PRESBYTERIAN HOSPITAL AGOGO SUMMARIZED ANNUAL REPORT JANUARY – DECEMBER 2006

1.0 <u>INTRODUCTION</u>

Presbyterian Hospital, Agogo, was established in March, 1931, and has a bed complement of 250. It provides medical care as well as specialized care in ophthalmology, general surgery, obstetrics/gynaecology and paediatrics. It is accredited by the Ghana Medical and Dental Council to train medical housemen, by the Ghana Pharmacy Council to train pharmacy housemen and by the Ghana College of Physicians and Surgeons to train residents (doctors training to be specialists). It is also a MOH/WHO designated centre for training in the surgical management of buruli ulcer. In the Ashanti Region, it is second to only Komfo Anokye Teaching Hospital in terms of size, range of service delivery and utilization. It is the District Hospital for Asante-Akyem North.

2.0 STRATEGIC OBJECTIVE

The strategic objectives for the year were:

- To increase access to health services to the poor and sick, people living with HIV/AIDS (PLWHA) and the vulnerable
- To improve the quality of Care
- To improve financial and human resources mobilization and management
- To increase efficiency in resource utilization
- To improve collaboration and networking with MOH/GHS and other Stakeholders

3.0 HUMAN RESOURCES

3.1 <u>STAFF STRENGTH</u>

As at the close of the year, Agogo Presbyterian Hospital had a staff strength of 312, detailed out as follows:

- 11 Doctors including 4 Specialists, 2 Senior Medical Officers, 2 Residents, 1 Medical Officer and 2 House Officers.

- 89 Nurses of all grades including 4 Nurse Anaesthetists
- 2 Medical Assistants
- 2 Pharmacists
- 2 Laboratory Technologists
- 1 Principal Technical Officer (X-Ray)
- 205 other paramedical and service staff

3.2 <u>IN-COMING STAFF</u>

A total of 16 new members of staff joined the hospital. They include:

- 4 Doctors (2 Residents and 2 House Officers)
- 9 Newly qualified Nurses
- 1 Accountant
- 2 Health Aides

3.3 <u>STAFF WASTAGE</u>

Twenty (20) members of staff left the hospital as follows:

- 2 Medical Officers (1transferred to Tamale by the GHS; the other, a German, returned home)
- 3 House Officers who completed their rotations
- 1 Pharmacist released to the Methodist Hospital at Ankaase on request.
- 1 Staff Nurse who resigned
- 1 Midwifery Superintendent who was transferred to Enchi Presby PHC
- 1 Health Aide and 1 Washerman who both vacated post
- 10 members of staff of various grades who retired.

3.4 <u>CAPACITY BUILDING</u>

3.4.1 SPONSORED TRAINING

The hospital provided training sponsorship for 6 serving officers and 21 continuing and fresh student nurses at Agogo Nurses' Training College, as well as 1 continuing student nurse at Bawku Nurses' Training College.

3.4.2 <u>IN-SERVICE TRAINING</u>

In-Service Training workshops covering sixteen (16) different topics were organized by the hospital during the year. A total expenditure of ¢19,618,000.00 was incurred on these workshops. Each member of staff participated in one workshop or another.

4.0 PHARMACY PRODUCTION UNIT

This unit of the Pharmacy Department produced 5,036 bottles of intravenous fluids during the year which yielded a total revenue of ¢64,466,750.00. The direct production cost was ¢31,072,260.00 indicating a gross margin of ¢33,394,490.00 or 107.5%. But for a crack in the distillation plant, the production level could have been one hundred percent higher. Since the unit commenced operation in May, 2001, all intravenous fluids produced have been used with very satisfactory results.

5.0 <u>SERVICE OUTPUTS</u>

SERVICE	2005	2006	% CHANGE
OPD ATTENDANCE: General Eye TOTAL	56392	65066	15.4?
	17858	19080	6.8?
	74250	84146	13.3?
ADMISSION: General Eye TOTAL	8121	8261	1.7?
	571	693	21.4?
	8692	8954	3.0?
OPERATIONS (GENERAL) Major Minor TOTAL	1050	1143	8.9?
	1155	1335	15.6?
	2202	2478	12.5?

SERVICE	2005	2006	% CHANGE
OPERATIONS (EYE) Major Minor TOTAL	701 314 1015	772 130 902	10.1? 58.6? 11.1?
GRAND TOTAL (OPERATIONS	3220	3380	5.0?
DELIVERIES: Single Multiple Prematurity TOTAL	998 28 289 1315	1116 47 170 1333	11.8? 67.9? 41.2? 1.4?
MATERNAL DEATHS	5	8	60.0?
NEONATAL DEATHS	26	17	34.6?
ANTENATAL ATTENDANCE	5753	5424	5.7?
POSTNATAL ATTENDANCE	1329	804	39.5?
LABORATORY INVESTIGATIONS	95216	65803	30.9?*
X-RAY INVESTIGATIONS	3046	3611	18.5?
ULTRASOUND INVESTIGATIONS	1613	1818	12.7?
TOTAL DEATHS (Death Rate)	392	339	13.5?

^{*} The 30.9% reduction in laboratory investigations was due to the closure of the laboratory block for rehabilitation in June and subsequent relocation of the department to a smaller area.

6.0 EXEMPTIONS

6.1 POOR & SICK

A total of 169 patients declared "poor and sick" received free medical care at a total cost of ϕ 59,138,500.00 which was wholly financed from remittance from EMS, Stuttgart, Germany, into the Poor and Sick Account of the hospital.

6.2 <u>HIV/AIDS PATIENTS</u>

158 HIV/AIDS patients also received free medical treatment at a total cost of ϕ 19,968,300.00 which was absorbed by the hospital.

6.3 GOVERNMENT EXEMPTION POLICY: MATERNAL DELIVERIES

As at the close of year, reimbursement to the hospital by government to the tune of approximately ¢200 million remained outstanding. The amount is in respect of free maternal deliveries carried over from 2005. No free maternal delivery services were provided throughout 2006.

7.0 **HEALTH INSURANCE**

From January to December, the level of operation of the Health Insurance Scheme in the hospital is depicted by the following records:

Total no. of cases treated: 24,043 (23.6% of all cases treated)

Total cost or service charge: ¢3,628,593,577.00 (40% of total service

Revenue)

Total amount paid by Insurance Schemes:

¢3,248,313,991.00 (89.5% of total service

charge)

Outstanding Payment: ¢380,279,586.00 (10.5% of total service

Charge)

8.0 FINANCE

8.1 INCOME & EXPENDITURE ACCOUNT

8.1.1 **INCOME**

The total income of the hospital for the year was &epsilon 21,859,407,771.00. The major income sources contributed to the total income in the following proportions:

- Government Subvention : 53.2%

- Internally Generated Income : 44.9%

Overseas Partners' Contribution

and other Donations : 1.9%

8.1.2 EXPENDITURE

Total recurrent expenditure was & 21,605,050,893.00 out of which & 14,159,390,334.00 or & 65.5% was on personal emoluments.

8.2 DEVELOPMENT EXPENDITURE

Development expenditure for the year was ¢623,785,606.00 detailed out as follows:

- Constructional Works : ¢526,277,606.00

- Purchase of Medical Equipment : ¢79,350,000.00

- Purchase of Furniture : ¢18,158,000.00

9.0 NOTABLE EVENTS

9.1 INTERNATIONAL WORKSHOP ON BURULI ULCER

An international workshop on the surgical management of buruli ulcer organized by the WHO in collaboration with the Ministry of Health was hosted by Agogo Hospital from 15th May to 9th June. Twenty-one (21) Doctors from eleven countries participated in the workshop during which 105 buruli ulcer patients were treated.

9.2 MALARIA VACCINE PROJECT

A malaria vaccine project was launched in Agogo Hospital on 6th October, 2006. The hospital is one of eight sites in Africa chosen for the project which involves the clinical trial of a malaria vaccine candidate reputed to be the most advanced in the world. The Kumasi Centre for Collaborative Research in Tropical Medicine (KCCR) is carrying out the project in collaboration with the School of Medical Sciences, KNUST, Kumasi.

9.3 HAND-OVER OF DONATED X-RAY UNIT

A complete X-Ray Unit, with accompanying film processor, valued at approximately ¢1.8 billion and donated by EPMF, Switzerland was handed over to the hospital on 9th December, 2006. The equipment was handed over by Mr. H. R. Roth, Chairman of EPMF, Switzerland and received by Rt. Rev. (Dr.) Yaw Frimpong-Manso, Moderator of the General Assembly of the Presbyterian Church of Ghana.

10.0 MAIN ACHIEVEMENTS

- Successful containment of increasing patient load resulting from the health insurance scheme.
- Completion of extension and rehabilitation of Laboratory Department.
- Successful hosting of international workshop on the surgical management of buruli ulcer from 15th May to 9th June.
- Fruitful collaboration with Kumasi Centre for Collaborative Research into Tropical Medicine and School of Medial Sciences of KNUST, leading to the selection of the hospital as one of eight sites in Africa for a Malaria vaccine project.
- Purchase of oxygen concentrator which produces oxygen from atmospheric air.
- Acquisition of a new x-ray unit with film processor to replace an obsolete one.

11.0 MAIN CONSTRAINTS/CHALLENGES

- Failure of Ministry of Health to reimburse the hospital with an amount of approximately ¢200 million being expenses on free maternal deliveries dating back to year 2005.
- Cracked distiller of Pharmacy Production Unit causing a considerable reduction in production levels.
- Extreme difficulty in paying staff on unmechanized payroll following the upward review of salaries of health personnel.
- Inadequate number of nurses/midwives.
- Increasing workload on staff as a direct consequence of the national health insurance scheme.
- Inadequate space in the Medical Records Department.

12.0 WAY FORWARD

- Pressurize the Ministry of Health to reimburse the hospital with all outstanding amounts in respect of the care of exempt cases.
- Replace cracked distiller of Pharmacy Production Unit.
- Pursue mechanization of staff on unmechanized payroll.
- Continue sponsorship of student nurses.
- Extend medical records department.
- Implement three-year (2007-2009) strategic plan.

13.0 ACKNOWLEDGEMENT

Presbyterian Hospital, Agogo, wishes to acknowledge the special contributions of the following organizations to the work of the hospital during the year.

- Rev. Ernst Peyer Memorial Foundation (EPMF) for the donation of an X-Ray Unit valued at approximately \$\phi 1.80\$ billion.
- KCCR for co-financing the extension, rehabilitation and refurbishing of the laboratory department.
- EED for the continued sponsorship of expatriate Medical Specialist to work in the hospital.
- Evangel Reformed Church of Herzogenbuchsee, Switzerland, for providing US\$30,136.00 for the rehabilitation and extension of the laboratory department.
- World Vision Ghana for the donation of drugs and other medical items.
- DIFAM for the donation of TB drugs and other medical consumables.
- EMS, ICCO and Kerkinactie for their recurrent budgetary support.

THOMAS MENSAH GENERAL MANAGER