

Health Facility Assessment: Summary Findings

District Buner (September-November 2005)

Current Situation of MNH Services

INDICATORS	RHC n= 2	THQ n = 3	DHQ n=1
Basic Emergency Obstetric and Neonatal Care (EmONC)	<ul style="list-style-type: none"> Basic Emergency Obstetric and Neonatal Care (EmONC) services were not available in any RHC. 	<ul style="list-style-type: none"> Basic Emergency Obstetric and Neonatal Care (EmONC) services were not available in any THQ hospital 	<ul style="list-style-type: none"> Basic Emergency Obstetric and Neonatal Care (EmONC) services were available
Comprehensive Emergency Obstetric and Neonatal Care (EmONC)		<ul style="list-style-type: none"> Comprehensive Emergency Obstetric and Neonatal Care (EmONC) services were not available in any THQ hospital 	<ul style="list-style-type: none"> Comprehensive Emergency Obstetric and Neonatal Care (EmONC) services were available
C-section as percentage of total births at facility		<ul style="list-style-type: none"> No C-section was reported out of total births (38) at facility during 2004 	<ul style="list-style-type: none"> 9% (76) out of the total births (809) at facility during 2004
MNH Service delivery protocols availability	<ul style="list-style-type: none"> Only one RHC had Service delivery protocols for postnatal care, emergency obstetric care and family planning 	<ul style="list-style-type: none"> None of the service delivery protocols for Maternal and neonatal services was available in any THQ hospitals 	<ul style="list-style-type: none"> All MNH Service delivery protocols were available
Supervisory visits	<ul style="list-style-type: none"> Supervisory visits were conducted 	<ul style="list-style-type: none"> Supervisory visits were conducted 	<ul style="list-style-type: none"> Supervisory visits were conducted
MNH Essential drugs/supplies, Stock position	<ul style="list-style-type: none"> Injectable & Oral antibiotics, Tablet Iron and MNH supplies were available only in 1RHC Injectable Oxytoncin and Neonatal Eye Ointment were not available in any RHC 	<ul style="list-style-type: none"> Injectable antibiotics were available in 2 THQs and Tablet Iron was available only in 1THQ hospital Injectable Oxytoncin, Neonatal Eye Ointment and Oral Anitbiontics were not available in any THQ hospital 	<ul style="list-style-type: none"> All essential MNH drugs were available except Injectable Antibiotics and neonatal eye ointment
Human Resource	<ul style="list-style-type: none"> The posts of WMOs were vacant in both RHCs Posts of LHV were occupied 	<ul style="list-style-type: none"> The posts of Gynecologist, Pediatrician and Anesthetist were vacant in all THQ hospitals 2 THQ hospitals had WMOs while post was vacant in third The posts of LHVs was vacant in all THQ hospitals 	<ul style="list-style-type: none"> The posts of Gynecologist and Pediatrician were filled while the posts of anesthetist was vacant One WMO and one LHV was posted in DHQ hospital
Number of facilities sending HMIS Reports for the month prior to survey	<ul style="list-style-type: none"> Monthly HMIS report was sent by all RHC 	<ul style="list-style-type: none"> Monthly HMIS report was sent by all THQs 	<ul style="list-style-type: none"> Monthly HMIS report was not sent

Recommendations

- ❖ The availability of Basic Emergency Obstetric and Neonatal Care (EmONC) services must be ensured in all health facilities by providing missing component of services
- ❖ The Comprehensive EmONC services must be made available in THQ and DHQ level
- ❖ The availability of service delivery protocols at RHCs, THQ and DHQ hospitals must be ensured through dialogue with DHMTs.
- ❖ Availability of all essential MNH drugs/supplies must be ensured in all public health facilities
- ❖ The availability of Gynecologists, Pediatrician and Anesthetist must be ensured in all THQ and DHQ hospitals devising some innovative approaches.
- ❖ The availability of WMOs in all types of health facilities and additional posts in THQ/DHQ hospitals is required to expand the MNH services
- ❖ Innovative approaches are required to make the availability of female staff (LHV, Midwife) in all types of health facilities.