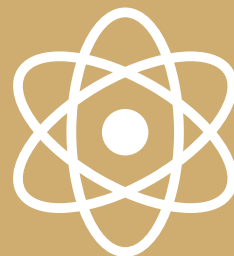


# Chapter 7

## Achievements





# Preventive Care

## CELEBRATION OF SECOND SEHAT KHIDMAT HEALTH WEEK 2018

### Health Week: A Great Success Of Primary & Secondary Healthcare Department Punjab

For the first time ever in Pakistan, Health Week was held all over the Punjab from 15<sup>th</sup>-19<sup>th</sup> August 2017. Primary & Secondary Healthcare Department is proud to be the first to take this initiative. In continuation of this series, **Second Health Week** was conducted from 19<sup>th</sup> February to 24<sup>th</sup> February 2018 across Punjab in the form of integrated screening camps at 700 Health Facilities and community based activities. Chief Executive officers (CEOs) of respective districts were assigned the responsibility of planning, coordination, execution, management, supervision and monitoring along with the technical assistance of vertical programs of P&SHD.

Total Patients Registered

**966,585**

Total Completed Screening

**907,240**

Hepatitis B Vaccination

650,000 Adults

Tetanus Vaccination

200,000 Females

Deworming

3,000,000 Children >5

Antenatal Check up

40,000 Pregnant Ladies

Children Screened for Malnutrition

5.8 Million

- Maternal & Child Health
- Nutrition
- Screening against
- TB
- Hepatitis B & C
- HIV/AIDS
- NCDs (Asthma, Diabetes etc)



خوشخبری

عوام الناس کے لئے حکومت پنجاب کی جانب سے

6 روزہ

**صحت میلہ**

19 تا 24 فروری 2018ء

تک جاری رہے گا۔





## PAK-MEDICA MEDICAL HEALTH EXHIBITION

A 3-days Pak-medica Health Exhibition (28<sup>th</sup> -30<sup>th</sup> September 2017) was organized with the collaboration of Turkish Government and Primary & Secondary Healthcare Department, Punjab at International Expo center Lahore.



## The Infectious Waste Management Across All Healthcare Facilities of P&SHD Punjab

A dedicated team of Infectious Disease Control Program has achieved a milestone on 14th February 2018. Punjab is the first province to have a dedicated and comprehensive mechanism for collection, transportation and disposal of infectious hospital waste across Punjab. It is the only province with real time data entry and monitoring through a well thought of waste management information system.



## Second Hepatitis B Vaccination Dose Camp- Motor Transport Wing Punjab Police

In continuation of the first camp, a second integrated camp was conducted for motor transport wing Punjab Police. The camp was held on 2nd February 2018, in which 1202 employs of Punjab got their 2nd dose of Hepatitis B vaccine. Awareness about the prevention of Hepatitis and infection control was provided to new entrants and also screened for Hepatitis B&C and vaccinated against HBV. Those found positive on screening were referred for PCR to THQs and DHQs.

# HEPATITIS & INFECTION CONTROL PROGRAM



## The First Incinerator Just Got Installed: A Ray of Hope

The dawn of 1st February 2018 saw the ray of hope, for minimizing the preventable spread of infection. It was the day when the one of twenty six promised incinerator got energized. This incinerator will not only cater to the infectious waste disposal needs of Sialkot but also its bordering districts, till the time incinerator of adjacent district gets installed.



## ICP Achievements

Infectious waste collected till date:

**156,607 kg**

Incinerated till dated

**138,243Kg**

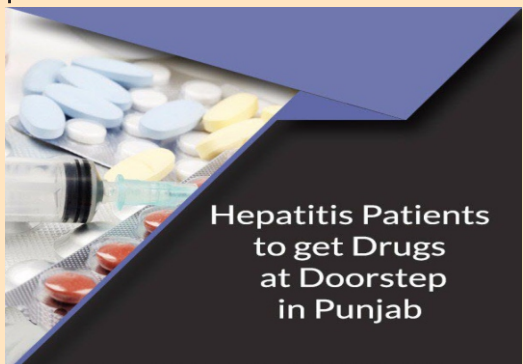


## Screening & Vaccination Camp at Shahdara & Hafizabad

For the promotion, prevention, control and treatment of Hepatitis, the Hepatitis and Infection Control Program Punjab along with other Vertical Programs like TB & NCD conducted a series of integrated screening and HBV vaccination camps in different Districts. In Shahdara Town Lahore, the camp was held on 8<sup>th</sup> December 2017 and one thousand, three hundred and fifty (1350) individuals were given awareness about prevention of Hepatitis and infection control; screened and vaccinated against HBV virus as well as provided requisite counselling. Those patients found positive for PCR were directed towards their nearest THQs and DHQs for further treatment, baseline investigation and counseling.

## Home Delivery Of Hepatitis 'C' Medicines

**Why Medicines Delivery through courier?** Home delivery of Hepatitis C/B medicines at the doorstep of patients has been initiated. Medicines for Hepatitis treatment are expensive. Initially medicines were being delivered through designated hepatitis sentinel sites (DHQ and THQ hospitals) however no consolidated record of medicines delivery was available there. Pilferage of medicines was also reported at some sites. To ensure transparency and facilitate patients, medicine delivery through courier company at the doorstep of the patients has been introduced.



## Prevention of Hepatitis Spread Through Barbers And Beauticians

Infection Control Program Punjab has successfully launched Punjab Hepatitis Ordinance 2017 on 9<sup>th</sup> November, 2017, which covers registration, licensing and capacity building on Infection Prevention and Control of the barbers and beauticians. The launching ceremony of Centralized Barber and Salon Licensing (CBSL) was held in District Kasur, Sheikhpura and Lahore on the same day with the support of Beauticians Associations and Barbers Associations of these districts and District Health Authorities of district Sheikhpura and Lahore.

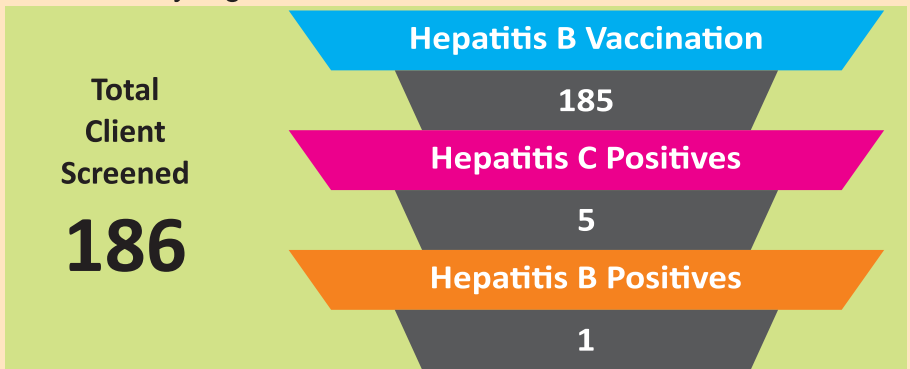


## Progress:

- 9793 patients picked up their medicines via courier service, out of which 4494 patients received complete (6months) course.
- First and second dose has been delivered to approximately 1,431 patients.
- 3,836 patients have picked, first three months' dose of medicines through courier.
- Data of another 6000 verified patients will be shared with courier in near future.

## Screening & Vaccination Camp At DGPR - Lahore

Hepatitis screening and vaccination camp was organized on the request of DGPR office Punjab for their staff. HICP arranged a dedicated team for this activity along with provision of RDT kits, Vaccines, Syringes, Lancets.



## Implementation of Hospital Waste Management Rules in Districts

Hospital Waste Management Rules have implemented in 12 districts and are being monitored on regular basis through outsourced firm. Proper segregation at ward by staff and proper disposal of the waste through environment friendly incinerators is being ensured. In remaining districts, refresher trainings, displays, foot operated waste bins, Personal Protection Equipment (PPE) for workers and disinfectants are available to all wards and regular monthly meetings are conducting to review the progress and to identify cost effective solutions for the safe collection, storage, transportation and disposal of the hospital waste.



## Ground Breaking Ceremony Installation of State of The Art Incinerator at DHQ Hospital Chiniot

The Ground Breaking Ceremony for installation of incinerator at DHQ hospital Chiniot was held on 7<sup>th</sup> December 2017. The aim of this ceremony was to get ownership of this project to ensure its smooth completion. After approval of installation of 13 incinerators by Environmental Protection Department Punjab, the P&SHD has started civil work.

## Screening Of Workers Of Super Asia Industries, Gujranwala

The screening of workers for TB was conducted on 24<sup>th</sup> September 2017 in the Super Asia Industries, Gujranwala. It has more than 700 employees. The dispensary of the Super Asia was set for the arrangements of different desks like registration, verbal screening and sputum collection. The dispensary doctors and staff along with the doctors of the district government office supervised the screening of the workers X-RAYS & sputum collection and examination.

# TB CONTROL PROGRAM

## Signing of Mou With All Pakistan Transporter Association

The MoU (Memorandum of Understanding) was signed with the all Pakistan Transporter Association on 28<sup>th</sup> September 2017, the PTP Punjab will establish screening camps in all terminals in Punjab. The employees staff of the terminals including Bus drivers, conductors and others shall be screened and treated if required. Billboard will be placed in their terminals, standees in the waiting area, stickers on the buses and the hostess will distribute (IEC) material to the passengers regarding TB.



## Case Study:

Sajid Mohammad is the only earning member of his family. He learned through his village dispensary that Chest Camps are established by Government. He came to the camp, was diagnosed with active Tuberculosis and was asked to get his contacts in the house screened. His Wife and three children also had cough and fever but were unaware of disease, they were getting treatment from the village dispensary. On contact tracing they were also diagnosed with TB. And now they are all getting free treatment from provincial TB Control Program (PTP) and free follow ups.





# PUNJAB AIDS CONTROL PROGRAM



## Mous For Partnership Signed With Different Institutes & Organizations For Research & Development Purposes

- MoU signed on August 2, 2017 with Armed Forces and Institute of Pathology for collaboration in case detection and treatment of HIV/AIDS positive cases.
- MoU was signed with Bushran Begum Memorial Hospital Jalalpur Jattan on 16th January 2017. The area has a cluster of HIV patients and a center was required here. As part of the agreement, the PACP will provide HR, treatment, counselling and technical support whereas the Hospital will provide logistics and premises for the treatment center.
- Work on joint Project with Walled City Authority

## Screening Of Jail Inmates

The PACP started second round of screening of Jail inmates across Punjab on 28<sup>th</sup> January 2018. In the first round, over 47,000 prisoners were tested. The prisoners are being vaccinated and provided Hepatitis C, HIV and syphilis treatment along with vaccination for Hepatitis B.

## Screening/Registration Of Trucker Service Resumed (BABU-SABU)

More than 20,000 bus and truck drivers' tested and screened for Hepatitis B, Hepatitis C, Syphilis and HIV/AIDS with free vaccination for Hepatitis B and free treatment for Hepatitis C. The Babu Sabu truck stand has been resumed in collaboration with Punjab Good Transport Association.



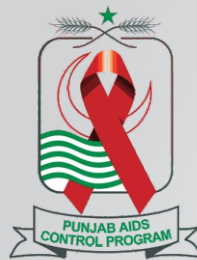
## Establishment of Aids Control Center in DHQ Hospital Chiniot

In Chiniot, 35 AIDS cases have been reported, Government of Punjab has established AIDS Control Center in DHQ hospital Chiniot. Primary and Secondary Healthcare Department established new HIV/AIDS free treatment, counseling and diagnostic centre on Dec 7, 2017.

## Worlds AIDS Day and Year Ender

The Punjab AIDS Control Program organized a number of awareness activities on World AIDS Day 2017. Following activities were carried out in year of 2017.

- HIV Awareness Session and Walks
- News supplement in English & Urdu Newspapers.
- Year End Media Information Pack
- Special TV packages on HIV:
- Special Year Ender Newsletter



Life is Beautiful

Hope For Happy Life

Remember

HIV/AIDS can be prevented and patients can live normal life with the use of medicine.

You can protect yourself and your loved ones by prevention



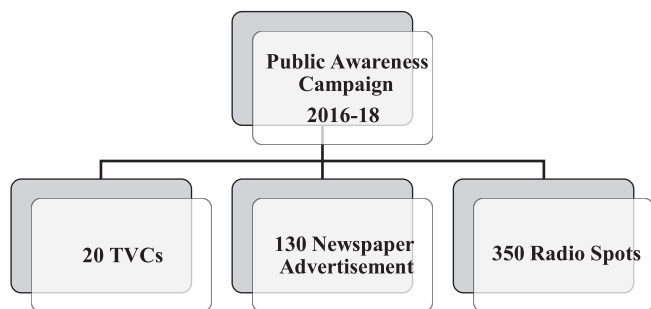
# PREVENTION AND CONTROL OF NON COMMUNICABLE DISEASES

## Establishment of Integrated Desks & NCDS Clinics

Program is screening all people above 40 years coming to hospitals for non-communicable diseases. This is done through calculating BMI, BSR, BP, PEFR at screening desks in secondary health care facilities. The project has already **established 130 screening desks** at secondary level. The project has also piloted early detection model at 30 primary level facilities in 3 districts (Chiniot, Okara & Nankana Sahib). Program has provided necessary logistics for establishment of screening desks whereas the health facilities are using their trained staff (LHVs, Nurses) for screening and also utilizing their own resources to top up screening supplies.

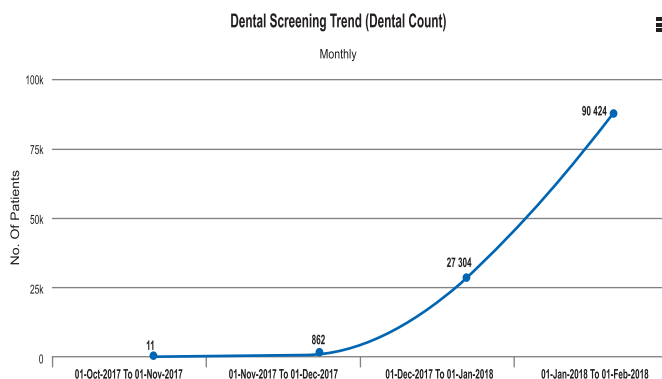
## HEALTH PROMOTION CAMPAIGN

Prevention and Control of Non-Communicable Diseases Program has used **print, electronic and social media** through intensive campaigns for awareness of public for health promotion and safety. This includes information about **healthy lifestyle, oral health, CA Breast and diabetes**, their complications and its prevention. Program has taken following steps



## Revamping of Dental Services

NCD Program is revamping the dental services which have been the most neglected area of the health facilities. The program made use of existing dental clinics and HR in primary and secondary health care facilities for screening of oral diseases like caries, gingivitis and periodontitis. Android based app for registration of patients is also prepared. In screening camps, the importance of oral hygiene was highlighted to patients. The patients screened positive for these oral diseases were referred to the dental clinics in their respective DHQH, THQH where the Dental Surgeons provided treatment for the above mentioned diseases. Furthermore, patients with diabetes were given special instructions on maintaining oral hygiene, guidelines and brushing techniques advised with focus on regular follow-ups.



## Training of District Health Officers (preventive)

A series of three training sessions was conducted at NCDs Program Office, on 29<sup>th</sup> September 2017 (First Batch – 12 Districts) and 02<sup>nd</sup> October (2 Batches – 24 Districts) to train District Health Officers (Preventive) about the operational aspects of NCDs Program Intervention such as Integrated Screening Desks and NCDs Clinics branding, android application, HR Placement, Logistics etc.

# EXTENDED PROGRAM ON IMMUNIZATION

## Anti Polio Drive in Punjab Through Campaigns

Campaigns on Special National Immunization Days (SNIDs) held in October and December 2017 as well as National Immunization Drives held in December, 2017 and January, 2018 received widespread coverage all over the province. Over 50 million children under five years of age were given additional protection against polio in the three campaigns.



## A Step Forward Towards DTP Booster Dose Introduction In Punjab

Punjab has successfully implemented Diphtheria, Tetanus, and Pertussis vaccine booster dose introduction orientation workshops, commonly known as DTP, in Lahore and Multan. The trainings were held on January 22 and 23 in Lahore and 25 in Multan. The training was organized by Primary and Secondary Healthcare department of the Punjab.

## Launching Ceremony of Introduction of DTP Booster Vaccine

Punjab has become first province in the country to introduce DTP booster vaccine. P&SHD has launched DTP Booster Vaccine on 26th April 2018 in Punjab. Launching ceremony was organized by Expanded Program on Immunization, P&SHD with the collaboration of UNICEF. The vaccine would provide shield to the children against Diphtheria, Pertussis and Tetanus.



## Improvement In Service Delivery Indicators

All indicators have shown a positive trend in the last quarter of 2017. Against the planned target of 84 per cent, the OPV III coverage was recorded at 96 per cent. Similarly, against the planned target of increasing PCV III coverage to 84 per cent, the program managed to hit 95 per cent. Against the planned target of achieving the IPV coverage target of 60 per cent, the provincial coverage was recorded at 87 per cent. Similarly, Rota I & II coverage was recorded at 71 and 45 per cent respectively against the set target of 50 per cent.

Indicators	Target in Percent	Coverage achieved of last quarter of 2017 in percentage
Increase in Measles 1 coverage	79	97
Increase in in OPV 3 coverage	84	96
Increase PCV (10) 3 coverage	84	95
Increase IPV coverage	60	87
Increase Rota virus vaccine coverage	50	71
Decrease dropout rate.	<10	5

## Free Medical Camps

From October to December 2017 over 105 free medical camps were set up in eight districts of Punjab. The free medical camps were set up to support vaccination of children who were either due, defaulter or zero. The camps proved to be a huge success.

- Over 76,000 patients were treated during the camps for various ailments in over 96 union councils.
- The staff deployed at the camps managed to vaccinate 489 children who were either missed in polio campaigns or unavailable at the time of campaign.
- Over 784 birth registrations took place at the camp.
- Over 889 caregivers received messages during the sessions.



# IRMNCH & Nutrition Program

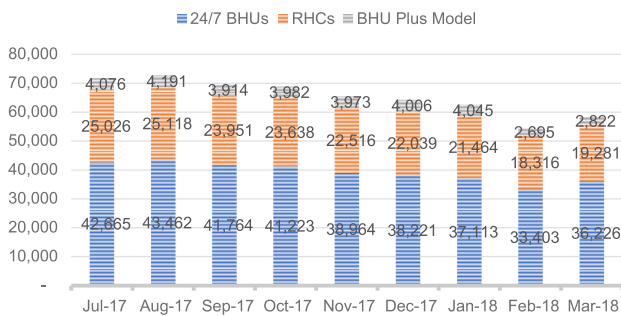
Government of Punjab has taken a number of new initiatives, the most important one was the integration of LHWs Program, MNCH Program, Nutrition Program and 24/7 Basic EmONC services under the umbrella of the Integrated Reproductive, Maternal, Newborn & Child Health and Nutrition Program (IRMNCHNP).



## Basic EmONC services provided at RHCs, 24/7 BHUs & BHU+

The total number of deliveries conducted at primary health care facilities 884,385. Out of these, 588,094 were conducted at RHCs, 24/7 BHUs and BHU Plus. Similarly, the antenatal and postnatal care visits are also higher in 24/7 BHUs compared to the regular BHUs.

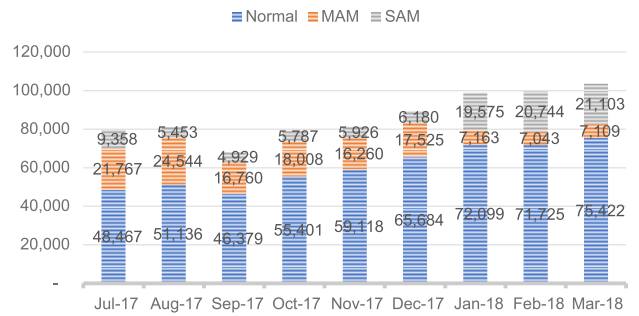
## ANTENATAL CARE VISITS



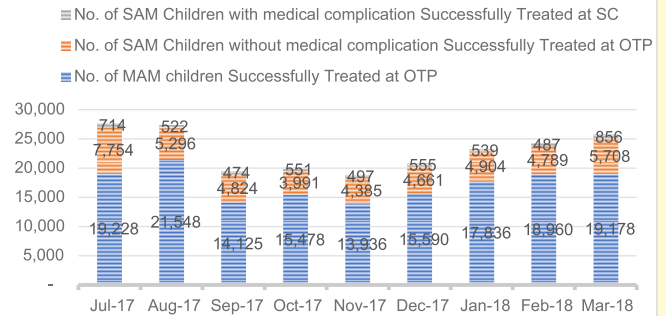
## Recently Scaled up Intervention-Facility Based Nutrition Services (OTPs and SCs)

The nutrition related services, one of the most recently scaled up interventions by the program, has successfully treated 207,386 children through Outdoor Therapeutic Program (OTP) and Stabilization Centers (SCs) from July 2017 to March 2018. These children were enrolled at the OTPs / SCs after initial screening. The total number of SAM and MAM cases identified during screening at facility level were 235,234. Thus, the cure rate turned out to be 88%.

## SCREENING



## TREATMENT



## Increase in Lady Health Workers Coverage

The services provided by the LHWs include registration of target groups, household visits, health education and awareness, and special campaigns. As of February 2018, the LHWs cover a population of 73 million individuals across rural (59 million) and urban (13 million) areas of the province.



## Strengthening Linkage Between Community and Health Facility

The LHWs working at community level are the strongest connection between the communities and health facilities. In order to further strengthen the linkages and to reduce the second delay i.e. delay in provision of transport service for obstetric cases, a special initiative of rural ambulance service was launched. Thus, a total fleet of 433 ambulances are working in the field.





# PRIMARY CARE

## Patient Transfer System

The patient transfer system was initiated in all Districts and Tehsils of Punjab to transfer patients from one medical facility to another and so far 60,000 patients have been successfully transferred. More than 900 ambulances are available with P&SHD. All ambulances are well equipped with modern medical facilities, equipment and well trained staff to cater the patients.



## Ambulance Service Desk

Ambulance Service Desks have been established in all public sector hospitals for better coordination and facilitation of the patients and their families.

## Initiative of LOCUM Doctors

Government of the Punjab has initiated the concept of Doctors on Call; a Locum service aimed at providing the public hospitals and other health facilities of Punjab with quality and cost-effective Locum cover.

## MOU Inked For Eye Treatment Of Rural Women

Primary & Secondary Healthcare Department, The College of Ophthalmology & Allied Vision Sciences (COAVS) Lahore and the Fred Hollows Foundation (FHF), Australia signed a MOU for the eye screening and treatment of rural women in the agriculture sector in districts Jhang, Sahiwal and Khanewal through "Comprehensive eye care for

## Kangaroo Mothercare Initiative:

Policy and Strategic Planning Unit, P&SHD with the support of UNICEF conducted trainings on Early Essential Newborn Care (EENC) and Kangaroo Mothercare (KMC) in Services Hospital. There were 5 EENC and 5 KMC Workshops conducted by master trainers of Services Hospital and participants were gynecologists, pediatricians and nurses from Tertiary Care Hospitals of Lahore (Services Hospital, Sir Ganga Ram Hospital, Jinnah Hospital, Lady Aitchison Hospital, Children Hospital, Shahdara Hospital, Nawaz Sharif Yaki Gate Hospital, Rashid Latif Hospital, Fatima Memorial Hospital and DHQ and THQ Hospitals of Bahawalnagar, Layyah and Faisalabad).



unicef

ASSESSMENT OF KANGAROO MOTHER CARE IN  
SERVICES HOSPITAL LAHORE, PAKISTAN  
June, 2018



BORN TOO EARLY,  
YOUR BABY NEEDS  
YOUR HUG, FOR LIFE!

## Teleconsultation Program

To provide the best quality healthcare service, P&SHD has initiated a 'teleconsultation' program for the patients living in the remote areas Punjab. About 250 BHUs will be connected to certified doctors at a central hub in Lahore in the next 3 months. A test project has been started in Mandi Bahauddin, e-linking four BHUs of Bhojwal, Bherowal, Rerkka Bala and Dhunni Kalan with the central hub. These e-BHUs are already facilitating 5,500 patients online!

## Motor Bike Ambulance Service Another Milestone Achieved!

Primary and secondary Healthcare department has launched Motorbike Ambulance Service in Punjab which is first initiative of its kind. This service has been launched to cater emergency cases reported from congested areas. These motor bike Ambulances are fully equipped to provide basic emergency medical services at the spot.





# Secondary Healthcare



## Revamping of DHQ and THQ Hospitals

The project of Revamping DHQ and THQ hospitals of Punjab has set sail towards provision of quality healthcare services in the province. The flagship project of revamping 126 DHQ/THQ hospitals of Punjab will be completed in two phases at a total cost of Rs.40 billion.

Initially 40 hospitals (including 25 DHQ + 15 THQ) have been revamped by the end of December 2017 whereas the remaining 86 hospitals (1 DHQ and 85 THQs) will be taken up for revamping in phase 2.

Comprehensive reforms have already started taking place in phase I hospitals including 100% increase in clinical and non-clinical staff, up-gradation of Infrastructure, establishment of new facilities, supply of a wide range of Bio-Medical and Non-biomedical equipment, use of latest technology and implementation of International protocols.



## Establishment of The New Units

The infrastructure work is speedily progressing in Phase -I hospitals through fast paced Civil, Electrical and sanitary interventions.

With a huge investment of more than 10 billion rupees the existing departments of the hospital will be improved along with the establishment of following new units:

- ICU
- CCU
- Dialysis Unit
- Physiotherapy Unit
- Burn Unit
- Mortuary
- Dental Unit
- Ct Scan (Trauma Center)
- Yellow Room
- Water Filtration Plant
- Cafeteria



State of the art health facilities are being established in phase-I DHQ/THQ hospitals

## Electrical Installations

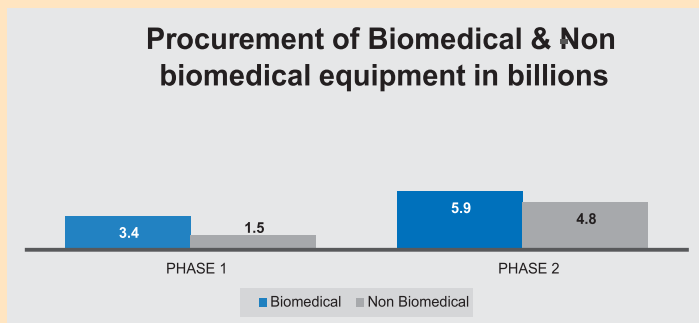
A remarkable reform in the revamping program is the installation of Express Line, Transformers, Generators and Dual Supply in DHQ/THQ hospitals. Express Line and Dual Supply have been already installed in 14 Phase-I hospitals promising 24/7 availability of electricity in the hospitals.





## Supply of Biomedical & Non Biomedical Equipment In Hospitals

A wide range of high quality Biomedical & Non-Biomedical equipment is being supplied in the DHQ/THQ hospitals to ensure quality healthcare service delivery and improved patient experience.



Non-Biomedical equipment including Industrial Exhaust, Synthetic Pillows, Fowler Bed Set, insect Killers, Executive Office Furniture, Electric Water Coolers, Gas Burners and Waste Bins has been already delivered in all 40 Phase1 hospitals whereas list of items consisting of Air conditioners, refrigerator, washing machine, bed sheets, blankets, air curtains, benches ventilators, ceiling fans etc. are being delivered.



## Installation of CT Scan Machines

A great achievement of revamping program is successful installation of CT scan machines in 5 DHQs of Punjab which are Kasur, Mianwali, Layyah, Bhakkar and Vehari. More CT scan machines will be installed in remaining DHQs soon.



## World Class Pathology Services In DHQ Chakwal

World Class Pathology services are made available in DHQ Chakwal.



## Achieved The Target of 100% Increase in Clinical and Nonclinical Staff

Under the revamping program, Phase -I hospitals have achieved the target of 100% increase in clinical and nonclinical staff of hospitals.

<b>NMS</b>	1525
<b>Consultants</b>	1710
<b>Nurses</b>	6532
<b>Women Medical Officer</b>	1300
<b>Emergency Medical Officer</b>	1350
<b>Allied Health Professional</b>	2130
<b>Pharmacist</b>	519
<b>Physiotherapist</b>	116
<b>TOTAL</b>	<b>15182</b>

## IT Facilities & Apps in DHQ/THQ Hospitals

A number of IT interventions are being introduced in the DHQ/THQ hospitals for systematic operations, safe recoding & storage of patient data, convenience and effective communication.



## Outsourcing Of Services to Improve Health Standards

The outsourced services include Janitorial, Security & Parking, MEP (Mechanical, Electrical & Plumbing), Generators, Pathology, Radiology, Cafeteria and Laundry. For the first time, Minimum Service Delivery Standards is being implemented in the hospitals to ensure International standard health facilities in the hospitals.

After DHQ Sheikhpura, DHQ Attock has been also accredited with Healthcare Commission. It firms our resolve that healthcare services can meet International standards if the effort is being made in the right direction.

## Queue Management System

Queue Management System launched by P&SHD. The aim of this system is to manage overall functioning of OPDs. Currently operational in Narowal & Bahawalnagar.

# Drug Control



## Revamping Of Chief Drug Controller Office

Primary & Secondary Healthcare Department has taken a special initiative for Revamping of Chief Drugs Controller Officer Punjab. The vision is “to be the leading regulatory body for drugs and medical devices with excellent professional and regulatory services that contribute to protect and improve of health in Punjab”.

CDC Office current set up with the establishment of following wings in order to execute its role:



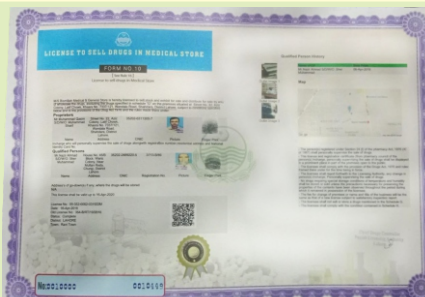
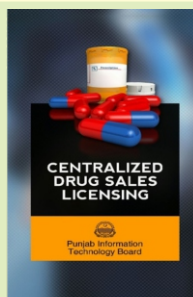
- Central Drug Sale Licensing Wing
- Pharmacovigilance and Surveillance Wing
- Drugs Manufacturing Unit Inspection Wing
- Complaint Cell & Integration Wing
- Point of Sales (POS) and Monitoring Wing



## Online Drug Sale Licence

A remarkable initiative of P&SHD is to restrain spurious drugs!

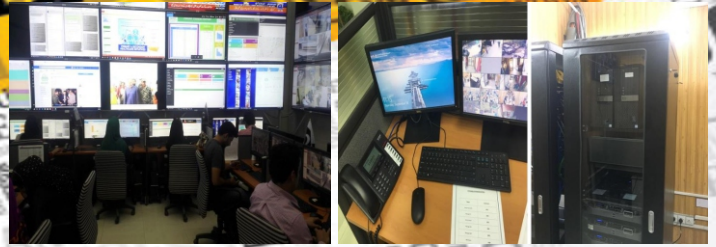
For the safety and convenience of people, P&SHD has linked all drug sale licenses to online system. Now all licenses will be issued online.





# Institutional Capacity

## TRAINING



### Health Information & Service Delivery Unit

P&SHD envisaged to implement its ambitious vision with the help of indigenous IT interventions / solutions. With this in view, HISDU was established in August 2016. HISDU performs the role of visceral backbone of the department. It ensures e-service delivery ensuring smooth and efficient transmission of directions, initiatives and requests for proper and timely disposal. It also helps to implement one window operation in the department.

A rundown Lab of Chief Chemical Examiner was converted into an efficient and smart work place which would act as central Hub for Data Collection, Software Development, Recruitments and Data Center.

### Key Achievements By HISDU

Key achievements by HISDU of this tenure are given below:

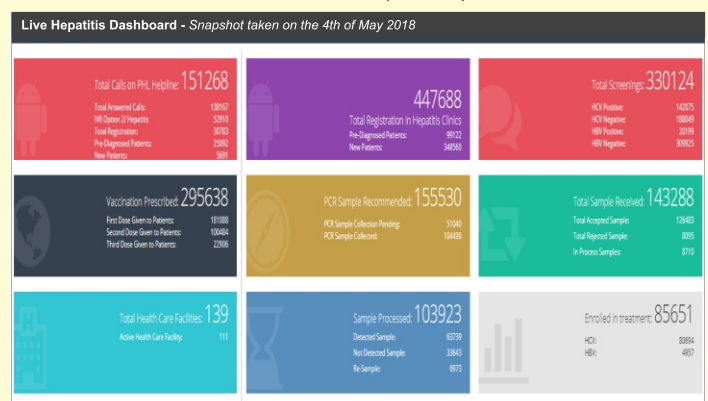
- Facilitation center to entertain Transfer, Posting, Leave and Retirement requests
- Nerve Center for development of portals and applications
- Network Operations Center for surveillance, IT & Hardware Support
- Command and Control Center for monitoring and coordination
- Centralized Human Resource Management System for managing staff
- Electronic Record Room for easy access and protecting record
- Queue Management System to streamline flow of patients
- Integrated Screening Application

- Vaccination Centre Finder App for locating nearest facility with vaccination facilities
- Centralized Public Address System
- Meeting Management System
- Web Portal for London Roadshow

### New Initiatives By HISDU

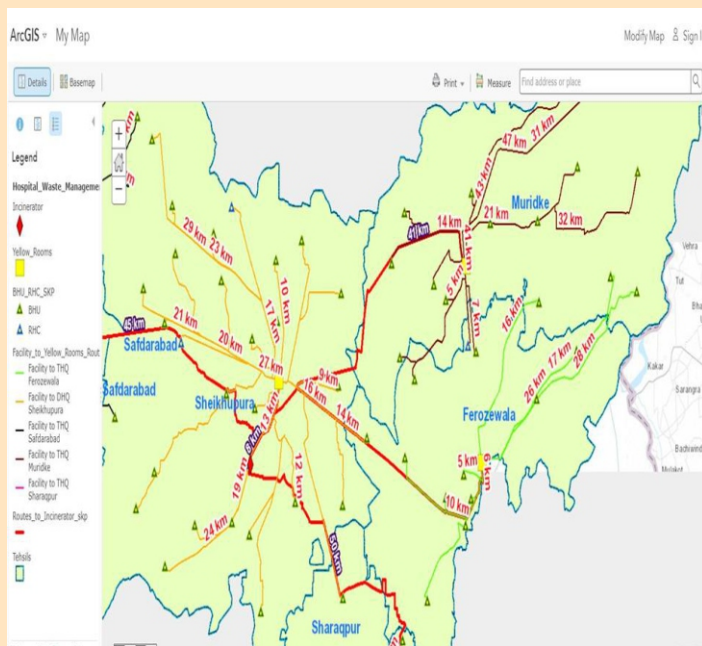
- Route plan for Hospital Waste Management System
- EPI Coverage plan for Rajanpur
- Scaling up of Hospital Management Information System in PMU operated hospitals
- GIS based dashboards for health facilities
- Redesigning and revamping of Integrated Screening App
- EMR for Lady Health Workers
- File Tracking System
- Prescription Management System Phase -II
- Medico Legal System enhancement
- PQCB ERP

### Electronic Medical Record (EMR) Dashboard





## Job Advertisement Portal



### 3rd Health Sector Donor Coordination Meeting

The Donors and Development Partners Coordination Meeting is an important forum for sharing health related activities of all development partners and have an overview of each Partner's activities, identifying thematic working areas with the aim to avoid duplication of activities and share activities for the upcoming year.

**Policy and Strategy Planning Unit**, Primary & Secondary Healthcare Department, Punjab had already arranged two Health Sector Coordination Meetings. The first Donors and Development Partners Coordination meeting was held on 17<sup>th</sup> March, 2015 and second on 7<sup>th</sup> January, 2016.

In continuation of this, 3<sup>rd</sup> Health Sector Donors and Development Partners Meeting was held on 7<sup>th</sup> February 2018 at Falettis Hotel, Lahore. The aim of the meeting was to share and discuss the activities & key challenges during 2017 and work plan of 2018 of the developments partners and donor coordination body. Program Director PSPU, Additional Secretary (Tech) P&SHD, Member Health P&D, Program Director IRMNCH & NP, Program Directors from all vertical programs, CEO, PPHA, Representatives from DFID, World Bank, Chief of Health, UNICEF, Program Specialist, UNFPA, PHE, FFP, USAID, GAIN, TRF+, Pathfinder, Nutrition International, FPAP, WHO, BRAC, PSPU and other renowned officers and professionals of the Department were attended the meeting.



### Training Of District Health Officers (Preventive)

To train District Health Officers (Preventive) about the operational aspects of NCDs Program Intervention such as Integrated Screening Desks and NCDs Clinics branding, android application, HR Placement, Logistics etc. a series of three training sessions was conducted at NCDs Program Office, on 29<sup>th</sup> September 2017 (First Batch – 12 Districts) and 02<sup>nd</sup> October (2 Batches – 24 Districts).



### Orientation Seminar on Breastfeeding Rules For Gynecologists and Pediatricians

**Policy and Strategic Planning Unit**, Primary and Secondary Healthcare Department with the support of UNICEF conducted two orientation Sessions on Breastfeeding Rules for Gynecologists and Pediatricians. The first seminar was held in Lahore on 22<sup>nd</sup> August 2017 at Pearl Continental Hotel and was organized with collaboration of Jang Forum. Similar orientation seminar was held on 25<sup>th</sup> September 2017 in Rawalpindi with pediatricians, gynecologists and nurses from Rawalpindi Division.



### Health Facility Assessment 2017

Health Facility Assessments (HFA) is a legal covenant of Policy & Strategic Planning Unit under Project Appraisal Document (PAD) signed with World Bank and the aims is to provide a comprehensive baseline for measuring progress overtime to reach the EPHS benchmarks for primary and secondary health care services. Two HFA have been conducted prior and third round of HFA is underway by PSPU.

### Lady Health Workers Program Evaluation

Evaluation of Lady Health Workers (LHWs) Program is one of the essential requirements of the Policy & Strategic Planning Unit to assess the performance of LHW Program. The Purpose of LHW evaluation is to explore and provide action oriented information for improving performance of the existing LHWs component and to identify a feasible model for community work in uncovered areas. TPV of LHWs program is underway by PSPU.



### Capacity Building Trainings of School Health Nutrition Supervisors

Trainings of School Health and Nutrition Supervisors throughout Punjab on revised Job descriptions, curriculum, screening, recording reporting tools were conducted from July onwards on the training package developed by PSPU. Trainings were conducted by Program Director DHDC and facilitators were pediatricians, eye specialist, dentist, master Trainers of SH&Ns from the respective districts and technical experts from PSPU. The logistic support for trainings was provided by TRF plus and was monitored by PSPU.



# Chapter 8

## Challenges







Provincial Health Policy & Strategy

Integration of Health Information Systems

Integrated Communication Unit

Deficient Referral Mechanism

Quality of Care for Maternal and Child Health

Integration of Overlapping Initiatives

Human Resource Management (Location Wise & Specialty Wise)

Ethics & Code of Conduct Policy

Ensuring Basic Health Services in the Peripheries

Addition of Seats, Posts and Promotions

Issues In Implementation and Operationalization of Minimum Service Delivery Standards

Shortage and Operational Issues Regarding Equipment at Health Facilities

Management and Capacity Building Issues of Healthcare Practitioners

## HEALTH & NUTRITION

*Exclusive Breastfeeding\**

**DID YOU KNOW?**



Every **2<sup>nd</sup>** child in

*Punjab of age less than 6 months gets exclusively breastfeeding and...*

More children are breastfed by the poor and less educated mothers than rich and more educated ones!



**EXCLUSIVE  
BREASTFEEDING**  
[42%]

**CONTINUED  
BREASTFEEDING**  
[61%]

3 out of 5 Children (age < 1 Year) in Punjab gets continued breastfeeding

*\* Percentage of infants under 6 months of age who are exclusively breastfed, and did not receive any other food or fluids.*

 **MICS**  
2017-18

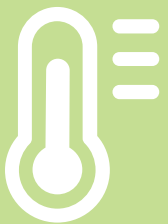


Bureau of Statistics  
Planning & Development Dept.  
Government of the Punjab



# Chapter 9

## Photo Gallery

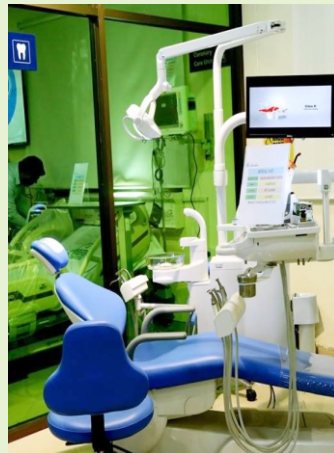
















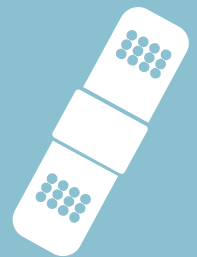






# Chapter 10

## Statistics





## Human Resource Position Filled in Teaching Hospitals

District	Proportion of Staff Position filled of Specialist			Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of Staff Position		
	Sanctioned	Filled	% age	Sanctioned	Filled	% age	Sanctioned	Filled	% age	Sanctioned	Filled	% age
<b>Bahawalpur</b>	135	78	58%	573	340	59%	1514	965	64%	630	489	78%
<b>Rahimyar Khan</b>	39	19	49%	292	258	88%	522	425	81%	1	0	0%
<b>D.G Khan</b>	32	28	88%	132	102	77%	124	104	84%	0	0	
<b>Faisalabad</b>	200	90	45%	1202	658	55%	1891	1501	79%	4705	3449	73%
<b>Gujranwala</b>	32	23	72%	121	110	91%	331	302	91%	0	0	
<b>Gujrat</b>	22	16	73%	84	49	58%	138	115	83%	0	0	
<b>Sialkot</b>	37	27	73%	156	84	54%	211	65	31%	113	112	99%
<b>Lahore</b>	402	198	49%	2514	1727	69%	5913	4984	84%	4043	3252	80%
<b>Multan</b>	25	21	84%	569	277	49%	674	555	82%	2439	1829	75%
<b>Sahiwal</b>	38	24	63%	192	115	60%	330	250	76%	433	254	59%
<b>Rawalpindi</b>	142	72	51%	359	275	77%	1225	1078	88%	430	363	84%
<b>Sargodha</b>	30	24	80%	152	99	65%	262	250	95%	441	316	72%
<b>TOTAL</b>	<b>1134</b>	<b>620</b>	<b>55%</b>	<b>6346</b>	<b>4094</b>	<b>65%</b>	<b>13135</b>	<b>10594</b>	<b>81%</b>	<b>13235</b>	<b>10064</b>	<b>76%</b>

(Source: DHIS, July 2018)



## Human Resource Position Filled in DHQ Hospitals

District	Proportion of Staff Position filled of Specialist			Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of Other Staff Position		
	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age
<b>Attock</b>	42	23	55%	145	62	43%	173	110	64%	0	0	
<b>Bahawalnagar</b>	31	20	65%	91	39	43%	147	88	60%	0	0	
<b>Bhakkar</b>	52	35	67%	218	50	23%	242	184	76%	411	317	77%
<b>Chakwal</b>	19	14	74%	113	53	47%	102	86	84%	0	0	
<b>Chiniot</b>	45	13	29%	136	27	20%	98	58	59%	75	34	45%
<b>Hafizabad</b>	38	19	50%	101	23	23%	128	120	94%	0	0	
<b>Jhang</b>	41	31	76%	180	89	49%	184	180	98%	211	166	79%
<b>Jhelum</b>	44	23	52%	161	52	32%	160	127	79%	0	0	
<b>Kasur</b>	48	48	100%	121	121	100%	163	163	100%	0	0	
<b>Khanewal</b>	41	17	41%	122	71	58%	135	74	55%	0	0	
<b>Khushab</b>	49	24	49%	180	42	23%	136	108	79%	0	0	
<b>Layyah</b>	49	34	69%	155	77	50%	315	277	88%	460	306	67%
<b>Lodhran</b>	19	15	79%	148	70	47%	123	111	90%	137	92	67%
<b>Mandi Bahauddin</b>	23	12	52%	106	49	46%	177	140	79%	0	0	
<b>Mianwali</b>	49	30	61%	167	61	37%	166	116	70%	79	40	51%
<b>Multan</b>	39	33	85%	186	129	69%	153	148	97%	177	177	100%
<b>Muzaffargarh</b>	19	18	95%	156	72	46%	111	108	97%	0	0	
<b>Nankana Sahib</b>	40	13	33%	144	35	24%	193	110	57%	308	209	68%
<b>Narowal</b>	21	13	62%	116	62	53%	162	161	99%	335	96	29%
<b>Okara</b>	66	48	73%	237	104	44%	267	260	97%	212	178	84%
<b>Pakpattan</b>	48	26	54%	73	18	25%	134	115	86%	0	0	
<b>Rajanpur</b>	42	18	43%	117	51	44%	123	61	50%	0	0	
<b>Sheikhupura</b>	37	23	62%	245	196	80%	337	277	82%	0	0	
<b>Toba Tek Singh</b>	47	27	57%	118	75	64%	173	130	75%	0	0	
<b>Vehari</b>	51	22	43%	148	60	41%	138	124	90%	0	0	
<b>TOTAL</b>	<b>1000</b>	<b>599</b>	<b>60%</b>	<b>3684</b>	<b>1688</b>	<b>46%</b>	<b>4240</b>	<b>3436</b>	<b>81%</b>	<b>2405</b>	<b>1615</b>	<b>67%</b>

(Source: DHIS, July 2018)

## THQ Hospitals

District	Proportion of Staff Position filled of Specialist			Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of Other Staff Position		
	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age
Attock	79	28	35%	240	112	47%	25	160	71%	85	80	94%
Bahawalnagar	44	19	43%	71	44	62%	175	169	97%	144	129	90%
Bahawalpur	51	32	63%	179	80	45%	288	251	87%	269	222	83%
Bhakkar	48	16	33%	60	27	45%	155	140	90%	87	67	77%
Chakwal	36	18	50%	90	44	49%	120	99	83%	82	80	98%
Chiniot	25	7	28%	7	25	35%	86	66	77%	79	36	46%
D.G Khan	22	14	64%	76	27	36%	85	44	52%	42	32	76%
Faisalabad	70	39	56%	237	127	54%	277	204	74%	341	248	73%
Gujranwala	43	26	60%	65	57	88%	119	119	100%	75	75	100%
Gujrat	47	30	64%	100	57	57%	231	176	76%	102	91	89%
Hafizabad	18	7	39%	4	1	25%	34	32	94%	0	0	
Jhang	44	15	34%	52	28	54%	162	135	83%	196	173	88%
Jhelum	38	14	37%	92	19	21%	76	39	51%	67	50	75%
Kasur	51	21	41%	138	65	47%	152	120	79%	0	0	
Khanewal	33	18	55%	130	81	62%	115	96	83%	40	37	93%
Khushab	56	16	29%	163	28	17%	225	162	72%	151	116	77%
Lahore	12	9	75%	13	12	92%	65	62	95%	16	15	94%
Layyah	62	29	47%	114	92	81%	220	193	88%	197	163	83%
Lodhran	21	14	67%	82	31	38%	153	145	95%	37	36	97%
Mandi Bahauddin	19	7	37%	46	14	30%	107	90	84%	89	60	67%
Mianwali	51	12	24%	98	31	32%	174	123	71%	97	38	39%
Multan	42	22	52%	101	35	35%	176	124	70%	157	130	83%
Muzaffargarh	18	11	61%	43	31	72%	33	28	85%	50	27	54%
Nankana Sahib	29	22	76%	62	29	47%	106	87	82%	38	33	87%
Narowal	11	8	73%	24	19	79%	29	29	100%	44	13	30%
Okara	26	9	35%	67	22	33%	75	74	99%	69	59	86%
Pakpattan	20	12	60%	38	10	26%	92	84	91%	0	0	

District	Proportion of Staff Position filled of Specialist			Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of Other Staff Position		
	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age
<b>Rahimyar Khan</b>	47	30	64%	159	98	62%	137	107	78%	0	0	
<b>Rajanpur</b>	31	20	65%	102	71	70%	147	115	78%	48	48	100%
<b>Rawalpindi</b>	144	77	53%	267	177	66%	410	267	65%	12	11	92%
<b>Sahiwal</b>	1	12	71%	34	26	76%	88	55	63%	0	0	
<b>Sargodha</b>	93	38	41%	203	101	50%	343	259	76%	158	92	58%
<b>Sheikhupura</b>	41	26	63%	41	25	61%	151	112	74%	1	1	100%
<b>Sialkot</b>	67	41	61%	169	105	62%	236	195	83%	107	91	85%
<b>Toba Tek Singh</b>	46	28	61%	125	51	41%	187	143	76%	0	0	
<b>Vehari</b>	44	26	59%	111	57	51%	210	197	94%	54	38	70%
<b>TOTAL</b>	<b>1546</b>	<b>773</b>	<b>50%</b>	<b>3667</b>	<b>1859</b>	<b>51%</b>	<b>5665</b>	<b>4501</b>	<b>79%</b>	<b>2934</b>	<b>2291</b>	<b>78%</b>

(Source: DHIS, July 2018)



## Rural Health Centres

District	Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of Staff Position		
Attock	5	5	100%	30	15	50%	197	151	77%
Bahawalnagar	10	8	80%	32	21	66%	400	366	92%
Bahawalpur	12	11	92%	50	36	72%	583	475	81%
Bhakkar	4	4	100%	20	14	70%	132	126	95%
Chakwal	10	8	80%	33	22	67%	369	307	83%
Chiniot	3	3	100%	18	10	56%	124	93	75%
D.G Khan	9	8	89%	43	40	93%	340	278	82%
Faisalabad	15	15	100%	70	46	66%	549	494	90%
Gujranwala	11	8	73%	43	41	95%	49	465	95%
Gujrat	9	8	89%	54	44	81%	410	290	71%
Hafizabad	7	7	100%	23	17	74%	242	210	87%
Jhang	19	14	74%	43	35	81%	239	215	90%
Jhelum	6	6	100%	38	16	42%	277	250	90%
Kasur	11	11	100%	53	48	91%	305	282	92%
Khanewal	7	5	71%	28	23	82%	216	178	82%
Khushab	5	4	80%	31	14	45%	182	153	84%
Lahore	4	4	100%	12	11	92%	207	205	99%
Layyah	3	3	100%	17	16	94%	184	130	71%
Lodhran	4	4	100%	17	13	76%	167	146	87%
Mandi Bahauddin	8	7	88%	40	26	65%	347	291	84%
Mianwali	10	6	60%	56	33	59%	357	307	86%
Multan	8	4	50%	51	41	80%	285	251	88%
Muzaffargarh	12	12	100%	61	49	80%	708	643	91%
Nankana Sahib	6	6	100%	38	30	79%	199	170	85%
Narowal	7	7	100%	21	21	100%	241	212	88%
Okara	10	10	100%	40	35	88%	374	355	95%
Pakpattan	4	4	100%	22	21	95%	183	169	92%
Rahimyar Khan	19	18	95%	78	69	88%	627	541	86%
Rajanpur	6	6	100%	37	30	81%	269	258	96%
Rawalpindi	8	7	88%	35	20	57%	283	240	85%
Sahiwal	11	9	82%	33	23	70%	263	198	75%
Sargodha	11	11	100%	38	29	76%	363	328	90%
Sheikhupura	7	7	100%	23	22	96%	275	258	94%
Sialkot	8	6	75%	45	43	96%	135	121	90%
Toba Tek Singh	9	9	100%	51	30	59%	331	303	92%
Vehari	14	10	71%	55	36	65%	515	474	92%
<b>Total</b>	<b>312</b>	<b>275</b>	<b>88%</b>	<b>1379</b>	<b>1040</b>	<b>75%</b>	<b>11370</b>	<b>9933</b>	<b>87%</b>

(Source: DHIS, July 2018)

## Basic Health Units

District	Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of other Staff Position		
	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age
Attock	63	53	84%	1376	1003	73%	289	240	83%
Bahawalnagar	102	88	86%	677	1568	94%	517	452	87%
Bahawalpur	73	59	81%	1535	1360	89%	385	317	82%
Bhakkar	40	28	70%	322	294	91%	192	175	91%
Chakwal	65	49	75%	1086	957	88%	174	169	97%
Chiniot	37	28	76%	752	532	71%	115	57	50%
D.G Khan	50	49	98%	1058	996	94%	100	99	99%
Faisalabad	168	164	98%	2809	2622	93%	471	464	99%
Gujranwala	84	69	82%	1792	1601	89%	542	488	90%
Gujrat	89	84	94%	2337	1564	67%	447	342	77%
Hafizabad	30	28	93%	438	399	91%		67	92%
Jhang	58	45	78%	666	558	84%	168	142	85%
Jhelum	48	37	77%	961	854	89%	312	260	83%
Kasur	77	76	99%	521	467	90%	200	132	66%
Khanewal	83	72	87%	1652	1499	91%	375	344	92%
Khushab	42	23	55%	799	709	89%	191	116	61%
Lahore	35	35	100%	882	862	98%	42	41	98%
Layyah	36	34	94%	878	839	96%	186	166	89%
Lodhran	48	48	100%	1098	1090	99%	153	153	100%
Mandi Bahauddin	45	28	62%	1100	978	89%	58	46	79%
Mianwali	40	37	93%	828	747	90%	157	148	94%
Multan	82	76	93%	1966	1853	94%	461	406	88%
Muzaffargarh	71	69	97%	2017	1772	88%	348	269	77%
Nankana Sahib	48	40	83%	940	795	85%	279	198	71%
Narowal	58	5	95%	1368	1161	85%	302	273	90%
Okara	96	74	77%	1905	1642	86%	480	459	96%
Pakpattan	55	54	98%	1088	1027	94%	63	59	94%

District	Proportion of Staff Position filled of General Medical Doctors			Proportion of Staff Position filled of Paramedical Staff			Proportion of other Staff Position		
	Sanctioned	Filled	%age	Sanctioned	Filled	%age	Sanctioned	Filled	%age
<b>Rahimyar Khan</b>	104	103	99%	1187	951	80%	201	155	77%
<b>Rajanpur</b>	33	33	100%	612	598	98%	95	94	99%
<b>Rawalpindi</b>	100	73	73%	1792	1298	72%	266	228	86%
<b>Sahiwal</b>	71	60	85%	583	473	81%	352	202	57%
<b>Sargodha</b>	132	92	70%	2488	2243	90%	623	492	79%
<b>Sheikhupura</b>	77	66	86%	1384	1230	89%	311	274	88%
<b>Sialkot</b>	91	89	98%	1081	952	88%	414	369	89%
<b>Toba Tek Singh</b>	69	65	94%	1387	1281	92%	104	100	96%
<b>Vehari</b>	73	70	96%	1225	1154	94%	229	217	95%
<b>Total</b>	<b>2473</b>	<b>2153</b>	<b>87%</b>	<b>45590</b>	<b>39929</b>	<b>88%</b>	<b>9675</b>	<b>8213</b>	<b>85%</b>

(Source: DHIS, July 2018)



## Outdoor Trends of DHQs

Table: Five Years Outdoor Trend of 25 DHQs Hospitals of Punjab

Specialty	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
<b>General OPD</b>	1,296,531	1,393,001	1,102,640	83,810	1,092,354	57,137	1,714,342
<b>Medicine</b>	721,624	774,654	769,370	91,039	1,024,513	54,042	1,807,787
<b>Surgery</b>	296,205	320,407	347,639	51,353	429,667	23,042	548,252
<b>Paediatrics</b>	637,413	744,002	796,71	76,348	1,046,522	42,418	1,637,131
<b>Eye</b>	470,850	488,685	533,887	64,685	656,580	29,070	857,055
<b>ENT</b>	222,494	264,777	266,638	32,910	301,647	20,855	423,516
<b>Orthopaedics</b>	143,262	155,435	200,238	25,972	264,663	12,685	445,312
<b>Psychiatry</b>	38,251	40,605	42,673	9,568	32,420	3,904	86,791
<b>Dental</b>	279,582	289,788	305,115	28,593	386,036	15,054	481,628
<b>Skin</b>	85,558	134,272	162,396	26,196	210,518	30,587	495,418
<b>OB/GYN</b>	378,090	398,709	398,326	55,838	476,044	57,089	798,210
<b>Emergency / Casualty</b>	1,620,852	1,838,594	1,990,951	0	3,078,060	0	5,614,877
<b>Homeo Case</b>	164,857	160,688	151,372	34,531	169,080	21,884	133,716
<b>Tibb/Unani Shifa Khana OPD Cases</b>	116,652	124,134	125,615	26,950	129,631	18,511	103,115
<b>Cardiology</b>	146,305	151,167	155,538	18,411	205,028	17,750	363,155
<b>Others</b>	373,512	440,796	393,114	30,935	562,681	34,419	1,091,669
<b>Grand Total</b>	6,992,038	7,719,714	7,742,223	657,139	10,065,444	438,447	16,601,974

(Source: DHIS, July 2018)

## Indoor Trends of DHQs

Table : Five Years Indoor Trend of 25 DHQs Hospitals of Punjab

Specialty	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Medicine	209,447	218,148	209,639	214,017	233,741	252,542	237,298
Surgery	166,234	171,064	167,299	174,479	169,721	214,599	192,461
Pediatrics	198,131	240,623	263,809	250,612	306,313	433,726	432,659
OB/GYN	116,327	1,453	122,641	131,737	158,628	206,148	271,594
Eye	39,174	30,928	35,842	38,581	41,040	49,062	50,097
ENT	10,698	11,390	9,100	10,398	10,522	13,729	12,399
Orthopedics	54,489	51,416	49,707	51,430	58,432	78,451	96,268
Cardiology	54,478	62,793	60,479	62,224	9,650	77,911	89,998
Neuro Surgery	378	814	2,035	654	37	2,785	3,256
Psychiatry	1,161	1,472	750	658	880	3,004	1,575
TB/Chest	21,238	21,237	22,509	27,359	29,015	36,748	27,725
Skin	1,055	13	0	250	0	7,237	1,859
Others	134,325	148,077	137,067	187,612	224,65	365,454	397,092
<b>Grand Total</b>	<b>1,006,752</b>	<b>1,079,377</b>	<b>1,080,877</b>	<b>1,150,011</b>	<b>1,275,987</b>	<b>1,741,396</b>	<b>1,814,281</b>

(Source: DHIS, July 2018)

## Outdoor Trends of THQs

Table: Five Years Outdoor Trend of THQs Hospitals of Punjab

Specialty	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Medical Ward	1,036,165	1,055,051	949,713	930,411	1,134,098	1,316,925	1,615,706
Surgical Ward	477,132	472,931	461,100	462,845	598,068	794,643	901,587
Paediatrics	1,267,540	1,403,027	1,321,413	1,312,726	1,704,362	2,360,252	3,091,198
OB/GYN	918,466	1,036,100	1,035,144	1,081,956	1,343,760	1,900,609	2,382,245
Eye Ward	382,753	483,036	591,030	618,034	786,380	1,023,201	1,182,158
ENT Ward	84,964	108,664	102,312	103,233	119,864	149,493	245,012
Orthopaedics	54,917	106,728	130,824	141,199	212,814	337,357	435,839
Cardiology Ward	29,292	49,721	77,429	96,271	93,951	114,236	169,078
Psychiatry Ward	13,419	20,018	21,000	6,371	7,380	17,456	25,486
Others	361,993	380,759	478,664	540,038	724,647	824,330	1,188,345
Dental Ward	394,441	450,830	499,145	537,191	623,915	841,106	1,139,683
Skin Ward	116,743	106,393	105,940	92,359	92,279	95,592	176,766
<b>General OPD</b>	<b>3,061,176</b>	<b>3,431,400</b>	<b>4,103,154</b>	<b>4,719,278</b>	<b>5,601,481</b>	<b>7,303,012</b>	<b>11,312,507</b>

## Indoor Trends of THQs

Table: Five Years Indoor Trend of THQs Hospitals of Punjab

Specialty	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Medical Ward	226,360	218,594	337,415	405,033	475,642	609,601	600,175
Surgical Ward	139,145	124,826	130,950	143,742	158,862	190,4	195,740
Pediatrics	145,515	155,562	183,877	221,571	280,095	378,120	414,333
OB/GYN	96,843	122,527	121,088	155,687	206,639	266,966	326,296
Eye Ward	7,995	7,698	10,602	13,372	18,189	28,963	29,933
ENT Ward	2,188	3,131	2,939	3,847	3,456	4,121	5,123
Orthoopedics	3,203	7,926	8,018	9,422	13,177	19,246	19,005
Cardiology Ward	967	939	2,576	6,697	6,887	11,550	21,220
Psychiatry Ward	109	74	92	0	3	3,217	298
Neuro Surgery	30	8	6	0	0	0	497
TB/Chest	792	7,517	838	86	93	1,530	1,825
Skin	10	86	577	4	307	4,515	290
Others	55,491	75,263	92,783	107,619	135,749	138,383	138,482
<b>Grand Total</b>	<b>675,275</b>	<b>721,177</b>	<b>891,102</b>	<b>1,067,080</b>	<b>1,284,968</b>	<b>1,656,627</b>	<b>1,753,217</b>

(Source: DHIS, July 2018)

## National and International Commitments

Millennium Development Goals (MDGs) were launched in developing countries for the improvement of quality of human lives. Eight Millennium Development goals have been the overarching development framework for the world for the last 15 years. Out of these, Goal 4 (Reduce Child Mortality), Goal 5 (Improve Maternal Health) & Goal 6 (Combat HIV/AIDS, Malaria & other Diseases) are directly related to health. The MDGs related to Health aimed at improving national and local health infrastructure and programs with the goal of decreasing preventable deaths among vulnerable populations.

### Targets and Status of Mdg

Pakistan targets along with national values are shown in the table below



Table 1 MDG Summary Pakistan

Goals	Indicators (Health Relevant MDGs)	Target	National Values	Status
Goal 4: Reduce Child Mortality	Under 5 Mortality Rate (per 1000 live births)	52	89	Off Track
	Infant Mortality Rate(per 1000 live births)	40	74	Off Track
	Proportion of fully immunized children (12-23 months)	<90	80	Off Track
	Proportion of children under 5 who suffer from diarrhea in the last thirty days	>10	8	Achieved
Goal 5: Improve Maternal Health	Maternal Mortality Ratio (per 100,000 live births)	140	276	Off Track
	Proportion of birth attended by SBA	<90	52.1	Off Track
	Contraceptive Prevalence Rate	55	35.4	Off Track
Goal 7: Combat HIV/AIDS, Malaria & other Diseases	HIV prevalence among vulnerable groups			
	IDU	▼50%	37.4	Off Track
	FSW		0.8	Off Track
	MSW	85	3.1	Off Track
	TB cases detected and cured under DOTS		91	Achieved

Table 1 shows that Pakistan was not able to achieve the targets set in MDGs for Goal 4, 5 & 6. The unfinished agenda of MDGs was transformed into Sustainable Development Goals in August 2015. The SDGs contain 17 goals with 169 targets covering a broad range of sustainable development issues to be achieved by 2030. These include ending poverty and hunger, improving health and education, making cities more sustainable, combating climate change and protecting oceans and forests, SDGs related to health are mentioned below:

- SDG-3 (Ensure healthy lives and promote well-being for all) is one of the 17 Global goals which is directly related to health.
- SDG-2 (End hunger, achieve food security and improved nutrition and promote sustainable agriculture) is dealing with malnutrition and indirectly related to health.

Government of Punjab has endorsed the SDGs and is fully committed to achieve the targets set for 2030.

# TIME LINE

## 2018

- January** - Installation of new incinerators
- February** - High Risk 2: More than 900,000 people screened
- March** - BIRU launched Pilot BHUs
- April** - Promulgation of Hospital Bill
- May** - Honorable Chief Minister visit of MCHD Establishment

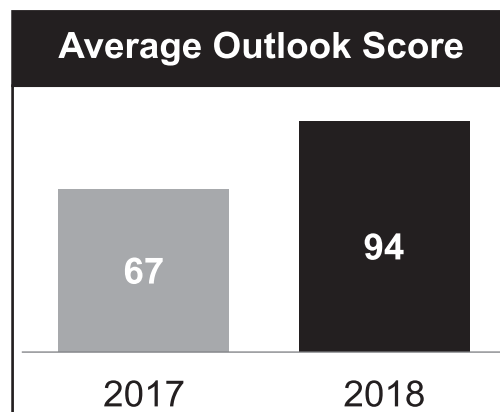
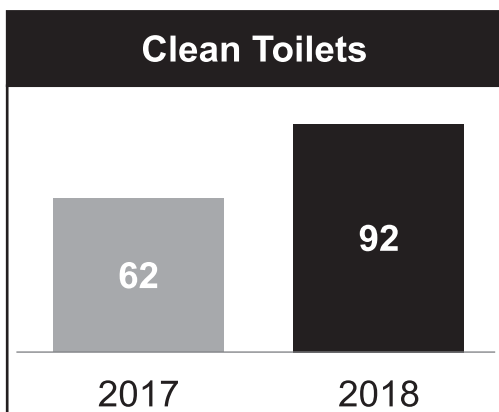
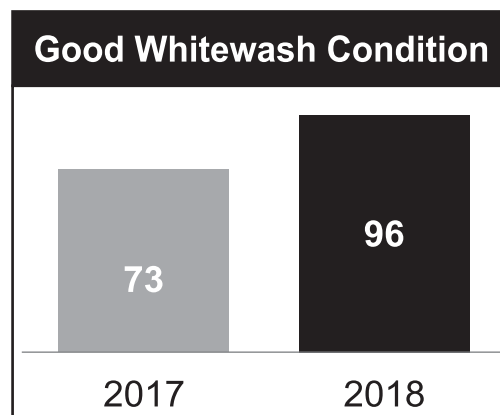
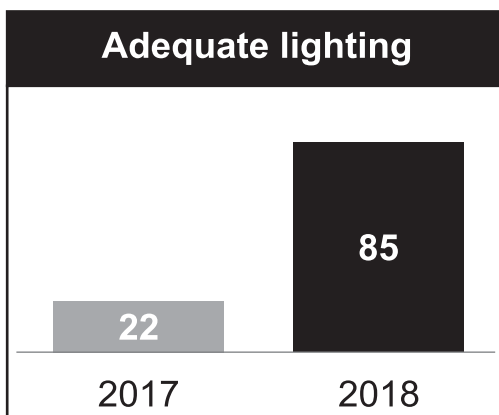
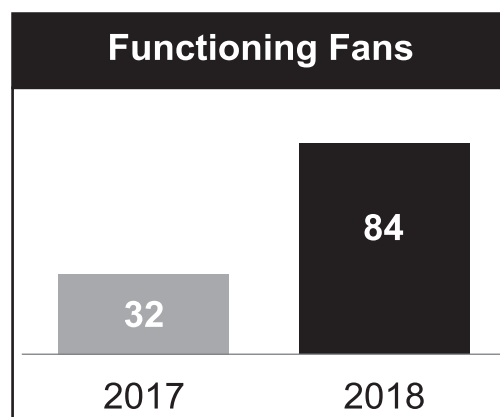
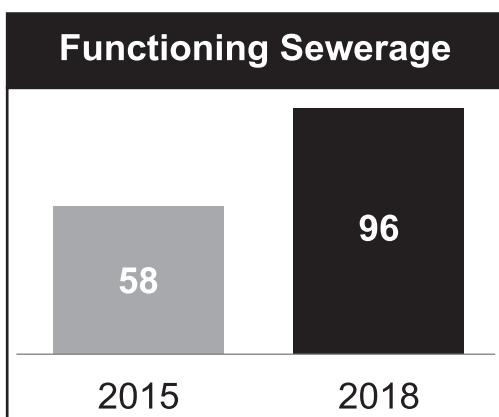
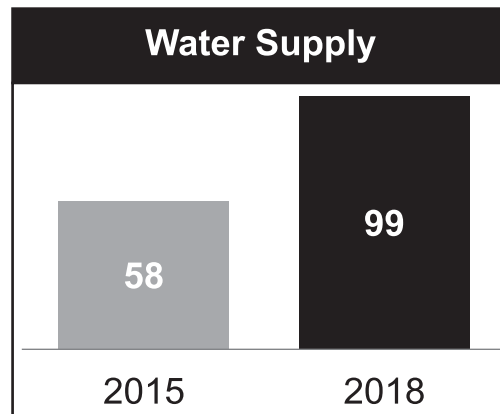
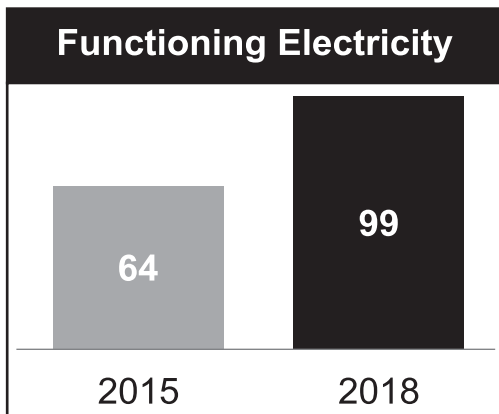
## 2017

- January** - Approval of Hospital Bill, Honorable Chief Minister for Amendments Management System
- February** - Honorable Diseases and Health Control Policy established
- March** - Hospital Emergency Response Team made part of revamping program
- April** - Hospital Management System operational. First supply bonded
- May** - First Hospital received MSDS accreditation
- June** - Door to door Medicine Delivery AIGS, JAMCH and TB
- July** - 100th Birth Anniversary Service launched
- August** - 380,000 people screened
- September** - Centralized Drug Sale licensing begins
- October** - Hospital Information System (HIS) established in 110 Karnataka
- November** - Hospital Ordinance promulgated
- December** - Hospital Police screening of 68,000 personnel

## 2016

- January** - Primary and Secondary Health Care Department made functional
- February** - Journey towards ISO of Drug Testing Laboratories begins
- March** - Journey towards high quality Procurement Regime begins
- April** - Revamping of Hospital Drug Procurement mode conceptualized
- May** - Jointed Collaborating Initiative Pilot districts
- June** - Ambulance 40 Revamping Program conceptualized
- July** - Hospital Project starts Phase 1, 25 BHU and 13 THU
- August** - Creation of Health Information & Unit (HISIU)
- September** - PNU established implementation of 40 Hospital Revamping
- October** - "Sahel Khatmat Awar" approved. Rollouts launched
- November** - "Sahel Khatmat Awar" approved. Rollouts launched
- December** - Program of 14 Mobile Health Units

## Functionality of Primary Health Facilities, %





# Annual Health Report

## 2017-18

