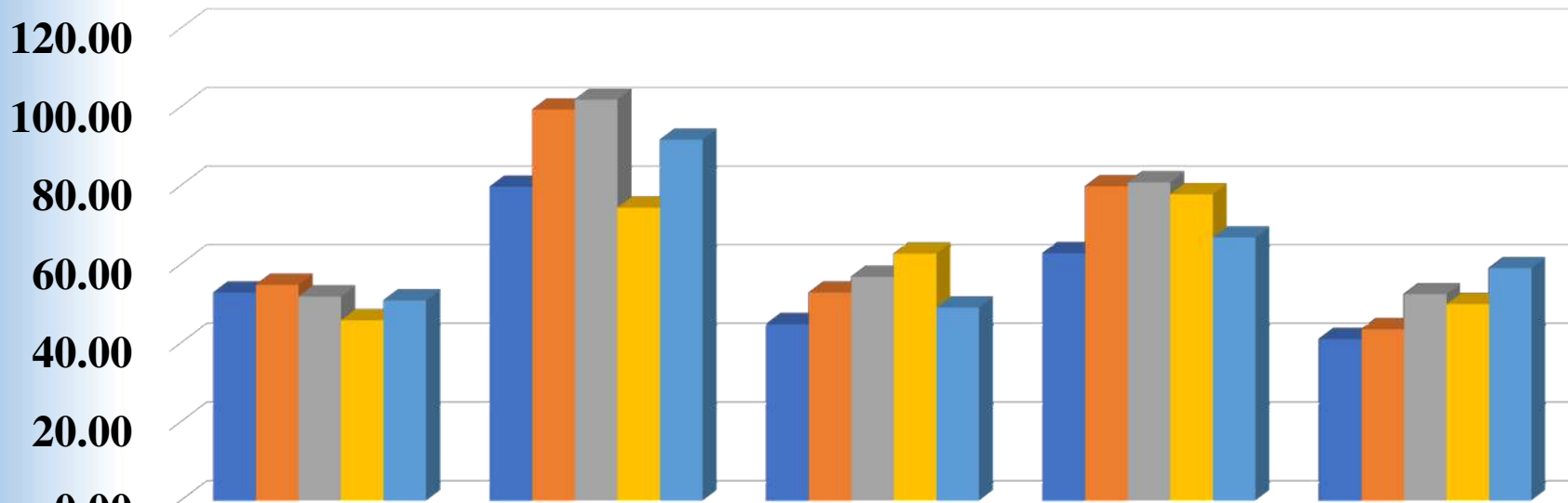
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Child Health Services

### INSTITUTIONAL NEONATAL MORTALITY RATE

**THs Target = 25/1000 LB**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	53.00	79.90	45.00	63.00	41.20
■ 2019	55.00	99.52	53.00	80.00	43.70
■ 2020	52.00	102.05	57.00	81.00	52.60
■ 2021	46.00	74.58	62.90	78.00	50.10
■ 2022	51.00	91.83	49.20	67.00	59.20

### REMARKS :

- **KBTH:**  
2022 = 51 (↑)  
2021 = 46 (↓)  
2020 = 52 (↓)
- **KATH:**  
2022 = 91.83 (↑)  
2021 = 74.58 (↓)  
2020 = 102.05 (↑)
- **TTH:**  
2022 = 49.20 (↓)  
2021 = 62.90 (↑)  
2020 = 57.00 (↑)
- **CCTH:**  
2022 = 67.00 (↓)  
2021 = 78.00 (↓)  
2020 = 81.00 (↑)
- **HTH:**  
2022 = 54.00 (↑)  
2021 = 50.10 (↓)  
2020 = 52.60 (↑)

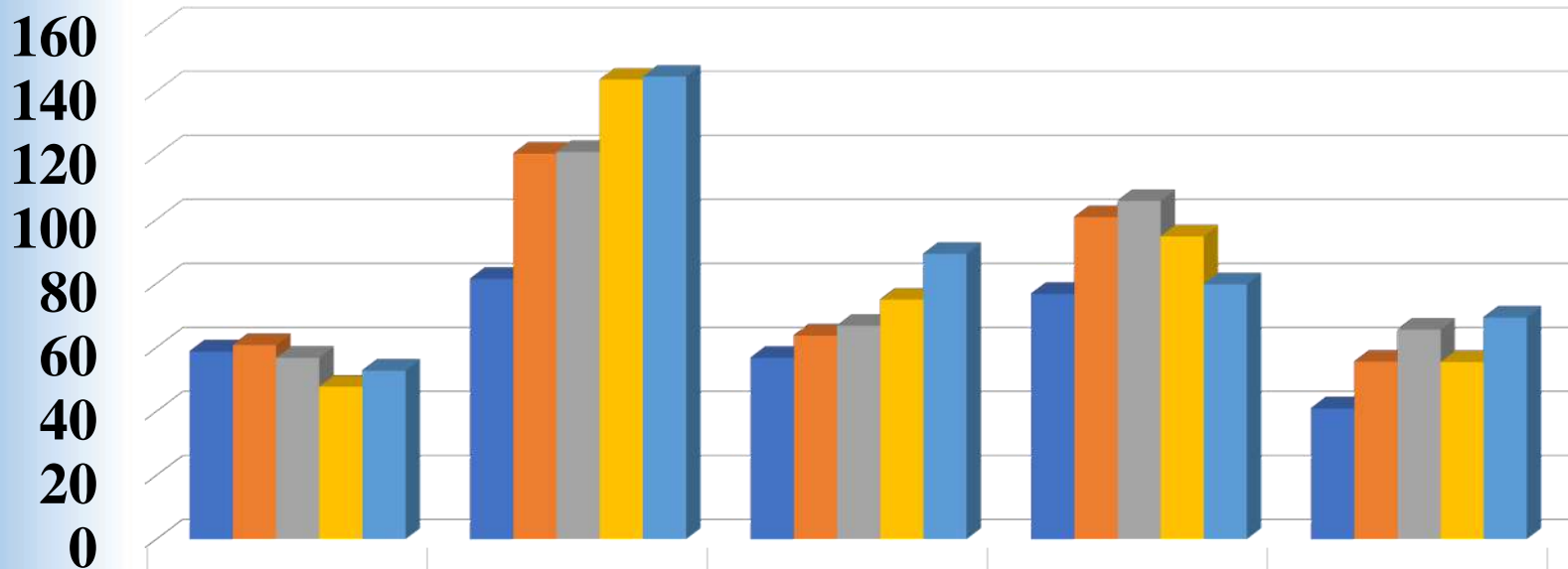
**Recommendation:**

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Child Health Services

### INSTITUTIONAL UNDER-FIVE MORTALITY RATE

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	59	81.71	57	77	41.2
■ 2019	61	120.81	64	101	55.8
■ 2020	57	121.3	67	106	65.8
■ 2021	48	143.9	75.2	95	55.7
■ 2022	53	144.83	89.5	80	69.6

### REMARKS :

- **KBTH:**  
2022 = 53 (↑)  
2021 = 48 (↓)  
2020 = 57 (↓)
- **KATH:**  
2022 = 144.83 (↑)  
2021 = 143.9 (↑)  
2020 = 121.30 (↑)
- **TTH:**  
2022 = 89.5 (↑)  
2021 = 75.2 (↑)  
2020 = 67 (↑)
- **CCTH:**  
2022 = 80 (↓)  
2021 = 95 (↓)  
2020 = 106 (↑)
- **HTH:**  
2022 = 69.6 (↑)  
2021 = 55.7 (↓)  
2020 = 65.8 (↑)

### Recommendation:

# THs TOP FIVE CAUSES OF UNDER-FIVE CHILD DEATH

<b>KBTH</b>	<b>KATH</b>	<b>TTH</b>	<b>CCTH</b>	<b>HTH</b>
Neonatal = 375 (53.6%)	Preterm /Low Birth Rate = 201 (38.80%)	<b>Preterm</b> = 130 (17.8%)	Respiratory Distress Syndrome = 63 (23.9%)	<b>Prematurity</b> = 63 (56%)
Cardiac = 69 (9.95%)	Birth Asphyxia = 112 (21.62%)	Birth Asphyxia = 105 (14.3%)	Asphyxia = 43 (16.3%)	Hypoxic Ischaemic Encephalopathy = 9 (8%)
<b>Cancer</b> = 45 (6.4%)	Heart Diseases = 82 (15.83%)	<b>Sepsis</b> = 92 (12.6%)	<b>Sepsis</b> = 32 (12.1%)	Meconium Aspiration syndrome = 6 (5%)
Haematological = 31 (4.4%)	Pneumonia = 66 (12.75%)	Respiratory Distress Syndrome = 76 (10.4%)	NEC = 12 (4.5%)	Septic Shock = 6 (5%)
Septic shock = 24 (3.4)	<b>Paediatric Cancers</b> = 57 (11.0%)	Severe Acute Malnutrition = 43 (5.9%)	Respiratory Failure = 9 (3.4%)	RVI = 6 (5%)

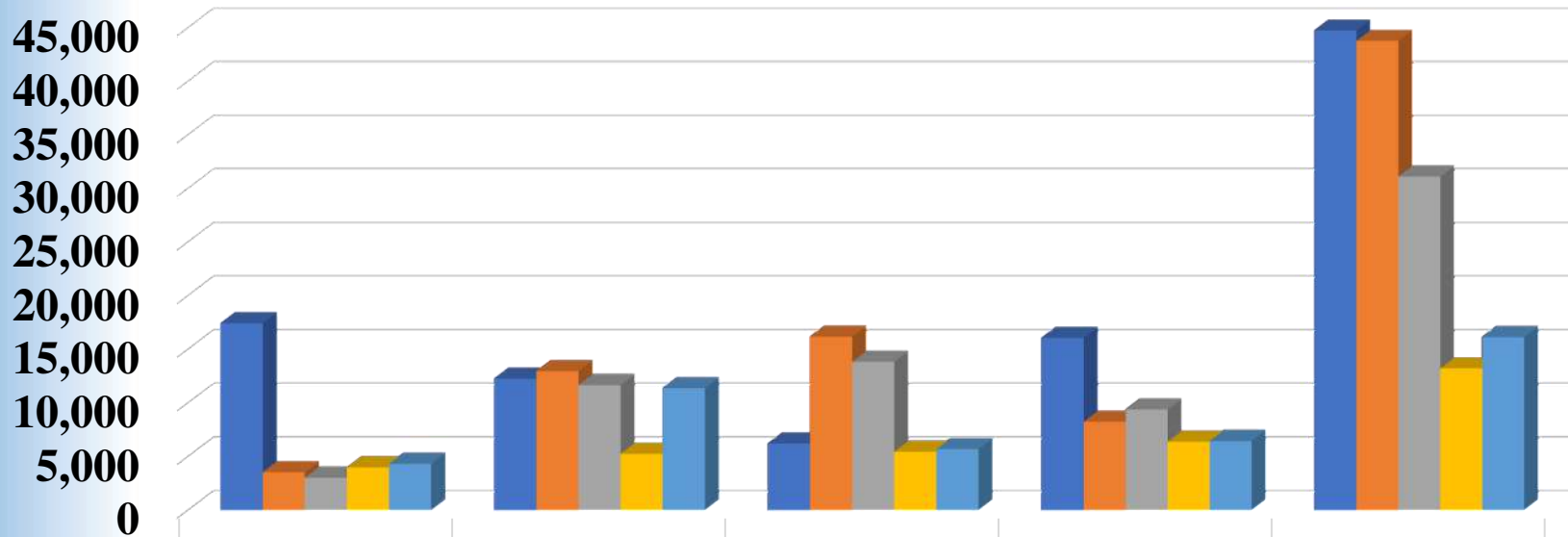
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pharmaceutical Services

### PRESCRIPTION TO PHARMACIST RATIO

**THs Target = 12000:1**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	17,462	12,300	6,255	16,097	44,774
■ 2019	3,571	13,000	16,208	8,288	43,806
■ 2020	3,065	11,700	13,869	9,425	31,151
■ 2021	4,042	5,289	5,496	6,422	13,253
■ 2022	4,365	11,414	5,733	6,495	16,176

### REMARKS :

- **KBTH:**  
2022 = 1:4,365 (↑)  
2021 = 1:4,042 (↑)  
2020 = 1:3,065(↓)
- **KATH:**  
2022 = 1: 11,414(↑)  
2021 = 1:5,289 (↓)  
2020 = 1:11,700 (↓)
- **TTH:**  
2022 = 1: 5,733 (↑)  
2021 = 1:5,496 (↓)  
2020 = 1:13,869(↓)
- **CCTH:**  
2022 = 1:6,495 (↑)  
2021 = 1:6,422 (↓)  
2020 = 1:9,425:1 (↑)
- **HTH:**  
2022 = 1:16,176 (↑)  
2021 = 1;13,253 (↓)  
2020 = 1:31,151(↓)

### Recommendation:



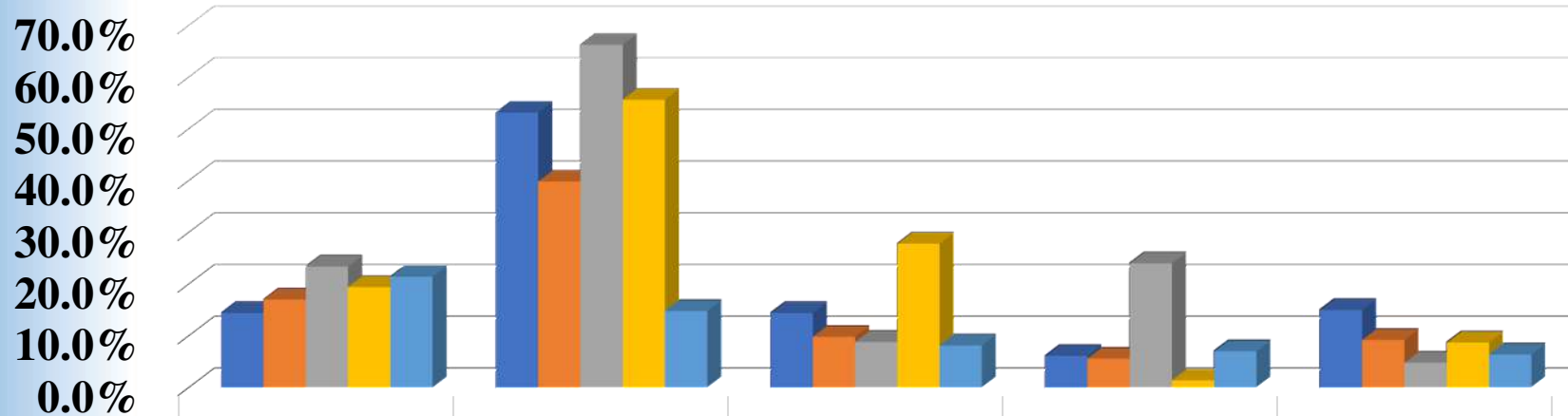
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pharmaceutical Services

### PERCENTAGE OF INJECTABLE PRESCRIBED

**THs Target = 10%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	14.6%	53.3%	14.6%	6.3%	15.2%
■ 2019	17.2%	40.0%	10.0%	5.8%	9.4%
■ 2020	23.6%	66.4%	9.0%	24.2%	5.0%
■ 2021	19.6%	55.8%	28.0%	1.6%	8.9%
■ 2022	21.6%	15.0%	8.3%	7.2%	6.6%

### REMARKS :

- **KBTH:**  
2022 = 21.6%(↑)  
2021 = 19.6% (↓)  
2020 = 23.6% (↑)
- **KATH:**  
2022 = 15% (↓)  
2021 = 55.8% (↓)  
2020 = 66.4% (↑)
- **TTH:**  
2022 = 8.33% (↓)  
2021 = 28.0% (↑)  
2020 = 9% (↓)
- **CCTH:**  
2022 = 7.23% (↑)  
2021 = 1.6% (↓)  
2020 = 24.2% (↑)
- **HTH:**  
2022 = 6.6% (↓)  
2021 = 8.9% (↑)  
2020 = 5% (↓)

### Recommendation:

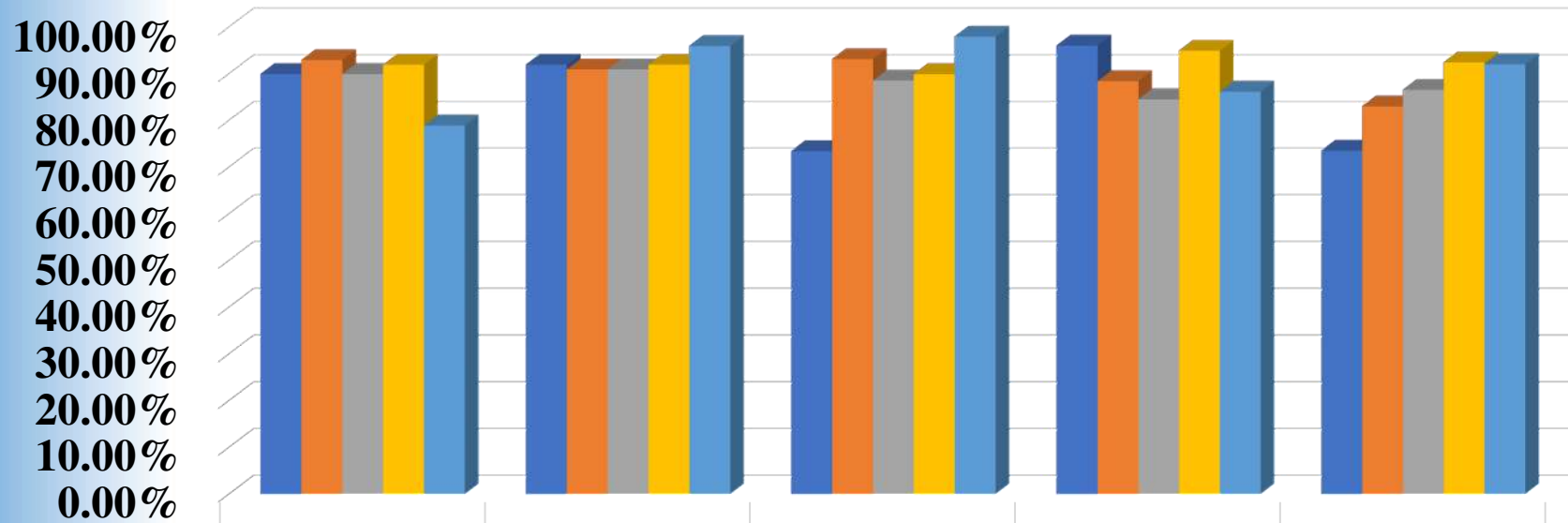
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pharmaceutical Services

### TRACER DRUG AVAILABILITY (%)

**THs Target = 90%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	90.00%	92.00%	73.50%	96.10%	73.60%
■ 2019	93.00%	91.00%	93.20%	88.50%	83.10%
■ 2020	90.00%	91.00%	88.60%	84.62%	86.60%
■ 2021	92.00%	92.00%	90.00%	95.00%	92.50%
■ 2022	79.00%	96.00%	98.00%	86.25%	92.10%

### REMARKS :

- **KBTH:**  
2022 = 79% (↓)  
2021 = 92% (↑)  
2020 = 90% (↓)
- **KATH:**  
2022 = 96% (↑)  
2021 = 92% (↑)  
2020 = 91%
- **TTH:**  
2022 = 98.0% (↑)  
2021 = 90.0% (↑)  
2020 = 88.6% (↓)
- **CCTH:**  
2022 = 86.25% (↓)  
2021 = 95% (↑)  
2020 = 84.62% (↓)
- **HTH:**  
2022 = 92.1% (↓)  
2021 = 92.5% (↑)  
2020 = 86.6% (↑)

### Recommendation:

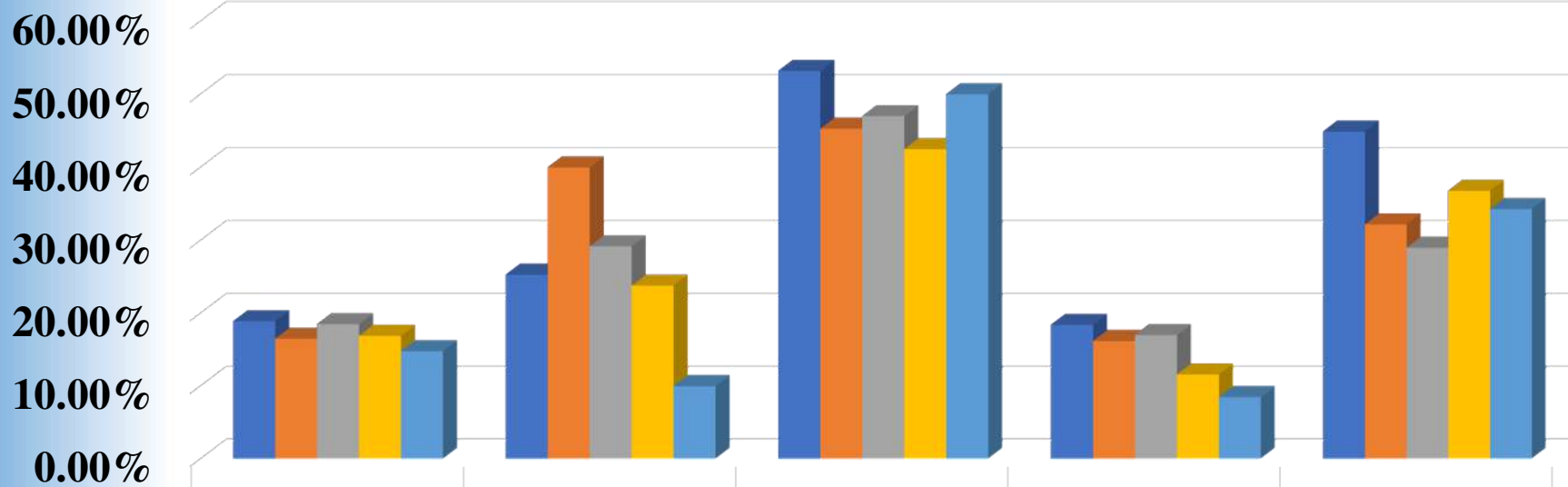
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pharmaceutical Services

### PERCENTAGE OF ANTIBIOTIC PRESCRIBED

**THs Target = 35%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	18.90%	25.30%	53.20%	18.40%	44.90%
■ 2019	16.50%	40.00%	45.30%	16.20%	32.20%
■ 2020	18.50%	29.20%	47.00%	17.00%	29.00%
■ 2021	16.90%	23.80%	42.50%	11.60%	36.80%
■ 2022	14.80%	10.00%	50.00%	8.50%	34.30%

### REMARKS :

- **KBTH:**  
2022 = 14.8%(↓)  
2021 = 16.9% (↓)  
2020 = 18.5% (↑)
- **KATH:**  
2022 = 10% (↓)  
2021 = 23.8% (↓)  
2020 = 29.2% (↓)
- **TTH:**  
2022 = 50.0%(↑)  
2021 = 42.5% (↓)  
2020 = 47% (↑)
- **CCTH:**  
2022 = 8.5% (↓)  
2021 = 11.6% (↓)  
2020 = 17.% (↑)
- **HTH:**  
2022 = 34.3% (↓)  
2021 = 36.8% (↑)  
2020 = 29% (↓)

**Recommendation:**

# Provide Pharmaceutical Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Utilization of Pharmaceutical Care interventions	<b>90.0 (↑)</b> <b>26.2% (↑)</b> <b>20.6% (↓)</b> <b>21% (↑)</b> <b>20.9% (↓)</b>	<b>30%(↑)</b> <b>18% (↑)</b> <b>16% (↓)</b> <b>17%</b> <b>- = 2018</b>	<b>93.9%(↓)</b> <b>95% (↓)</b> <b>76% (↓)</b> <b>78%</b> <b>78% (↑)</b>	<b>97% (↑)</b> <b>21.2% (↑)</b> <b>11.5% (↓)</b> <b>99% (↑)</b> <b>97.3% (↑)</b>	<b>98.1% (↑)</b> <b>88.4% (↑)</b> <b>83.3% (↑)</b> <b>82%</b> <b>N/A</b>	<b>30%</b>	Number of interventions / cases seen * 100
Proportion of ward round inputs by clinical pharmacist utilised	<b>- = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>90%(↑)</b> <b>80% (↑)</b> <b>75% (↓)</b> <b>80%</b> <b>- = 2018</b>	<b>90%(↓)</b> <b>95% (↑)</b> <b>93% (↑)</b> <b>85%</b> <b>85% (↑)</b>	<b>100%</b> <b>100%</b> <b>89.3%</b> <b>- = 2019</b> <b>80%</b>	<b>94%</b> <b>94% (↓)</b> <b>100% =</b> <b>2020</b> <b>N/A</b> <b>N/A</b>		Number of clinical pharmacist inputs utilised / Total number of inputs

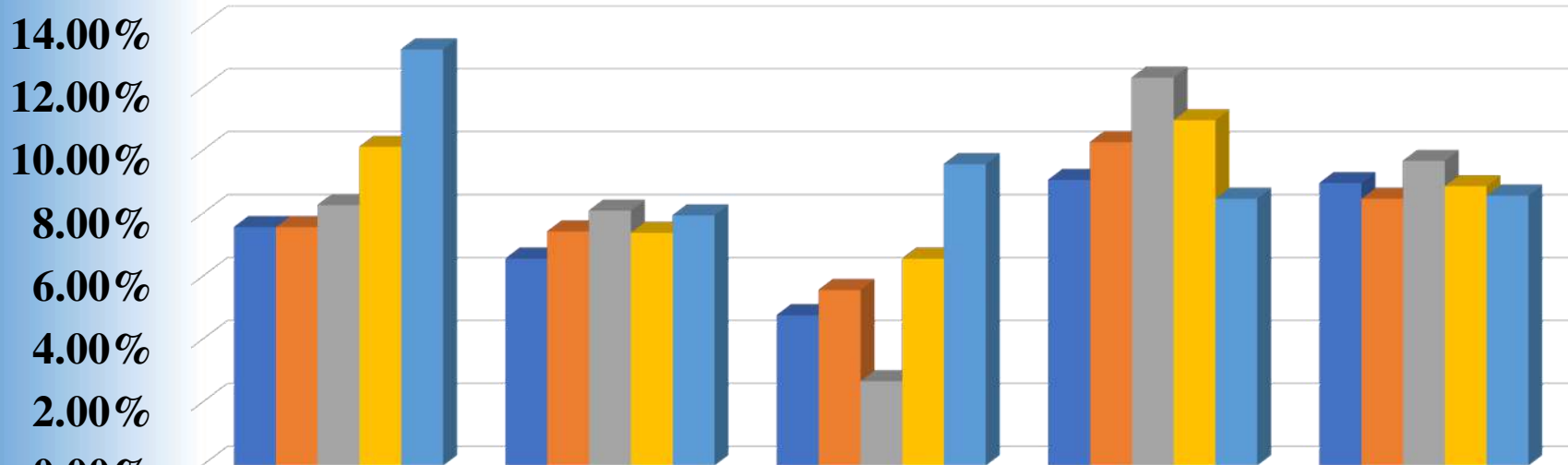
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pathological & Mortuary Services

### INSTITUTIONAL ALL-CAUSE MORTALITY RATE

**THs Target = 5%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	7.60%	6.60%	4.80%	9.10%	9.00%
■ 2019	7.60%	7.46%	5.60%	10.30%	8.50%
■ 2020	8.30%	8.12%	2.70%	12.35%	9.70%
■ 2021	10.15%	7.42%	6.60%	11.00%	8.90%
■ 2022	13.25%	7.97%	9.60%	8.50%	8.60%

### REMARKS :

- **KBTH:**  
2022 = 13.25% (↑)  
2021 = 10.15% (↑)  
2020 = 8.3% (↑)
- **KATH:**  
2022 = 7.97% (↑)  
2021 = 7.42% (↓)  
2020 = 8.12% (↑)
- **TTH:**  
2022 = 9.6% (↑)  
2021 = 6.6% (↑)  
2020 = 2.7% (↓)
- **CCTH:**  
2022 = 8.50% (↓)  
2021 = 11.0% (↓)  
2020 = 12.35% (↑)
- **HTH:**  
2022 = 8.6% (↓)  
2021 = 8.9% (↓)  
2020 = 9.7% (↑)

### Recommendation:

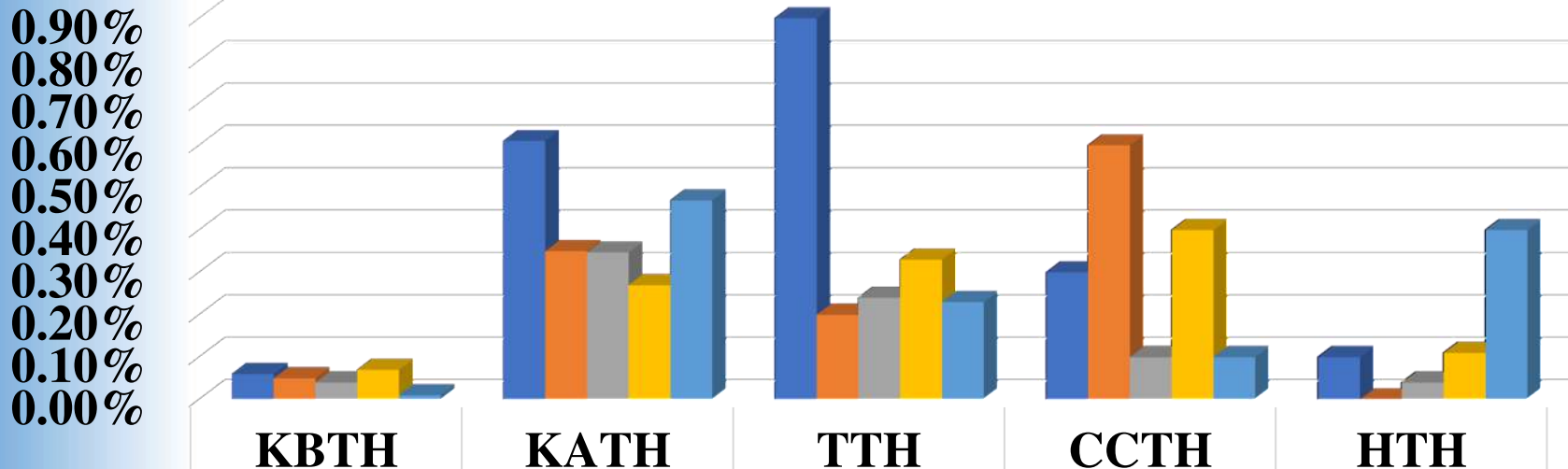
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Pathological & Mortuary Services

### THEATER DEATH RATE

**THs Target = 0.5%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	0.06%	0.61%	0.90%	0.30%	0.10%
■ 2019	0.05%	0.35%	0.20%	0.60%	0.00%
■ 2020	0.04%	0.35%	0.24%	0.10%	0.04%
■ 2021	0.07%	0.27%	0.33%	0.40%	0.11%
■ 2022	0.01%	0.47%	0.23%	0.10%	0.40%

### REMARKS :

- **KBTH:**  
2022 = 0.01% (↓)  
2021 = 0.07% (↓)  
2020 = 0.04% (↓)
- **KATH:**  
2022 = 0.47% (↑)  
2021 = 0.27% (↓)  
2020 = 0.347% (↓)
- **TTH:**  
2022 = 0.23% (↓)  
2021 = 0.33% (↑)  
2020 = 0.24% (↑)
- **CCTH:**  
2022 = 0.10% (↓)  
2021 = 0.4% (↑)  
2020 = 0.1% (↓)
- **HTH:**  
2022 = 0.4% (↑)  
2021 = 0.11% (↑)  
2020 = 0.04% (↑)

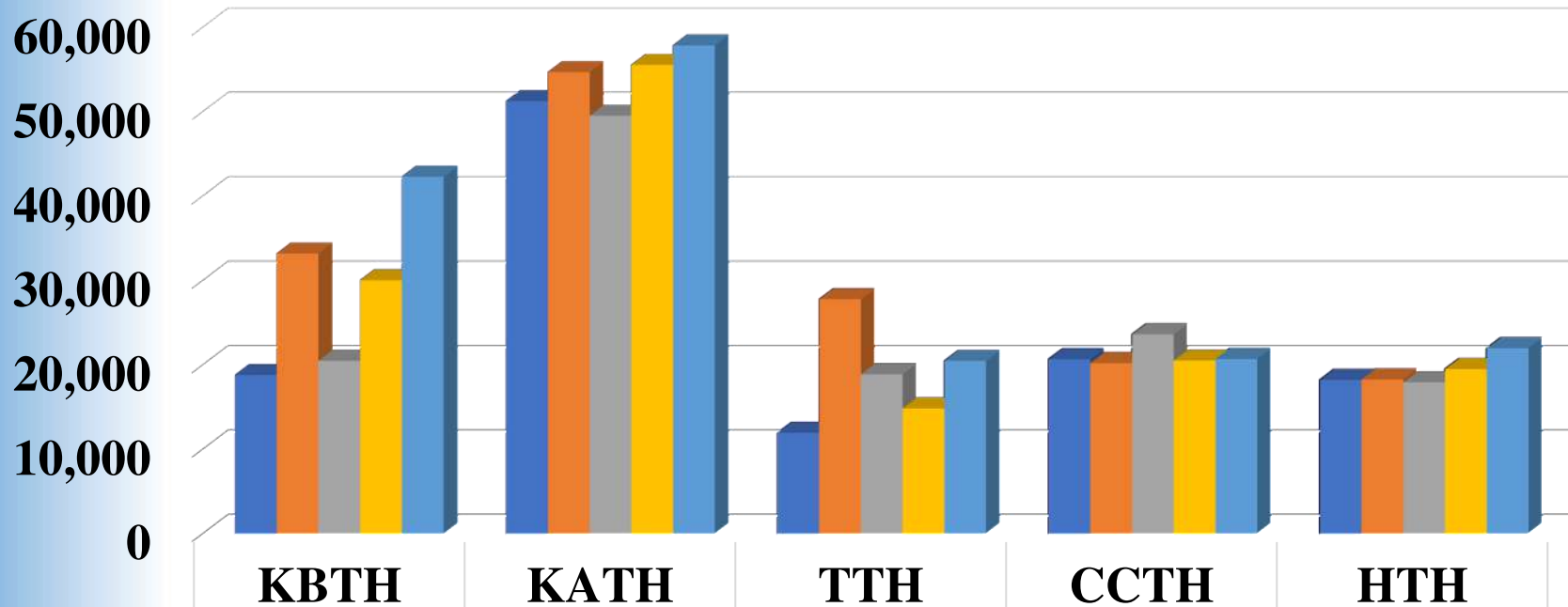
### Recommendation:

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Diagnostics Services

### TREND ANALYSIS OF TOTAL RADIOLOGY INVESTIGATIONS

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



■ 2018	18,858	51,318	12,030	20,766	18,303
■ 2019	33,263	54,741	27,849	20,285	18,355
■ 2020	20,554	49,575	18,962	23,697	18,009
■ 2021	30,099	55,601	14,919	20,587	19,585
■ 2022	42,356	57,915	20,548	20,787	22,058

### REMARKS :

- KBTH:**  
 2022 = 42,356 (40.72%↑)  
 2021 = 30,099 (46.4%↑)  
 2020 = 20,554 (38.2%↓)
- KATH:**  
 2022 = 57,915 (4.16% ↑)  
 2021 = 55,601 (12.16 ↑)  
 2020 = 49,575 (9.4% ↓)
- TTH:**  
 2022 = 20,548 (37.7% ↑)  
 2021 = 14,919 (21.3% ↓)  
 2020 = 18,962 (32.5% ↓)
- CCTH:**  
 2022 = 20,787 (0.97% ↑)  
 2021 = 20,587 (13.1% ↓)  
 2020 = 23,697 (16.8% ↑)
- HTH:**  
 2022 = 22,058 (12.6% ↑)  
 2021 = 19,585 (8.8% ↑)  
 2020 = 18,009 (1.9% ↓)

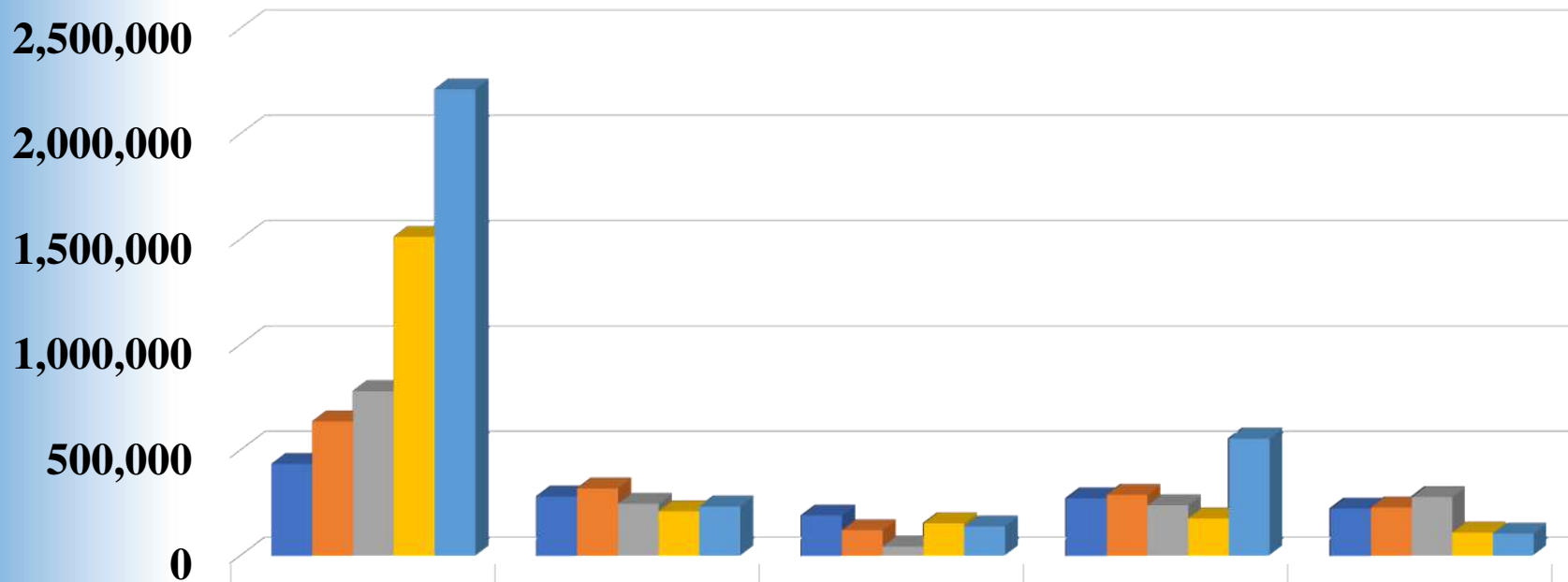
### Recommendation:

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Diagnostics Services

### TREND ANALYSIS OF TOTAL LABORATORY INVESTIGATIONS

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	437,889	284,030	193,376	275,329	226,768
■ 2019	639,717	322,163	124,210	291,677	232,061
■ 2020	782,994	249,205	46,752	241,858	281,495
■ 2021	1,514,553	214,001	156,673	180,415	113,393
■ 2022	2,214,529	236,428	141,886	558,298	108,103

### REMARKS :

- KBTH:**  
 2022 = 2,214,529 (46.21% ↑)  
 2021 = 1,514,553 (93.4%↑)  
 2020 = 782,994 (22.4%↑)
- KATH:**  
 2022 =  
 2021 = 214,001(14.13% ↓)  
 2020 = 249,205 (22.6% ↓)
- TTH:**  
 2022 = 141,886 (9.4% ↓)  
 2021 = 156,673 (235.1% ↑)  
 2020 = 46,752 (62.4% ↓)
- CCTH:**  
 2022 = 558,298 (209% ↑)  
 2021 = 180,415 (25.4% ↓)  
 2020 = 241,858 (17.1% ↓)
- HTH:**  
 2022 = 108,103 (4.7% ↓)  
 2021 = 113,393 (59.7% ↓)  
 2020 = 281,495 (21.3% ↑)

### Recommendation:

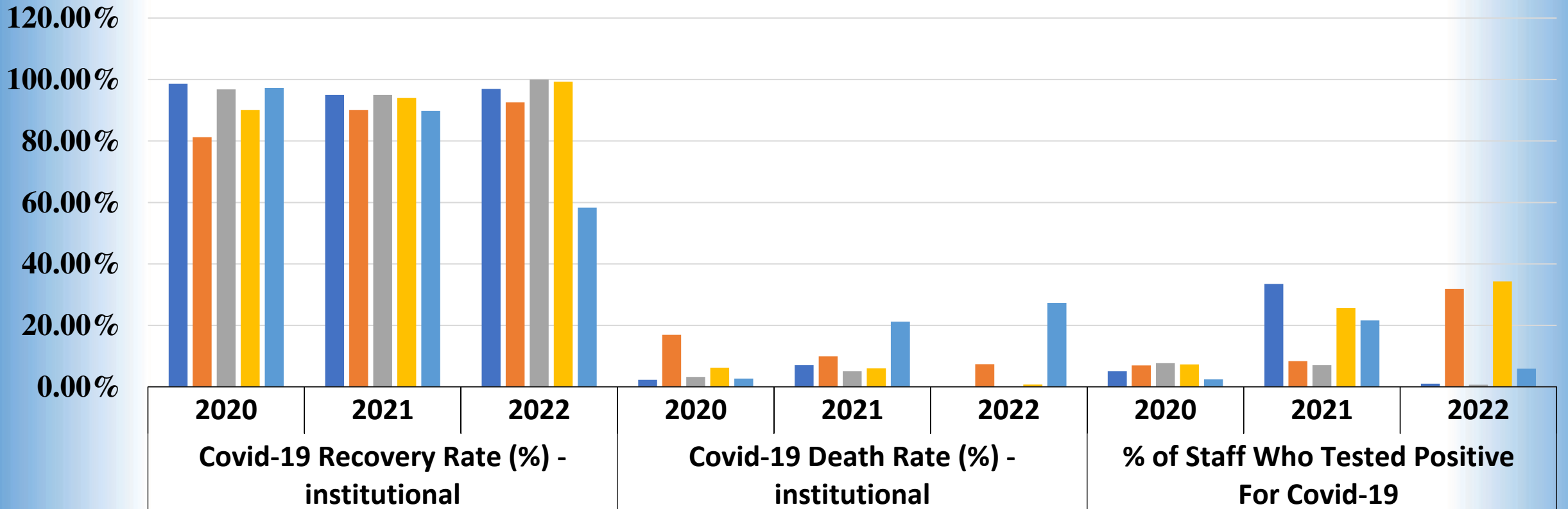


# **COVID-19 Pandemic Response By THs**

# COVID-19 Response By THs

## OUTCOME OF COVID-19 CASES MANAGED BY THs

■ KBTH ■ KATH ■ TTH ■ CCTH ■ HTH

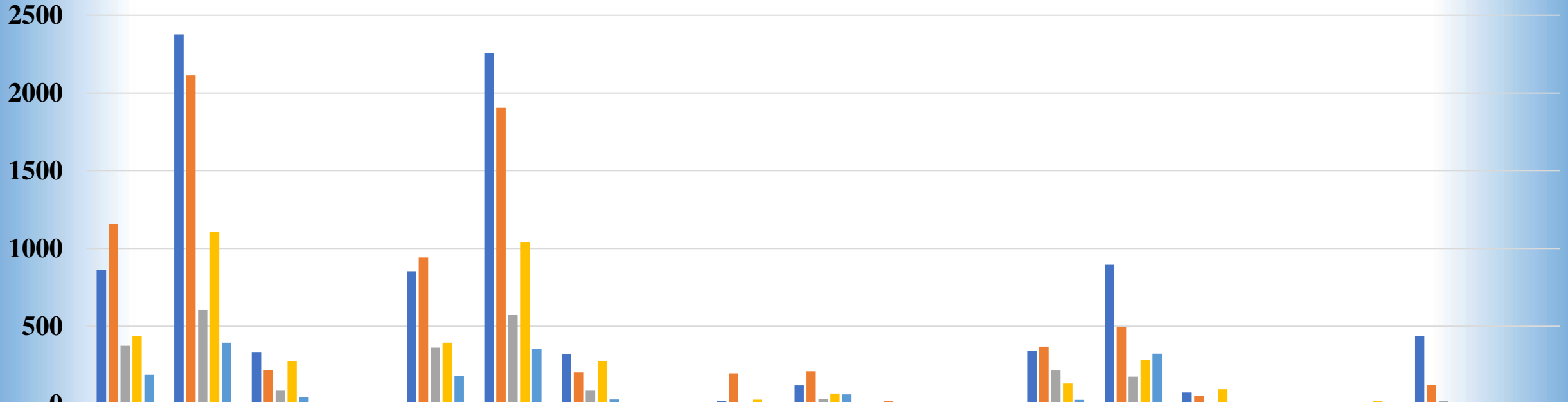


■ KBTH	98.60%	95%	96.96%	2.30%	7%	0.02%	5.10%	33.48%	1.01%
■ KATH	81.20%	90.10%	92.60%	16.90%	9.89%	7.37%	6.97%	8.40%	31.90%
■ TTH	96.80%	95%	100%	3.20%	5.10%	0%	7.70%	7%	0.65%
■ CCTH	90.10%	94.00%	99.30%	6.20%	6%	0.72%	7.30%	25.60%	34.30%
■ HTH	97.30%	89.80%	58.30%	2.70%	21.20%	27.30%	2.40%	21.60%	5.90%

# COVID-19 Response By THs in 2022

## TOTAL NUMBER OF COVID-19 CASES MANAGED BY THs

■ KBTH ■ KATH ■ TTH ■ CCTH ■ HTH



	2020	2021	2022		2020	2021	2022		2020	2021	2022		2020	2021	2022		2020	2021	2022
	Total Positive Covid-19 Cases Managed				Total Recoveries/Discharged				Total Covid-19 Related Deaths				Total Number Of Covid-19 Infection Among Staff				Total Active Cases At The End Of 2020		
■ KBTH	862	2,377	330		850	2,258	320		20	119	8		341	895	73		12	436	0
■ KATH	1,158	2,113	217		941	1,904	201		196	209	16		368	494	53		8	122	0
■ TTH	374	604	85		362	573	85		12	31			215	175	0		0	17	0
■ CCTH	436	1,108	277		393	1,041	275		27	67	2		131	284	95		16	0	0
■ HTH	187	393	44		182	353	28		5	62	12		26	324			0	7	0

# **THs Mandate 2: TRAINING**

# THs Mandate 2: Training

THs	KEY ACHIEVEMENT
KBTH	<ul style="list-style-type: none"><li data-bbox="315 225 2446 392">➤ 81% implementation of the entire KBTH Training Plan-executed both local and international institutions</li><li data-bbox="315 454 1763 511">➤ Trained Ghana's first female Cardiothoracic Surgeon</li><li data-bbox="315 568 1803 625">➤ 100% pass rate for Pharm D students trained at KBTH</li><li data-bbox="315 682 2229 739">➤ Officially started Training Emergency Medicine residency under GCPS</li><li data-bbox="315 796 1352 853">➤ 10 doctors trained in BLS and ACLS</li><li data-bbox="315 911 2040 968">➤ 856 staff trained on development of program of work/budgeting</li><li data-bbox="315 1025 1302 1082">➤ 116 staff trained on data validation</li></ul>

# THs Mandate 2: Training

THs	KEY ACHIEVEMENT
KATH	<ul style="list-style-type: none"><li>➤ 71.47% of fellowship applications approved for fellowship.</li><li>➤ Management training done for all Directorates/Units Management Team Members</li><li>➤ 49 CPD done with 1,820 staff trained</li><li>➤ Have Accreditation for various residency training programmes</li><li>➤ Curriculum for Critical Nursing School developed</li><li>➤ Establishment of the Critical Nursing School at 60% completion stage</li></ul>

# THs Mandate 2: Training

THs	KEY ACHIEVEMENT
TTH	Three (3) senior specialists and 14 <b>specialists resumed</b> duty after successfully <b>completing their respective specialty trainings.</b>
CCTH	<ul style="list-style-type: none"><li><input type="checkbox"/> <b>Appointed a Training Coordinator for the Hospital</b></li><li><input type="checkbox"/> 8 new Specialists and 7 Nurse specialists resumed after completing their postgraduate training.</li><li><input type="checkbox"/> <b>Received the Accreditation for specialist training</b> in the following areas:<ul style="list-style-type: none"><li>➤ <b>Urology</b></li><li>➤ <b>Orthopedics</b></li><li>➤ <b>Re-accreditation for General Surgery</b></li></ul></li><li><input type="checkbox"/> Started house officer training in Emergency Medicine and</li><li><input type="checkbox"/> Initiated the process to secure accreditation for house officer training in Anaesthesia.</li><li><input type="checkbox"/> <b>100% pass for medical students</b></li><li><input type="checkbox"/> MOU signed with school of Peri-operative and Critical Care Nursing</li></ul>
HTH	<ul style="list-style-type: none"><li>➤ <b>21 Residents</b> undergoing residency programmes</li><li>➤ <b>Accredited for Residency training in Internal Medicine</b></li></ul>

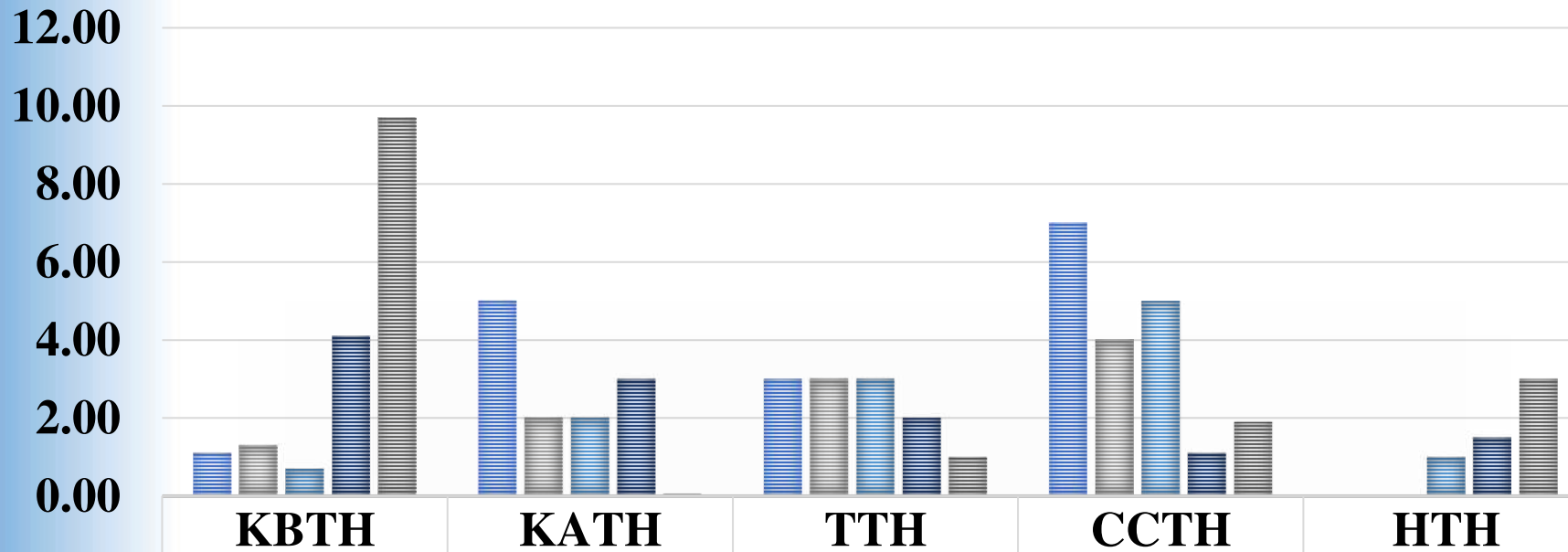
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide Staff Development & Training & Staff Welfare Support

### CONSULTANT TO RESIDENT DOCTOR RATIO

**THs Target = 1:3**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
2018	1.10	5.00	3.00	7.00	
2019	1.30	2.00	3.00	4.00	
2020	0.70	2.00	3.00	5.00	1.00
2021	4.10	3.00	2.00	1.10	1.50
2022	9.70	0.04	1.00	1.90	3.00

### REMARKS :

- **KBTH:**  
2022 = 1:9.7 (↑)  
2021 = 1:4.1 (↑)  
2020 = 1:0.7 (↓)
- **KATH:**  
2022 = 1.90 (↑)  
2021 = 1:3 (↑)  
2020 = 1:2
- **TTH:**  
2022 = 1:1 (↓)  
2021 = 1:2 (↓)  
2020 = 1:3
- **CCTH:**  
2022 = 1:1.9 (↑)  
2021 = 1:1.4 (↓)  
2020 = 1:5 (↑)
- **HTH:**  
2022 = 1:3  
2021 = 1:1.5 (↑)  
2020 = 1:1

**Recommendation:**



## Provide Staff Development & Training & Staff Welfare Support

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Doctor to Nurse/Midwife Ratio	1:4 (↓) 1:5 1:5 1:5 (↓) 1:7 = 2018	1:4(↑) 1:3 (↓) 1:5 (↑) 1:4 (↓) 1:5 (↑)	1:4 (↓) 1:7 (↓) 1:9 1:9 (↑) 1:8 (↑)	1:4 (↓) 1:7 (↑) 1:5 = 2020 1:5 (↑) 1:4 (↓)	1:6 (↓) 1:7 (↓) 1:9 (↓) 1:13 (↑) 1:8 (↓)	1:5	Total number of Doctors in the hospital / Total of Nurses

## Support Teaching And Training Of Health Professionals

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Residents pass rate	88%(↑) 85% (↓) 95% (↑) 91% (↑) 80.2% (↑)	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	94% 94% - = 2020 - = 2019 93% = 2018	87.5% (↓) 91% - = 2020 100% (↑) 90% = 2018	N/A= 2022 N/A = 2021 N/A = 2020 N/A = 2019 N/A = 2018	60%	Percentage of final year professional passes / Total number of students enrolled (proxy: medical and nursing students)
Number of Staff Enrolled In Postgraduate Colleges	99 (23.8%↓) 130 (19.3% ↑) 109 (47.1%↓) 206 (255.2%↑) 58 (205.3%↑)	228 (67.6%) 136 (68%↑) 81(70%↑) 30 (70.3%↓) 101 = 2018	102 (14.6% ↑) 89 (178.1% ↑) 32 (54.3%↓) 70 (27.8%↓) 97 = 2018	47 (23.68% ↑) 38 (65.2% ↑) 23 (52%↓) 48 (9.4%↓) 53 = 2018	56 (80.6% ↑) 31 (47.7% ↑) 21= 2020 N/A= 2019 N/A= 2018	-	-

**THs MANDATE 3:  
UNDERTAKE RESEARCH**

# UNDERTAKE RESEARCH

## THs

## KEY ACHIEVEMENT

KBTH	<ul style="list-style-type: none"><li>➤ A total of 76 research applications received</li><li>➤ <b>51 research works published</b> (representing 67%)</li><li>➤ 159 Research works were done to address issues of KBTH</li><li>➤ <b>International collaborative researches ongoing</b> Eg. Newborn Sickle Cell Screening, Cardio metabolic project -CREATE</li><li>➤ <b>Research fair was held</b></li></ul>
KATH	<ul style="list-style-type: none"><li>➤ Research capacity among staff improved</li><li>➤ <b>Organized research ethics workshop for staff</b> of the hospital.</li><li>➤ <b>Research fund policy and Registry setup policy developed</b></li><li>➤ 130 Total Applications (registration)</li><li>➤ <b>176</b> submitted to KATH IRB. 270% increased compared to 65 submission in 2021.<ul style="list-style-type: none"><li>a) <b>162 approved</b>. 324% increased compared to 50 approvals in 2021</li><li>b) 13 conditional approval.</li></ul></li><li>➤ Six (6) operational researches were conducted</li><li>➤ One Hundred and thirty-four (<b>134</b>) <b>research papers published</b></li></ul>

# UNDERTAKE RESEARCH

THs	KEY ACHIEVEMENT
TTH	<ul style="list-style-type: none"><li>➤ Successfully organized Two Ethical Review Committee meetings</li><li>➤ Successfully completed a research project and submitted for publication and others at various stages of completion</li><li>➤ <b>Successfully organized a Scientific Research Conference</b></li><li>➤ TTH/UDS and Loughborough University <b>undertaking a 5-year research on the effects of environmental heat on the health of the population.</b></li></ul>
CCTH	<ul style="list-style-type: none"><li>➤ 200 research applications received in 2022, out of which;<ul style="list-style-type: none"><li>✓ <b>93.5% (187) of researches approved</b> out of the 200 applications received.</li><li>✓ <b>23 Staff research</b> applications approved for 2022</li><li>✓ A total of twenty-three (23) researches conducted by departments<ul style="list-style-type: none"><li>○ Sixteen (16) independent researches by seven (7) departments</li><li>○ Seven (7) collaborative researches among seven (5) departments</li></ul></li></ul></li><li>➤ <b>Research capacity and activity among staff improved</b></li><li>➤ Institutional <b>Research Policy document developed</b> (awaiting the Hospital Board's approval)</li></ul>
HTH	<ul style="list-style-type: none"><li>➤ <b>Curriculum for Research Capacity building finalized</b></li><li>➤ Soliciting for funding to roll out the training and field activities</li></ul>

## Support Teaching And Training Of Health Professionals

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
	<b>Undertake Research Activities</b>						
Operational research	38 (46.1%↑) 26 (13.3% ↓) 30(45.5%) 55 (5.8%↑) 52(10.6%)	6 (14.3%↓) 7 (53.3% ↓) 15 (150%↑) 6 (20%↑) 5 (25%↑)	2 = 2022 2 = 2021 2 (77.8%↓) 9 (350%↑) 2 (33.3%↓)	9 (35.71%↓) 14 (600% ↓) 2 (66.7%↓) 6 (100%↑) 3 (50%↑)	12 (140%) 5 (150%) 2 N/A= 2019 N/A= 2018	4	Number of operational research carried out/ operational research planned for period
Number of Research published	51 (21.42%↑) 42 (133.3% ↑) 18 (37.9%↓) 29 (7.4%↑) 27 (15.6%↓)	134 (4.3%↓) 140 (14.8%↑) 122 (713%↑) 15 (16.7%↓) 18 (18.2%↓)	33 (26.9%↑) 26 (53% ↑) 17 (6.3%↑) 16 (46.7%↓) 30 = 2018	17 (41.6%↑) 12 (20% ↓) 15 (50%↑) 10 (9.1%↓) 11 = 2018	10 (42.9%) 7 = 2021 0 (↓) 2 (↑) 0= 2018	20	

# **KEY ACHIEVEMENTS**

## **- Governance**

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - **KBTH**

- Through **Public-Private Partnership**, Korle Bu Teaching Hospital has **inaugurated a modern Diagnostic centre**, known as the Korle Bu-Mindray-Lynch (KML) to provide quicker results and serve the needs of its growing clients. The laboratory will **provide** services in clinical **chemistry, haematology** and **immunology** etc.
- **Phase one of New Psychiatry Block completed** and occupied
- Extensive renovation and modernization of Fevers Unit completed
- **New 50-bed Infectious Disease Isolation Centre completed**



## KEY ACTIVITY ACHIEVEMENTS IN 2022 - **KBTH**

- Implemented 2021 External Audit recommendations
- Improved staff satisfaction rate of 59% (2022) as compared to 38%(2021)
- Client satisfaction increased by 30.17%
- Data validated improved from 18% (2021) to 52% (2022)
- **WHO support** in developing a **Standard Operating Procedure (on data system)** and a **Monitoring and Evaluation Plan**
- Maiden **Standard Operating Procedure** for **Health Information Management System Completed (HMIS)**
- Data validation exercise held across 19 Sub-BMC's

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - **KATH**

- ❖ The Procurement Audit, which was conducted by the **Public Procurement Authority**, placed the hospital as a **Matured Procurement Entity** (under the procurement **Benchmarking Ladder**).
- ❖ The Hospital **received Excellence Awards at the Africa Procurement & Supply Chain Awards (APSCA)**
- ❖ **Excellence** in Procurement & Supply Chain (**Healthcare**) – **Gold**
- ❖ Public Sector Procurement **Team of the Year** – **Bronze**
- ❖ Public Sector Procurement **Professional of the Year** – **DD-SCMU**
- ❖ Development of new policies and review of some existing policies.
- ❖ Management **constituted** several committees. Key amongst them is the **Patients Relations Committee**

## **KEY ACTIVITY ACHIEVEMENTS IN 2022 – KATH Continued**

- ❖ Eight (8) National Competitive Tenders (NCTs) conducted for procurement of: Non medicine consumables, Medical equipment, Works, Services etc. to ensure uninterrupted flow of medicines, consumables and services to support healthcare delivery.
- ❖ **Held one Board and Management Retreat**
- ❖ **Electronic Medical Record System extended to cover over 97% of all clinical areas in the hospital**
- ❖ About 99% of all payments processed through GIFMIS
- ❖ Fully digitized 24 hour operations using the pharmacy Electronic Medical Record System
- ❖ All program medicines and reagents managed through GHiLMIS

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - TTH

- A total of thirty-four (34) out of thirty-four (34) **audit recommendations have been implemented**
- Successfully **organized a GIFMIS training for new Directors** and a refresher training for other users
- **Constituted a Partnerships and Projects Team** to **carryout business development functions** for the Hospital
- Revised and ratified Policies: Accommodation, Code of Conduct & Disciplinary Procedures.
- Policies in Draft: Occupational Health & Safety, Rewards and Recognitions, Transport and Donations.
- **Stakeholder engagement organized:** Management, Governing Board, **key Traditional Authorities and Opinion Leaders** within the immediate catchment area of the hospital.
- Engaged Ghana National Blood Service to enhance activities of the Northern Zonal Blood Centre.

# KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH

## EQUIPMENT:

1. **Creation of Ultrasound Scan Suite and Installation of Ultrasound Scans at critical care areas**
  - The Suite was created during the period under review and all scan services now provided, including trans-vaginal ultrasound
  - Ultrasound Scans installed at **A/E, O&G Dept, OPD**, and **other critical care areas**
  - **Eight(8)** Ultrasound Scans machines installed for use at various service points with one mobile Scan available for emergency purposes
2. A 32 Slides CT Scan Installed and operational

## INFRASTRUCTURE:

1. **Infectious Disease Centre**
  - This project is part of Gov't World Bank Support projects on Infectious Diseases Mgt preparedness
  - **95% Completion stage** of construction as at 31/12/22

# KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH Con't

## INFRASTRUCTURE:

### 2. Construction of a **New Eye Centre**

- **Construction was at the substructure** as at 31/12/22
- Construction period is 18months
- Ultramodern Eye Surgical Training Centre costing approximately US\$1Million
- **Funding from USAID, HCP** (A USA NGO & its Partners)
- **Product of the Hospital's Resource Mobilization agenda.**
- The centre comes with two theatres, female and male wards with 20 bed each
- Training wing for training of all eye care professionals

### 3. Construction of **Patient Relative Hostel**

- Project started in October, 2022
- **Construction was at 30%** by close of year
- **Funding from Ghana Gas.** Product of the Hospital's Resource Mobilization agenda.
- The project is aimed at providing decent and affordable accommodation for our clients.
- Further improve on environmental sanitation within the hospital

# KEY ACTIVITY ACHIEVEMENTS IN 2022 – CCTH Con't

## INFRASTRUCTURE:

4. Construction of a comprehensive Stand-alone **A&E Centre** with attached surgical wards
  - A comprehensive A&E centre the hospital is currently pursuing for execution
  - With the support of the Board and MoH this project was listed as one of the priority projects in 2022 Budget statement
  - Concept Paper, **Pre-feasibility & Feasibility studies were all done** and received approval from the MoF in 2022
  - **Project promoters are pursuing it on a Turn-Key basis**

## **OTHERS:**

- ❖ Ensured Procurement Act compliance
  - Bid opened in 2nd February 2022
- ❖ The key meetings mandated were held
- ❖ **Continue to implement a Sick Staff Policy** that benefits all staff and key dependants & retired staff of CCTH.

## KEY ACTIVITY ACHIEVEMENTS IN 2022 - HTH

- ❖ Organized training for Central Management and Sub-BMC Management Teams on Enterprise Risk Management
- ❖ 5 Board meetings and 3 Board Committee meetings were held to deliberate on Technical, Human Resource and Financial Issues of the Hospital
- ❖ Organized a Business session to deliberate on the 2021 Performance of the Hospital and develop interventions to address the key challenges encountered in 2021
- ❖ Engaged stakeholders on the development of the Hospital



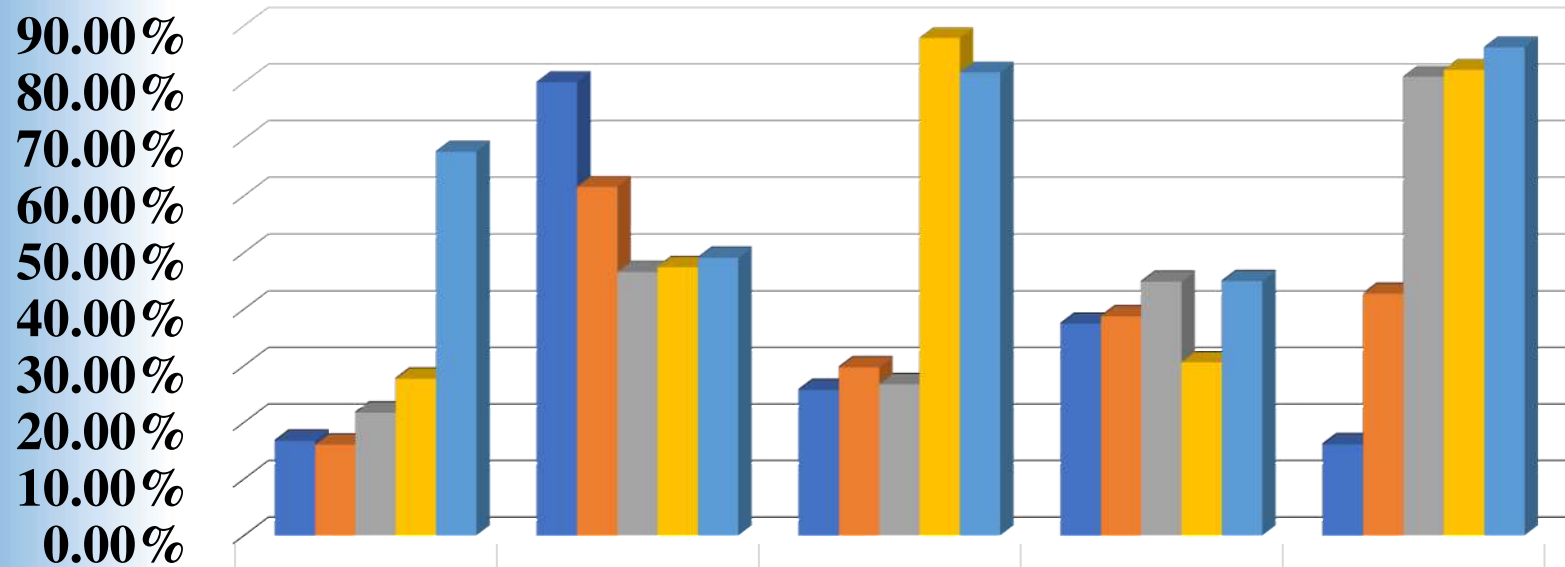
# **KEY OUTPUTS ACHIEVEMENTS**

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## PROPORTION OF STAFF APPRAISED

**THs Target = 100%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
2018	17.00%	80.25%	26.00%	37.70%	16.40%
2019	16.30%	61.80%	30.00%	39.00%	43.00%
2020	22.00%	46.80%	27.00%	45.10%	81.20%
2021	28.00%	47.70%	88.00%	30.90%	82.40%
2022	68.00%	49.32%	81.95%	45.21%	86.40%

## REMARKS :

- KBTH:**  
 2022 = 68%(↑)  
 2021 = 28% (↑)  
 2020 = 22% (↑)
- KATH:**  
 2022 = 49.32% (↑)  
 2021 = 47.73 (↑)  
 2020 = 46.8% (↓)
- TTH:**  
 2022 = 81.95% (↓)  
 2021 = 88.0% (↑)  
 2020 = 27.0% (↓)
- CCTH:**  
 2022 = 45.21% (↑)  
 2021 = 30.9% (↓)  
 2020 = 45.1% (↑)
- HTH:**  
 2022 = 86.4% (↑)  
 2021 = 82.4%(↑)  
 2020 = 81.2% (↓)

**Recommendation:**

# **Technical and Logistical Support Services**

## Provide Technical Services and Logistical Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Equipment downtime Proxy: CT SCAN	10.0%(↑) 7.0% (↓) 8.3% (↑) 5.0% (↓) 12% (↑)	15 %(↑) 8.2% (↓) 11.9% (↑) 10.55% (↓) 33.5% (↑)	19.0% (↓) 61.6% (↓) 73.3% - = 2019 29%	100% (↑) 82.5% (↓) 0% = 2020 0% (↓) 7.69% (↑)	0% N/A = 2021 N/A= 2020 N/A= 2019 N/A= 2018	5%	Average downtime/Total productive hours Total productive hours (12 per day ) *100
PPM output achieved	75.0% (↑) 60.0% (↑) 40.0% (↓) 90.0% (↑) 60.0% (↓)	85.0% (↓) 89.7% (↑) 86.8% 86.8% (↑) 75.0% (↑)	= 2022 -= 2021 92% (↑) 87% (↓) 90% (↑)	50.0% (↓) 61.7% (↓) 75.0% (↓) 80.0% (↑) 62.0% (↑)	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	80%	PPM executed / PPM *100
Equipment Utilisation Proxy: CT SCAN	91% %(↓) 92% (↓) 98% (↑) 85% (↑) 70% (↓)	87.8% (↓) 91.8% (↑) 88.5% (↓) 88.7% (↑) 69.5% (↑)	88% = (↑) 38.4% (↑) 28% (↑) 15% (↓) 67% (↓)	0% (↓) 21.4% (↓) 98.7% (↑) 83.1% (↑) 74.2% (↑)	- = 2022 N/A = 2021 N/A= 2020 N/A= 2019 N/A= 2018	90%	operation hour*100/available hours

**Undertake Financial Audit and Administrative  
Activities**

## Undertake Financial Audit and Administrative Activities

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion Audit recommendations implemented	100%	100%	100%	100%	100%	100%	Total audit recommendations implemented / Total Audit Recommendations
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
Number of ARIC Meetings (Audit Committee meetings)	6(↑)	7 (↓)	4	2 (↓)	4	4	Total Meetings Organized / Total meetings planned
	4 (↓)	9 (↑)	4 (↑)	4	4		
	5	8 (↓)	2	4 (↓)	4		
	- = 2019	10 (↑)	2	5 (↑)	4		
	- = 2018	8 = 2018	N/A= 2018	4	4		
Number of Board Meetings	12(300%↑)	12	9 (↑)	4 (↑)	5 (↑)	-	Total Board Meetings organized / Total Board Meetings Planned
	3 (↓)	12 (↑)	1 (↓)	1 (↓)	2 (↑)		
	14 (↑)	11 (↓)	3 (↓)	4 (↓)	1		
	13 (↑)	12 (↓)	6	5 (↓)	N/A		
	8 (↑)	13 = 2018	N/A	6 (↑)	N/A		

**OCCUPATIONAL HEALTH AND SAFETY  
&  
QUALITY ASSURANCE**

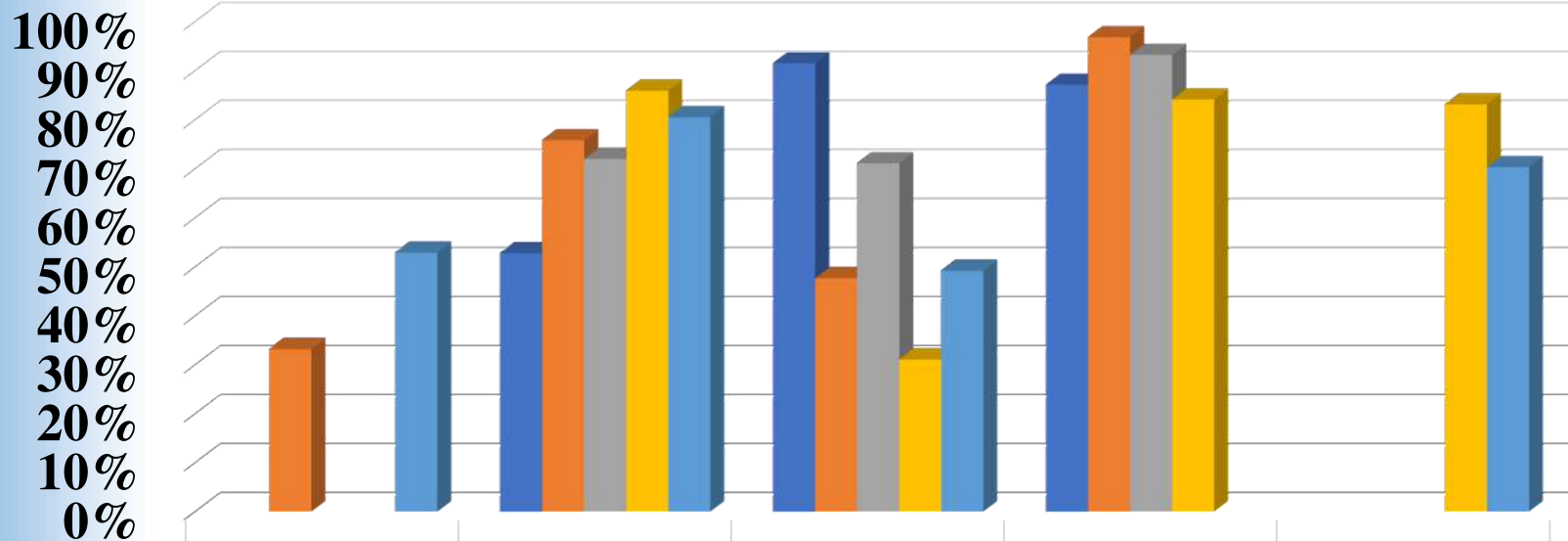
# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Provide OHS/ QA Services Cont.

PERCENTAGE OF CLIENTS SATISFIED WITH SERVICES

**THs Target = 95%**

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018		53%	91.70%	87.30%	
■ 2019	33.40%	76%	47.90%	97%	
■ 2020		72.20%	71.30%	93.40%	
■ 2021		86.10%	31.30%	84.30%	83.30%
■ 2022	53.10%	80.70%	49.40%		70.50%

### REMARKS :

- KBTH:**  
 2022 = 53.10%  
 2021 = -  
 2020 = -
- KATH:**  
 2022 = 80.7% (↓)  
 2021 = 86.1% (↑)  
 2020 = 72.2% (↓)
- TTH:**  
 2022 = 49.4% (↑)  
 2021 = 31.30% (↓)  
 2020 = 71.3% (↑)
- CCTH:**  
 2022 = -  
 2021 = 84.3% (↓)  
 2020 = 93.4% (↓)
- HTH:**  
 2022 = 70.5% (↓)  
 2021 = 83.3%  
 2020 = -

**Recommendation:**



# Provide OHS/ QA Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Percentage of clients satisfied	53.1= 2022 - = 2021 - = 2020 33.4% - = 2018	80.7% (↓) 86.1%(↑) 72.2% (↓) 76% (↑) 53% (↓)	49.4% (↑) 31.30% (↓) 71.3% (↑) 47.9% (↓) 91.7%	- = 2022 84.3% (↓) 93.4% (↓) 97% (↑) 87.3% (↓)	70.5% (↓) 83.3% - = 2020 - = 2019 - = 2018	95%	Total no. of client surveyed who are satisfied with health care services / total no. client surveyed * 100
Percentage of Staff satisfied	59% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	58.03 % (↓) 75.8% - = 2020 39.7% (↓) 54% (↓)	- = 2022 - = 2021 48.9% - = 2019 33.3% (↓)	- = 2022 - = 2021 46.5% (↓) 62.5% (↑) 36.5% (↓)	53.2% - = 2021 - = 2020 - = 2019 - = 2018	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	1.52%(↑) 0.33% - = 2020 - = 2019 9.8 % (↑)	1.59% (↑) 1.39% (↓) 1.4% (↓) 0.70% (↓) 1.79%	0.63% (↓) 0.65% (↓) 0.9% (↓) 1.6% (↑) 0.9%	0.78% (↓) 1.1% (↑) 0.67% (↑) 0.06% (↓) 0.4% (↓)	4.2% (↑) 2.4% (↑) 1.14% (↓) 0.59% (↓) 0.66%	1%	Total no. of workers reported with needle prick / total no. of workers * 100
Total no. of workers reported with needle injury	110 (323%) 26 - = 2020 - = 2019 313 (18.7%↓)	84 (12.0%↑) 75 (1.39%↑) 23 (32.4%↓) 34 (51.4%↓) 70	14 (17.6% ↓) 17 (32% ↓) 25 (26.5%↓) 34 (61.9%↑) 21	15 (34.8% ↓) 23 (91.7% ↑) 12 (↑) 1 (80%↓) 5 (37.5%↓)	72 (84.6%↑) 39 (200↑) 13 (160%↑) 5 (25% ↑) 4	-	

# Provide OHS/ QA Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Work place related injuries resulting in death or incapacitation	<b>0 = 2022</b> <b>0 = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>0 = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	1%	Total work place injuries resulting in deaths or incapacitation / total injuries recorded
<i>Total Staff injuries recorded</i>	<b>110 = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>84 (12% ↑)</b> <b>75 (226.1% ↑)</b> <b>23 (32.4% ↓)</b> <b>34 (51.4% ↓)</b> <b>70 = 2018</b>	<b>- = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>19 (20.8% ↓)</b> <b>24 (0.6% ↑)</b> <b>15 (25% ↓)</b> <b>20 (150% ↑)</b> <b>8 (38.5% ↓)</b>	<b>72 (84.6% ↑)</b> <b>39 (8.3% ↑)</b> <b>36 (23.4% ↓)</b> <b>47</b> <b>(20.5% ↑)</b> <b>39 = 2018</b>	-	
Percentage of Health Workers who benefited from Occupational health and safety interventions	<b>48.7%</b> <b>= 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>16 (↓)</b>	<b>0.02%</b> <b>- = 2021</b> <b>0.08% (↓)</b> <b>1.52% (↑)</b> <b>0.67% = 2018</b>	<b>0.63%</b> <b>- = 2021</b> <b>215</b> <b>- = 2019</b> <b>- = 2018</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	100%	Total no. of staff benefiting from OHS interventions / Total no. of staff * 100

# Provide OHS/ QA Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
<i>Adverse Events</i>	- = 2022	84 (13.5% ↑)	= 2022	19 (58.7% ↓)	15 (37.5% ↓)	40	Total number of incidents reported
	- = 2021	74 (↑)	- = 2021	46 (71.1% ↓)	24 (33.3% ↓)		
	- = 2020	17 (55.3% ↓)	17 (6.3% ↑)	159 (3.9% ↑)	36 (140% ↓)		
	- = 2019	38 (2.6% ↓)	16 (23.1% ↑)	153 (54.5% ↑)	15		
	- = 2018	39 (26.4% ↓)	13 (18.2% ↑)	99 (19.3% ↑)	- = 2018		

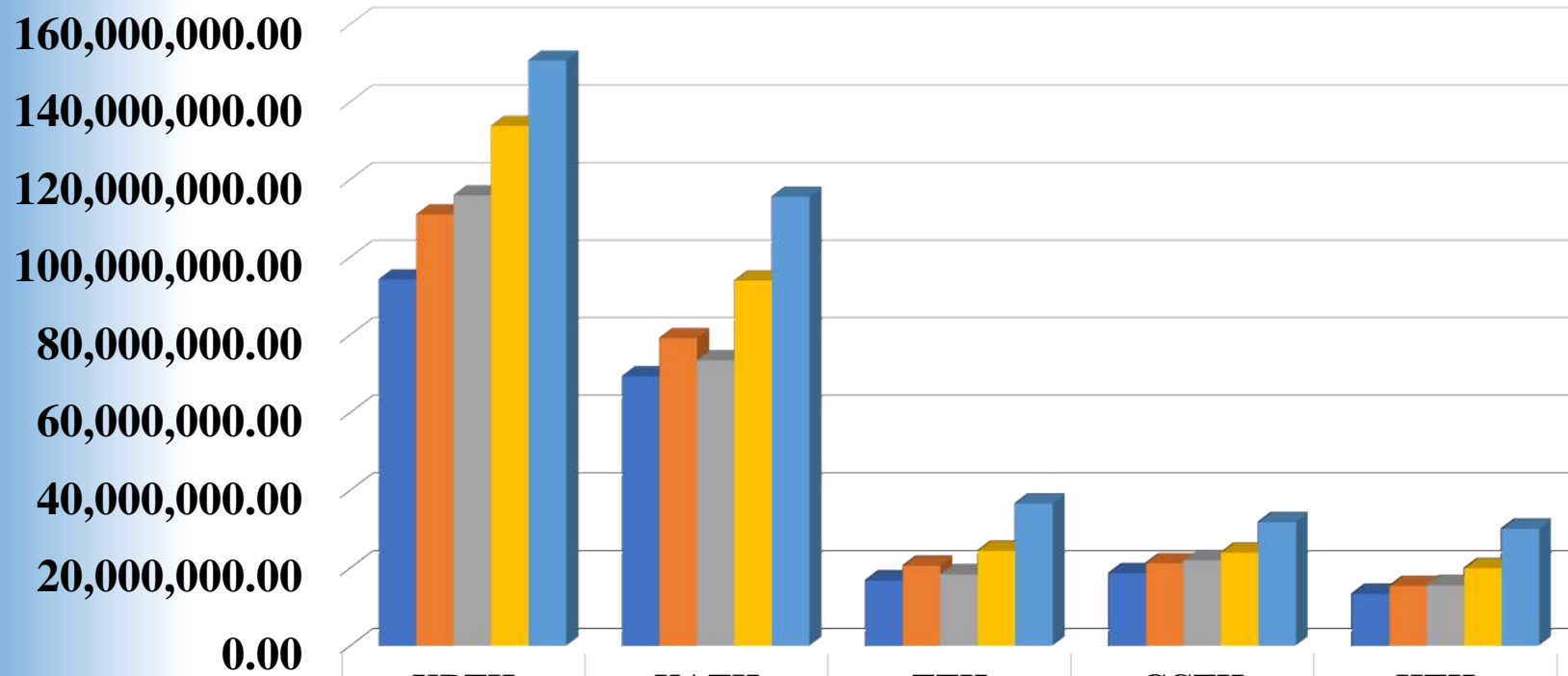
# **FINANCIAL PERFORMANCE**

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Revenue Mobilization & Financial Monitoring Support Services

### ANALYSIS OF IGF REVENUE (GHC)

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	94,531,528.66	69,590,563.41	17,117,126.15	18,944,945.89	13,618,289.93
■ 2019	111,233,708.8	79,435,141.99	20,874,378.12	21,579,680	15,645,456.93
■ 2020	116,159,035.5	73,716,476.98	18,664,708.74	22,268,693.60	15,868,137.07
■ 2021	134,049,354.0	94,240,353.99	24,723,816.17	24,217,381.36	20,218,627.01
■ 2022	150,906,358.2	115,819,364.1	36,902,417.15	32,100,188.39	30,406,401.19

### REMARKS :

- **KBTH:**  
2022 = 4.28% ↑  
2021 = 15.4% ↑  
2020 = 4.4% ↑
- **KATH:**  
2022 = 11.62% ↓  
2021 = 27.84% ↑  
2020 = 7.2% ↓
- **TTH:**  
2022 = 49.23% ↑  
2021 = 32.5% ↑  
2020 = 10.6% ↓
- **CCTH:**  
2022 = 32.6% ↑  
2021 = 8.8% ↑  
2020 = 3.2% ↑
- **HTH:**  
2022 = 50.4% ↑  
2021 = 27.4% ↑  
2020 = 1.4% ↑

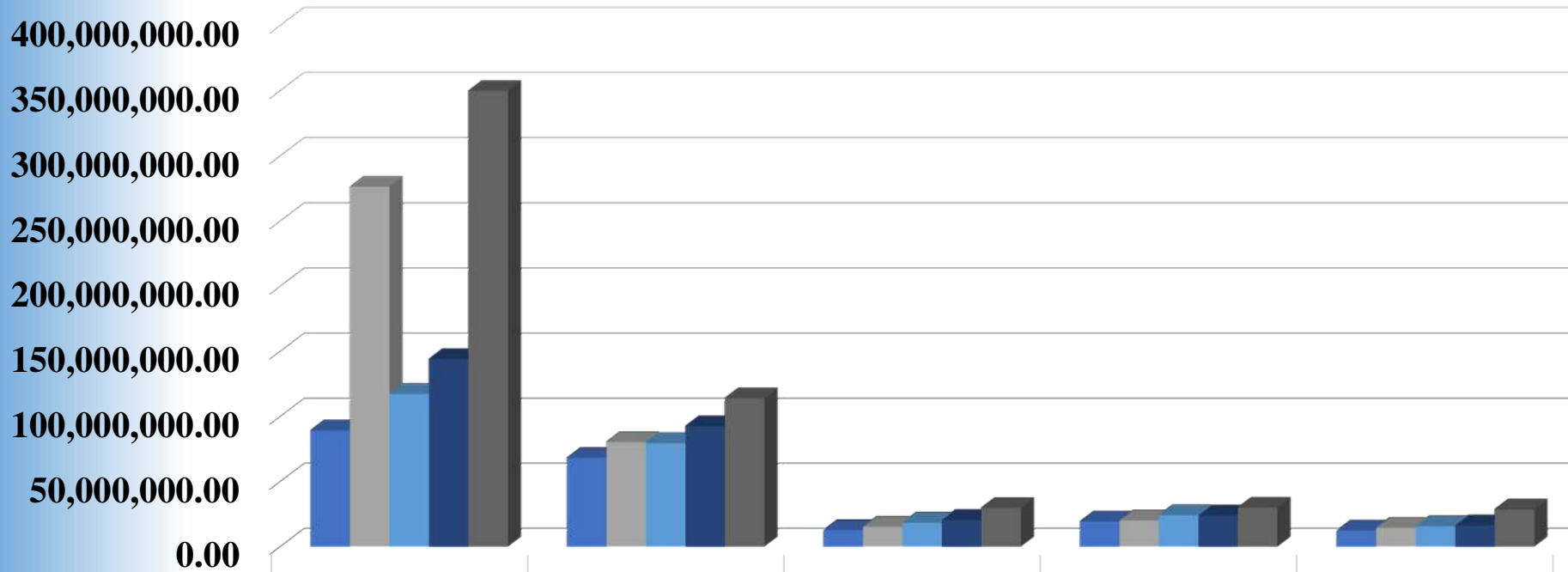
### Recommendation:

# THs 2022 ANNUAL JOINT PERFORMANCE REPORT

## Revenue Mobilization & Financial Monitoring Support Services

### ANALYSIS OF IGF EXPENDITURE (GHC)

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



	KBTH	KATH	TTH	CCTH	HTH
■ 2018	89,954,675.00	68,891,790.33	13,326,806.23	19,935,983.92	12,920,797.65
■ 2019	276,938,524	81,061,006.25	15,921,903.23	20,761,126.11	15,197,553.82
■ 2020	117,988,200	80,213,699.25	19,020,975.04	24,832,641.11	16,336,544.40
■ 2021	144,708,918.00	93,181,607.40	21,156,090.47	24,665,476.40	17,002,246.15
■ 2022	350,483,230.64	114,574,735.55	30,369,963.23	30,558,100.96	29,157,675.38

### REMARKS :

- **KBTH:**  
2022 = 142.10%↑  
2021 = 23% ↑  
2020 = 47%↑
- **KATH:**  
2022 = 10.42%↑  
2021 = 16.17%↑  
2020 = 1.05% ↓
- **TTH:**  
2022 = 43.6% ↑  
2021 = 11.2% ↑  
2020 = 19.46%↑
- **CCTH:**  
2022 = 23.9%↑  
2021 = 0.7% ↓  
2020 = 19.6%↑
- **HTH:**  
2022 = 71.5% ↑  
2021 = 2.4% ↑  
2020 = 7.5%↑

### Recommendation:

# Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
NHIS Claims Reimbursement Rate (submitted claims paid)	23%(↓)	41.8%(↓)	23.7% (↓)	65.97% (↑)	11.0% (↓)	75%	Total insurance claims reimbursed/total insurance claims submitted
	43% (↓)	44.14% (↓)	52.6% (↓)	52.1% (↑)	41.18% (↓)		
	51% (↑)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (↑)		
	47% (↓)	18.42% (↓)	33% (↓)	21.89% (↑)	23.62% (↓)		
	96.28% (↑)	28.20% (↓)	34% (↓)	20.88% (↓)	29.41% (↓)		
Debtors days	245(↑)	100 (↓)	488.5 (↑)	126.78 (↓)	306 (↑)	90	Debtors / Total Credit Revenue * 365
	196 (↑)	168 (↓)	212 (↓)	194 (↓)	242 (↑)		
	192 (↑)	197 (↓)	239 (↓)	215 (↓)	102 (↓)		
	184 (↓)	298 (↑)	241 (↓)	393 (↑)	208 (↑)		
	273 (↑)	262 (↓)	406 (↑)	346.29 (↑)	204 (↑)		
Creditors days	160 (↑)	108 (↓)	77.6 (↓)	233.77 (↑)	114 (↓)	120	Creditors / Total Credit Purchases * 365
	128 (↑)	130 (↓)	194 (↑)	224.8 (↑)	130 (↓)		
	106 (↓)	133 (↑)	111 (↓)	182 (↑)	153 (↑)		
	108 (↓)	132 (↑)	184 (↓)	175 (↑)	147 (↓)		
	172 (↑)	131 (↓)	360 (↑)	100.82 (↓)	157 (↑)		
Proportion of IGF revenue spent on PPM	5% (↑)	4.65 (↓)	0.05% (↓)	3.53% (↓)	4.07% (↑)	5%	total amount spend on PPM/total IGF
	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (↓)		
	7.2% (↓)	6.87% (↑)	5.45% (↑)	3.51% (↓)	1.49% (↑)		
	10.2% (↑)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
	5.9% (↑)	4% (↓)	4% (↑)	3.52% (↓)	1.32% (↑)		

## Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENTS
	KBTH	KATH	TTH	CCTH	HTH		
Percentage IGF paid as compensation	9.0%(↓)	5.03% (↓)	29.14% (↑)	8.93% (↑)	1.95% (↓)	10%	total amount spend on salaries /total IGF
	14% (↓)	6.76%(↓)	14.1% (↓)	7.8% (↓)	2.32% (↓)		
	22.3% (↑)	7.76% (↑)	15.3% (↑)	10.82% (↑)	5.95 % (↓)		
	20.6% (↑)	6.07% (↓)	14.5% (↓)	9.55% (↓)	6.12 % (↓)		
	20.3% (↓)	16% (↑)	16% (↑)	9.68% (↓)	7.27 % (↓)		
Ratio of cash revenue to NHIA reimbursement	1:0.21(↑)	2.25:1(↓)	2.3:1 (↑)	1.61:1 (↑)	0.58:1 (↓)	-	Cash Revenue/ NHIS revenue reimbursement
	1:0.17 (↓)	2.66:1	0.12:1 (↓)	1.1:1 (↑)	0.94:1(↑)		
	1:0.23 (↑)	2.66:1(↑)	0.4:1 (↓)	0.85:1 (↓)	0.89:1 (↑)		
	1:0.14 (↑)	2.33:1(↑)	0.7:1 (↓)	1.32:1 (↑)	0.76:1 (↓)		
	1:0.21 (↓)	1.99:1 (↑)	1.5:1 (↑)	0.66:1 = 2018	0.88:1 (↓)		



# STATUS OF NHIA CLAIMS

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Percentage of NHIA Claims Submitted on time	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	-	Total number of claims submitted to NHIS at the end of the ensuing month / Total Number of claims submitted to NHIA by all facilities * 100
Percentage of rejection on claims submitted to NHIS	<b>0.81% (↓)</b> <b>3.1% (↓)</b> <b>3.2% (↓)</b> <b>3.4% (↓)</b> <b>3.72% (↓)</b>	<b>0.55%(↓)</b> <b>3.95% (↓)</b> <b>4.19% (↑)</b> <b>3.59% (↓)</b> <b>5%</b>	<b>2.64%</b> <b>0%</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>0%</b> <b>0%</b> <b>0%</b> <b>0%</b> <b>0%</b>	<b>3.10% (↓)</b> <b>5.74% (↑)</b> <b>3.44% (↑)</b> <b>2.92% (↓)</b> <b>9.86% (↓)</b>	-	Total number of rejected claims received from NHIS / Total Number of claims submitted to NHIA by all facilities * 100

## Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
NHIS Claims Reimbursement Rate (submitted claims paid)	26.86%(↓)	41.8% (↓)	23.7%(↓)	65.97% (↑)	56.3%(↑)	75%	Total insurance claims reimbursed/total insurance claims submitted
	50.14% (↓)	44.14% (↓)	52.6% (↓)	52.1% (↑)	41.18% (↓)		
	51% (↑)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (↑)		
	47% (↓)	18.42% (↓)	33% (↓)	21.89% (↑)	23.62% (↓)		
	96.28% (↑)	28.20% (↓)	34% (↓)	20.88% (↓)	29.41% (↓)		
No Of Month Outstanding	8 (↑)	8 (↑)	8 (↑)	9 (↑)	10 (↑)		
	6 (↓)	7 (↑)	6 (↑)	6	7 (↑)		
	6 (↓)	5 (↓)	5 (↓)	6 (↓)	4 (↓)		
	9 (↓)	9 (↑)	8 (↑)	8	8		
	9 (↑)	6 (↓)	6	8 (↑)	8 (↑)		
Proportion of IGF revenue spent on PPM	5%(↑)	4.65% (↓)	0.05(↓)	3.53% (↓)	4.07% (↑)	5%	total amount spend on PPM/total IGF
	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (↓)		
	7.2% (↓)	6.87% (↑)	5.45% (↑)	3.51% (↓)	1.49% (↑)		
	10.2% (↑)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
	5.9% (↑)	4% (↓)	4% (↑)	3.52% (↓)	1.32% (↑)		

# **SUPPORT TO PERIPHERAL INSTITUTIONS**

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

THs	KEY ACHIEVEMENT
KBTH	<ul style="list-style-type: none"><li data-bbox="333 311 2476 486">➤ 117 Outreach programs were conducted by clinicians for people in deprived communities within and outside Greater Accra Region.</li><li data-bbox="333 568 1386 615">➤ 13,341 benefited from the outreach programs</li><li data-bbox="333 696 1166 743">➤ Undertook 195 clinical Outreaches</li><li data-bbox="333 825 1493 872">➤ 342 cataract surgeries were done through outreach</li></ul>

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

THs	KEY ACHIEVEMENT
KATH	<ul style="list-style-type: none"><li>➤ The Directorate of Oral Health visited 7 schools and 1 Church with a total of 4,355 persons screened. This represents 22.8% decreased compared to the 2021 performance of 5,646.</li><li>➤ 1,432 people were <b>screened for hearing disorders in some cluster of schools</b>.</li><li>➤ 462 people were also screened by ENT at Juaben and Ejisu Municipalities.</li><li>➤ 140 <b>women were screened for breast cancer</b> on church outreaches by Oncology Directorate</li><li>➤ A total of 6,553 people were screened, 1,114 booked for surgeries with 1,023 surgeries done.</li><li>➤ <b>Series of radio and television talk sessions</b> on diverse health topics were held by different directorates and Units.</li></ul>

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

## THs

## KEY ACHIEVEMENT

### TTH

- Eighty-seven (87) **Gynecological surgeries** conducted under the **Czech Republic MEDEVAC TTH partnership**.
- **Collaborated** with **Daybreak Vision project-USA** and screened 6,730 clients and **performed 1,065 cataract surgeries** at the Eye Unit
- Organised an outreach programme to **mark World Prostate Cancer awareness** month; screened 129 clients and **performed 21 surgeries**
- Provided outreach support in Kidney screening for about 2,000 community members in Bolgatanga and Tamale.
- **Training of midwives from ten (10) selected facilities** within our catchment area **on Ultrasound use** and the **donation of ten (10) ultrasound machines to the selected facilities**.

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

THs	KEY ACHIEVEMENT
CCTH	<ul style="list-style-type: none"><li>➤ Collaborated with International institutions to conduct surgical specialist outreaches<ul style="list-style-type: none"><li>✓ Himalayan Cataract Project (International) = 2,415 HCP Cataract Surgeries</li><li>✓ UTAH = 22 free ENT Surgeries</li><li>✓ Operation-Smile Ghana = 7 free cleft lip and palate surgeries</li><li>✓ MEDEVAC Team from Chez Republic<ul style="list-style-type: none"><li>▪ 27 Plastic Surgeries and</li><li>▪ 43 Orthopaedic surgeries</li></ul></li></ul></li></ul>
HTH	<ul style="list-style-type: none"><li>➤ 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.<ul style="list-style-type: none"><li>✓ It has now been cleared and ready for commissioning and use</li><li>✓ Organized Operation Restore and Operation Hernia Missions</li></ul></li></ul>

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion of planned specialist outreach support to facilities carried out.	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	90% (↑) 84% = 2021 - = 2020 - = 2019 - = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	100% 100% (↑) 50% 50% (↓) 150% (↑)	50% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	70%	Number of district and regional hospitals supported with specialist outreach visits as planned / Number of regional and district hospitals planned to be covered with Specialist outreach visits



## SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
<i>Total number of facilities visited</i>	- = 2022 - = 2021 - = 2020 - = 2019 27 (50%↑)	19= 2022 26= 2021 18 (2.7%↓) 23 (9.5%↑) 21 (5%↑)	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1063 (161.8%↑) 406 (147.6% ↑) 164 (5.8%↓) 174 (↑) 17 = 2018	2= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
<i>Number of visits planned</i>	110 = 2022 95 = 2021 12 = 2020 - = 2019 - = 2018	21 (32.3% ↓) 31 (47.6% ↑) 21(8.7%↓) 23 (15%↑) 20 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1063 (161.8%↑) 406 (147.6% ↑) 164 (5.8%↓) 174 (↑) 17 = 2018	4= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
Number of Beneficiaries recorded	13,341(↑) 558 (78% ↓) 2,606 = 2020 - = 2019 561 (31.4%↑)	13,045 (53.2%↓) 27, 859(206%↑) 9,101 (13.3%↑) 8,034 (74.9%↓) 32,022 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	38,896 (85.6% ↑) 20,955 (153.2% ↑) 8,276 (40.4%↓) 13,873 (↑) 1,062 (55%↓)	6,276 (123%↑) 2809 (309.5%↑) 686 (89.1%↓) 6265 - = 2018	11,215	Total Number of clients seen

# **KEY CHALLENGES**

## CHALLENGES FOR ALL THs IN 2022

CHALLENGES	THs
<input type="checkbox"/> Late referral of patients	ALL THs
<input type="checkbox"/> High Institutional Maternal and Neonatal Mortality	ALL THs
<input type="checkbox"/> Inadequate <b>Accommodation for Staff</b>	ALL THs
<input type="checkbox"/> <b>Delays in NHIS Claims Reimbursement</b> and low tariffs	ALL THs
<input type="checkbox"/> Inadequate infrastructure and Ageing Vehicles and equipment	ALL THs
<input type="checkbox"/> Absence of a <b>Patients-Relatives' Hostel</b>	ALL THs
<input type="checkbox"/> <b>MRI machine still not functioning</b> and handed over	<i>TTH, KATH &amp; CCTH</i>
<input type="checkbox"/> 10% Retention of NHIS claims by NHIA	<i>TTH, KATH &amp; CCTH</i>

# CHALLENGES – KBTH

CHALLENGES	MITIGATING STRATEGIES
➤ Sub optimal outcomes of referred cases due to <b>late arrivals</b> - High Maternal Mortality	Strengthen engagement with peripheral facilities to influence timely access to high quality care
➤ <b>E-Health Infrastructure, software security issues</b>	<ul style="list-style-type: none"><li>▪ System Audit to be carried out and engage software providers for lasting solutions.</li><li>▪ Procure computers to facilitate the smooth implementation of LHIMS</li></ul>
➤ <b>Cost Recovery for specialized and advance health care packages issues</b>	Continue dialogue with relevant stakeholders
➤ Delay in reporting and issues of data quality	<ul style="list-style-type: none"><li>▪ Standard Operating Procedure developed and rolled</li><li>▪ Monitoring and Evaluation Plan (M&amp;E) developed</li></ul>
➤ <b>High Utility Tariffs</b> (Legacy Bills: Water and Electricity)	Staff sensitize on conservation and consumption
➤ <b>Staff Attrition</b> for Critical areas	Improve conditions of Service
➤ Thirteenth Month Salary Payment which was not budgeted for	<b>Petition MOH to absorb the 13<sup>th</sup> Month Salary payments and going forward make it productivity related</b>

# CHALLENGES – KATH

CHALLENGES	MITIGATION STRATEGIES
<ul style="list-style-type: none"> <li>➤ High Institutional Maternal Mortality</li> </ul>	<ul style="list-style-type: none"> <li>• Supporting and providing capacity building for peripheral district hospitals.</li> <li>• Improving communication systems between KATH and Peripheral Institutions</li> </ul>
<ul style="list-style-type: none"> <li>➤ Late referrals of patients or presentation of cases at advanced state</li> </ul>	<ul style="list-style-type: none"> <li>• Increase awareness in early attendance and referral by:</li> <li>• Intensifying collaborative outreach with Peripheral institutions, social and religious bodies</li> <li>• Improving communication systems between KATH and Peripheral Institutions</li> </ul>
<ul style="list-style-type: none"> <li>➤ Inadequate and ageing infrastructure needed for quality patient care</li> </ul>	<ul style="list-style-type: none"> <li>• Continuous appeal to MOH for support and retooling of the theatres and A&amp;E Centre</li> </ul>
<ul style="list-style-type: none"> <li>➤ Delays in the payment of health insurance claims/ unrealistic tariffs/ withheld NHIS claims</li> </ul>	<ul style="list-style-type: none"> <li>• Continue dialogue with NHIA to reduce the delays in the payment of claims and agree on realistic tariffs for services</li> </ul>
<ul style="list-style-type: none"> <li>➤ <b>Increasing number of paupers</b></li> </ul>	<ul style="list-style-type: none"> <li>• Identify institutions and individuals to support patients who are not able to pay their bills</li> <li>• Improvement in social services engagement.</li> </ul>
<ul style="list-style-type: none"> <li>➤ <b>Inadequate clinical staff</b></li> </ul>	<ul style="list-style-type: none"> <li>• Build capacity through training and motivation of staff to retain them.</li> </ul>

# CHALLENGES - TTH

## CHALLENGES

<ul style="list-style-type: none"><li>• High Institutional Maternal and Neonatal Mortality</li></ul>	<ul style="list-style-type: none"><li>• Continue to specialist support for peripheral facilities in our catchment areas with the collaboration from the GHS</li></ul>
<ul style="list-style-type: none"><li>• High and <b>increasing cost of renting accommodation</b></li></ul>	<ul style="list-style-type: none"><li>• Accommodation Policy reviewed to reduce number of rental accommodation facilities; awaiting ratification by the Board</li></ul>
<ul style="list-style-type: none"><li>• Delays in NHIS Claims reimbursement</li></ul>	<ul style="list-style-type: none"><li>• Continue engagements with the NHIA to improve claims reimbursement rates</li></ul>
<ul style="list-style-type: none"><li>• Over-aged vehicles and near obsolete equipment</li></ul>	<ul style="list-style-type: none"><li>• Continue engagements with the MoH for support in the acquisition of new vehicles.</li></ul>
<ul style="list-style-type: none"><li>• Absence of a Patients-Relatives' Hostel</li></ul>	<ul style="list-style-type: none"><li>• Pursue initiative to engage private partners to support construction of the patients relatives Hostel</li></ul>
<ul style="list-style-type: none"><li>• MRI machine not functioning</li></ul>	<ul style="list-style-type: none"><li>• Pursue engagements with MoH as well as private partners for support</li></ul>
<ul style="list-style-type: none"><li>• <b>Inconsistent water supply</b> from GWCL</li></ul>	<ul style="list-style-type: none"><li>• Pursue engagements with GWCL to renovate underground water storage and improve supply of water to the Hospital</li></ul>
<ul style="list-style-type: none"><li>• <b>Inadequate infrastructural space for expanding specialties</b> as well as storage/warehouse facilities</li></ul>	<ul style="list-style-type: none"><li>• Continue engagements with MoH to support expansion of Hospital Infrastructure including the continuation of the planned Phase III of the Hospital's expansion and upgrading works.</li></ul>

# CHALLENGES – CCTH

KEY CHALLENGES	MITIGATION STRATEGIES
Funding Challenges for key projects and Sustainability of the programme initiatives due to funding	Set up a resource mobilization unit
High Institutional Maternal Mortality and Neonatal Deaths	Dialogue with GHS to support periphery referring facilities through training and support visits
Absence of NICU and PICU	Still engaging key stakeholders for support
Delay in NHIS reimbursement	Continuous dialogue with NHIA
Illegal sale, development and encroachment of hospital lands	Continue with court issue and other measures to prevent illegal developments on the hospital land
Inadequate Staff Accommodation	Pursuing the PPP agreement for the construction of 270 accommodation units
Inadequate and ageing equipment eg. Power Generators, Laundry and CSSD equipment, etc.	Work with MOH for replacement of obsolete equipment and machinery (Laundry, CSSD, Generator Sets).

# CHALLENGES – HTH

CHALLENGES	MITIGATION STRATEGIES
<ul style="list-style-type: none"><li>• <b>Inadequate infrastructure:</b> <b>Space for Clinical Services</b> (Consulting Rooms, Wards, Seminar Rooms, Library, etc.) Office space, Accommodation for staff</li></ul>	Concept Note was submitted to the MOH & MOF to Expand the Infrastructure for the Hospital
<ul style="list-style-type: none"><li>• <b>Inadequate Health Technology/Equipment &amp; Medical Products</b></li></ul>	Lobby MOH for additional Health Technology (Oxygen Plants, Anaesthetic Machines, Laparoscopy Machines, etc.)
<ul style="list-style-type: none"><li>• <b>Inadequate Human Resource (Right Mix and Numbers)</b> Additional Specialists (Radiologists, Paediatric Surgeons, etc) Medical Officers Technical Staff (Radiographers, etc) Support Staff (Security, Orderlies, Estates, Artisans, etc</li></ul>	Facilitate the training of Doctors, Nurses, Pharmacists for Specialist programmes and trying to build capacity in various specialists areas
<ul style="list-style-type: none"><li>• <b>Ageing vehicle &amp; High operational cost i.e., fuel, maintenance etc.</b></li></ul>	Lobby for additional vehicles



## CHALLENGES – HTH

CHALLENGES	MITIGATION STRATEGIES
<ul style="list-style-type: none"><li>• <b>Data Quality</b> and Data Repository to support Management decision making</li></ul>	Regular engagement with Vendors of the LHIMS and Lobby for the completion of the THIMS as data repository for the Teaching Hospitals
<ul style="list-style-type: none"><li>• Persistence increase in <b>prices of medical commodities including Pharmaceuticals</b></li></ul>	Lobby the NHIA for regular review of prices
<ul style="list-style-type: none"><li>• No Standard Tracer Medicines list for Teaching Hospitals</li></ul>	<i>Collaborate with other THs to develop a Standard Tracer Medicines List for the TH</i>
<ul style="list-style-type: none"><li>• High rate of staff separations due to greener pasture abroad.</li></ul>	

# **OUTLOOK FOR 2023**

## OUT LOOK FOR 2023 **FOR ALL THs**

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

## WAY FORWARD/OUTLOOK FOR 2023

- Urgently work to address challenges leading to poor maternal and child mortality
- Continue to offer support to peripheral facilities
- **Continue the deliver excellent health care** through the monitoring of Key Performance indicators leading to quality outcomes
- Roll out a comprehensive Standard Operating Procedure for the hospital

## OUT LOOK FOR 2023 – KATH

### WAY FORWARD/OUTLOOK FOR 2023

- 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)
- Continue the provision of infrastructure for clinical training of students
- Strengthen outreach services
- Continue to provide support for facilities within our catchment area
- Commence operations of the Fertility Centre (ART)
- Strengthen collaboration with other institutions

# OUT LOOK FOR 2023 – TTH

## WAY FORWARD/OUTLOOK FOR 2023

- Improve revenue generation.
- **Strengthen Sub-BMC Management systems.**
- Pursue efforts to improve sanitation and enhance the aesthetics of the Hospital's environment
- **Establish a research fund and increase budgetary allocation for research**
- Strengthen existing partnerships with emphasis on research capacity building and funding
- **Improve and ensure uninterrupted supply of commodities (drugs and non-drugs).**
- Establish additional specialties and sub-specialties
- Improve nursing and midwifery practices by **strengthening Total Nursing Care.**
- Scale-up implementation of agreed conditions of service
- Strengthen disciplinary structures and improve professionalism
- **Enhance customer care**

## OUT LOOK FOR 2023 – CCTH

### WAY FORWARD/OUTLOOK FOR 2023

- Expansion of existing infrastructure and equipment.
- Retooling of equipment and furniture and Development of new infrastructure with equipment
- Scale up existing Sub-Specialist Services
- Improve clinical pharmacy and pharmaceutical services
- Introduce new specialized services
- Strengthen client's relations
- Improvement on Blood and Blood products for service delivery
- Reduction in communicable and non-communicable disease burden
- Reduce Institutional mortalities

## OUT LOOK FOR 2023 – CCTH Continued

### WAY FORWARD/OUTLOOK FOR 2023

- To increase access to specialist services
- To **improve the quality of care** at the hospital
- To improve the infrastructure and equipment base for the delivery of quality services
- To **strengthen the governance system**
- To improve health research
- To improve capacity of staff
- To **improve residency training**
- To **intensify support to the lower level of health facilities**



# OUT LOOK FOR 2023 – HTH

## WAY FORWARD/OUTLOOK FOR 2023

- Acquire accreditation for residency training in Paediatrics
- Plan and implement outreach Support programmes to lower levels using the Mobile Clinic Van
- Improve referral system by establishing call centres in various Sub-BMCs
- Continue lobbying for Hospital Infrastructural Expansion Project
- Strengthen Quality Management and IPC Systems
- Conduct Baseline studies using JCI Accreditation Standards for Hospitals to facilitate Medical Tourism
- Review Hospital's Strategic Plan to emphasize Medical Tourism vision by the Board
- Conduct Capacity building in Research, Leadership & Management Development
- Put up Pharmaceutical Production Unit and strengthen the existing QC systems

# ACKNOWLEDGEMENT

- Ministry of Health
- All Regional Coordinating Council
- Partners
- Regional Health Administrations
- All Medical Schools
- All 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*

# SELECTED HR TREND

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

CADRE	KBTH	KATH	TTH	CCTH	HTH
<b>Total Staff</b>	7,204 (0.20%↑)	5,293 (1.71% ↓)	3,411 (11%↑)	1,915 (6.6% ↓)	1,682 (4.5%↑)
	7,189 (9.0%↑)	5,385 (1.98%↑)	3,073 (10.1%↑)	2,051 (14.5%↑)	1,610 (41.1% ↑)
	6,590 (9.9%↑)	5,280 (8.71%↑)	2,790 (15.9% ↑)	1,792 (10.1%↑)	1,141 (35.2%↑)
	5,997 (18%↑)	4,857 (24.3%↑)	2,408 (14.8%↑)	1,627 (22.8%↑)	844 (39.5%↑)
	5,082 (1.5↓)	3,909 (3.8%↑)	2,097 ( 5.2% ↓)	1,325 (0.4%↑)	605 (4.6%↓)
<b>Total Doctors</b>	676 (10.27%↑)	531 (23.8% ↓)	447 (116%↑)	376 (25.75% ↑)	143 (37.5% ↑)
	589 (15%↑)	697 (15.9%↑)	207 (56.8%↑)	299 (2.8%↑)	104 (%↑)
	590 (11.53%↑)	601 (13.2↑)	132 (7.7%↓)	291 (9.4% ↑)	67 (91.4%↑)
	529 (35.99%↑)	531 (2.8%↓)	143 (5.93%↑)	266 (20.4%↑)	35 (6.1%↑)
	389 96.3%↑)	546 (0.4%↓)	135 (6.3%↑)	221 (18.8%↑)	33 (22.3%↑)
Consultant, Senior Specialist and specialists	259 (18.26%↑)	273 (17.02% ↓)	74 (37.0%↓)	76 (No change)	67 (45.7%↑)
	219 (36.87%↑)	329(28.52%↑)	54 (58.8%↑)	76 (11.8%↑)	46 (360% ↑)
	160 (27.9%↓)	256 (16.9%↑)	34 (5.6%↓)	68 (5.6% ↓)	10 (25%↑)
	222 (27.7%↓)	219 (4.8%↓)	36 (10%↓)	72 (35.8%↑)	8 (20%)
	307 (9.6%↓)	230 (0.9%↑)	40 = 2018	53 (17.8% ↑)	10 (9.1%)
Consultants	34 (13.33%↑)	50 (1.7% ↑)	24 (No change)	6 (No change)	8 (33.3%↑)
	30 (7.14%%↓)	60 (1.6%↓)	24 (↑)	6 (50%↑)	6 (200% ↑)
	28 (7.69%↑)	61 (13%↑)	2 (No change)	4 = 2020	2 (100%↑)
	26 (4.9%↑)	54 (3.9%↑)	2 (No change)	4 = 2019	1 (↑) = 2019
	18 (44.44%)	52 (3.7%↓)	2 = 2018	4 = 2018	0 = 2018

## SELECTED HR TREND

CADRE	KBTH	KATH	TTH	CCTH	HTH
Senior Specialist	46 (15.0%↑) 40 (14.89%) 48 (2.1%↑) 47 (9.3%↑) 43 (7.5%↑)	69 (8.2% ↓) 85 ( 19.7%↑) 71 (9%↓) 78 78 (9.9%↑)	5 (No change) 5 (16.7%↓) 6 (50%↑) 4 4	21 (No change) 21 (113%↑) 9 (12.5%↑) 8 (100%↑) 4 (300↑)	4 (50%↓) 8 (100% ↑) 4 (Nil) 4 (33.3%↑) 3
Specialist	179 (26.95%↑) 141 (80.76%↑) 78 (39.3%↑) 56 (12%↑) 50 (0%)	154 (16.3% ↓) 184 (48.29%↑) 124 (6%↑) 117 (17%↑) 100 (3%↓)	45 (89%↑) 25 (3.8% ↓) 26 (13.3%↓) 30 (11.8%↓) 34 = 2018	49 (No change) 49 (10.9%↓) 55 (8.3% ↓) 60 (33.3%↑) 45 (12.5%↑)	55 (120% ↑) 25 (525% ↑) 4 (33.3%↑) 3 (57.1%) 7 (12.5%)
Residents	332(14.43%↓) 388 (240%↑) 114 (44.4%↓) 205 (26.5%↑) 162 (42.1%↑)	311 (32.3% ↑) 235 (22.40%↑) 192 (5.9%↓) 204 (10.1↓) 227 (5%↓)	22 (100%↑) 11 (57.14%↑) 7 (No change) 7 (↑) 0	50 (31.58%↑) 38 (38.7%↓) 62 (29.2% ↓) 48 (9.4% ↓) 53	21(133.3% ↑) 9 (350% ↑) 2 = 2020 N/A N/A

## SELECTED HR TREND

CADRE	KBTH	KATH	TTH	CCTH	HTH
Medical Officers	427 (15.40%↑) 370 (704%↑) 46 (42.5%↓) 80 (166.7%↑) 30 (36.4%↑)	253 (14.29%↑) 133 (13.07%↓) 153 (41.6%↑) 108 (21.4%↑) 89 (9.9%↑)	200 (40.8%↑) 142 (56.04%↑) 91 (16.7%↑) 78 (6.9%↑) 73	39 (15.22%↓) 46 (21.1%↑) 38 (15.2%↑) 33 (13.8%↑) 29 (58%↓)	76 (31.0%↑) 58 (1.8%↑) 57 (111.1%↑) 27 (17.4%↑) 23 (43.8%↑)
House Officers	230 (19.79%↑) 192 (7.26%↑) 179 (6.6%↑) 168 (21.7%↑) 138	207 (28.57%↑) 161 (7.33%↑) 150 (No change) 150 (2.0%↓) 153 (0.6%↑)	151 (19.3%↓) 187 (32.6%↑) 141 (31.6%↓) 206 (52.6%↑) 135	211 (51.8%↑) 139 (13.0%↑) 123 (8.9%↑) 113 (68.7%↑) 67 (26.4%↓)	70 (9.1%↓) 77 (2.5%↓) 79 (16.2%↑) 68 (23.6%↑) 55 (16.7%↓)

# SELECTED HR TREND

BLACK= 2022, RED = 2021, GREEN= 2020, PURPLE = 2019, BLUE = 2018

CADRE	KBTH	KATH	TTH	CCTH	HTH
<b>Professional Nurses</b>	2,443 (5.75%↑) 2310 (7.5%↑) 2,147 (6.8%↑) 2,011 (24.4%↑) 1,616 (5%↑)	1,586 (4.40%↓) 1,659 (8.79%↑) 1,525 (7.6%↑) 1,418 (23.6%↑) 1,147(2.2%↓)	1,292(5.6%↑) 1,223 (37.6%↑) 889 (1.7%↓) 904 (18.5%↑) 763 = 2018	737 (6.0%↓) 784 (21.9%↑) 643 (14.4%↑) 562 (25.2%↑) 449 (1.3%↓)	583 (6.2%↑) 549(47.7%↑) 394 (55.7%↑) 253 (41.3%↑) 179 (3.8%↓)
<b>Enrolled Nurses</b>	468 (8.58%↑) 431 (10.5%↓) 482 (26.2%↑) 382(32.9%↓) 569 (3.2%↓)	177 (11.94%↓) 201(12.23%↓) 229 (9.8%↓) 254(19.8%↑) 212 (12.4%↓)	172 (1.7%↓) 175 (3.54%↑) 169 (3.4%↓) 175 (196.6%↑) 59 = 2018	71 (No change) 71 (1.4%↑) 70 (17.7%↓) 85 (12.4%↓) 97 (2.0%↓)	136 (17.1%↓) 164 (28.1↑) 128 (1.5%↓) 130 (150%↑) 52 (8.8%↓)
<b>Midwives</b>	569 (34.51%↑) 423 (4.4%↑) 405 (0.3%↑) 352 (36.4%↑) 258 (0.8%↓)	387 (1.53%↓) 393(2.48%↓) 403 (4.3%↓) 421 (21.7%↑) 346 (5%↓)	323 (14.9%↓) 281 (44.1%↑) 195 (8.3%↑) 180 (9.8%↑) 164 (4.7%↓)	231 (16.1%↑) 199 (21.3%↑) 164 (7.9%↑) 152 44.8%↑) 105 (0.9%↓)	164 (9.3%↑) 153 (35.4%↑) 113 (37.8%↑) 82 (54.7%↑) 53 (13.1%↓)

## SELECTED HR TREND

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

CADRE	KBTH	KATH	TTH	CCTH	HTH
Pharmacist	100 (9.90%↓)	79 (3.7%↑)	46 (15%↑)	22 (12% ↓)	23(no change)
	111 (4%↑)	82(49.09%↑)	40 (90.5%↑)	25 (66.7%↑)	23 (21.01%↑)
	97 (3%↓)	55 (3.5%↓)	21 (4.5%↓)	18 = 2020	19 (137.5%↑)
	100 (26.6%↑)	57 (3.4%↓)	22 (4.8% ↑)	18 (100%↑)	8 = 2019
	79 (3.7%↓)	59 (1.7%↓)	21 (10.5%↑)	9 = 2018	8 = 2018
Pharmacy Technicians	59 (4.83%↓)	68 (1.49%↑)	36(5.2%↓)	8 (14.3%↑)	5 (150%↑)
	62 (1.7%↓)	67 (31.37%↑)	38 (40.7%↑)	7 = 2021	2 (0%)
	58 (3.3%↓)	51 (7.3%↓)	27 = 2020	7 = 2020	2 (100%↑)
	60 (27.7%↑)	55 (5.2%↓)	27 (59.3%↑)	7 (16.7%↑)	1 (100%↓)
	47 (6.8%↑)	58	11 (50%↓)	6 = 2018	2 (33.3%↓)
Others	2,889 (6.3% ↓)	2,005 (12.3%↓)	1,095 (18.8%↑)	470 (29.4%↓)	633(8.2%↑)
	3,083 = (10.7% ↑)	2,286 (0.9%↑)	922 (14.9%↑)	666 (9.4% ↑)	585 (71.6% ↑)
	2,786 (28.7%↑)	2,266 (15%↑)	1,083 (20.1%↑)	609 (11.3%↑)	341 (8.3%↓)
	2,164 (3.3%↓)	1,971 (41.4%↑)	902 (2.5%↓)	547 (7.1%↑)	372 (57.6%↑)
	2,239 (0.1%↓)	1,394 (22%↓)	925 (9.8%↓)	511 (3.8%↓)	236 (7.1%↓)



# Provide Outpatient Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Total OPD Attendance	414,625 (1.16%) 360,245 (18.27%↑) 380,297 (0.4%↓) 381,830 (12.6%↑) 339,128 = 2017	312,305 (32.0%↑) 286,546 (21.1%↑) 236,636 (33%↓) 353,108 (0.5%↑) 351,443 (3.9%↑)	173,510 (29.4%↑) 134,116 (69.1%↑) 79,330 (23.7%↓) 103,985 (8.4%↑) 95,900 (1.3%↓)	170,441 (11.86%↑) 152,364 (21.1%↑) 125,772 (25.2%↓) 168,056 (6.3%↑) 158,164 (34.2%↑)	194,717 (20.4%↑) 130,740 (20.4%↓) 164,173 (2.7%↑) 159,866 (38.9%↑) 115,128 = 2017	-	Total no. of client attending OPDs
OPD cases seen per doctor (ratio)	1:613 (↓) 1:676 (↑) 1:516 (↓) 1:539 (↓) 1:1,514 (↓)	1:588 (↑) 1:411 (↓) 1:501 (↓) 1:808 (↓) 1:1,040 (↑)	1:586(↓) 1:648 (↑) 1:601 (↓) 1:727 (↑) 1:705 (↓)	1:1033 (↑) 1:958 (↑) 1:749 (↓) 1:1098 (↑) 1:1163 = 2018	1:936 (↓) 1:1,521 (↓) 1:1,951 (↓) 1:4,691 (↓) 1:5,329 (↑)	1:1080	Total no. of client attending OPDs / Total no. of Drs
OPD cases seen per specialist (ratio)	1:1,132 (↓) 1:1,680 (↓) 1:2,379 (↓) 1:3,692 (↑) 1:1,830 (↓)	1: 1,143 (↑) 1: 870 (↓) 1:924 (↓) 1:2,675 (↑) 1:2,108 (↓)	1:1,607 (↑) 1:1,246 (↑) 1:863 (↑) 1:485 (↓) 1:585 (↓)	1:1085 (↓) 1:1483 (↑) 1:1024 (↓) 1:1255 (↓) 1:1418 (↓)	1:2,906 (↓) 1:3,440 (↑) 1:3,352 (↓) 1:3,749(↑) 1:2,940 (↑)	1:1200	Total no. of OPD client attending specialist clinics / Total no. of specialist/Snr. Specialists/Consultants.

# Provide Inpatient Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Number of admissions	60,689 (73.83%↑) 34,912 (11.1%↓) 40,875 (17.7%↓) 49,648 (10.6%↑) 44,908 (3%↑)	29,790 (0.60%↓) 29,968(3.51%↑) 28,951 (16.2%↓) 34,539 (2.9%↓) 35,553 (2.9%↑)	21,077 (7.9%↑) 19,535 (4%↑) 18,780 (16.2%↓) 22,412 (1%↓) 22,640 (2.1%↓)	12,622 (2.38%↓) 12,930 (22.2%↑) 10,578 (4.6%↓) 11,088 (2.1%↑) 10,865 (5.1%↓)	12,380 (12.0%↑) 11,051 (10.5%↑) 9,999 (4.6%↑) 9,562 (2.7%↑) 9,323 (12.3%↓)	12,000	Total no. of clients admitted.
% of patients admitted due to external referrals	45% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	= 2022 - = 2021 - = 2020 - = 2019 - = 2018	19.27% (↑) 18.81% (↓) 21.6% (↓) 40.4% (↑) 25.8% (↓)	12.1% (↓) 19.9% (↑) 5.48% - = 2019 - = 2018	-	No. of Patients admissions due to external referrals / Total admissions * 100
% of Neonatal Admissions due to external Referrals	54.0%(↑) 52.8% (↓) 55% % (↑) 42% % (↑) 40% % (↑)	62.92% (↑) 47.00% (↓) 47.49% (↑) 45.05% - = 2018	44.1%(↑) 37.4% (↓) 48.3% (↓) 51.2 % (↑) 18.8 = 2018	13.8% (↓) 15% (↓) 25.5% (↓) 27.2% (↑) 26.1% (↓)	22.4% 22.4 % (↓) 24.1% (↓) 34.7% (↑) 28.8% (↓)	30%	No. of Neonatal admissions due to referrals / Total neonatal admissions * 100
% of Maternal Admissions due to external Referrals	80.3% (↓) 81.2% (↑) 80.8% (↓) 86.3% (↑) 84.7% (↑)	- = 2022 - = 2021 - = 2020 - = 2019 79.41% (↑)	10.4%(↓) 56.5% (↑) 34% (↑) 25% (↓) 26% = 2018	26.7% (↑) 23.0% (↑) 21.2% (↓) 27.2% (↓) 41.4% (↓)	18.6%(↓) 21.6%(↑) 21.0% (↓) 21.3% (↑) 15.8% (↓)	60%	No. of Maternal admissions due to referrals / Total maternal admissions

# Provide Inpatient Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGET S	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Nurse and Midwife to admission ratio	1:4 (↓)	1: 14 (↓)	1:13 (↓)	1:13	1:17 (↑)	1:25	Total no. of clients admitted / total no. of nurses and midwives
	1:15 (↑)	1:15 (↓)	1:19 (↑)	1:13	1:15 (↓)		
	1:13 (↓)	1:16 (↓)	1:15 (↓)	1:13 (↓)	1:16 (↓)		
	1:18 (↓)	1:19 (↓)	1:18 (↓)	1:16 (↓)	1:21 (↓)		
	1:35 (↓)	1:37 (↑)	1:23 (↓)	1:20 (-)	1:41 (↓)		
Bed occupancy rate	61.0% (↓)	69.15% (↑)	59.7% (↑)	54.0% (↑)	69.0 (↑)	75%	No. of client days / No. of beds * No of days in the period
	66.1% (↑)	62.63% (↓)	56.0% (↑)	52.2% (↓)	62.2 (↓)		
	53.2% (↓)	63.58% (↓)	47.2%(↓)	55.5% (↑)	65.5% (↓)		
	64.0% (↑)	69.14% (↓)	58.0% (↓)	55% (↓)	67.7% (↑)		
	63.7% (↑)	70.68%(↓)	60.4% (↓)	51% (↓)	58.7% (↓)		
Average length of stay in the facility	5.2 (↓)	7.0	7.6	5.5 (↓)	6.0 (↓)	6	No. of client days / No. of Discharges + Deaths
	11.4 (↑)	7.0 (↓)	7.6 (↓)	5.6 (↓)	6.1 (↑)		
	8.5 (↑)	8.0 (↑)	8.2	5.9 (↑)	5.6 (↑)		
	8.3 (↓)	7.0	8.2 (↑)	5.6 (↑)	5.5 (↑)		
	8.5 (↑)	7 .0	6 (↑)	5.1 (↑)	4.6		

# Provide Emergency Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion of in-patients managed on nursing and midwives' care plan	<b>85% (↑)</b> <b>58% (↑)</b> <b>53% (↑)</b> <b>52% (↑)</b> <b>50%</b>	<b>96.6% (↑)</b> <b>95.6% (↑)</b> <b>57.65% (↑)</b> <b>35.12%</b> <b>- = 2018</b>	<b>100% (↑)</b> <b>60% (↓)</b> <b>100% (↑)</b> <b>85%</b> <b>- = 2018</b>	<b>- = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>65%</b>	No. of admissions with care plan/ Total admissions * 100
Average length of stay at the emergency wards	<b>2.3 (↓)</b> <b>7.7 (↑)</b> <b>3.7 (↑)</b> <b>3.3 (↓)</b> <b>4.9 (↑)</b>	<b>1.63 (↓)</b> <b>2.3 (↑)</b> <b>1.8 (↓)</b> <b>2 (↓)</b> <b>4.65 (↓)</b>	<b>3.8 (↓)</b> <b>4.3 (↑)</b> <b>4.0 (↓)</b> <b>5.8 (↑)</b> <b>5.1 (↓)</b>	<b>1.0 (↓)</b> <b>2.9 (↑)</b> <b>2.0 (↓)</b> <b>3.9 (↓)</b> <b>4.2 (↑)</b>	<b>2.4 (↓)</b> <b>3.7 (↑)</b> <b>2 (↓)</b> <b>3 (↑)</b> <b>2 (↓)</b>	<b>2</b>	No. of client days / No. of emergency discharges and death

## Provide Staff Development & Training & Staff Welfare Support

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Doctor : Pharmacist Ratio	<b>7:1</b> <b>7:1 (↑)</b> <b>6:1 (↓)</b> <b>7:1 (↑)</b> <b>3:1</b>	<b>9:1</b> <b>9:1 (↑)</b> <b>9:1 (↓)</b> <b>10:1 (↑)</b> <b>3:1 (↓)</b>	<b>6:1 (↑)</b> <b>3:1 (↓)</b> <b>4:1 (↓)</b> <b>7:1 (↑)</b> <b>6:1 (↓)</b>	<b>7.5:1 (↑)</b> <b>6.4:1 (↓)</b> <b>9:1 (↑)</b> <b>8.5:1 (↓)</b> <b>15.1:1 (↑)</b>	<b>7:1(↑)</b> <b>5:1 (↑)</b> <b>4:1= 2020</b> <b>4:1 (↑)</b> <b>3:1 (↑)</b>	<b>10:1</b>	Total number of Doctors in the hospital / Total number of pharmacist
No. Of welfare packages available	<b>12= 2022</b> <b>7= 2021</b> <b>2 = 2020</b> <b>2 = 2019</b> <b>2 = 2018</b>	<b>7 = 2022</b> <b>7= 2021</b> <b>7= 2020</b> <b>7= 2019</b> <b>7 = 2018</b>	<b>3 = 2022</b> <b>3 = 2021</b> <b>3 = 2020</b> <b>2 = 2019</b> <b>2 = 2018</b>	<b>2 = 2022</b> <b>2 = 2021</b> <b>3 = 2020</b> <b>2 = 2019</b> <b>2 = 2018</b>	<b>1 = 2022</b> <b>1 = 2021</b> <b>1 = 2020</b> <b>1 = 2019</b> <b>1= 2018</b>	-	Total Number of welfare packages provided for staff

# Provide Surgical Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Surgical site infection rate	7% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	0.84% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	0.4% (↓) 2.0% (↓) 2.4% (↑) 0.9% (↑) 0.7% (↑)	- = 2022 - = 2021 12.61% (↑) 0.27% = 2019 - = 2018	4.4 (↓) 6.25 = 2021 - = 2020 - = 2019 - = 2018	5%	Total infected wounds within 10 days / Total Surgeries * 100
Total Surgeries	23,152 (18.48%↑) 19,541 (17.82%↑) 16,586 (21.9%↓) 21,226 (5.1%↓) 22,362 (3.4%↑)	17,215 (1.53%↑) 16,955 (1.2%↓) 17,162 (12.1%↓) 19,520 (4.6%↑) 18,666 (6.3%↑)	6,720 (45.6%↑) 4,616 (28%↑) 3,606 (32%↓) 5,299 (28.1%↑) 4,137 (30.1%↑)	5,357 (10.13%↓) 5,961 (53.5%↑) 4,815 (24%↑) 3,883 (4.2%↑) 3,728 (3.2%↑)	4,992(41.4%↑) 3,530 (46.4%↑) 2,412 (38.7%↑) 1,739 (0.5%↓) 1,748 (18.1%↑)	-	Total number of surgeries conducted
Surgery - Surgeon Ratio	89:1 (↑) 68:1 (↑) 61:1(↓) 81:1 (↓) 191:1(↑)	63:1 (↑) 52:1(↓) 67:1 (↓) 78:1 (↓) 267:1(↑)	210:1 (↓) 220:1 (↑) 150:1 (↓) 220:1 (↓) 172: (↑)	179:1 (↓) 199:1 (↑) 108:1 (↓) 127:1 (↓) 133:1 (↓)	250:1(↑) 208:1 (↑) 121:1 (↑) 73:1 (↓) 77:1 (↓)	250:1	Total no. of surgeries performed / total no. of Surgeons
<i>Total Number of Surgeons</i>	259 (1.96%↑) 254 (5.92↓) 270 (3.5%↑) 261 (0.8%↑) 259 = 2018	273 (17.02%↓) 329 (28.5%↑) 256 (2.4%↑) 250 (257.1%↑) 70 (21.4%↓)	32 (↑) 21 (↓) 24 (0%) 24 (0%) 24 (4.2%↓)	30 30 (↓) 36 (5.3%↓) 38 (35.7%↑) 28 (12%↑)	20 (17.6%↑) 17 (15%↓) 20 (13%↓) 23 (4.6%↑) 22 (46.7%↑)	-	

# Provide Maternal Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Total Deliveries	7,273 (7.36%↓) 6,774 (7.9% ↓) 7,359 (11.1%↓) 8,275 (9.5%↓) 9,145 (4.7%↓)	5429 (8.1% ↓) 5,909 (5.4%↓) 6,247 (8.3%↓) 6,814 (16.1%↓) 8,117 (3.8%↓)	7,934 (5.2%↓) 8,369 (7.8% ↑) 7,763 (12.2%↓) 8,837 (7.3%↑) 8,238 (2.7%↓)	3269 (7.0% ↑) 3,055 (6% ↑) 2,883 (4.8%↓) 3,027(4.2%↓) 3,160 (3.4%↑)	1,896(3.5% ↓) 1,964 (3.9% ↑) 1,891(4.5%↑) 1,809(7.3%↓) 1,951(8.6%↑)	-	Total No. of Deliveries undertaken
Deliveries to midwives ratio <i>(TOTAL MIDWIVES IN THE HOSPITAL)</i>	16:1 (↑) 12:1(↓) 18:1(↓) 24:1(↓) 35:1(↓)	14:1 (↓) 15:1 (↓) 16:1 16:1 24:1 (↑)	25 :1(↓) 30:1 (↓) 38:1(↓) 50:1 50:1 (↑)	14:1 (↓) 15:1 (↓) 18:1 (↓) 20:1 (↓) 30:1 (↑)	11:1(↓) 13:1 (↓) 16:1(↓) 22:1(↓) 37:1(↑)	-	Total Number of deliveries / Total No. of midwives
Deliveries to midwives ratio <i>(TOTAL MIDWIVES IN THE DELIVERY SUITE)</i>	72:1 72:1 (↓) 91:1(↓) 135:1 (↓) 141 :1(↓)	181:1(↓) 185:1 (↓) 189:1(↓) 208:1(↓) 271 :1 (-)	184:1(↓) 226:1 (↓) 250:1 (↓) 276:1 (↓) 298:1(-)	50:1 (↑) 46:1 (↓) 70:1 (↓) 75:1 (↓) 77:1 (↑)	30:1 (↓) 76:1 (↑) 54:1(↓) 67:1(↓) 94:1(↑)	-	Total Number of deliveries / Total No. of midwives
Partograph use rate	60%(↑) 52%(↑) 50.3% (↓) 50.4% (↓) 60% (↑)	32.2%(↓) 44.4% (↓) 74% (↓) 94.1% (-) - = 2018	44.4% 100% 100% 100% 100%	47.60% (↓) 48.5% (↓) 48.7% (↑) 46.1% (↑) 40.8%	100% 100% 100% 100% (↑) 95% (-)	60%	Deliveries done with use or support of Partograph / Total deliveries * 100

# Provide Maternal Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Low birth weight rate (%)	34.0% (↑) 33.0% (↑) 17.5% (↑) 16.5 (↓) 17.1% (↓)	27.97% (↑) 26.76% (↓) 35.07% (↓) 37.99% (↑) 36.8% (↓)	9.30% (↑) 7% (↓) 5% (↓) 17% (↓) 20 % (↓)	20.50% (↑) 19.4% (↑) 16.8% (↑) 16.1% (↑) 13.5% (↑)	19.4% (↑) 17.7 (↓) 18.3 (↑) 14.7 (↑) 13.1 (↑)	12%	Total no. of babies < 2.5kg/ Total live births *100
Still birth rate / 1000 Birth	45 (↑) 41 (↑) 31 (↓) 37 (↑) 34 (↓)	18.1 (↓) 19.0 (↓) 121.30 (↑) 120.81 (↑) 39.5 (↓)	33.6 (↑) 16.1 (↓) 35.8 (↑) 34.7 (↓) 46.4 (↑)	35 (↓) 42 (↑) 31 (↓) 42 (↑) 37 (↑)	35.3% (↑) 33.6 (↑) 29.1 (↑) 26.1 (↑) 25.3 (↓)	15/1000L B	No. of babies born with no signs of life / Total no. of birth in the specific period
Caesarean Section Rate (%)	48.0% (↓) 49.9% (↑) 49.3% (↑) 47.4% (↑) 45.7% (↑)	50.47% (↓) 50.81% (↓) 44.51% (↑) 40.30% (↑) 38.59 % (↑)	36.4% (↑) 36% (↑) 28% (↓) 30% (↑) 29% (↑)	50.35% (↓) 51.4% (↓) 53.3% (↑) 41.2% (↓) 47% (↑)	46.0% (↓) 50.1% (↑) 44.6% (↑) 42.7% (↑) 40.7% (↑)	40%	No. of women delivered by CS in a specified time period / Total no. deliveries within a specified time period
Couple year protection	12,043 (↑) 9,688 (↓) 10,993 (↓) 45,111 (↓) 45,432 (↑)	6180.6 (↑) 6,064.71 (↓) 6,362.48 (↓) 8,588.67 (↑) 6,410.22 (↓)	2,990.7 (↑) 1,229.74 (↓) 2,258.91 (↓) 6,409 (↑) 2,284 (↓)	2,626 (↑) 2,233 (↑) 1,891.2 (↑) 1,562.5 (↑) 1,521.6 (↑)	3,827.5 (↑) 1,835.9 (↑) 1,134.1 (↓) 1,582.3 (↑) 1,531.8 (↑)	2,500	Total No. of Commodities dispensed / CYP factor



# Provide Maternal Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Institutional Maternal Mortality Ratio (/ 100,000 LB)	796 (↑)	2,202.31(↑)	719 (↓)	1186 (↑)	733.4 (↓)	300/10 0,000	No of maternal deaths / total live births * 100 000
	688 (↑)	1,818.18 (↑)	740 (↑)	1050 (↑)	1,164 (↑)		
	677 (↑)	847.05 (↓)	608 (↓)	903 (↓)	526 (↓)		
	640 (↑)	1,575 (↑)	633 (↑)	925 (↑)	1093 (↑)		
	470 (↓)	1,500 (↑)	573 (↓)	860 (↓)	762 (↑)		
Maternal deaths audited (%)	100%	100%	100%	100%	100%	100%	No. of reported maternal deaths audited according to established guidelines. / total no. of reported maternal deaths within a specified period * 100
	100%	100%	100%	100%	100% (↑)		
	100%	100%	100%	100%	87.5% (↓)		
	100%	100%	100%	100%	100% %		
	100%	100%	100%	100%	100 (↑)		

# Provide Child Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Institutional Infant mortality rate /1,000 LB	82 (↑) 71 (↑) 55 (↑) 51 (↑) 55 (↓)	122.81(↓) 125.9 (↓) 134.71 (↑) 127.77 (↑) 85.85 (↓)	66.2(↑) 60.3 (↑) 38 (↓) 43 (↓) 79 (↑)	77 (↓) 88 (↓) 89 (↓) 91 (↑) 69 (↑)	59.2 (↑) 33.4 (↓) 58.9 (↑) 43.2 (↓) 52.8 (↓)	15/100 0LB	No. of children dying under one year of age during a year / Total live births in a year * 1000
Institutional Neonatal mortality rate /1,000 LB	55 (↑) 46 (↓) 52 (↓) 55 (↑) 53 (↓)	91.83 (↑) 74.58 (↓) 102.05 (↑) 99.52 (↑) 79.9 (↓)	49.4(↓) 62.9 (↑) 57 (↑) 53 (↑) 45 (↑)	67 (↓) 78 (↓) 81 (↑) 80 (↑) 63 (↑)	54.0 (↑) 50.1 (↓) 52.6 (↑) 43.7 (↑) 41.2 (↓)	25/100 0LB	No. of Deaths from 0-28 days / Total No. of live births
<i>Infant Death</i>	547 (1.4%↑) 539 (21.8%↓) 690 (29%↑) 535 (23.9%↓) 703 (2.2%↓)	658 (8.61↓) 720 (8.40↓) 786 (12.7%↓) 900 (27.8%↑) 704 (13.6%↓)	524(15.1%↓) 617(118.8%↑) 282 (25%↓) 376(39.3%↓) 619 = 2018	252 (6.0% ↓) 267 (6.4% ↓) 284 (4.4%↑) 272 (25.9%↑) 216 (7.5%↑)	113 (3.7%↑) 109 (0.9%↓) 108 (16.1% ↑) 93 (1.09↓) 92		

# Provide Child Health Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH	
<i>Neonatal Death</i>	73 (7.3%↑)	492 (13.8%↓)	391(19.2% ↓)	219 (8.4%↓)	103 ( 35.5%↑)	-
	68 (30%↑)	571( 13.8%↓)	484 (13.9%↑)	239 (2.6% ↑)	76 (13.4%↑)	
	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	197 (9.4%↑)	81 (12%↓)	
<i>Number of under five deaths- Institutional</i>	- = 2022	776= 2022	709 (22.5%↑)	264 (9.0%↓)	132 = 2022	-
	678 (4.64%)	823 (8.4% ↑)	579 (7.4%↑)	290 (5.5% ↑)	N/A = 2021	
	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%↓)	
	749 (6.1%↓)	670 (14.4%↓)	450 23.3%↑)	242 (10.5%↑)	127 (11.2%↓)	
<i>Under Five Mortality Rate (/1000LB</i>	41 (↓)	144.83 (↑)	89.5(↑)	80 (↓)	69.6 (↑)	-
	48 (↓)	143.9 (↑)	75.2 (↑)	95 (↓)	55.7 (↓)	
	57 (↓)	121.30 (↑)	67 (↑)	106 (↑)	65.8 (↑)	
	61 (↑)	120.81 (↑)	64 (↑)	101 (↑)	55.8 (↑)	
	59 (↓)	81.71 (↓)	57 (↑)	77 (↑)	41.2 (↑)	

# Provide Pharmaceutical Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Tracer Drug availability (%)	79.0%(↓) 92.3% (↑) 90.0%(↓) 93.0% (↑) 90.0% = 2018	96% (↑) 92% (↑) 91% 91% (↓) 92% (↑)	98.0% (↑) 90.0% (↑) 88.6% (↓) 93.2% (↑) 73.5 (↓)	86.25% (↓) 95% (↑) 84.62% (↓) 88.5% (↓) 96.10% (↓)	92.1% (↓) 92.5% (↑) 86.6% (↑) 83.1% (↑) 73.6% (↓)	90%	Tracer Medicines available / Total medicines in the tracer medicines list * 100
Prescription to Pharmacist Ratio	1:4,365 (↑) 1:4,042 (↑) 1:3,065(↓) 1:3,571 (↓) 1:17,462 (↑)	1: 11,414 (↑) 1:5,289(↓) 1:11,700 (↓) 1:13,000 (↓) 1:12,300	1:5,733(↑) 1:5,496(↓) 1:13,869(↓) 1:16,208(↑) 1:6,255 (↓)	6,495:1 (↑) 6,422:1 (↓) 9,425:1 (↑) 8,288:1 (↓) 16,097:1 (↑)	1:16,176 (↑) 1: 13,253 (↓) 1:31,151(↓) 1:43,806 (↓) 1:44,774(↑)	12000:1	Total no. of prescription served / total no. of pharmacists
Percentage antibiotic prescribed (%)	14.8%(↓) 16.9% (↓) 18.5% (↑) 16.5% (↓) 18.9% (↓)	10%(↓) 23.8% (↓) 29.2% (↓) 40% (↑) 25.3% = 2018	50.0%(↑) 42.5% (↓) 47% (↑) 45.3% (↓) 53.2% (↓)	8.5% (↓) 11.6% (↓) 17.% (↑) 16.2% (↓) 18.4% (↑)	34.3% ((↓) 36.8 (↑) 29% (↓) 32.2%(↓) 44.9% (↓)	35%	Total number of antibiotic / Total of medicines on a prescription * 100
Percentage injectable prescribed (%)	21.6%(↑) 19.6% (↓) 23.6% (↑) 17.2% (↑) 14.6% (↓)	15%(↓) 55.8% (↓) 66.4% (↑) 40% (↓) 53.3% = 2018	8.33% (↓) 28.0% (↑) 9% (↓) 10%(↓) 14.6%	7.23% (↑) 1.6% (↓) 24.2% (↑) 5.8% 6.3% (↑)	6.6 % (↓) 8.9% (↑) 5% (↓) 9.4% (↓) 15.2% (↑)	10%	Total number of injectable / Total of medicines on a prescription * 100

# Provide Pharmaceutical Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Utilization of Pharmaceutical Care interventions	<b>90.0 (↑)</b> <b>26.2% (↑)</b> <b>20.6% (↓)</b> <b>21% (↑)</b> <b>20.9% (↓)</b>	<b>30%(↑)</b> <b>18% (↑)</b> <b>16% (↓)</b> <b>17%</b> <b>- = 2018</b>	<b>93.9%(↓)</b> <b>95% (↓)</b> <b>76% (↓)</b> <b>78%</b> <b>78% (↑)</b>	<b>97% (↑)</b> <b>21.2% (↑)</b> <b>11.5% (↓)</b> <b>99% (↑)</b> <b>97.3% (↑)</b>	<b>98.1% (↑)</b> <b>88.4% (↑)</b> <b>83.3% (↑)</b> <b>82%</b> <b>N/A</b>	<b>30%</b>	Number of interventions / cases seen * 100
Proportion of ward round inputs by clinical pharmacist utilised	<b>- = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>90%(↑)</b> <b>80% (↑)</b> <b>75% (↓)</b> <b>80%</b> <b>- = 2018</b>	<b>90%(↓)</b> <b>95% (↑)</b> <b>93% (↑)</b> <b>85%</b> <b>85% (↑)</b>	<b>100%</b> <b>100%</b> <b>89.3%</b> <b>- = 2019</b> <b>80%</b>	<b>94%</b> <b>94% (↓)</b> <b>100% =</b> <b>2020</b> <b>N/A</b> <b>N/A</b>		Number of clinical pharmacist inputs utilised / Total number of inputs

# Provide Pathological & Mortuary Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGET S	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Institutional All-cause mortality rate	13.25%(↑)	7.97% (↑)	9.6% (↑)	8.50% (↓)	8.6% (↓)	5%	Total death / (Discharges + deaths) * 100
	10.15% (↑)	7.42% (↓)	6.6% (↑)	11.% (↓)	8.9% (↓)		
	8.3% (↑)	8.12% (↑)	2.7% (↓)	12.35% (↑)	9.7% (↑)		
	7.6%	7.46% (↑)	5.6% (↑)	10.3% (↑)	8.5%(↓)		
	7.6% (↓)	6.6% (↓)	4.8% (↓)	9.1% (↑)	9.0% (↑)		
Theatre Deaths Rate	0.01%(↑)	0.47%(↑)	0.23% (↓)	0.10% (↓)	0.4% (↑)	0.5%	Total No. of deaths at the theatre (Including Recovery Wards) / Total Surgeries * 100
	0.07% (↓)	0.27% (↓)	0.33% (↑)	0.4% (↑)	0.11% (↑)		
	0.04% (↓)	0.347% (↓)	0.24% (↑)	0.1% (↓)	0.04% (↑)		
	0.05% (↓)	0.35%(↓)	0.2% (↓)	0.6% (↑)	0 (↓)		
	0.06% (↑)	0.61% (↑)	0.9% (↑)	0.3% (↓)	0.1% (↑)		

# Provide Diagnostics Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Utilization Radiological services	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	74.03% (↓) 88.30% (↑) 77.7% (Aug-Dec) - = 2019 - = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	123.3% (↑) 87% (↓) 530.7% (↑) 86.9% (↑) 79.4% = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	60%	Total Radiological Investigations / Total Radio. request * 100
Utilization of Laboratory Services	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	73% (↓) 76% = 2021 - = 2020 - = 2019 - = 2018	= 2022 - = 2021 - = 2020 - = 2019 - = 2018	524% (↑) 221.3% (↓) 260.3% (↑) 62.5% (↓) 78% = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	60%	Total Laboratory Investigations / Total Radio. request * 100

# Provide Diagnostics Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
<i>Total Radiology Investigations</i>	42,356 (40.72%↑)	57,915 (4.16↑)	20,548(37.7% ↑)	20,787 (0.97% ↑)	22,058 (12.6% ↑)	-	
	30,099 (46.43%↑)	55,601 (12.16↑)	14,919 (21.3%↓)	20,587 (13.1% ↓)	19,585 (8.8%↑)		
	20,554 (38.2%↓)	49,575 (9.4%↓)	18,962 (32.5% ↓)	23,697 (16.8%↑)	18,009 (1.9% ↓)		
	33,263 (76.6%↑)	54,741 (6.7%↑)	27,849 (131.5% ↑)	20,285 (2.3%↓)	18,355 (0.3%↑)		
	18,858 (1.9%↑)	51,318 (4.3%↑)	12,030 (45.2%↓)	20,766 (27.1%↑)	18,303 (0.2%↑)		
<i>Total Radio. request</i>	- = 2022	78230 (24.25%↑)	= 2022	16,857 (6.2% ↓)	- = 2022	-	
	- = 2021	62,964 (132.9% ↑)	- = 2021	17,962 (302.1% ↑)	- = 2021		
	- = 2020	27,034	- = 2020	4,465 (74.7%↓)	- = 2020		
	- = 2019	(Aug-Dec.)	- = 2019	17,624 (6.9%↑)	- = 2019		
	- = 2018	- = 2019	- = 2018	16,482 (1.3%↓)	- = 2018		
	- = 2018	- = 2018					
<i>Total laboratory Investigations</i>	2,214,553(46.21%↑)	236,428 (10.48%↑)	141,886 (9.4% ↓)	558,298 (209.5%)	108,103 (4.7% ↓)	-	
	1,514,553 (93.43%↑)	214,001 (14.1% ↓)	156,673 (235.1% ↑)	180,415 25.4% ↓)	113,393 (59.7%↓)		
	782,994 (22.4%↑)	249,205 (22.6%↓)	46,752 (62.4%↓)	241,858 (17.1%↓)	281,495 (21.3%↑)		
	639,717 (45.9%↑)	322,163 (13.4%↑)	124, 210 (35.8%↓)	291,677 (4.4%↑)	232,061 (2.3%↑)		
	437,889 (2.9%↑)	284,030 (8.7%↑)	193,376 (52.3%↑)	275,329 (3.4%↑)	226,768 (14.9%↑)		
<i>Total Lab request</i>	- = 2022	324,831 = 2022	= 2022	103,638 (40.1%↑)	- = 2022	-	
	- = 2021	281,605 = 2021	- = 2021	73,953 (20.40% ↓)	- = 2021		
	- = 2020	- = 2020	- = 2020	92,907 (50.1%↑)	- = 2020		
	- = 2019	- = 2019	- = 2019	61,900 (4.1%↑)	- = 2019		
	- = 2018	- = 2018	- = 2018	59,478 = 2018	- = 2018		



# Provide Diagnostics Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Availability of non-drug consumables	- = 2022	90.85% (↓)	- = 2022	71.88% (↓)	- = 2022	90%	Non-drug consumables available / Total non-drug consumables in the baskets (Baskets to be determined e.g. Gloves, gauze, syringes etc.
	- = 2021	91.72% (↑)	- = 2021	73.1% (↑)	- = 2021		
	- = 2020	91.32% (↑)	- = 2020	68.34% (↓)	87.5%		
	- = 2019	91.14% (↑)	- = 2019	96.37% (↑)	82.1%		
	- = 2018	90.66%	- = 2018	95.85%	85.7%		

# COVID-19 Response By THs

KEY INDICATORS	PERFORMANCE				
	KBTH	KATH	TTH	CCTH	HTH
<b>Total Positive Covid-19 Cases Managed</b>	330= 2022 2377= 2021 862 = 2020	217 = 2022 2,113 = 2021 1,158 = 2020	85= 2022 604 = 2021 374 = 2020	277 1108 = 2021 436 = 2020	= 2022 393= 2021 187= 2020
<b>Total Recoveries/ Discharged</b>	320= 2022 2258= 2021 850 = 2020	201 = 2022 1,904 = 2021 941 = 2020	85= 2022 573 = 2021 362 = 2020	275 1042 = 2021 393 = 2020	= 2022 353= 2021 182 = 2020
<b>Covid-19 Recovery Rate (%) - Institutional</b>	896= 2022 95%= 2021 98.6%= 2020	92.6% = 2022 90.1% = 2021 81.2% = 2020	100= 2022 95%= 2021 96.8% = 2020	99.30% 94% = 2021 90.1% = 2020	= 2022 89.8%= 2021 97.3% = 2020
<b>Total Covid-19 Related Deaths</b>	8= 2022 119= 2021 20 = 2020	16 = 2022 209 = 2021 196 = 2020	0= 2022 31 = 2021 12 = 2020	2 67 = 2021 27 = 2020	= 2022 62= 2021 5 = 2020
<b>Covid-19 Death Rate (%) - Institutional</b>	0.02%= 2022 6.7% = 2021 2.3% = 2020	7.37% = 2022 9.89% = 2021 16.9% = 2020	0= 2022 5.1% = 2021 3.2% = 2020	0.72% 6% = 2021 6.2% = 2020	= 2022 21.2%= 2021 2.7% = 2020
<b>Total Number Of Covid-19 Infection Among Staff</b>	73= 2022 895= 2021 341 = 2020	53 = 2022 494 = 2021 368 = 2020	20= 2022 175 = 2021 215 = 2020	95 284 = 2021 131 = 2020	= 2022 324= 2021 26 = 2020
<b>Proportion of Total Staff Who Tested Positive for Covid-19</b>	1.01%= 2022 33.48% =2021 5.1% = 2020	31.9% = 2022 8.4% = 2021 6.97% = 2020	0.65%= 2022 7% = 2021 7.7% = 2020	34.3% 25.6% = 2021 7.3% = 2020	= 2022 21.6%= 2021 2.4% = 2020
<b>Total Active Cases At The End of Year</b>	0= 2022 436= 2021 61= 2020	0 = 2022 122= 2021 8 = 2020	0= 2022 17 = 2021 - = 2020	0 0 = 2021 16 = 2020	= 2022 7= 2021 0 = 2020

## Provide Staff Development & Training & Staff Welfare Support

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion of staff Appraised	68%(↑) 28% (↑) 22% (↑) 16.3% (↓) 17% (↓)	49.32%(↑) 47.73% (↑) 46.8% (↓) 61.8% (↓) 80.25 % (↑)	81.95% (↑) 5% (↓) 27% (↓) 30% (↑) 26% (↓)	45.21% (↑) 30.86% (↓) 45.1% (↑) 39% (↑) 37.7% (↓)	86.4%(↑) 82.4% (↑) 81.2% (↑) 71.4% (↑) -	100%	Number of staff appraised / total number of staff * 100
Consultant to Resident Doctor ratio	1:9.7 (↑) 1:4.1 (↑) 1:0.7 (↓) 1:1.3 (↑) 1:1.1 (↑)	1:2 (↓) 1:3 (↑) 1:2 1:2 (↓) 1:5 (↑)	1:1 (↓) 1:2 (↓) 1:3 1:3 1:3	1:1.9 (↑) 1:1.4 (↓) 1:5 (↑) 1:4 (↓) 1:7 (↓)	1:3 (↑) 1:1.5 (↑) 1:1= 2020 N/A = 2019 N/A = 2018	1:3	Number of Consultant and Senior Specialist / total number of Resident Doctors
Doctor to Nurse/Midwife Ratio	1:4 (↓) 1:5 1:5 1:5 (↓) 1:7 = 2018	1:4(↑) 1:3 (↓) 1:5 (↑) 1:4 (↓) 1:5 (↑)	1:4 (↓) 1:7 (↓) 1:9 1:9 (↑) 1:8 (↑)	1:4 (↓) 1:7 (↑) 1:5 = 2020 1:5 (↑) 1:4 (↓)	1:6 (↓) 1:7 (↓) 1:9 (↓) 1:13 (↑) 1:8 (↓)	1:5	Total number of Doctors in the hospital / Total of Nurses

## Support Teaching And Training Of Health Professionals

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Residents pass rate	88%(↑) 85% (↓) 95% (↑) 91% (↑) 80.2% (↑)	-= 2022 - = 2021 - = 2020 - = 2019 - = 2018	94% 94% - = 2020 - = 2019 93% = 2018	87.5% (↓) 91% - = 2020 100% (↑) 90% = 2018	N/A= 2022 N/A = 2021 N/A = 2020 N/A = 2019 N/A = 2018	60%	Percentage of final year professional passes / Total number of students enrolled (proxy: medical and nursing students)
Number of Staff Enrolled In Postgraduate Colleges	99 (23.8%↓) 130 (19.3% ↑) 109 (47.1%↓) 206 (255.2%↑) 58 (205.3%↑)	228 (67.6%) 136 (68%↑) 81(70%↑) 30 (70.3%↓) 101 = 2018	102 (14.6% ↑) 89 (178.1% ↑) 32 (54.3%↓) 70 (27.8%↓) 97 = 2018	47 (23.68% ↑) 38 (65.2% ↑) 23 (52%↓) 48 (9.4%↓) 53 = 2018	56 (80.6% ↑) 31 (47.7% ↑) 21= 2020 N/A= 2019 N/A= 2018	-	-

## Support Teaching And Training Of Health Professionals

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
	<b>Undertake Research Activities</b>						
Operational research	38 (46.1%↑) 26 (13.3% ↓) 30(45.5%) 55 (5.8%↑) 52(10.6%)	6 (14.3%↓) 7 (53.3% ↓) 15 (150%↑) 6 (20%↑) 5 (25%↑)	2 = 2022 2 = 2021 2 (77.8%↓) 9 (350%↑) 2 (33.3%↓)	9 (35.71%↓) 14 (600% ↓) 2 (66.7%↓) 6 (100%↑) 3 (50%↑)	12 (140%) 5 (150%) 2 N/A= 2019 N/A= 2018	4	Number of operational research carried out/ operational research planned for period
Number of Research published	51 (21.42%↑) 42 (133.3% ↑) 18 (37.9%↓) 29 (7.4%↑) 27 (15.6%↓)	134 (4.3%↓) 140 (14.8%↑) 122 (713%↑) 15 (16.7%↓) 18 (18.2%↓)	33 (26.9%↑) 26 (53% ↑) 17 (6.3%↑) 16 (46.7%↓) 30 = 2018	17 (41.6%↑) 12 (20% ↓) 15 (50%↑) 10 (9.1%↓) 11 = 2018	10 (42.9%) 7 = 2021 0 (↓) 2 (↑) 0= 2018	20	

BLACK = 2022, RED = 2021 GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion of staff Appraised	68%(↑)	49.32% (↑)	81.95% (↓)	45.21% (↑)	86.4%(↑)	100%	Number of staff appraised / total number of staff * 100
	28% (↑)	47.73% (↑)	88.0% (↑)	30.86% (↓)	82.4% (↑)		
	22% (↑)	46.8% (↓)	27.0% (↓)	45.1% (↑)	81.2% (↑)		
	16.3% (↓)	61.8% (↓)	30.0% (↑)	39% (↑)	43.0% (↑)		
	17% (↓)	80.25 % (↑)	26.0% (↓)	37.7% (↓)	16.4%		

## Provide Technical Services and Logistical Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Equipment downtime Proxy: CT SCAN	10.0%(↑) 7.0% (↓) 8.3% (↑) 5.0% (↓) 12% (↑)	15 %(↑) 8.2% (↓) 11.9% (↑) 10.55% (↓) 33.5% (↑)	19.0% (↓) 61.6% (↓) 73.3% - = 2019 29%	100% (↑) 82.5% (↓) 0% = 2020 0% (↓) 7.69% (↑)	0% N/A = 2021 N/A= 2020 N/A= 2019 N/A= 2018	5%	Average downtime/Total productive hours Total productive hours (12 per day ) *100
PPM output achieved	75.0% (↑) 60.0% (↑) 40.0% (↓) 90.0% (↑) 60.0% (↓)	85.0% (↓) 89.7% (↑) 86.8% 86.8% (↑) 75.0% (↑)	= 2022 -= 2021 92% (↑) 87% (↓) 90% (↑)	50.0% (↓) 61.7% (↓) 75.0% (↓) 80.0% (↑) 62.0% (↑)	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	80%	PPM executed / PPM *100
Equipment Utilisation Proxy: CT SCAN	91% %(↓) 92% (↓) 98% (↑) 85% (↑) 70% (↓)	87.8% (↓) 91.8% (↑) 88.5% (↓) 88.7% (↑) 69.5% (↑)	88% = (↑) 38.4% (↑) 28% (↑) 15% (↓) 67% (↓)	0% (↓) 21.4% (↓) 98.7% (↑) 83.1% (↑) 74.2% (↑)	- = 2022 N/A = 2021 N/A= 2020 N/A= 2019 N/A= 2018	90%	operation hour*100/available hours

## Undertake Financial Audit and Administrative Activities

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion Audit recommendations implemented	100%	100%	100%	100%	100%	100%	Total audit recommendations implemented / Total Audit Recommendations
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
	100%	100%	100%	100%	100%		
Number of ARIC Meetings (Audit Committee meetings)	6(↑)	7 (↓)	4	2 (↓)	4	4	Total Meetings Organized / Total meetings planned
	4 (↓)	9 (↑)	4 (↑)	4	4		
	5	8 (↓)	2	4 (↓)	4		
	- = 2019	10 (↑)	2	5 (↑)	4		
	- = 2018	8 = 2018	N/A= 2018	4	4		
Number of Board Meetings	12(300%↑)	12	9 (↑)	4 (↑)	5 (↑)	-	Total Board Meetings organized / Total Board Meetings Planned
	3 (↓)	12 (↑)	1 (↓)	1 (↓)	2 (↑)		
	14 (↑)	11 (↓)	3 (↓)	4 (↓)	1		
	13 (↑)	12 (↓)	6	5 (↓)	N/A		
	8 (↑)	13 = 2018	N/A	6 (↑)	N/A		



# Provide OHS/ QA Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Percentage of clients satisfied	53.1= 2022 - = 2021 - = 2020 33.4% - = 2018	80.7% (↓) 86.1%(↑) 72.2% (↓) 76% (↑) 53% (↓)	49.4% (↑) 31.30% (↓) 71.3% (↑) 47.9% (↓) 91.7%	- = 2022 84.3% (↓) 93.4% (↓) 97% (↑) 87.3% (↓)	70.5% (↓) 83.3% - = 2020 - = 2019 - = 2018	95%	Total no. of client surveyed who are satisfied with health care services / total no. client surveyed * 100
Percentage of Staff satisfied	59% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	58.03 % (↓) 75.8% - = 2020 39.7% (↓) 54% (↓)	- = 2022 - = 2021 48.9% - = 2019 33.3% (↓)	- = 2022 - = 2021 46.5% (↓) 62.5% (↑) 36.5% (↓)	53.2% - = 2021 - = 2020 - = 2019 - = 2018	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	1.52%(↑) 0.33% - = 2020 - = 2019 9.8 % (↑)	1.59% (↑) 1.39% (↓) 1.4% (↓) 0.70% (↓) 1.79%	0.63% (↓) 0.65% (↓) 0.9% (↓) 1.6% (↑) 0.9%	0.78% (↓) 1.1% (↑) 0.67% (↑) 0.06% (↓) 0.4% (↓)	4.2% (↑) 2.4% (↑) 1.14% (↓) 0.59% (↓) 0.66%	1%	Total no. of workers reported with needle prick / total no. of workers * 100
Total no. of workers reported with needle prick	110 (323%) 26 - = 2020 - = 2019 313 (18.7%↓)	84 (12.0%↑) 75 (1.39%↑) 23 (32.4%↓) 34 (51.4%↓) 70	14 (17.6% ↓) 17 (32% ↓) 25 (26.5%↓) 34 (61.9%↑) 21	15 (34.8% ↓) 23 (91.7% ↑) 12 (↑) 1 (80%↓) 5 (37.5%↓)	72 (84.6%↑) 39 (200↑) 13 (160%↑) 5 (25% ↑) 4	-	

# Provide OHS/ QA Services

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Work place related injuries resulting in death or incapacitation	<b>0 = 2022</b> <b>0 = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>0 = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	<b>0% = 2022</b> <b>0% = 2021</b> <b>0% = 2020</b> <b>0% = 2019</b> <b>0% = 2018</b>	1%	Total work place injuries resulting in deaths or incapacitation / total injuries recorded
<i>Total Staff injuries recorded</i>	<b>110 = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>84 (12% ↑)</b> <b>75 (226.1% ↑)</b> <b>23 (32.4% ↓)</b> <b>34 (51.4% ↓)</b> <b>70 = 2018</b>	<b>- = 2022</b> <b>- = 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>19 (20.8% ↓)</b> <b>24 (0.6% ↑)</b> <b>15 (25% ↓)</b> <b>20 (150% ↑)</b> <b>8 (38.5% ↓)</b>	<b>72 (84.6% ↑)</b> <b>39 (8.3% ↑)</b> <b>36 (23.4% ↓)</b> <b>47</b> <b>(20.5% ↑)</b> <b>39 = 2018</b>	-	
Percentage of Health Workers who benefited from Occupational health and safety interventions	<b>48.7%</b> <b>= 2021</b> <b>- = 2020</b> <b>- = 2019</b> <b>16 (↓)</b>	<b>0.02%</b> <b>- = 2021</b> <b>0.08% (↓)</b> <b>1.52% (↑)</b> <b>0.67% = 2018</b>	<b>0.63%</b> <b>- = 2021</b> <b>215</b> <b>- = 2019</b> <b>- = 2018</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	100%	Total no. of staff benefiting from OHS interventions / Total no. of staff * 100

# Provide OHS/ QA Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Availability of toilet facilities	1:4 (↓)	1:06 (↓)	1:6	0.41 (↓)	1:0.5	1:-25	Total number of functioning toilets / Average bed capacity
	1:5	1:2 (↑)	1:6 (↑)	0.42 (↓)	1:0.5		
	1:5 (↑)	1:1.85 (↓)	1:7	0.43 (↑)	1:0.5		
	1:4	1:1.98	1:7 (↑)	0.23	1:0.5 (↑)		
	1:4	1:1.98 (↑)	1:5 (↑)	0.23	1:0.5		
<i>Total number of toilets Facility</i>	498 (8.2%↑)	560 (13.4%↓)	135 (2.2% )	165(17.7%↓)	160	-	
	456 (2.2% ↑)	494	132 (10% ↑)	169 (2.3% ↓)	160		
	446 (9.9%↑)	494	120	173 (88%↑)	160		
	406 (7.1%↑)	494	120	92 = 2019	160 (2.6%↑)		
	379(15.7%↑)	494 (4.9%↑)	120(4.3%↑)	92 = 2018	156 = 2018		

# Provide OHS/ QA Services Cont.

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Availability of Hand hygiene facilities using wash basins and bed capacity as proxy	0.48 (↑) 0.35 (↑) 0.25 (↑) 0.22 (↑) 0.17 (↓)	0.21 (↑) 0.19 (↓) 0.21 (↓) 0.22 (↓) 0.28 (↑)	1:21(↑) 1:20-(↑) 1:19 (↑) 1:16 (↑) 1:15 (↓)	0.23 (↑) 0.18 (↓) 0.43 (↑) 0.23 = 2019 0.23 = 2018	0.23 0.23 (↑) 0.21 (↑) 0.15 (↑) 0.8 (↓)	-	Number of wash basin / Number of staff
<i>Total number of wash basins</i>	1,365 (1.1% ↑) 1,350 (0.7% ↑) 1,341 (21.4%↑) 1,105 (7.2%↑) 1,031 (4.5%↑)	1,088 1,008 (7.4%↓) 1,089 1,089 1,089 (8.3%↑)	156 154 154 154 154 (105.3%↑)	433 (58.7% ↑) 368 368 (53.3%↑) 240 240	380 380 (1.3%↑) 375 375 375	-	
<i>Adverse Events</i>	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	84 (13.5% ↑) 74 (↑) 17(55.3%↓) 38 (2.6%↓) 39 (26.4%↓)	= 2022 - = 2021 17 (6.3%↑) 16 (23.1%↑) 13 (18.2%↑)	19 (58.7% ↓) 46 (71.1% ↓) 159 (3.9%↑) 153 (54.5%↑) 99 (19.3%↑)	15 (37.5%↓) 24 (33.3%↓) 36 (140%↓) 15 - = 2018	40	Total number of incidents reported

# Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
IGF Revenue	150,906,358.24	115,819,364.10	36,902,417.15	32,100,188.39	30,406,401.19	-	Total revenue collected
	134,049,354.00	94,240,353.99	24,723,816.17	24,217,381.36	20,218,627.01		
	116,156,035.59	73,716,476.98	18,664,708.74	22,268,693.6	15,868,137.07		
	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		
IGF Expenditure	350,483,230.64	114,574,735.55	30,369,963.23	30,558,100.96	29,157,675.38	-	Total expenditure made
	144,708,918.00	93,181,607.40	21,156,090.47	24,665,476.40	17,002,246.15		
	117,988,200.00	80,213,699.25	19,020,975.04	24,832,641.11	16,336,544.40		
	934,695,45.00	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		
	<b>REMARKS (% change)</b>						
<i>IGF Revenue</i>	2022= 4.28%↑ 2021= 15.4%↑ 2020 = 4.4%↑ 2019 = 17.7%↑ 2018 = 8.6%↑	2022 = 11.62%↑ 2021= 27.84%↑ 2020 = 7.2%↓ 2019 = 14.1%↑ 2018 = 12.1%↑	2022 =49.23% ↑ 2021 = 32.5% ↑ 2020 =10.6%↓ 2019 = 22%↑ 2018 = 2%↑	2022 = 32.6%↑ 2021 = 8.8% ↑ 2020 = 3.2%↑ 2019 = 13.9% ↑ 2018 = 10.9%↑	2022=50.4%↑ 2021 = 27.4%↑ 2020 = 1.4%↑ 2019 = 14.9%↑ 2018 = 12.9%↑		
<i>IGF Expenditure</i>	2022= 142.1%↑ 2021 = 23% ↑ 2020 = 47%↑ 2019 = 207.9%↑ 2018 = 8.9%↑	2022 = 10.42%↑ 2021=16.17%↑ 2020 = 1.05% ↓ 2019 = 17.7%↑ 2018 = 7.99%↑	2022 =43. 6% ↑ 2021 = 11.2% ↑ 2020 = 19.46%↑ 2019 = 19.47%↑ 2018 = 13.43%↓	2022 = 23.9%↑ 2021 = 0.7% ↓ 2020 = 19.6%↑ 2019 = 4.13%↑ 2018 = 42.1%↑	2022=71.5% ↑ 2021 =4.1%↑ 2020 = 7.5%↑ 2019 = 17.6% ↑ 2018 = 1.67%↑		

# Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
NHIS Claims Reimbursement Rate (submitted claims paid)	23%(↓)	41.8%(↓)	23.7% (↓)	65.97% (↑)	11.0% (↓)	75%	Total insurance claims reimbursed/total insurance claims submitted
	43% (↓)	44.14% (↓)	52.6% (↓)	52.1% (↑)	41.18% (↓)		
	51% (↑)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (↑)		
	47% (↓)	18.42% (↓)	33% (↓)	21.89% (↑)	23.62% (↓)		
	96.28% (↑)	28.20% (↓)	34% (↓)	20.88% (↓)	29.41% (↓)		
Debtors days	245(↑)	100 (↓)	488.5 (↑)	126.78 (↓)	306 (↑)	90	Debtors / Total Credit Revenue * 365
	196 (↑)	168 (↓)	212 (↓)	194 (↓)	242 (↑)		
	192 (↑)	197 (↓)	239 (↓)	215 (↓)	102 (↓)		
	184 (↓)	298 (↑)	241 (↓)	393 (↑)	208 (↑)		
	273 (↑)	262 (↓)	406 (↑)	346.29 (↑)	204 (↑)		
Creditors days	160 (↑)	108 (↓)	77.6 (↓)	233.77 (↑)	114 (↓)	120	Creditors / Total Credit Purchases * 365
	128 (↑)	130 (↓)	194 (↑)	224.8 (↑)	130 (↓)		
	106 (↓)	133 (↑)	111 (↓)	182 (↑)	153 (↑)		
	108 (↓)	132 (↑)	184 (↓)	175 (↑)	147 (↓)		
	172 (↑)	131 (↓)	360 (↑)	100.82 (↓)	157 (↑)		
Proportion of IGF revenue spent on PPM	5% (↑)	4.65 (↓)	0.05% (↓)	3.53% (↓)	4.07% (↑)	5%	total amount spend on PPM/total IGF
	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (↓)		
	7.2% (↓)	6.87% (↑)	5.45% (↑)	3.51% (↓)	1.49% (↑)		
	10.2% (↑)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
	5.9% (↑)	4% (↓)	4% (↑)	3.52% (↓)	1.32% (↑)		

## Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENTS
	KBTH	KATH	TTH	CCTH	HTH		
Percentage IGF paid as compensation	9.0%(↓)	5.03% (↓)	29.14% (↑)	8.93% (↑)	1.95% (↓)	10%	total amount spend on salaries /total IGF
	14% (↓)	6.76%(↓)	14.1% (↓)	7.8% (↓)	2.32% (↓)		
	22.3% (↑)	7.76% (↑)	15.3% (↑)	10.82% (↑)	5.95 % (↓)		
	20.6% (↑)	6.07% (↓)	14.5% (↓)	9.55% (↓)	6.12 % (↓)		
	20.3% (↓)	16% (↑)	16% (↑)	9.68% (↓)	7.27 % (↓)		
Ratio of cash revenue to NHIA reimbursement	1:0.21(↑)	2.25:1(↓)	2.3:1 (↑)	1.61:1 (↑)	0.58:1 (↓)	-	Cash Revenue/ NHIS revenue reimbursement
	1:0.17 (↓)	2.66:1	0.12:1 (↓)	1.1:1 (↑)	0.94:1(↑)		
	1:0.23 (↑)	2.66:1(↑)	0.4:1 (↓)	0.85:1 (↓)	0.89:1 (↑)		
	1:0.14 (↑)	2.33:1(↑)	0.7:1 (↓)	1.32:1 (↑)	0.76:1 (↓)		
	1:0.21 (↓)	1.99:1 (↑)	1.5:1 (↑)	0.66:1 = 2018	0.88:1 (↓)		

# STATUS OF NHIA CLAIMS

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Percentage of NHIA Claims Submitted on time	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	<b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b> <b>100%</b>	-	Total number of claims submitted to NHIS at the end of the ensuing month / Total Number of claims submitted to NHIA by all facilities * 100
Percentage of rejection on claims submitted to NHIS	<b>0.81% (↓)</b> <b>3.1% (↓)</b> <b>3.2% (↓)</b> <b>3.4% (↓)</b> <b>3.72% (↓)</b>	<b>0.55%(↓)</b> <b>3.95% (↓)</b> <b>4.19% (↑)</b> <b>3.59% (↓)</b> <b>5%</b>	<b>2.64%</b> <b>0%</b> <b>- = 2020</b> <b>- = 2019</b> <b>- = 2018</b>	<b>0%</b> <b>0%</b> <b>0%</b> <b>0%</b> <b>0%</b>	<b>3.10% (↓)</b> <b>5.74% (↑)</b> <b>3.44% (↑)</b> <b>2.92% (↓)</b> <b>9.86% (↓)</b>	-	Total number of rejected claims received from NHIS / Total Number of claims submitted to NHIA by all facilities * 100



# STATUS OF NHIA CLAIMS

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE				
	KBTH	KATH	TTH	CCTH	HTH
Unpaid Claims Bal B/F	12,352,311.9	20,191,451.04	16,543,703.98	6,795,023.88	7,356,252.64
	11,631,852.73	15,039,866.36	13,010,758.48	11,416,564	5,595,977.49
	15,948,982.36	22,661,681.81	16,858,427.96	12,643,564	5,720,134.10
	9,363,691.5	18,489,499.30	12,188,627.96	8,276,944	4,857,387.52
	8,368,205.03	14,510,720.16	6,711,309.40	8,041,108.90	2,315,338.16
Claims Submitted	28,606,856.53	35,430,058.16	20,100,451.95	15,457,168.44	14,933,293.23
	24,020,174.49	24,918,331.50	14,440,672.23	12,304,287.46	10,500,578.30
	23,380,084.47	19,967,749.69	12,091,438.38	11,368,136	7,695,973.22
	21,459,429.64	23,535,307.72	14,526,312.09	11,734,191.92	8,168,487.24
	16,260,621.98	22,310,669.71	11,173,862.27	9,629,551.55	7,233,580.26
	<b>REMARKS (% Change)</b>				
<i>Unpaid Claims Bal B/F</i>	2022= 6.0%↓	2022 = 34.3%↑	2022 =27.1% ↑	2022 = 40.5% ↓	2022=31.5%
	2021 = 33.77% ↓	2021 = 33.6%↓	2021 = 47.4% ↓	2021 = 9.7% ↑	2021 = 2.2%↓
	2020 = 70.3%↑	2020 = 22.6%↑	2020 = 38.3%↑	2020 = 52.8%↑	2020 = 17.8%↑
	2019 = 11.9%↑	2019 = 27.4%↑	2019 = 81.6%↑	2019 = 2.9%↑	2019 = 110%↑
	2018 = 42.9%↓	2018 = 18%↓	2018 = 15.5%↑	2018 = 21%↑	2018 = 17.5%↓
<i>Claims Submitted</i>	2022= 24%	2022=42.2%↑	2022 =39.2% ↑	2022 = 25.6% ↑	2022=42.21%
	2021= 28%	2021=24.8%↑	2021 = 52.6% ↑	2021 = 8.2% ↑	2021=36.4%↑
	2020 = 9%↑	2020 = 15.2%↓	2020 = 16.8%↓	2020 = 3.1%↓	2020 = 5.8%↓
	2019 = 32%↑	2019 = 5.5%↑	2019 = 30%↑	2019 = 21.9%↑	2019 = 12%↑
	2018 = 5.2%↑	2018 = 3.2%↑	2018 = 2.1%↓	2018 = 8.7%↓	2018 = 12%↑

# STATUS OF NHIA CLAIMS

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE				
	KBTH	KATH	TTH	CCTH	HTH
Claims Paid	18,486,101.77 23,241,956.40 27,149,506.51 15,034,473.08 15,265,135.48	8,706,048.93 22,246,751.82 30,050,902.49 18,966,566.26 17,315,822.96	= 2022 14,440,672.23 16,736,620.00 9,756,149.00 3,785,896.26	10,197,212.92 10,748,624.26 12,715,888 7,367,571.40 9,393,716.11	8,408,913.50 6,665,345.90 9,994,263.53 6,177,539.77 4,636,410.59
Outstanding As At end of the year	21,783,350.81 12,352,311.91 16,713,814.50 12,179,560.32 9,363,691.53	32,084,679.00 16,881,427.66 10,429,983.32 21,385,995.36 18,503,027.46	= 2022 13,010,758.48 13,407,963 16,858,427.96 12,188,627.56	12,054,979.40 6,795,023.32 11,416,143 12,643,564.86 8,276,944.34	13,246,768.63 5,595,977.49 2,622,589.53 5,720,134.10 4,857,387.52
	<b>REMARKS</b>				
<i>Claims Paid</i>	2022 = (69%↑) 2021 = (67% ↓) 2020 = (80.6%↑) 2019 = (1.5%↓) 2018 = (14.9%↓)	2022 = (60.9%↑) 2021 = (55.6%↓) 2020 = (58.4%↑) 2019 = (9.5%↑) 2018 = (25.8%↓)	= 2022 2021 = (52.6% ↓) 2020 = (71.6%↑) 2019 = (57.7%↑) 2018 = (64%↓)	2022 = (5.13% ↓) 2021 = (15.5% ↓) 2020 = (72.6%↑) 2019 = (21.6%↓) 2018 = (3%↑)	2022 = 26.16%↓ 2021 = (33.3% ↓) 2020 = (61.8%↑) 2019 = (33.2%↑) 2018 = (20.5%↓)
<i>Outstanding As At end of the year</i>	2022 = (76%↑) 2021 = (23% ↓) 2020 = (37.2%↑) 2019 = (30.1%↑) 2018 = (11.9%↑)	2022 = 90.0%↑ 2021 = (42.2%↓) 2020 = (51.2%↓) 2019 = (15.6%↑) 2018 = (27.5%↑)	= 2022 2021 = (47.4% ↓) 2020 = (20.5%↓) 2019 = (38.3%↑) 2018 = (81.6%↑)	2022 = (77.41%↑) 2021 = (40.5% ↓) 2020 = (9.7%↓) 2019 = (52.8%) 2018 = (2.9%↑)	2022 = 80.07↓ 2021 = 113.4% ↑ 2020 = (54.2%↓) 2019 = (17.8%↑) 2018 = (109.8%↑)
No Of Month Outstanding	8 = 2022 6 = 2021 6 (↓) 9 9 (↑)	8 = 2022 7 = 2021 5 (↓) 9 (↑) 6 (9)	8 (↑) 6 (↑) 5 (↓) 8 (↑) 6	9 (↓) 6 = 2021 6 (↓) = 2020 8 8 (↑)	10 = 2022 7 (↑) 4 (↓) 8 8 (↑)

## Revenue Mobilization & Financial Monitoring Support Services

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
NHIS Claims Reimbursement Rate (submitted claims paid)	26.86%(↓)	41.8% (↓)	23.7%(↓)	65.97% (↑)	56.3%(↑)	75%	Total insurance claims reimbursed/total insurance claims submitted
	50.14% (↓)	44.14% (↓)	52.6% (↓)	52.1% (↑)	41.18% (↓)		
	51% (↑)	50.27% (↑)	56% (↑)	11.2% (↓)	58.07% (↑)		
	47% (↓)	18.42% (↓)	33% (↓)	21.89% (↑)	23.62% (↓)		
	96.28% (↑)	28.20% (↓)	34% (↓)	20.88% (↓)	29.41% (↓)		
No Of Month Outstanding	8 (↑)	8 (↑)	8 (↑)	9 (↑)	10 (↑)		
	6 (↓)	7 (↑)	6 (↑)	6	7 (↑)		
	6 (↓)	5 (↓)	5 (↓)	6 (↓)	4 (↓)		
	9 (↓)	9 (↑)	8 (↑)	8	8		
	9 (↑)	6 (↓)	6	8 (↑)	8 (↑)		
Proportion of IGF revenue spent on PPM	5%(↑)	4.65% (↓)	0.05(↓)	3.53% (↓)	4.07% (↑)	5%	total amount spend on PPM/total IGF
	3.9% (↓)	7.97% (↑)	10.7% (↑)	5.4% (↑)	0.32% (↓)		
	7.2% (↓)	6.87% (↑)	5.45% (↑)	3.51% (↓)	1.49% (↑)		
	10.2% (↑)	2.66% (↓)	2.5% (↓)	3.8% (↑)	1.42% (↑)		
	5.9% (↑)	4% (↓)	4% (↑)	3.52% (↓)	1.32% (↑)		

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Proportion of planned specialist outreach support to facilities carried out.	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	90% (↑) 84% = 2021 - = 2020 - = 2019 - = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	100% 100% (↑) 50% 50% (↓) 150% (↑)	50% = 2022 - = 2021 - = 2020 - = 2019 - = 2018	70%	Number of district and regional hospitals supported with specialist outreach visits as planned / Number of regional and district hospitals planned to be covered with Specialist outreach visits
Outreach visits carried out	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	19 = 2022 26 = 2021 - = 2020 - = 2019 26 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	100% 100% 100% 100% 100%	2 = 2022 - = 2021 - = 2020 - = 2019 - = 2018	16%	Total number of outreach visits carried out / Total visit planned *100

## SUPPORT PERIPHERAL HEALTH INSTITUTIONS

KEY INDICATOR	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
<i>Total number of facilities visited</i>	- = 2022 - = 2021 - = 2020 - = 2019 27 (50%↑)	19= 2022 26= 2021 18 (2.7%↓) 23 (9.5%↑) 21 (5%↑)	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1063 (161.8%↑) 406 (147.6% ↑) 164 (5.8%↓) 174 (↑) 17 = 2018	2= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
<i>Number of visits planned</i>	110 = 2022 95 = 2021 12 = 2020 - = 2019 - = 2018	21 (32.3% ↓) 31 (47.6% ↑) 21(8.7%↓) 23 (15%↑) 20 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1063 (161.8%↑) 406 (147.6% ↑) 164 (5.8%↓) 174 (↑) 17 = 2018	4= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
Number of Beneficiaries recorded	13,341(↑) 558 (78% ↓) 2,606 = 2020 - = 2019 561 (31.4%↑)	13,045 (53.2%↓) 27, 859(206%↑) 9,101 (13.3%↑) 8,034 (74.9%↓) 32,022 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	38,896 (85.6% ↑) 20,955 (153.2% ↑) 8,276 (40.4%↓) 13,873 (↑) 1,062 (55%↓)	6,276 (123%↑) 2809 (309.5%↑) 686 (89.1%↓) 6265 - = 2018	11,215	Total Number of clients seen

# SUPPORT PERIPHERAL HEALTH INSTITUTIONS

BLACK = 2022, RED = 2021, GREEN = 2020, PURPLE = 2019, BLUE = 2018

KEY INDICATORS	PERFORMANCE					THs TARGETS	MEASUREMENT
	KBTH	KATH	TTH	CCTH	HTH		
Number of visits carried out	430= 2022 - = 2021 10 = 2020 - = 2019 - = 2018	19 (↓) 26 (↑) 18 (↓) 23 (↓) 26 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1063 (↑) 406 (↑) 164 (↓) 174 (↑) 17 = 2018	2= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
<i>Outreach to communities (no. of comm.)</i>	117= 2022 - = 2021 27 = 2020 - = 2019 - = 2018	272 (↑) 242 (↑) 207 (↓) 438 (↑) 16 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	1059 (↑) 398 (↑) 102 (↓) 168 (↑) 8 = 2018	37= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
<i>Outreach to schools</i>	= 2022 - = 2021 - = 2020 - = 2019 - = 2018	7 (↓) 14 (↑) 4 (↓) 24 (↑) 17 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	3 3 (↓) 8 (↑) 6 6	= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	
<i>Surgical Outreach to facilities</i>	- = 2022 - = 2021 1 = 2020 - = 2019 - = 2018	3= 2022 3 (↑) 2 (↓) 4 (↓) 6 = 2018	- = 2022 - = 2021 - = 2020 - = 2019 - = 2018	0 1 = 2021 1 (↓) = 2020 4 (↑) = 2019 2 = 2018	= 2022 - = 2021 - = 2020 - = 2019 - = 2018	-	