Quarterly Bulletin PPHI
Volume 2 | Issue 3
Quarter 3 & 4 Performance Review July to December, 2013

PPHI

PPHI
Making the Same Budget Go Farther



- Flood Relief work during 2010, 2011 and 2012 without asking Sindh Government for additional funds.
- Construction of 3 Modern Medicine Warehouses for Rs. 62 Million (Badin, Khairpur & Thatta).
- Restoration of Health Facilities submerged in floods.
- Supply of 73,681 Anti Rabies Vaccine doses for FY 2012-13.
- Establishment of 29 Pathology Labs at a cost of Rs. 9 Million.
- Purchase of 45 Ultrasound Machines.
- Purchase of 35 Generators for MCHCs.
- Establishing of Eye Hospitals at Khairpur and Matiari.

If you have any kind of complaints against PPHI services in your area
Please call on **PPHI's Complaint Cell, Toll Free: 0800-77755**

PPHI

PEOPLE'S PRIMARY HEALTHCARE INITIATIVE, SINDH

www.pphisindh.org

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Introduction

PPHI is a Public Private–Partnership between the Sindh Rural Support Organization (SRSO) and Government of Sindh (GOS) since Feb, 2007. It started with one District–Kashmore – and expanded gradually into 21 Districts of Sindh. The Partnership had only one objective in launching PPHI. GOS had an infrastructure, valued at approximately Rs 20 Billion, for delivering Primary Healthcare (PHC) in the rural areas. Tragically, this was either sub–optimally operational or altogether dysfunctional. This valuable infrastructure had to be made optimally operational. The strategy was named PPHI. It meant "contacting – out" management of the GOS's PHC infrastructure to the SRSO. PPHI has come to mean arranging many more Healthcare Providers even in remote and hard–to–access rural areas. It has come to mean Healthcare for Mother & Child; sufficient availability of necessary medical supplies; Health Education, Immunization; Communities connected with Health Facilities (HFs). PPHI has come to mean much more which is why we request you to please read on.

Mission

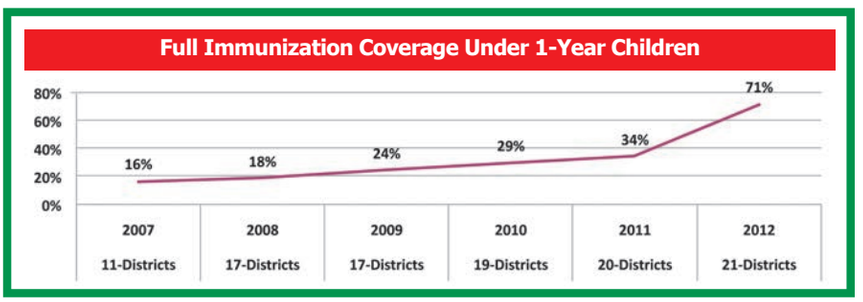
- To bring the Primary Health Care (PHC) infrastructure, that was by and large dysfunctional, to an optimum level of performance in terms of all the eight constituents of the PHC.
- To achieve the above without the use of any significant additional resources.
- To demonstrate a better and more efficient use of the available human and financial resources.
- To assist in the evolution of a sustainable PHC program that the state and the citizen have reasons to be satisfied with.

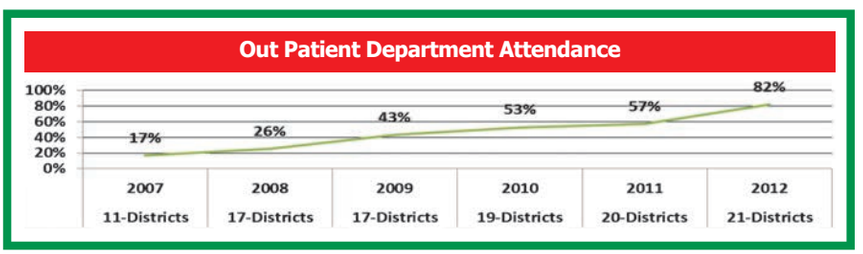
S. No.	Type of PHC - HFs	Total HFs	HFs with Health Dept.	HFs with PPHI	%
1	RHC	113	104	9	8%
2	BHUs	779	132	647	83%
3	MCHCs	72	38	34	47%
4	Dispensaries	598	165	435	73%
5	Others (Unani Shafakhana etc.)	37	25	12	32%
	Total	**1,599**	**464**	**1,137**	**71%**

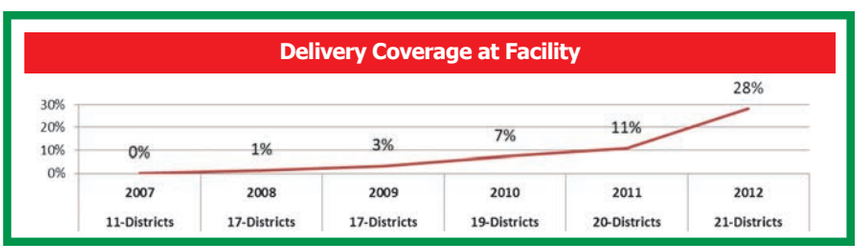


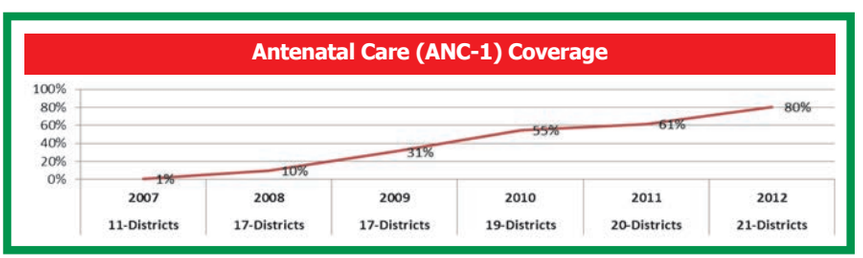
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

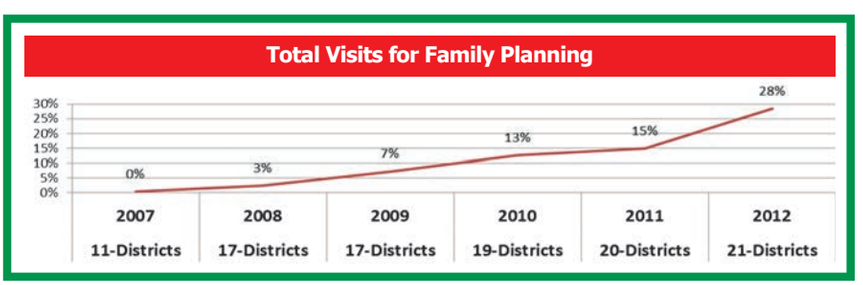
PPHI 06 - Years Contribution towards Achievement of MDGs:











Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

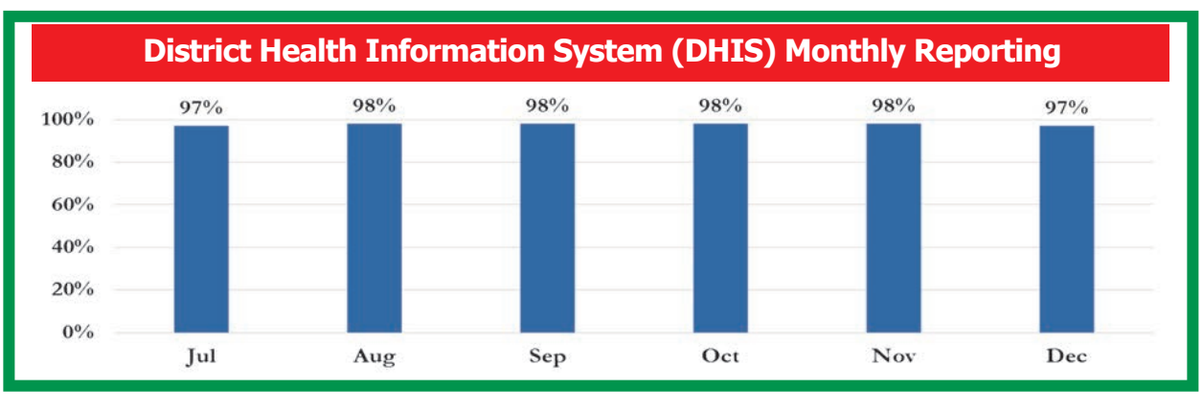
PPHI Bulletin – A Contribution to Health Information System



Dr. A. Sattar Chandio
Public Health Specialist

There have been many efforts to arrange a dependable Health Information System. PPHI, under the leadership of its Program Director and Dr Abdul Sattar Chandio, Public Health Specialist, after considerable preparatory work, has re–organized DHIS for its own reporting. PPHI's data can now be shared among stakeholders with a degree of confidence. All PPHI data is collected through the incharge MOs at HFs on HMIS / DHIS proformas. This data is randomly checked. The PPHI web designer, Mr Uzair Aslam Bhatti, has very competently placed the DHIS software, developed by the Ministry of Health / JICA, at thePPHI website. The District level staff, after collection of the monthly report, enter the data into DHIS software directly. This data is accordingly compiled and disseminated with due confidence in its accuracy. We at PPHI continue our efforts to improve the quality of the data that we present and shall be most grateful for advice and suggestions from our readers for improving it in the future.

PPHI has achieved a significant improvement not only in DHIS reporting but analysis at PSU Level as well



Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Section I Inputs by PPHI Sindh

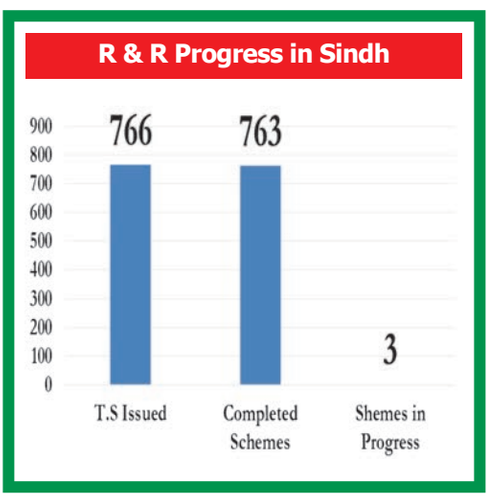
1.1 Human Resource at Health Facilities

S. No.	Healthcare Providers	GOVT. Staff	SRSO/ PPHI Staff	Total Staff	% PPHI Staff	Clusters of HFs		
						Clusters with one MO		Clusters with one FMO
1.	Medical Officers (Male)	363	639	1,002	64%	4 HFs	0	5
2.	Medical Officers (Female)	21	398	419	95%	3 HFs	7	12
3.	Dispensers / HTs	864	625	1,489	42%	2 HFs	75	279
4.	LHVs / MWs	470	503	973	52%	Single HF	920	123

The cluster of HFs means that a doctor rotationally provides Healthcare at more than one HF according to a widely publicized schedule. PPHI has filled an HR gap through appointment of Medical and Paramedical staff at HFs. People can now expect to benefit from the huge investment of the state in various Preventive, Promotive and Curative programs. In addition, PPHI has brought Female Doctors – first time ever in the history of the country – to the HFs in villages. This has fundamentally changed the Health environment for the rural women. It has created a huge opportunity for PPHI to increase vaccination, antenatal care, deliveries at HFs and utilization of contraceptive materials.

1.2 Physical Infrastructure District-Wise Repair and Renovation (R&R) Status

Most of the 1,137 HFs with the PPHI are deplorably dilapidated. GOS, on proposal from PPHI, approved a special grant of Rs 500,000 / BHU and Rs 300,000 / GDs for repair and renovation. By the end of 4th Quarter 2013, PPHI has completed repair & renovation at 763 HFs. Work is in progress at another 3 HFs.



Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Through better management and prudent spending, PPHI has completed these repairs at 35% less than the Government "Scheduled Rates." Routine maintenance of HFs has not been overlooked either.



Construction of Medicine Warehouses from Savings

Contruction of 3 modern medicine warehouses for Rs. 62 million in district Thatta & Badin are completed and are in use since 2013 whereas Khairpur is near to completion.





Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.3 Making Mother and Child Health Centres (MCHCs) Operational

No round–the–clock MCH Center is available in the rural areas. PPHI has made an important beginning with 44 MCHCs operating 24 / 7, 6 MCHCs operating 12 / 6 and 50 MCHCs operating 6 / 6. Service delivery of all MCHCs will be ensured 24 / 7 during 2014 with SBMR, planning phase is completed. These MCHCs are equipped with Diagnostic Labs and Ambulance connectivity.



1.4 Mobile / Stationary Ultrasound Tests Facility

For the first time in the history of Sindh, PPHI had brought the facility of Ultrasound Tests to its villages. PPHI is now using 81 high quality Ultrasound Machines, with portable generators to ensure un-interrupted power supply. PPHI is employing 35 Sonologists and assigned them a cluster of 8 to 10 HFs for conducting free-of-cost sonograms for women and sharing findings with I/C Lady Doctor of the PPHI. Schedule of Sonologists is circulated in advance and widely publicized. LHWs of the area are also encouraged to refer pregnant ladies for Ultrasound tests. Please see the Ultrasound Tests by PPHI coverage data below.



PPHI Free Ultrasound Services		
No. of HFs with coverage on fortnight	**No. of HFs with coverage on weekly**	**No. of HFs with coverage on daily**
242	**72**	**29**

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.5 The New Pharmacies



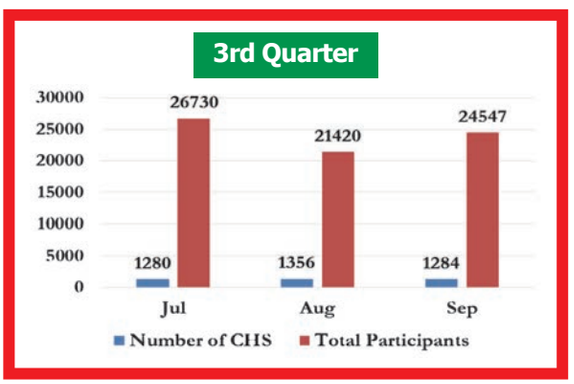
PPHI is providing 90 medicines & 20 related items to the Patients at every HF free of charge. These medicines are procured from National & Multi-national Pharmaceuticals of good repute. No medicine is supplied to a HF without Quality Tests at Government Laboratories. Only, packed or stripped medicines are supplied at HFs. In this way, the Pharmacies at rural HFs have improved in terms of quantity, quality and coverage. Disposable syringes are provided at every HF. It is ensured that regular supply of medicines and material are delivered at the HF through centralized arrangements at the District level. All the tracer drugs recommended at primary healthcare HFs are available and ensured.

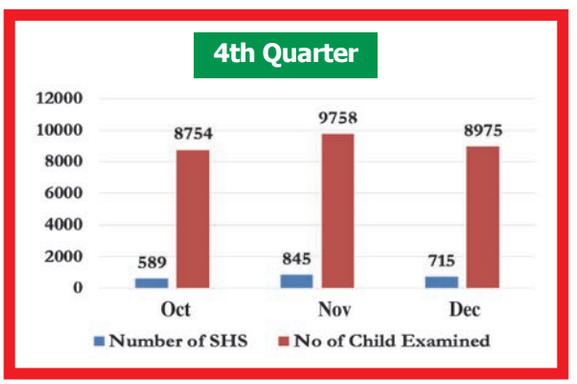
1.6 Health Education

School "Health Sessions" are a regular feature at schools in the catchment area with the object of providing Education on key Health issues, healthy life and avoidance of disease. Doctors are also expected to provide medical assistance to school children during School Health Sessions. Health Education is also provided to the community on a regular basis every month.









Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.7 Capacity Building of Healthcare Providers

Training of Healthcare Providers for meeting old and new challenges & for better facility management has been a regular priority. PPHI always welcomes participation in Government / NGO run training programs as well as conducts specialized sessions of its own. Under contractual arrangement, Liaquat University Hospital Karachi is providing 8 weeks ultrasound training to PPHI Lady Doctors from far flung areas. Beside Specialists, Focal Persons for Vertical Programs and other stakeholders are regularly invited to conduct training sessions at "Monthly Review Meetings" in the Districts.

S. No.	Staff	Topics	Jul	Aug	Sep	Oct	Nov	Dec
1	Capacity Building Session for Doctors	Clinical Malaria, DHIS, Immunization, Hand Washing, Family Planning, Eye Problem	42	38	116	123	128	121
2	Capacity Building Session for Paramedics	Topics AURT, Clinical Malaria, DHIS, Immunization, Hand Washing, Family Planning, Eye Problem	2	5	1	1	2	2

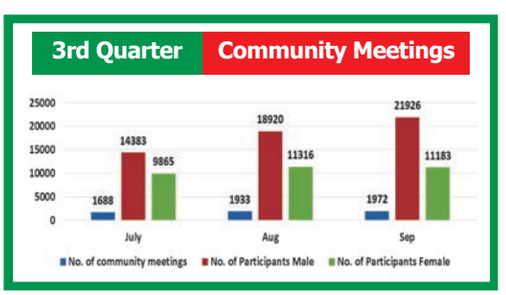
1.7.1 Capacity Building of DSU Staff

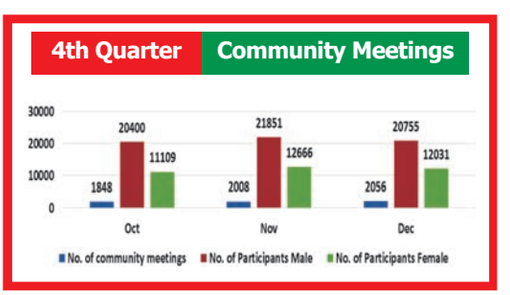
Capacity building sessions for MOs and FMOs regarding IYCF was planned and conducted by Nutrition Cell, to train the district master trainers for district level medics and paramedics orientation sessions and proper implimentation of IYCF protocol at HF level, total trained officers / officials were 27 from 9 districts under the management of PPHI Sindh.



1.8 Community Participation

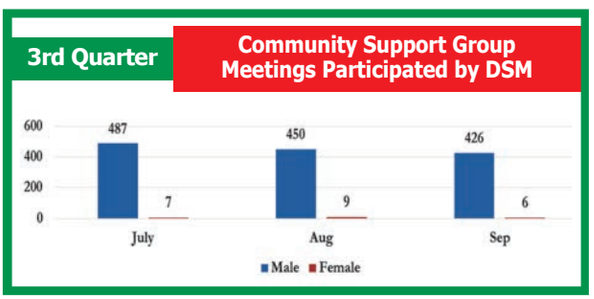
To connect the community with HFs, 1,137 Community Support Groups (CSG) have been formed (109 are female Support Groups, 932 are Male Support Groups). Exhaustive TORs have been developed on how these Groups are to be formed, how frequently these are expected to meet and enrich the deliverable services. Minutes of Monthly CSG meetings are recorded and updated at every HF.

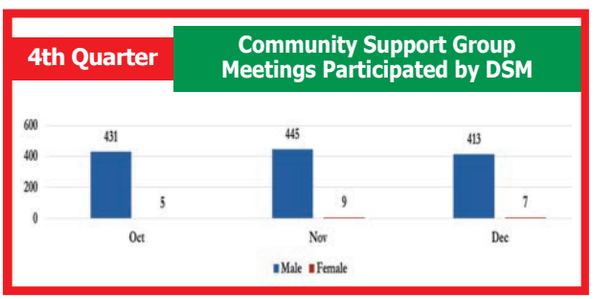


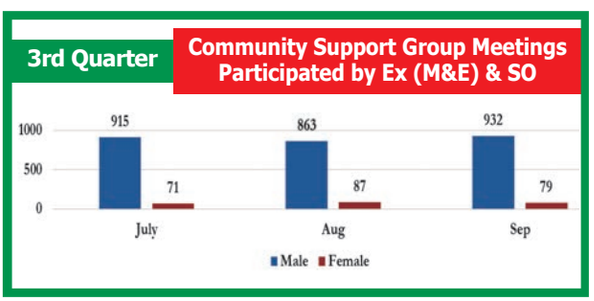


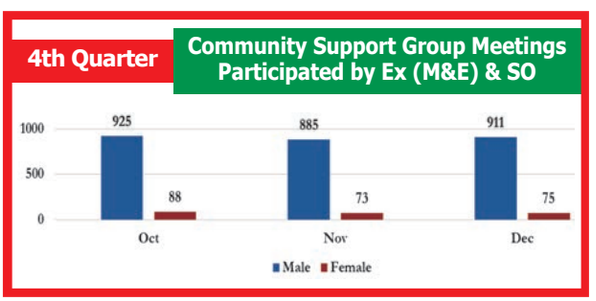
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.8.1 Community Support Group Meetings Participated by DSM and SO's







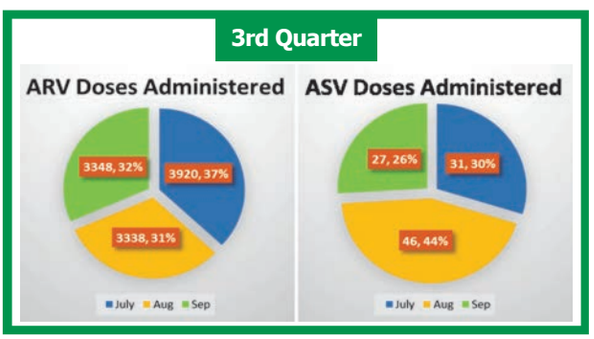


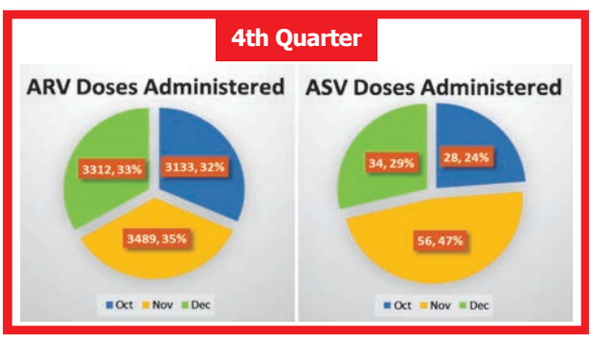
1.9 Addition of PPHI Vaccination Centres

Routine vaccination is the only answer to achieve Health Output Indicators. At the 1,137 HFs with the PPHI, there were only 425 EPI Refrigerators available. PPHI has added 155 new Cold Chain Points and appointed the same numbers of Vaccinators. EPI as a "Program" is not with PPHI management nor does PPHI receives funding earmarked for EPI.

1.10 Anti-Rabies & Anti-Snake Venom Vaccine Used

PPHI has provided 96,171 Anti Rabies Vaccinations (ARV) at its focal HFs with IM regime. All Districts have budget for ARV / ASV vaccines. It is only PPHI that is providing these vaccines.





Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.11 PPHI Ambulance Service

PPHI has made a land mark addition to the range of its services by introducing Ambulance services to make the referral system purposeful. In the first phase, 66 Ambulances, including:

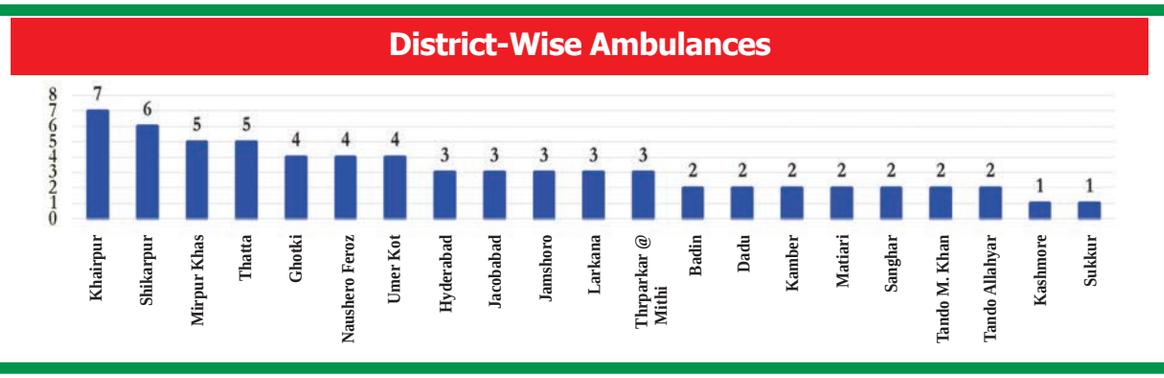
- 6 Advanced Cardiac Life Support (ACLS) Ambulances
- 25 Basic Life Support Ambulances
- The aforementioned 36 Ambulances have trained doctors and staff accompanying patients in distress. Besides, every 24 / 7 MCH Center has been provided dedicated Ambulance, for strengthening the referral system.





1.12 Value Addition Services

- BHUs Provided Lab Facility : 71
- BHUs Provided Ambulances : 61
- BHUs Provided Electricity : 493
- BHUs Provided Solar Power : 37
- BHUs Provided furniture / Equipment: 1,050
- BHUs Provided Water Supply : 654
- BHUs Provided Labor Rooms : 647
- BHUs / MCHC Provided generators : 35



Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

1.13 Estimated Yearly Target Population by Standard Demographic Percentages Vis a Vis Performance Indicators

Total catchment area population catered by the PPHI HFs in Sindh is 14,390,039. Realistic target setting is for keeping track of performance of an HF. PPHI took all stakeholders on board and targets were set as per DHIS Policy by each District to rate their performance vis a vis (1) Daily OPD Attendance (2) Full Immunization Coverage (3) Antenatal Care (ANC-I) (4) Data Accuracy (5) Delivery Coverage at Facility (6) TB-DOTS patients missing more than one week (7) Total Visits for Family Planning (FP) (8) LHW Pregnancy registration.

Districts	Total Health Facilities (HFs)	Total Catchment Population	OPD Attendance	Full Immunization Coverage	Antenatal Care (ANC-1) coverage	Reporting data accuracy	Delivery coverage at facility	TB-DOTS patients missing more then one week	Total Visits for Family Planning
Badin	103	833420	138903	1824	2361	95%	403	0	4445
Dadu	49	521200	86867	1260	1477	95%	252	0	2780
Ghotki	51	709231	118205	1596	2009	95%	343	0	3783
Hyderabad	41	554822	92470	773	1572	95%	268	0	2959
Jacobabad	38	650000	108333	1569	1842	95%	314	0	3467
Jamshoro	35	426035	71006	452	1207	95%	206	0	2272
Kamber	27	749617	124936	684	2124	95%	362	0	3998
Kashmore	39	625351	104225	442	1772	95%	302	0	3335
Khairpur	151	1842790	307132	4122	5221	95%	891	0	9828
Larkana	47	675051	112509	1164	1913	95%	326	0	3600
Matiari	36	424191	70699	309	1202	95%	205	0	2262
MirpurKhas	98	877177	146196	1418	2485	95%	424	0	4678
Mithi	49	374347	62391	449	1061	95%	181	0	1997
Naushehro Feroze	49	571289	95215	2103	1619	95%	276	0	3047
Sanghar	90	683454	113909	2424	1936	95%	330	0	3645
Shikarpur	26	370756	61793	786	1050	95%	179	0	1977
Sukkur	35	660995	110166	155	1873	95%	319	0	3525
T.M.Khan	35	635000	105833	772	1799	95%	307	0	3387
TandoAllahyar	45	415656	69276	747	1178	95%	201	0	2217
Thatta	51	985058	164176	1771	2791	95%	476	0	5254
UmerKot	42	804598	134100	1366	2280	95%	389	0	4291
Provincial Total	1137	14390039	2398340	26186	40772	95%	6955	0	76747

Yearly Targets are set as ANC-1=3.4%, Full Immunization=2.7%, Delivery Coverage at Facility 20% of 2.9%, Family Planning Visits 40% of 16% Catchment Area Population whereas Yearly OPD attendence = Catchment area Population *2. Catchment Area population are provided by DHO of concerned district.

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Section 2 Output / Outcomes 3rd and 4th Quarter 2013

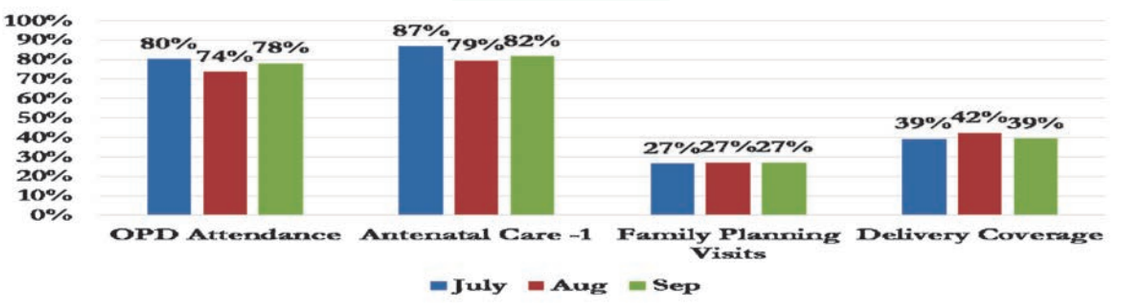
2.1 Performance of PPHI Vs Estimated Target Population

PPHI Sindh managed 1,137 HFs in 21 districts with catchment area population 14,781,520.

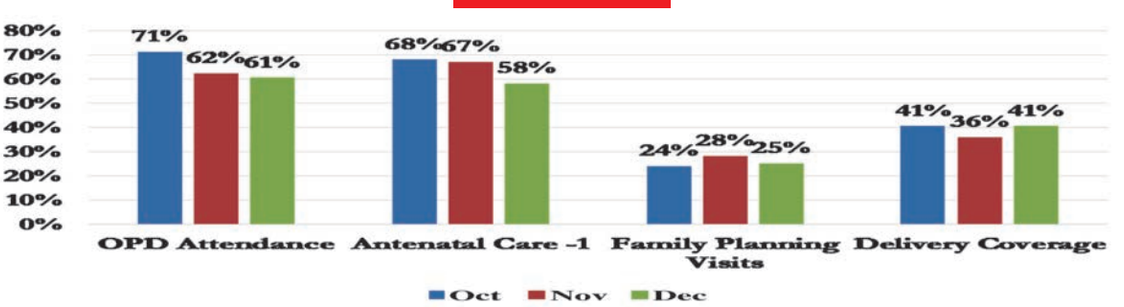
Indicator	Estimated Targets	Monthly Achivements By PPHI			
		July	Aug	Sep	Total
OPD Attendance	2398340	1926666	1767495	1872771	5566932
Antenatal Care -1	40772	35398	32401	33313	101112
Family Planning Visits	76747	20411	20829	20737	61977
Delivery Coverage	6955	2723	2942	2745	8410

Indicator	Estimated Targets	Monthly Achivements By PPHI			
		Oct	Nov	Dec	Total
OPD Attendance	2395069	1707544	1494965	1453035	4655544
Antenatal Care -1	40716	27730	27367	23712	78809
Family Planning Visits	76642	18503	21723	19422	59648
Delivery Coverage	6946	2822	2510	2825	8157

3rd Quarter



4th Quarter



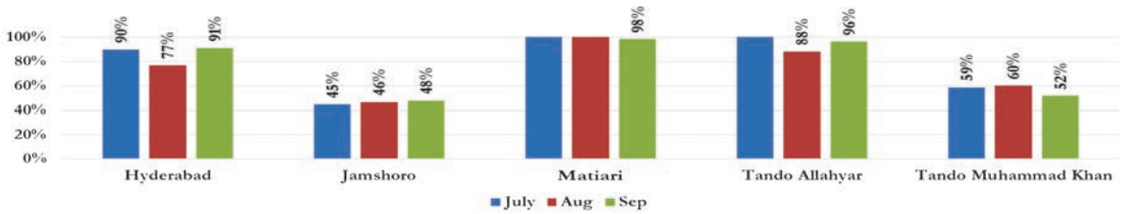
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit I

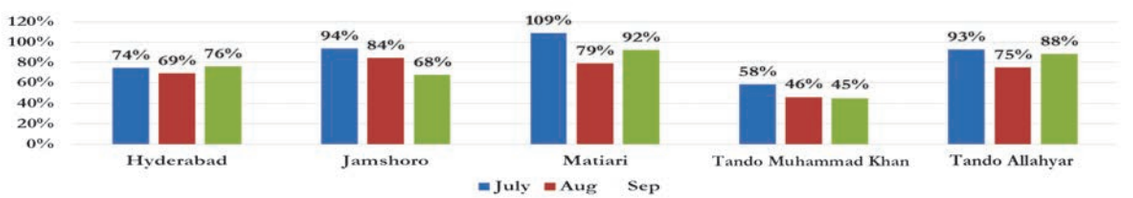
3rd Quarter

Districts	OPD Attendance				Total Visits for the FP				Delivery coverage at facility				Antenatal Care (ANC-1) coverage			
	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep
Hyderabad	92470	83240	71184	84336	2959	881	745	810	268	163	155	132	1572	1169	1087	1196
Jamshoro	116223	51827	53912	55455	2272	827	780	665	206	98	236	38	1207	1129	1016	819
Matiari	70699	82954	71146	69578	2262	493	849	458	205	254	260	257	1202	1310	947	1108
Tando Allahyar	69276	76851	61114	66752	3387	458	433	452	307	140	139	157	1799	1050	827	816
Tando Muhammad Khan	105833	62045	63446	54656	3525	918	849	1024	201	75	80	73	1178	1091	882	1038
Regional Total	454501	356917	320802	330777	14406	3577	3656	3409	1187	730	870	657	6958	5749	4759	4977

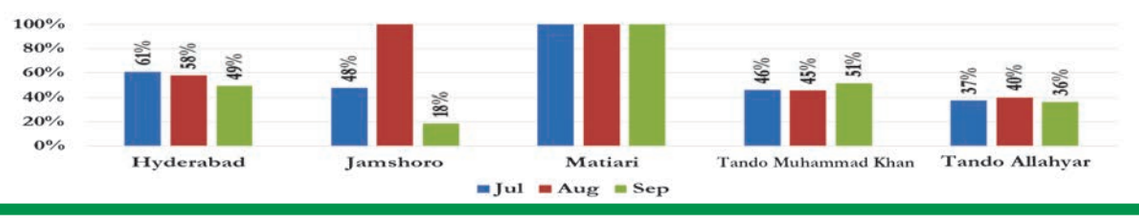
OPD Attendance



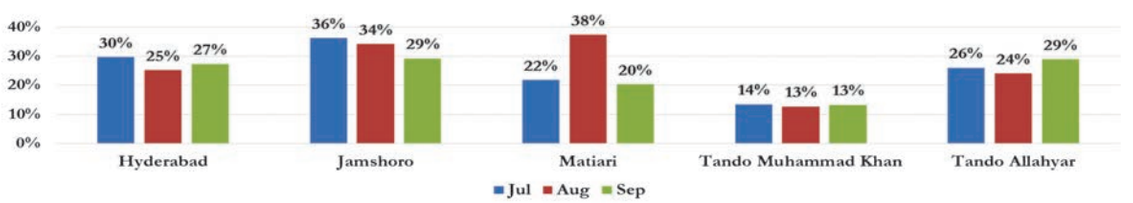
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



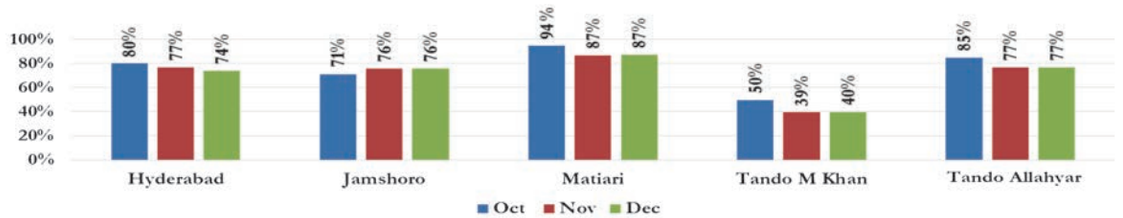
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit I

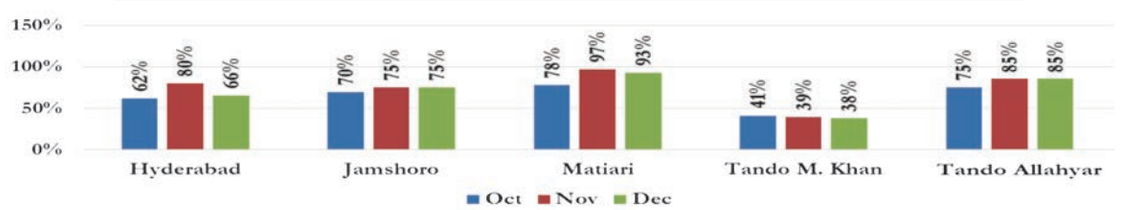
4th Quarter

Districts	OPD Attendance (#)			Antenatal Care (ANC-1)			Delivery coverage at facility			Total Visits for the FP (#)		
Months	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec
Hyderabad	73773	70884	68162	974	1263	1032	138	134	148	769	1035	913
Jamshoro	50421	53702	53702	843	906	906	139	70	70	614	912	912
Matiari	63053	57866	58265	888	1102	1051	215	206	188	434	523	502
Tando M. Khan	52850	41974	42124	741	711	684	142	130	174	457	488	553
Tando Allahyar	58627	53071	53071	888	1006	1006	80	99	99	551	484	398

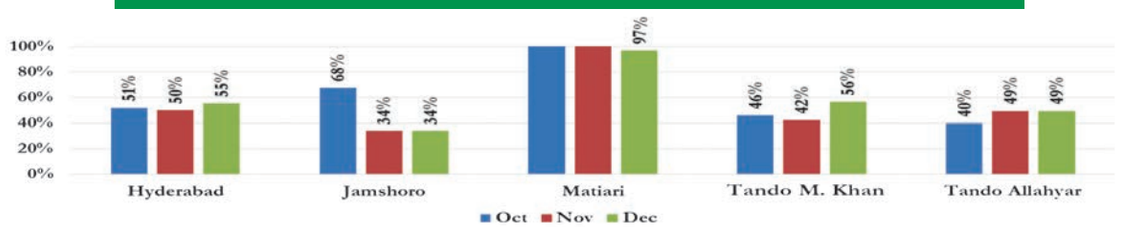
OPD Attendance



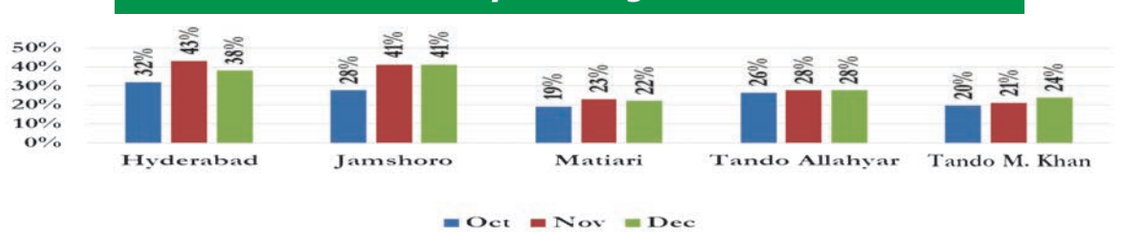
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



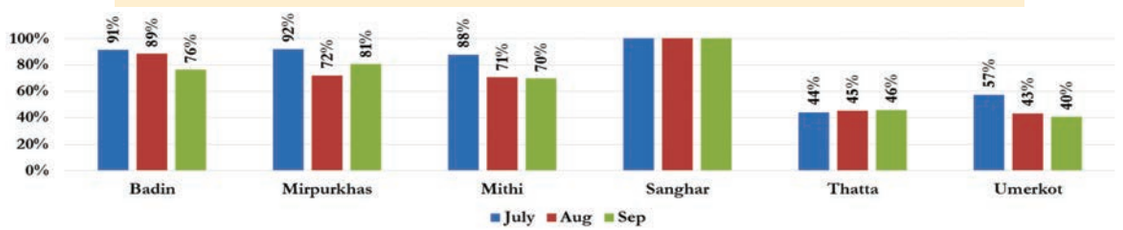
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit II

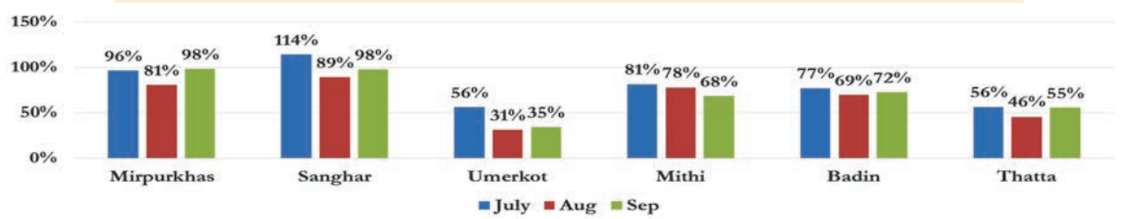
3rd Quarter

Districts	OPD Attendance				Total Visits for the FP				Delivery coverage at				Antenatal Care (ANC-1)			
	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep
Badin	138903	127001	123118	106235	4678	1527	1616	1696	424	252	240	244	2485	2389	2001	2446
Mirpurkhas	146196	134642	105285	117835	3047	925	1515	1643	330	157	155	169	1936	2215	1721	1893
Mithi	62391	54825	44085	43468	4291	1049	736	805	389	109	123	100	2280	1273	717	788
Sanghar	113909	139401	117609	116900	2217	464	436	487	181	10	9	14	1061	863	824	725
Thatta	164176	72077	74293	75010	4445	1771	1911	2001	403	108	193	128	2361	1819	1639	1706
Umerkot	134100	76829	57734	54112	5254	815	660	909	476	13	16	18	2791	1568	1276	1544
Regional Total	759676	604775	522124	513560	23932	6551	6874	7541	2203	649	736	673	12914	10127	8178	9102

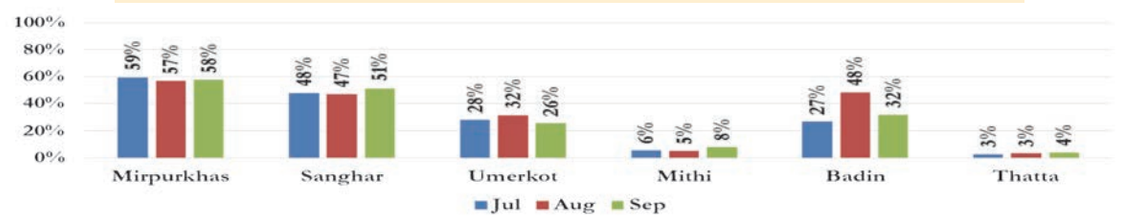
OPD Attendance



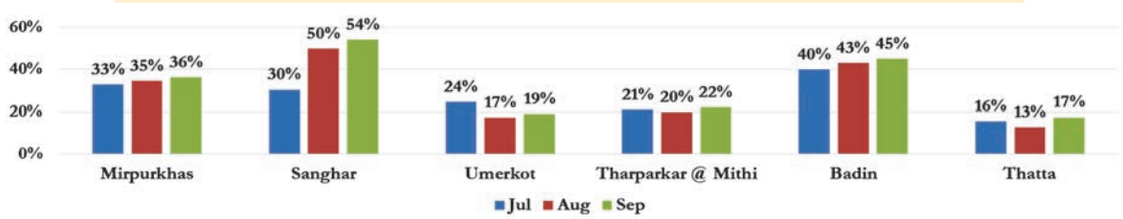
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



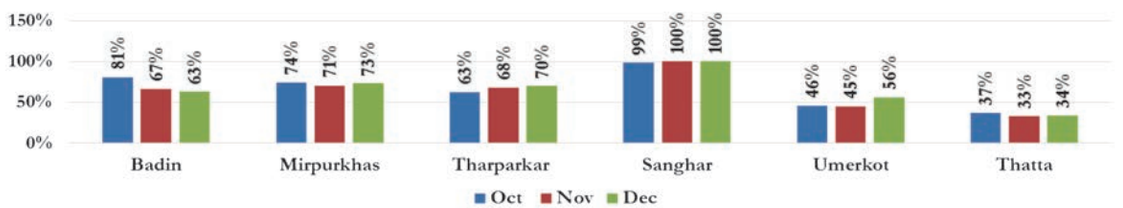
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit II

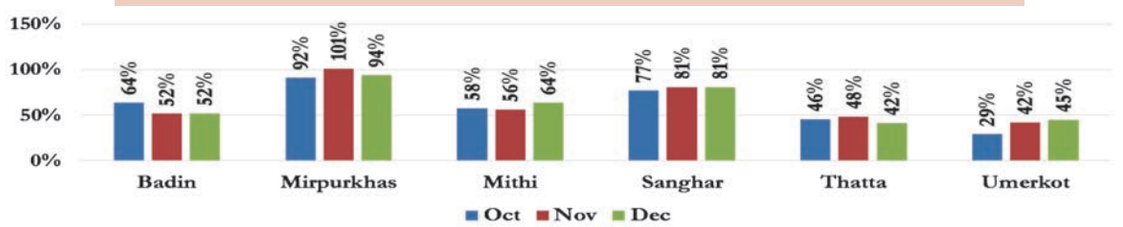
4th Quarter

Districts	OPD Attendance (#)			Antenatal Care (ANC-1)			Delivery coverage at facility			Total Visits for the FP (#)		
Months	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec
Badin	112235	92685	87314	1510	1219	1233	136	132	136	1507	1481	1327
MirpurKhas	108900	103186	106966	2275	2520	2344	235	243	266	1649	1863	1839
Mithi	39102	42588	43758	613	598	675	8	10	15	1081	1214	1112
Thatta	60804	54263	55913	1280	1347	1163	18	16	21	864	864	1003
Sanghar	112305	114170	114170	1493	1563	1563	150	180	180	568	544	568
UmerKot	61331	60313	75209	671	964	1028	99	88	88	751	649	794

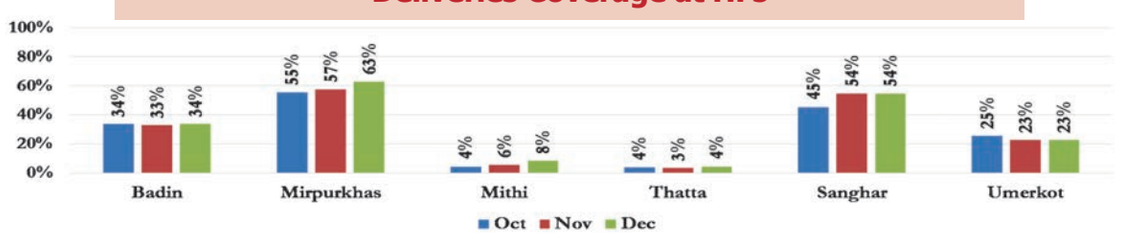
OPD Attendance



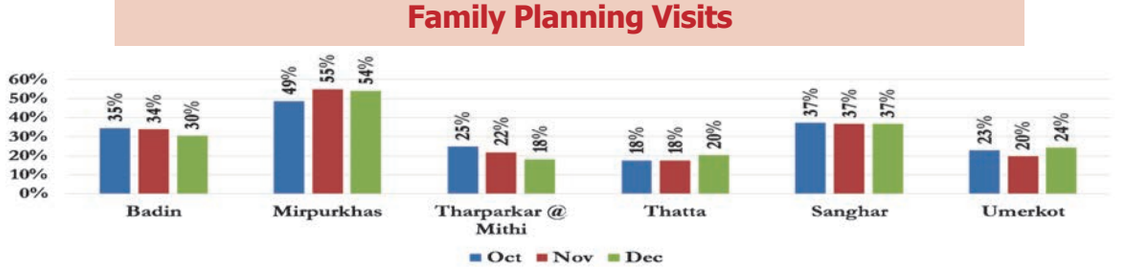
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



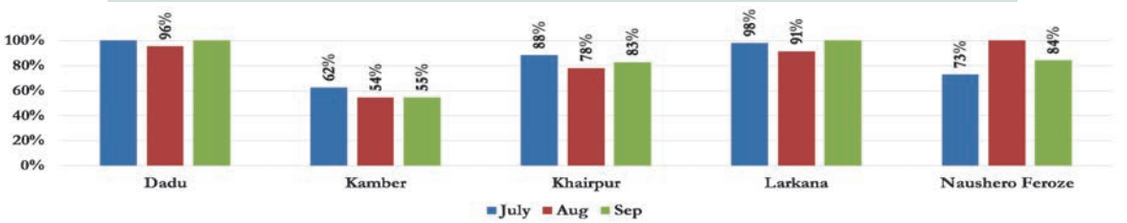
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit III

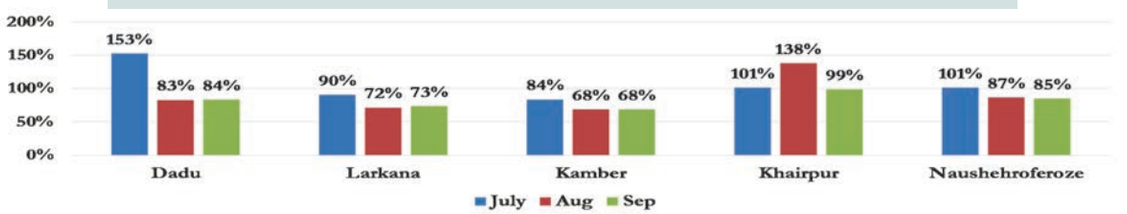
3rd Quarter

Districts	OPD Attendance				Total Visits for the FP				Delivery coverage at				Antenatal Care (ANC-1)			
	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep
Dadu	86867	95906	82992	90892	3600	748	668	696	252	47	71	89	1477	2254	1225	1236
Kamber	124936	77914	68076	68164	3998	483	366	487	362	132	152	159	1913	1730	1368	1402
Khairpur	307132	271241	240083	253825	9828	2846	2978	2597	891	425	204	176	2124	1779	1452	1452
Larkana	112509	110246	102894	120402	2780	1625	1883	1591	276	92	78	93	5221	5299	7196	5158
Naushero Feroze	95215	69316	96281	80199	1997	1246	1135	1198	326	166	163	179	1619	1636	1405	1372
Regional Total	726658	624623	590326	613482	22203	6948	7030	6569	2107	862	668	696	12353	12698	12646	10620

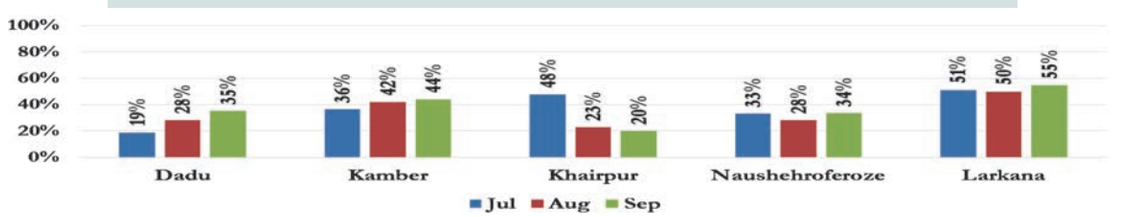
OPD Attendance



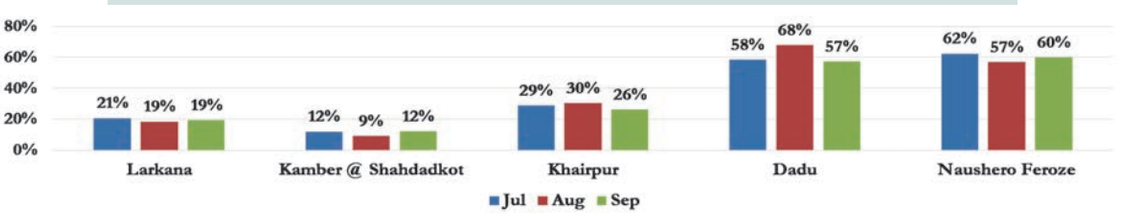
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



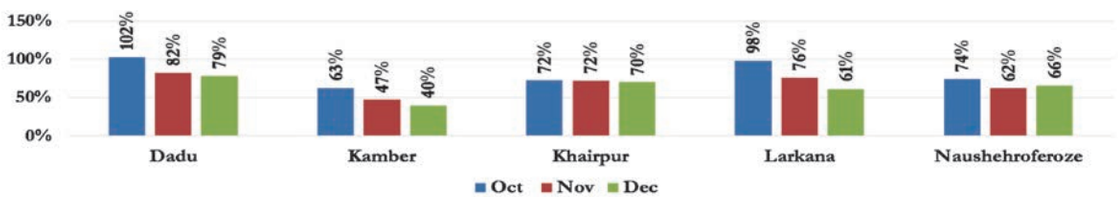
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit III

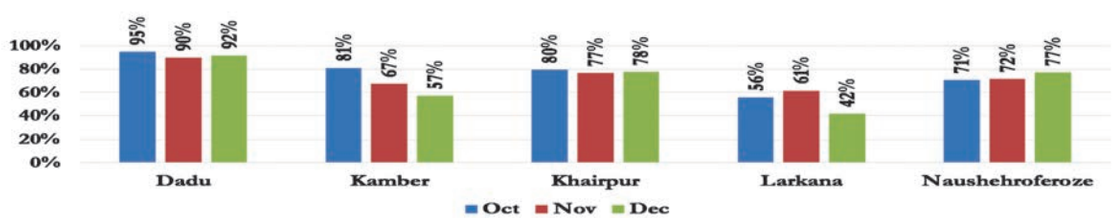
4th Quarter

Districts	OPD Attendance (#)			Antenatal Care (ANC-1)			Delivery coverage at facility			Total Visits for the FP (#)		
Months	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec
Dadu	89024	71600	68323	1404	1326	1355	87	69	137	1312	2094	1192
Kamber	78124	59060	49643	1721	1430	1218	209	182	160	429	376	474
Khairpur	222227	222102	215359	4167	4015	4072	155	130	403	2255	2956	2200
Larkana	110304	85318	68771	1065	1176	797	186	161	167	732	833	806
Naushero Feroze	70655	59161	62853	1142	1158	1253	85	81	95	1140	1118	1118

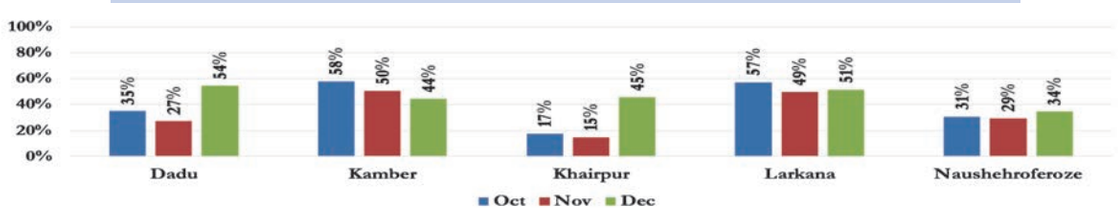
OPD Attendance



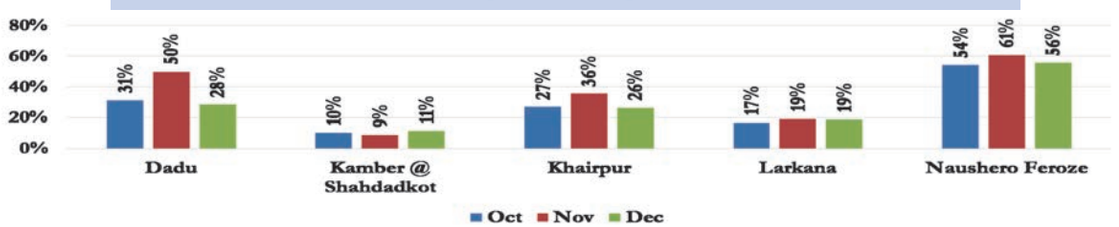
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



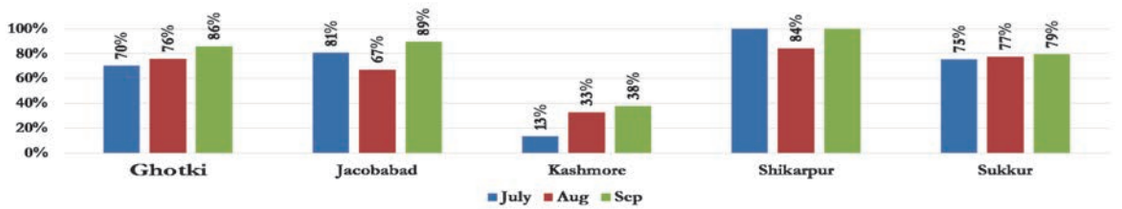
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit IV

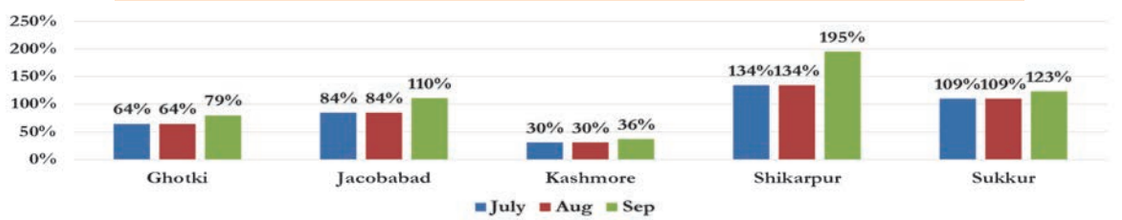
3rd Quarter

Districts	OPD Attendance				Total Visits for the FP				Delivery coverage at				Antenatal Care (ANC-1)			
	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep	Target	July	Aug	Sep
Dadu	86867	95906	82992	90892	3600	748	668	696	252	47	71	89	1477	2254	1225	1236
Kamber	124936	77914	68076	68164	3998	483	366	487	362	132	152	159	1913	1730	1368	1402
Khairpur	307132	271241	240083	253825	9828	2846	2978	2597	891	425	204	176	2124	1779	1452	1452
Larkana	112509	110246	102894	120402	2780	1625	1883	1591	276	92	78	93	5221	5299	7196	5158
Naushero Feroze	95215	69316	96281	80199	1997	1246	1135	1198	326	166	163	179	1619	1636	1405	1372
Regional Total	726658	624623	590326	613482	22203	6948	7030	6569	2107	862	668	696	12353	12698	12646	10620

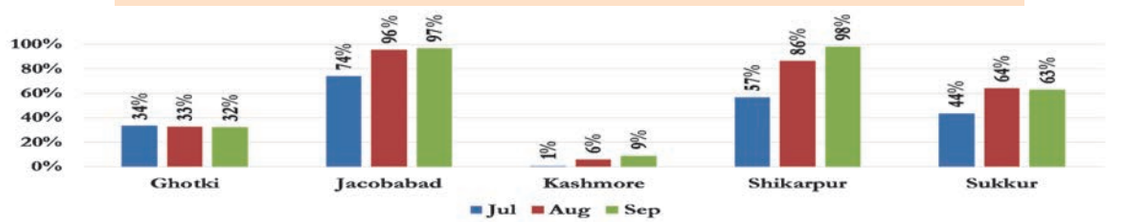
OPD Attendance



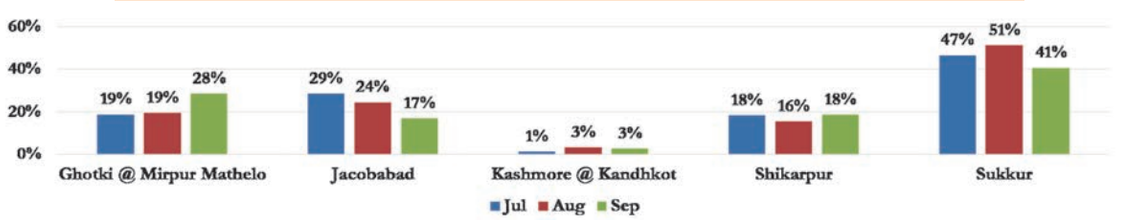
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



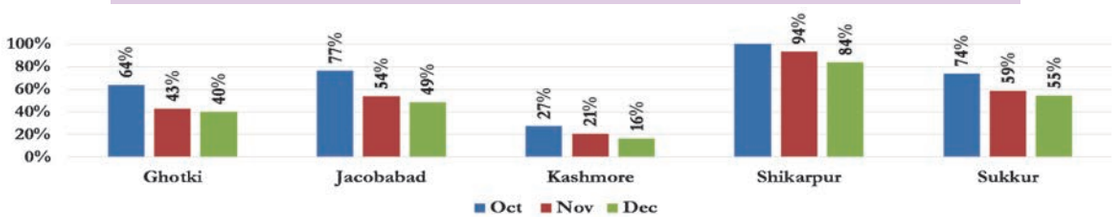
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Regional Support Unit IV

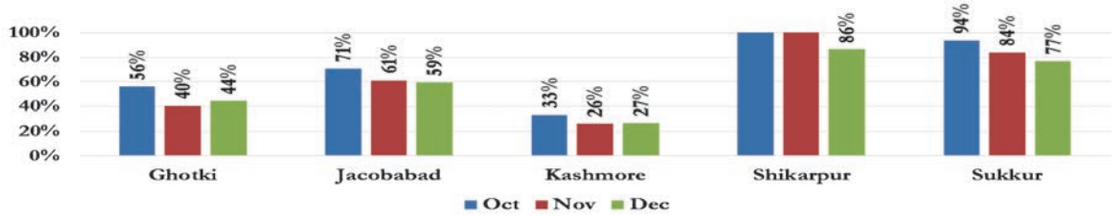
4th Quarter

Districts	OPD Attendance (#)			Antenatal Care (ANC-1)			Delivery coverage at facility			Total Visits for the FP (#)		
Months	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec
Ghotki	75614	50513	47609	1125	812	890	91	107	63	1054	1414	979
Jacobabad	83066	58462	52767	1299	1120	1092	262	204	199	612	918	828
Kashmore	28545	21511	17055	591	468	474	25	37	22	125	127	100
Shikarpur	75066	57809	51905	1284	1093	908	194	163	147	661	852	826
Sukkur	81518	64727	60096	1756	1570	1439	267	156	135	938	978	978

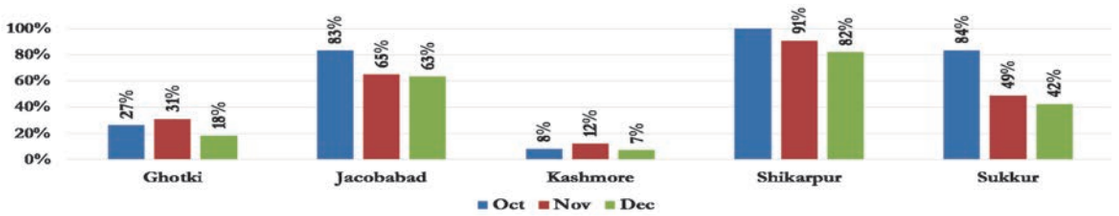
OPD Attendance



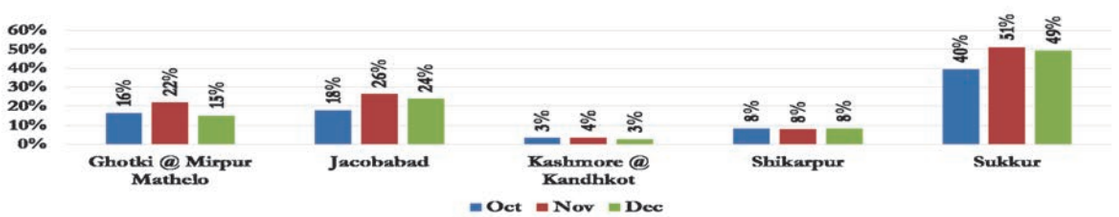
ANC-1 Coverage



Deliveries Coverage at HFs



Family Planning Visits



Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.2 Diseases Trend

2.2.1 No and Proportion of Diseases

3rd Quarter

Diseases	Jul		Aug		Sep	
	Cases	Proportion	Cases	Proportion	Cases	Proportion
Acute (Upper) Respiratory Infections	272568	23.96%	283146	25.96%	359392	30.00%
Suspected Malaria	131466	11.56%	145746	13.36%	168191	14.04%
Dermatitis	134066	11.79%	116049	10.64%	105937	8.84%
Fever due to other causes	69483	6.11%	67472	6.19%	78709	6.57%
Scabies	100947	8.88%	86314	7.91%	85183	7.11%
Diarrhoea/Dysentery	84019	7.39%	79774	7.32%	82749	6.91%
Diarrhoea/Dysentery in >5 yrs	87385	7.68%	82225	7.54%	76447	6.38%
Peptic Ulcer Diseases	58314	5.13%	51020	4.68%	54137	4.52%
Asthma	26412	2.32%	27405	2.51%	28798	2.40%
Otitis Media	28518	2.51%	24698	2.26%	26289	2.19%
Urinary Tract Infections	26437	2.32%	24645	2.26%	24438	2.04%
Dental Caries	17664	1.55%	15051	1.38%	15328	1.28%
Pneumonia	9578	0.84%	9405	0.86%	11082	0.93%
Hypertension	17011	1.50%	14396	1.32%	15007	1.25%
Diabetes Mellitus	14541	1.28%	12647	1.16%	12441	1.04%
Pneumonia > 5 years	9288	0.82%	7795	0.71%	9289	0.78%
Dog bite	3595	0.32%	2907	0.27%	3199	0.27%
Worm Infestations	8234	0.72%	6819	0.63%	7174	0.60%
Road traffic accidents	5458	0.48%	5589	0.51%	5926	0.49%
Chronic Obstructive Pulmonary Disease	5205	0.46%	4577	0.42%	4443	0.37%
Cataract	4450	0.39%	4086	0.37%	4189	0.35%
Enteric/ Typhoid Fever	3490	0.31%	2830	0.26%	3638	0.30%
Burns	1878	0.17%	1760	0.16%	1865	0.16%
Trachoma	2586	0.23%	1874	0.17%	2271	0.19%
Depression	2687	0.24%	2293	0.21%	2169	0.18%
TB Suspects	1336	0.12%	1349	0.12%	1329	0.11%
Sexually Transmitted Infections	1163	0.10%	1288	0.12%	1091	0.09%
Suspected Viral Hepatitis	1471	0.13%	1328	0.12%	1481	0.12%
Benign Enlargement of Prostrate	228	0.02%	242	0.02%	1569	0.13%
Drug Dependence	558	0.05%	524	0.05%	539	0.04%
Suspected Meningitis	1891	0.17%	1485	0.14%	856	0.07%
Fractures	429	0.04%	382	0.04%	331	0.03%
Ischemic Heart Disease	706	0.06%	314	0.03%	611	0.05%
Glaucoma	432	0.04%	448	0.04%	494	0.04%
Suspected Measles	1128	0.10%	680	0.06%	186	0.02%
Cutaneous Leishmaniasis	840	0.07%	1061	0.10%	370	0.03%
Cirrhosis of Liver	789	0.07%	171	0.02%	359	0.03%
Nephritis/ Nephrosis	343	0.03%	151	0.01%	171	0.01%
Epilepsy	96	0.01%	293	0.03%	69	0.01%
Acute Flaccid Paralysis	2	0.00%	9	0.00%	2	0.00%
Snake bite (symptoms of poison)	300	0.03%	258	0.02%	66	0.01%
Suspected Neonatal Tetanus	326	0.03%	32	0.00%	151	0.01%
Suspected HIV/AIDS	43	0.00%	0	0.00%	0	0.00%
Total	1137361		1090538		1197966	

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

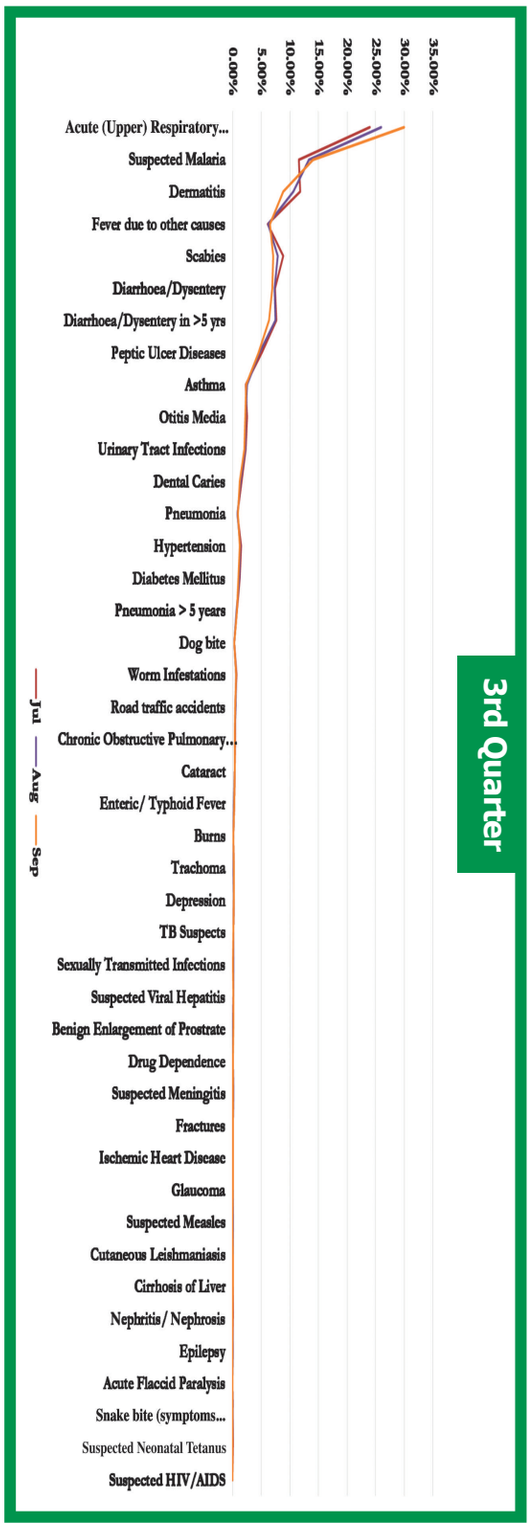
4th Quarter

Diseases	Oct		Nov		Dec	
	Cases	Proportion	Cases	Proportion	Cases	Proportion
Acute (Upper) Respiratory Infections	365481	35.22%	353414	39.08%	355675	40.39%
Suspected Malaria	147925	14.25%	110768	12.25%	89531	10.17%
Dermatitis	84411	8.13%	56605	6.26%	55723	6.33%
Fever due to other causes	63553	6.12%	57253	6.33%	53908	6.12%
Scabies	64461	6.21%	50336	5.57%	50878	5.78%
Diarrhoea/Dysentery	52443	5.05%	46799	5.18%	48197	5.47%
Diarrhoea/Dysentery in >5 yrs	54250	5.23%	45278	5.01%	46355	5.26%
Peptic Ulcer Diseases	43738	4.21%	40731	4.50%	40056	4.55%
Asthma	26132	2.52%	25331	2.80%	22176	2.52%
Otitis Media	22276	2.15%	17294	1.91%	18126	2.06%
Urinary Tract Infections	19567	1.89%	17073	1.89%	16479	1.87%
Dental Caries	12941	1.25%	11237	1.24%	11129	1.26%
Pneumonia	10426	1.00%	9498	1.05%	10932	1.24%
Hypertension	12840	1.24%	11423	1.26%	10837	1.23%
Diabetes Mellitus	10534	1.02%	10228	1.13%	10204	1.16%
Pneumonia > 5 years	7851	0.76%	7362	0.81%	8429	0.96%
Dog bite	3819	0.37%	3517	0.39%	4339	0.49%
Worm Infestations	5481	0.53%	4891	0.54%	4158	0.47%
Road traffic accidents	5650	0.54%	4111	0.45%	4075	0.46%
Chronic Obstructive Pulmonary Disease	4164	0.40%	4591	0.51%	3227	0.37%
Cataract	3012	0.29%	2631	0.29%	2360	0.27%
Enteric/ Typhoid Fever	2650	0.26%	2150	0.24%	1850	0.21%
Burns	1607	0.15%	1437	0.16%	1782	0.20%
Trachoma	2266	0.22%	1511	0.17%	1627	0.18%
Depression	2066	0.20%	1804	0.20%	1566	0.18%
TB Suspects	1500	0.14%	1499	0.17%	1526	0.17%
Sexually Transmitted Infections	885	0.09%	846	0.09%	1298	0.15%
Suspected Viral Hepatitis	1251	0.12%	1069	0.12%	971	0.11%
Benign Enlargement of Prostrate	423	0.04%	816	0.09%	683	0.08%
Drug Dependence	451	0.04%	516	0.06%	549	0.06%
Suspected Meningitis	689	0.07%	454	0.05%	317	0.04%
Fractures	334	0.03%	265	0.03%	278	0.03%
Ischemic Heart Disease	434	0.04%	333	0.04%	253	0.03%
Glaucoma	329	0.03%	370	0.04%	250	0.03%
Suspected Measles	295	0.03%	88	0.01%	191	0.02%
Cutaneous Leishmaniasis	426	0.04%	166	0.02%	179	0.02%
Cirrhosis of Liver	620	0.06%	366	0.04%	166	0.02%
Nephritis/ Nephrosis	198	0.02%	127	0.01%	117	0.01%
Epilepsy	206	0.02%	45	0.00%	63	0.01%
Acute Flaccid Paralysis	114	0.01%	2	0.00%	33	0.00%
Snake bite (symptoms of poison)	56	0.01%	33	0.00%	16	0.00%
Suspected Neonatal Tetanus	3	0.00%	1	0.00%	4	0.00%
Suspected HIV/AIDS	0	0.00%	0	0.00%	0	0.00%
Total	1037758		904269		880513	

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

Graphical Presentation of Diseases Trend

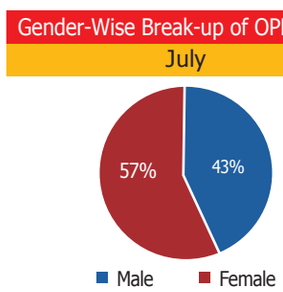


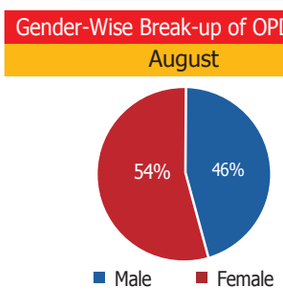


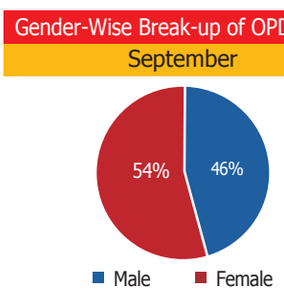
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.2.2 OPD Patients: Gender-Wise

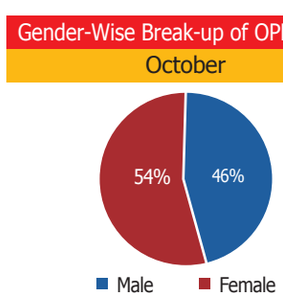
3rd Quarter

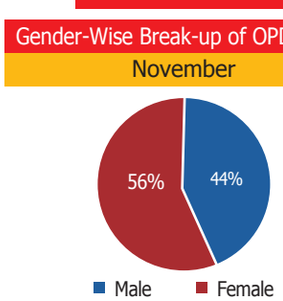


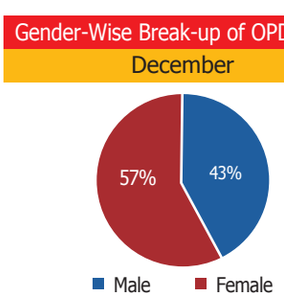




4th Quarter

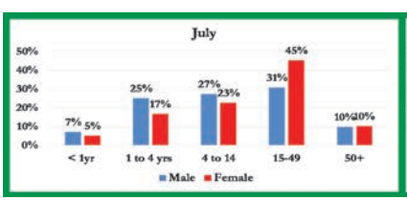


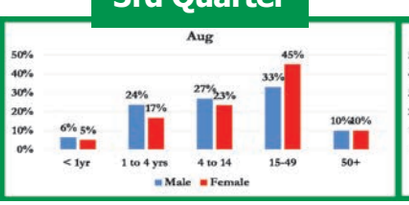


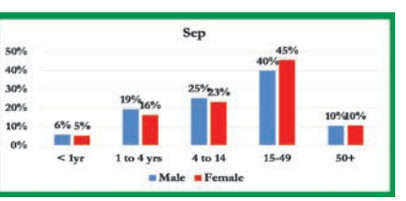


2.2.3 Age and Gender-Wise Distribution of OPD Attendance

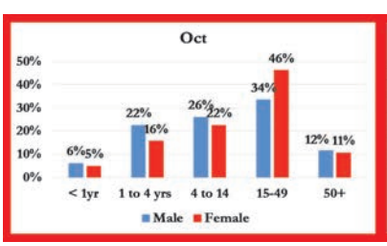
3rd Quarter

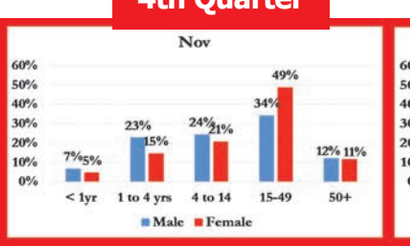


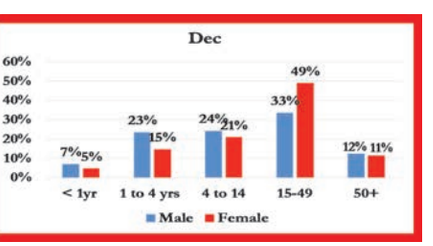




4th Quarter



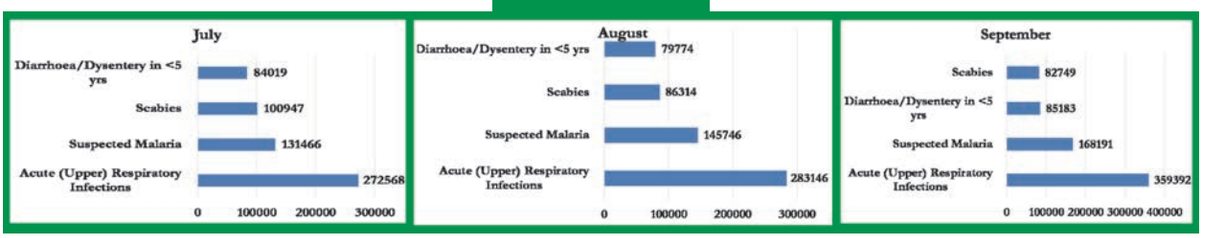




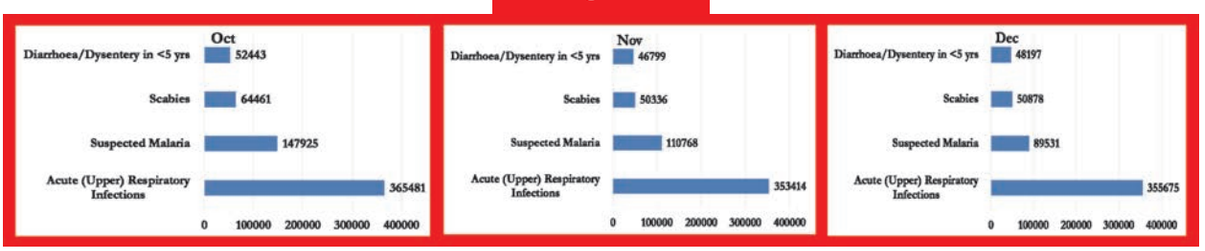
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.2.4 Top 4 Communicable Diseases

3rd Quarter

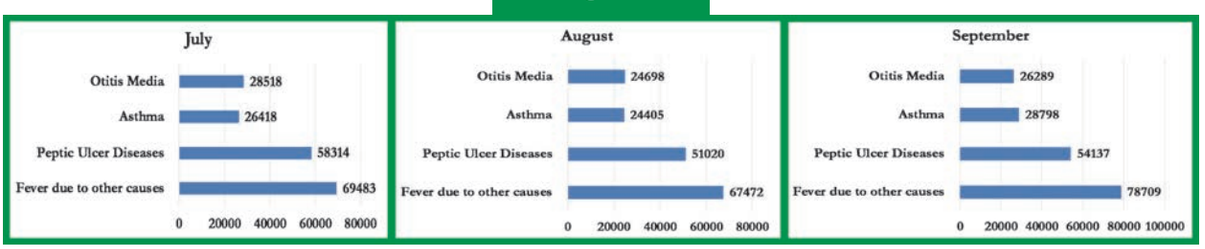


4th Quarter

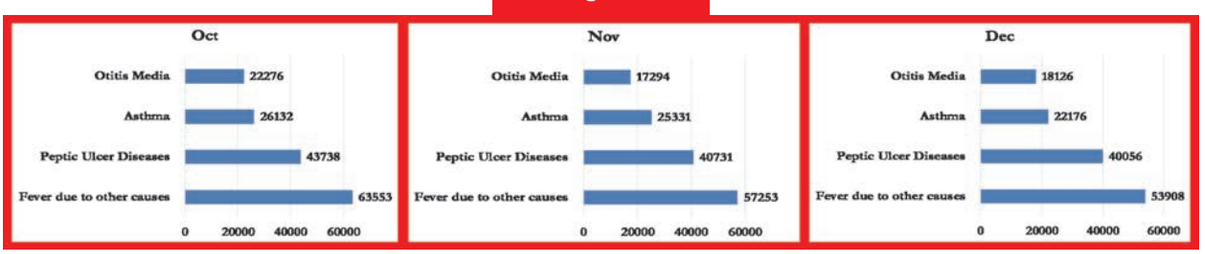


2.2.5 Top 4 Non-Communicable Cases

3rd Quarter



4th Quarter



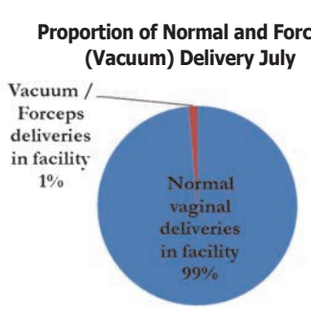
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

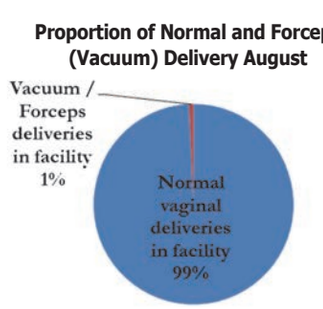
2.3 Tuberculosis

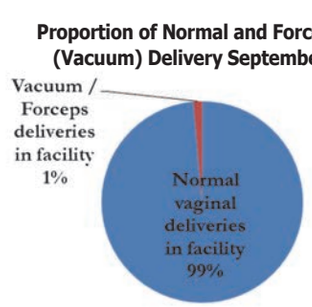
Month	Intensive Phase TB Dots Patients	Intensive-Phase TB-Dots Patients Missing Treatment > 1 week
July	338	36
August	294	55
September	345	41
October	283	19
November	269	26
December	235	24

2.3.1 Proportion of Normal and Forceps (Vacuum) Delivery

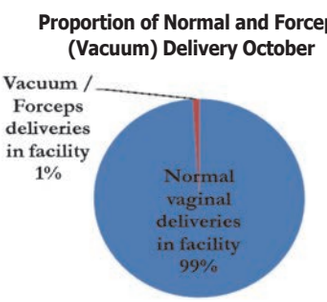
3rd Quarter

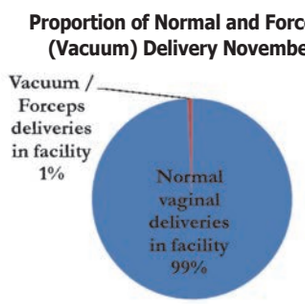


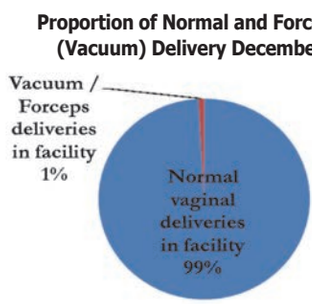




4th Quarter



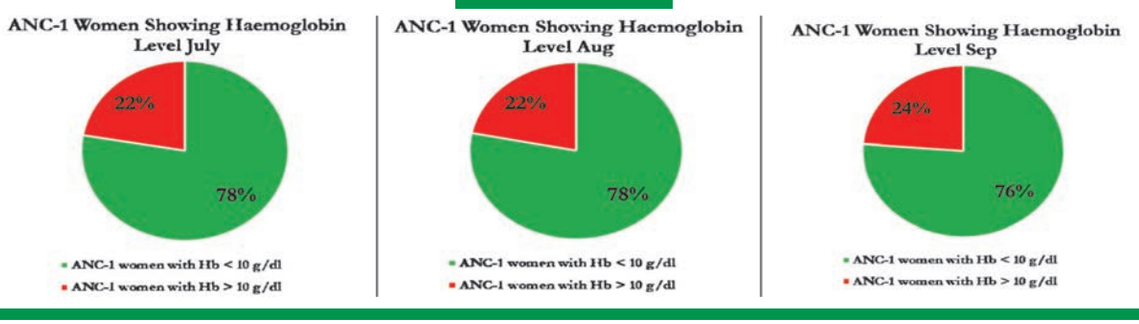




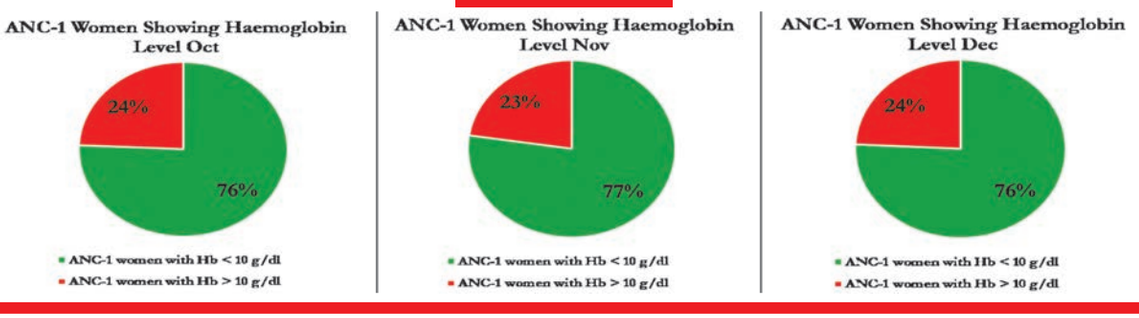
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.3.2 ANC-1 Women Showing Haemoglobin Level

3rd Quarter

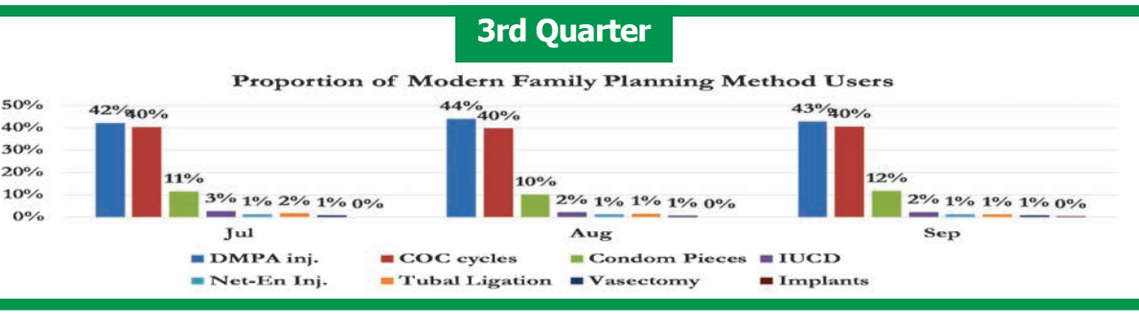


4th Quarter

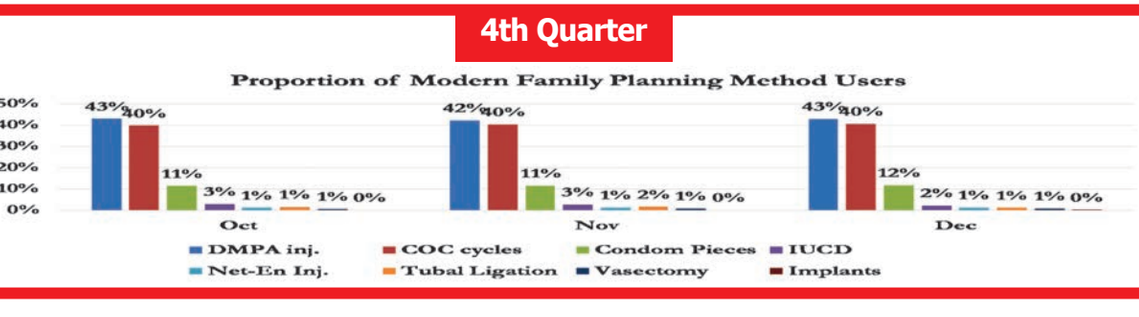


2.3.3 Modern Family Planning Method Users

3rd Quarter



4th Quarter

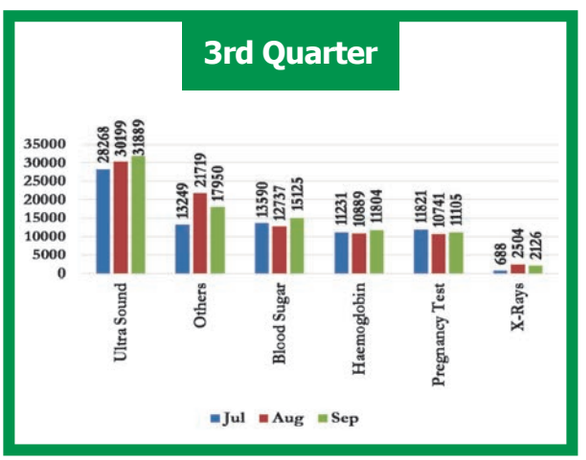


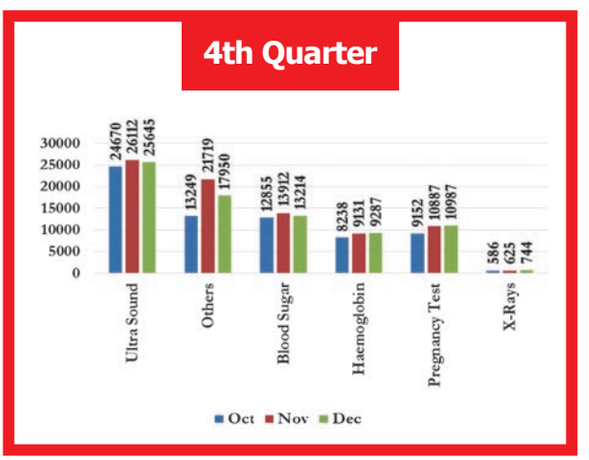
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.4 PPHI Diagnostic Services

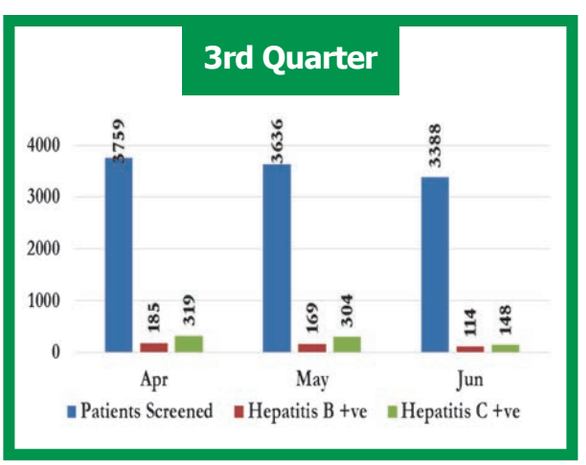
During 2012-13 alone, 200,800 ultrasound tests were undertaken – all free of cost. The success of the service can be judged from the fact that 35,365 pregnancies were confirmed; 1,311 Intra-uterine deaths were diagnosed; 2,829 cases of missed abortion were detected and more importantly – 1,109 cases of ectopic pregnancies were diagnosed and thus lives were saved.

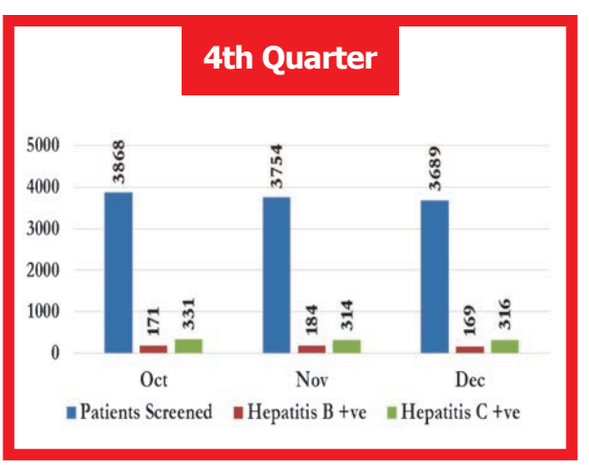
2.4.1 Routine Lab Tests





2.4.2 Hepatitis B & Hepatitis C Detection & Referral





Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.4.3 Special Events of the 2nd Quarter

Syed Naveed Qamar Zaman Shah (MNA), Tando Muhammad Khan inaugurated Mother and Child health Care Ghulam Shah Bagrani along with Haji Abdul Kareem Soomro and Asif Memon DC-TMK, Zulfiqar Mahar (SSP), including PPHI team Mr. Sharjeel Memon (M&E), Mr Azeem (SO).



2.5 Supervision Monitoring on District level, Provincial Level and EPI Monitoring Checklist

There is strict Monitoring of staff at HFs with PPHI. During the month alone 5,631 visits were made by PPHI staff to various HFs for effective monitoring and facilitation. "Absenteeism" is regularly reported to concerned authorities for action. PPHI has arranged V–Wireless telephones at PPHI HFs for monitoring and quick exchange of information.

3rd Quarter

	Jul	Aug	Sep
Ultra Sound	28268	30199	31889
Others	13249	21719	17950
Blood Sugar	13590	12737	15125
Haemoglobin	11231	10889	11804
Pregnancy Test	11821	10741	11105
X-Rays	688	2504	2126

4th Quarter

	Oct	Nov	Dec
Ultra Sound	24670	26112	25645
Others	13249	21719	17950
Blood Sugar	12855	13912	13214
Haemoglobin	8238	9131	9287
Pregnancy Test	9152	10887	10987
X-Rays	586	625	744

3rd Quarter

	Jul	Aug	Sep
Patients Screened	3759	3636	3388
Hepatitis B +ve	185	169	114
Hepatitis C +ve	319	304	148

4th Quarter

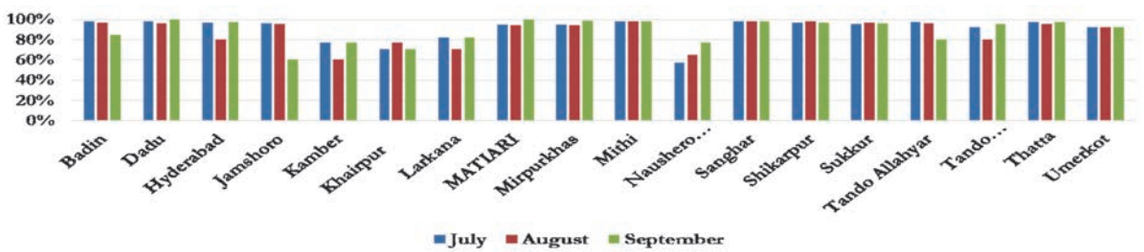
	Oct	Nov	Dec
Patients Screened	3868	3754	3689
Hepatitis B +ve	171	184	169
Hepatitis C +ve	331	314	316

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.5.1 Percentage of Health Facilities Monitored with Provincial and District Level Monitoring Checklist

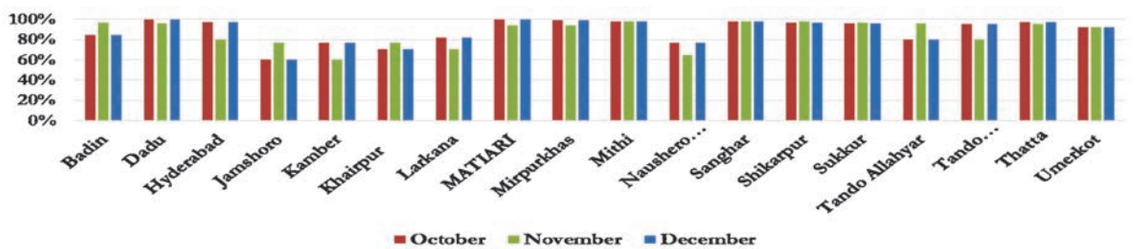
3rd Quarter

Health Facilities Monitored as per Monitoring Check List

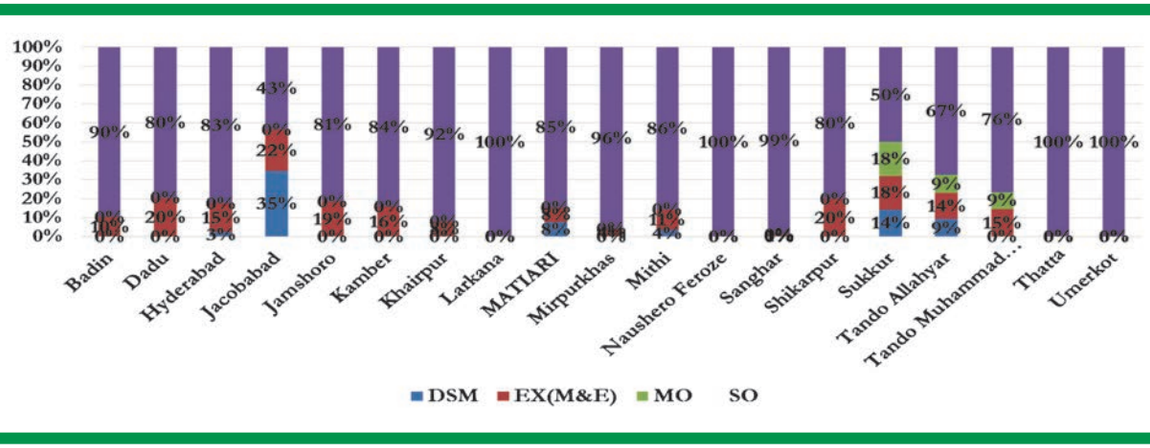


4th Quarter

Health Facilities Monitored as per Monitoring Check List



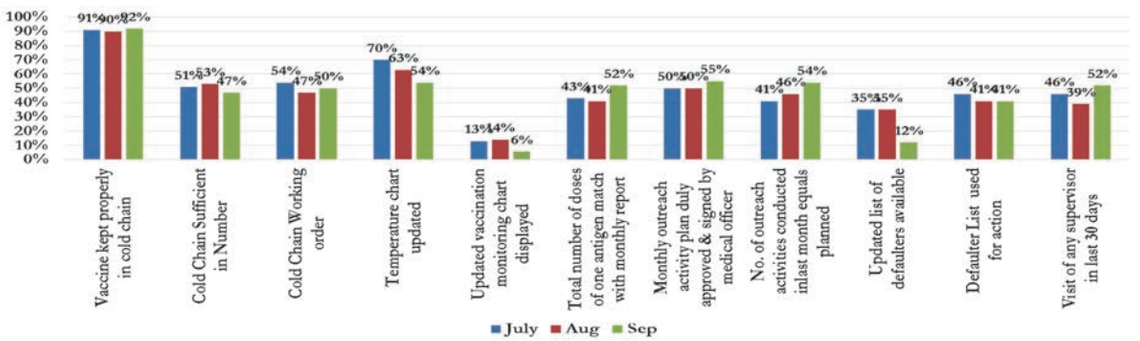
2.5.2 Monitoring Visits by DSU Team as per Monitoring Checklist during December



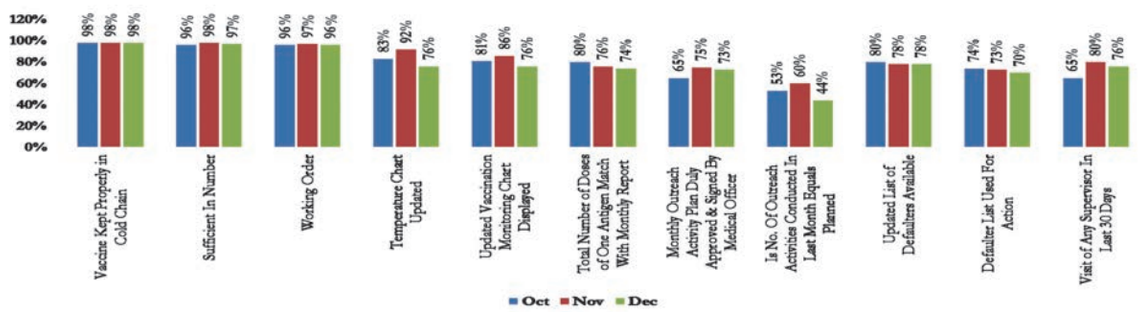
Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

2.5.3 EPI Monitoring as per Monitoring Checklist by PPHI Team

3rd Quarter



4th Quarter



Challenges

1. Despite being part of MOU, Vertical Programs are not yet transferred to PPHI Sindh.
2. Non Sharing of Data with PPHI by all stake holders working in Health Sector.

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

PPHI at a Glance





Rain Emergency Free Mobile Camp, District Ghotki



Community Health Session by Dr. Sadia, District Ghotki



Monthly Review Meeting August, Tando Allahyar





Community Health Session by DSM, Tando Allahyar

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

PPHI at a Glance





Conducted Free Medical Mobile Camps at Village Jam Sunharo & Sabzoi @ Torri Band Kandhkot, Kashmore





Free Mobile Rain Emergency Camps, District Sukkur





Community Support Group Meeting by Ex (M&E), Jamshoro

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

PPHI at a Glance



Community Support Group Meeting @ BHU Shah Abad, District Larkana



Community Support Group Meeting by Ex (M&E), District Matiari



Training of Trainers on Infant and Young Child Feeding



CSG Meeting at BHU Ruk Taluka Lakhi DSU PPHI Shikarpur

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

PPHI Champions



Dr. Shazia Qayoom
Place of Posting:
Saeed Khan Lund MCHC Centre

Dr. Shazia Qayoom has completed the requirements of MCPS and is working at Saeed Khan Lund MCHC Centre since 2012.

S.K.L Mother & Child Health Care Centre is about 35 kms away from Tando Muhammad Khan. Where, before PPHI, health service delivery was very poor. But after taking over management of Said BHU, PPHI turned this facility into MCHC 24/7.

Now, MCHC centre Saeed Khan Lund is working at maximum level of service delivery in OPD, follow ups, NVD, DNC, ANC, Family Planning (IUCD).

According to DHIS performance in the month of December, 2013; Tando Muhammad Khan reported 174 deliveries. The lion's share of 59 deliveries was from Saeed MCHC centre. This MCHC centre is successful and the credit of its success goes to Dr. Shazia Qayoom. She is a very dedicated and hard working member of our organisation.

Dr. Shagufta Shah (Female Medical Officer) & her husband Dr. Ishtiaque Ali Shah (Medical Officer) joined PPHI on 3/12/2008. They both belong to Hala City, District Matiari which is 300 kms away from Mithi. Initially she was working at 3 different Health Facilities in the desert of Taluka Mithi including BHU Doonjh, BHU K.G Shah & BHU Wakrio. Later on, she was transferred to MCH Malanhore Veena. She was the first Female Medical Officer to provide the Gynecological, Obstetrical, NVDs, and Family Planning Services in the desert area of Tharparkar. She conducts capacity building sessions on a regular basis in the community on different topics.



Dr. Shagufta Shah FMO
Place of Posting:
MCH Malanhore Veena

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

PPHI Heroes

Dr. Mukhtiar Ahmed Channa, has been working with PPHI since April, 2011. Currently he is posted at GD Tatri as Incharge Medical Officer. He is a thorough professional, kind and a facilitator to his staff and caring to all patients. By virtue of his personal efforts and coordination through community mobilization and participation, GD Tatri has shown improvement in service delivery. As a result of it, both OPD and follow up cases have increased while family planning, record keeping and store management have shown considerable improvement as well. His supportive role for female staff including FMO and sonologists has enhanced delivery, ANC, PNC and ultrasound service for the poor women of the area. The lush green grass and gardening would not have been possible without personal efforts of him. It would not be an exaggeration to say that without his dedication and efforts, GD Tatri's services and look would have been reflected a poor picture and not to appreciate the services of such great doctor would be tantamount to injustice. Such people are always an asset of any organization and PPHI has always been appreciating services of such unsung heroes.



Dr. Mukhtiar Ahmed Channa
Posting Place: GD Tatri, Larkana



Dr. Israr Ahmed Daudpoto
Posting Place:
BHU & MCHC Jahan Khan, Shikarpur

Dr. Israr Ahmed Daudpoto, Incharge Medical Officer PPHI, Shikarpur, joined PPHI as Medical Officer on October, 2011. Since then he has been working in PPHI with full dedication, enthusiasm and zeal. In March, 2012 with his efforts a separate MCHC started in the premises of BHU Jahan Khan and after that an increase in the number of skilled delivery at HF. The MCHC works round the clock and proves to be much beneficial for the community especially in late night services. First ambulance services were started in the HF due to his continuous demand for ambulance services at MCHC Jahan Khan. He made Community Health Session in schools and villages to encourage the community for supporting the HF and has now established good reputation in the community. Even the community group member contributes in welfare of HF. A laboratory was established on the request of I/C MO Dr. Israr Ahmed Daudpoto and tests like ESR, HB, Blood Grouping, BSR, URS-3, Urine PT, MP, Widal, BT / CT, Hepatitis B & C being conducted at MCHC Jahan Khan.

Ultrasound scheme has been increased for further two days in a week especially for women at HF on the request of the doctor. It is worth mentioning here that in the measles outbreak during 2012 he played a vital role in arranging Medical Camp at the door step of far flung villages. Besides he is also performing his duties at UC as Medical Officer to provide coverage to the National Immunization Drive(NID). His special attention is on EPI to cover the course of children immunization.

Source: The data has been collected on HMIS/DHIS format from all incharge MOs of HFs. There has been no comment on its validity from any Stake Holders.

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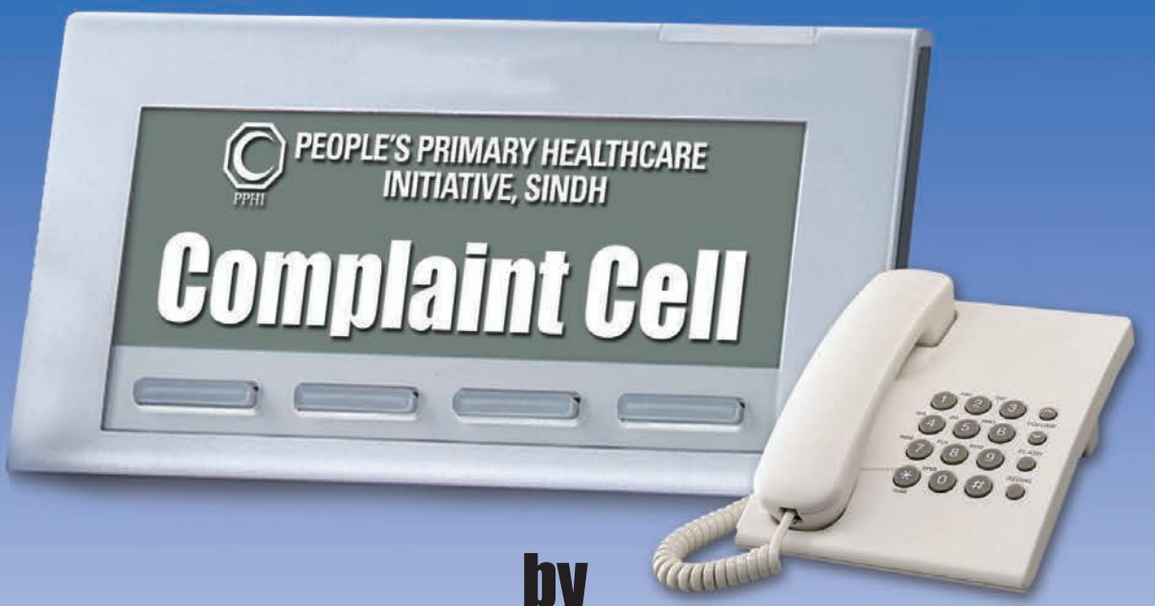
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Abbreviation & Acronyms

Abbreviation & Acronyms	Abbreviation & Acronyms
ACLS = Advanced Cardiac Life Support	HT = Health Technician
ANC = Antenatal Care	LHV = Lady Health Visitors
ARV = Anti Rabies Vaccine	MCHCs = Mother and Child Healthcare Centers
ASV = Anti Snake Vaccine	MDGs = Millennium Development Goals
BHU = Basic Health Unit	MO = Medical Officers
CSG = Community Support Group	MW = Midwife
DHIS = District Health Information System	OPD = Out Patient Department
DHO = District Health Officer	PD = Program Director
DSM = District Support Manager	PHC = Primary HealthCare
DSU = District Support Unit	PHS = Public Health Specialist
HR = Human Resource	PSU = Provincial Support Unit
EPI = Expanded Program for Immunization	RHC = Rural Health Center
EX(M&E) = Executive Monitoring and Evaluation	RPD = Regional Program Director
ERP = Enterprize Resource Planning	SHS = School Health Sessions
FMO = Female Medical Officer	SRSO = Sindh Rural Support Organization
FP = Family Planning	SO = Social Organizer
FSU = Federal Support Unit	TB-DOTS = Tuberculosis - Directly Observed treatment short course
GD = Government Dispensaries	
HFs = Health Facilities	TOR = Term Of Reference
HMIS = Health Management Information System	TB = Tubercle bacilli
HR = Human Resource	ZR = Zero Report

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Whoso saveth the life of one,
it shall be as if he saved the life of all mankind.



by
People's Primary HealthCare Initiative, Sindh

PPHI is here to provide you with quality healthcare service in your area,
and has launched a ' Complaint Cell ' for immediate responses to emergencies.

These complaint cells ' services are also being provided in
Jamshoro and Hyderabad districts.



If you have any queries about PPHI services in your area, Please call on

PPHI ' s Complaint Cell, Toll Free 0800-77755

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