

# Health Facility Assessment: Summary Findings

## District Jafferabad (September-November 2005)

### Current Situation of MNH Services

| INDICATORS  | RHC n= 1  | THQ n = 1   | DHQ n=1   |
|---|---|---|---|
| Basic Emergency Obstetric and Neonatal Care (EmONC)                     | <ul style="list-style-type: none"> <li>Basic Emergency Obstetric and Neonatal Care (EmONC) services were available</li> </ul>                                       | <ul style="list-style-type: none"> <li>Basic Emergency Obstetric and Neonatal Care (EmONC) services were not available.</li> </ul>  | <ul style="list-style-type: none"> <li>Basic Emergency Obstetric and Neonatal Care (EmONC) services were available</li> </ul>   |
| Comprehensive Emergency Obstetric and Neonatal Care (EmONC)             |   | <ul style="list-style-type: none"> <li>Comprehensive Emergency Obstetric and Neonatal Care (EmONC) services were not available</li> </ul>                                   | <ul style="list-style-type: none"> <li>Comprehensive Emergency Obstetric and Neonatal Care (EmONC) services were not available</li> </ul>   |
| C-section as percentage of total births at facility                     |   | <ul style="list-style-type: none"> <li>No C-section and no birth was reported during 2004</li> </ul>  | <ul style="list-style-type: none"> <li>No C-section was reported out of total births (21) at facility during 2004</li> </ul>  |
| Service delivery protocols  | <ul style="list-style-type: none"> <li>Protocols for postnatal care, newborn care, newborn resuscitation and neonatal asphyxia management were available</li> </ul> | <ul style="list-style-type: none"> <li>None of the service delivery protocol for Maternal and neonatal services was available</li> </ul>                                    | <ul style="list-style-type: none"> <li>All Service delivery protocols were available except Eclampsia, C-section, newborn resuscitation and Neonatal asphyxia management</li> </ul>     |
| Supervisory visits  | <ul style="list-style-type: none"> <li>Supervisory visits were conducted</li> </ul>   | <ul style="list-style-type: none"> <li>Supervisory visits were conducted</li> </ul>   | <ul style="list-style-type: none"> <li>Supervisory visits were conducted</li> </ul>   |
| MNH Essential drugs/supplies, Stock position                            | <ul style="list-style-type: none"> <li>All essential MNH drugs were available except Injectable Oxytocin</li> </ul>   | <ul style="list-style-type: none"> <li>All essential drugs except Tablet iron, Neonatal Ointment and Injectable Oxytocin were available</li> </ul>                          | <ul style="list-style-type: none"> <li>All essential MNH drugs were available except neonatal eye ointment</li> </ul>   |
| Human Resource  | <ul style="list-style-type: none"> <li>The post of WMO was existing but lying vacant,</li> <li>Posts of LHV was occupied</li> </ul>                                 | <ul style="list-style-type: none"> <li>The posts of Gynecologist, Pediatrician and Anesthetist were lying vacant</li> <li>The posts of WMO and LHV were occupied</li> </ul> | <ul style="list-style-type: none"> <li>Gynecologist was available</li> <li>Pediatrician and Anesthetist were not available</li> <li>The posts of WMOs and LHVs were occupied</li> </ul> |
| Number of facilities sending HMIS Reports for the month prior to survey | <ul style="list-style-type: none"> <li>Monthly HMIS report was sent</li> </ul>  | <ul style="list-style-type: none"> <li>Monthly HMIS report was sent</li> </ul>  | <ul style="list-style-type: none"> <li>Monthly HMIS report was sent</li> </ul>  |

## Recommendations

- ❖ The availability of Basic and Comprehensive Emergency Obstetric and Neonatal Care (EmONC) services must be ensured at THQ and DHQ hospitals by providing missing components of services
- ❖ 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 and Pediatrician 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
- ❖ The posts of midwifery must be created and Innovative approaches are required to make the availability of female staff (LHV, Midwife) in all types of health facilities.