**Management Memorandum from Mulanje Mission Hospital**

**Activity report 1st January 2020 - 31st December 2020, covering 12 months**

**1. Hospital issues**

**1.1 Activity report**

The table below shows a summary of hospital and community activities for the last 12 months.

**Inpatient and outpatient services January 2020 – December 2020**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|   | **2019-20 Q3** | **2019-20 Q4** | **2020-2021 Q1** | **2020-21 Q2** |
| **MATERNITY SERVICES** |  |  |  |  |
| New antenatal attendance | 820 | 819 | 722 | 697 |
| Deliveries | 815 | 765 | 732 | 757 |
| Caesarian section | 195 | 176 | 181 | 206 |
| **FAMILY PLANNING** |  |  |  |  |
| Number of persons receiving 3 month OCP | 740 | 173 | 49 | 108 |
| Numbero of persons receiving depo-provera | 3838 | 3936 | 3650 | 4047 |
| **CHILD HEALTH** |  |  |  |  |
| No of fully immunised under 1 Children | 495 |  499 | 472 | 468 |
| Unnderweight under 5s attending clinic | 71 | 69 | 96 | 64 |
| **OUT-PATIENT SERVICES** |  |  |  |  |
| Out-patient attendance - under 5s | 1513 | 1349 | 4945 | 3897 |
| Out-patient attendance – all | 5718 | 4929 | 12881 | 10472 |
| HIV confirmed poitive (15-49 yrs) | 299 | 265 | 205 | 201 |
| ART Clinic attendance | 7576 | 6686 | 7423 | 6374 |
| NCD Clinic attendance | Currently 2100 patients registered |
| **IN-PATIENT SERVICES** |  |  |  |  |
| In - patient admissions | 1980 | 1951 | 2130 | 1770 |
| In-patient Deaths | 40 | 35 | 39 | 48 |
| IP death rate ( %) | 2 | 1.8 | 1.8 | 2.7 |
|  |  |  |  |  |

**Source:** MMH HMIS files

**1.2 Nursing services**

***Quality improvement programs***

Quality improvement services in the period under review were vibrant following establishment of new teams. The hospital managed to set up a quality improvement support team (QIST) which oversees all quality improvement activities at the hospital. The team is comprised of heads of ward and other sections.

Under infection prevention activities, monitoring was done through quarterly assessments and the hospital continues to adhere to IP practices. There are new guidelines that have been put in place by government and therefore MMH has developed an action plan to ensure implementation of the new guidelines.

Reproductive health activities were also monitored and although the overall aggregate dropped from 68% in 2019 to 68% in 2020, there was significant improvement in some departments which scored as low as 12% in 2019 to 60% in 2020. Other departments which scored up to 100% in 2019 had slightly dropped in 2020. The drop can be attributed to lack of quarterly monitoring. The team agreed to strengthen monitoring activities to improve performance.

In the year under review, the hospital also introduced 5S activities. This QI program emphasises on keeping environment organised. 5S stands for Sorting, Setting, Standardising, Shinning and Sustaining. Malawi Ministry of health recommends this as a baseline for all quality improvement activities. Two Nurses were trained with funding from Amref and they are championing the program.

 ***Maternal Child health Services***

MMH continues to provide quality maternal child health services. In a research study conducted by Amref whose results were disseminated in August 2020, MMH was found to be leading in provision of care among the study facilities. In the past few months maternity work improvement team has worked toward reducing deaths that are caused by birth Asphyxia.

Currently rate of birth asphyxia is below 3% and rate of post Caesarean infection is below 1%.

***Covid 19***

Mulanje Mission Hospital has joined Malawi government in the fight against Covid activities. The hospital`s response began with the first wave and continues to fight in the second wave.

A Covid team was put in place to champion Covid response activities. To reduce spread of the virus within the hospital, MMH has put in place a screening point where all people going into the hospital are screened for Covid symptoms and those with symptoms are attended to separately. In addition, patient visitation is restricted and only guardian are allowed in the wards.

The hospital provides testing services. Initially started with PCR tests and currently using rapid tests which have improved care as the test results are instant. Sor far over 250 tests have been conducted at the hospital.

MMH also provides inpatient care for Covid patient. It has a four bedded isolation unit for this purpose. During the first wave, five patients were admitted and one death was registered .During the second wave, 15 patients have been admitted and 2 deaths have been registered. The hospital also provides follow up care for patients who do not require hospitalisation. The environmental health team ensures active contact tracing for all patients within our catchment area.

Covid has also affected members of staff at the hospital. So far 12 members of staff tested positive and 11 have recovered while 1 is still under follow up, thus affecting staffing levels at the facility. Allocating staff to work in isolation unit has also affected staffing levels. There is adequate PPE to ensure that members of staff providing care are safe, but this requires intense efforts to secure enough resources.

**1.3 Infrastructure**

**Completed projects**

**Healthpost**

A healthpost was constructed at Chidyang’ombe with support from Canzibe Foundation in the Netherlands.

**Renovation of Childrens’ ward**

This project was initially planned to start in June 2020 however it delayed due to funding challenges during the COVID19 pandemic. We are pleased to inform that the project first phase will start first week of March 2021. We have the funds and the contractor has already been identified. The first phase will concentrate on

* Replacing the ceiling boards
* Extending the treatment room
* Painting inside and outside walls
* Roof ceiling and painting
* Roof ceiling and painting.

The project will cost approximately K11,500.00 and is expected to be completed in five weeks.

**Construction of staff houses**

We have constructed two semidetached two bed roomed house at the cost of K42,000.000.00 with part funding from the Service Level Agreement (SLA) savings, and partly donor funded.

This will assist reducing the shortage of staff houses that we have at the hospital.

**Store**

A drugstore was constructed in the X-ray department, which no longer needed storage space after the installation of digital X-ray.

**Upcoming projects**

We are planning to have two other building projects

1. Construction of a building block for eye services

With the support of Christian Blind Mission (CBM) a German NGO MMH is planning to establish an eye clinic. In the package the NGO will support with infrastructure, equipment and training of staff.

The first support will be construction of building block to accommodate

* Minor theatre
* Offices
* Waiting area
* Resting rooms
1. Renovation of Old PHC Training Centre turning it into an apartment for staff accommodation

We are in the process of fundraising for the project. More update in the forth coming board meetings.

**1.4 Drugs and clinical supplies**

MMH continues to experience challenges in maintaining continuity of essential drugs and clinical supplies. A number of factors have contributed, including the poor government supply chain via DHO, lack of supplies at Central Medical Stores and rapidly increasing prices during the COVID-19 pandemic. CMST have had severe stock-outs during the COVID-19 pandemic, with essential drugs been out of stock for multiple months. The hospital has not experienced many stock-outs, but an increased fund-raising effort was needed to buy supplies on the commercial market.

There has been a large demand for PPE such as masks and gloves.

The hospital received a donation of drugs from Global Assistance, and multiple donors contributed to a fund for drugs and supplies.

**2. Primary Health Care**

MMH PHC continues to be busy in providing sound community preventive medicine with the following projects

1. Vector control: Indoor residual spraying (IRS) and Larval source management (LSM)
2. Orphan and Vulnerable Child Care
3. Prison Health
4. Sustainable livelihoods (SL)
5. Palliative Care: Chifundo project
6. Teenage pregnancy
7. Sustainable Maternal Neonatal Child Health
8. Environmental Health
9. TB, WASH and COVID-19: Mokwanira Project
10. Cervical cancer screening

The new project this year is Teenage pregnancy, MNCH was changed to SMNCH meaning Sustainable, Maternal and child health service. SMNCH is a scaled down project aimed at sustaining improved achievements under the previous MNCH project.

**2.1 Malaria Vector control**

In the year 2012; MMH started implementing a project known as Malaria vector control using Indoor Residual Spraying (IRS) in its catchment area. And larval source management (LSM) started in 2017.

The table below gives a picture of coverage of the vector control program.

Vector control progress since 2012

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Year | No. of IRS only villages  | No. of LSM only villages  | No. combining LSM&IRS. | Total |
| 2011/12 | 0 | 0 | 0 | O |
| 2012/13 | 4 | 0 | 0 | 4 |
| 2013/14 | 22 | 0 | 0 | 22 |
| 2014/15 | 40 | 0 | 0 | 40 |
| 2015/16 | 55 | 0 | 0 | 55 |
| 2016/17 | 35 | 0 | 0 | 35 |
| 2017/18 | 46 | 20 | 6 | 72 |
| 2018/19 | 32 | 32 | 10 | 74 |
| 2019/2020 | 52 | 10 | 10 | 52 |
| 2020/2021 | 52 | 9 | 4 | 61 |

MMH has reduced under 5 year’s malaria inpatient deaths from **16** in 2012/13 to **0** in 2019/21 malaria season.

MMH has taken first steps to get to a a public-private partnership in malaria control in Malawi. This is yet to be finalized.

**2.2 Orphan care project**

Mulanje Mission Hospital is very much concerned with the plight of orphans in the catchment area and beyond. Good Little Company and PWS&D are donors who are funding this project.

Aid to orphans is in form of school support (fees, uniforms, shoes, bags and stationery) free medical care and nutrition support (Lactogen and likuni phala). They are also given livestock for sustainability of the project. Currently the project has close to 600 orphans and at least 80% have livestock.

Since MMH started vocational skills trainings in 2018, a total of 45 orphans have benefited.

14 OVCs have also benefited from school bursaries.

**2.3 Prison Health**

Currently, there are 204 inmates against designated 200 carrying capacity at Mulanje Prison. MMH conduct prison health clinic every Friday and do the following activities;

* Environmental sanitation and personal hygiene. Under these services MMH provided durable dustbins and maintained toilets and water systems.
* Medical care and treatment – a clinic is held at the prison every Friday.
* Nutrition – supplying likuni phala, chiponde, soya pieces and cooking oil.
* COVID-19 prevention materials were supplied to the prison in 2020.

**2.4 Sustainable livelihoods (SL)**

This programme, funded by multiple corporate and other donors, seeks to improve both crop and animal husbandry practices and adoption of appropriate farming technologies. The Model Village Approach is being used, under which, apart from many other activities, three village irrigation schemes have been constructed. A fourth scheme is planned for 2021.

Other interventions are the livestock pass-on program and environmental management such as tree planting and riverbank protection, natural regeneration, bee keeping, manure making, economic empowerment such as Village Savings Loans and Associations (VSL & A), Group marketing through Communal Gardening. Lead farmers and para-vets have been trained in all the model villages and targeted clinics.

The biggest reforestation project is on Mlatho and Chole hills, where the project has managed to stopped people from cultivating in the hills to allow regeneration of indigenous trees. Currently the project targets 1200 direct beneficiaries.

Trees have also been planted on and around Mulanje Mission and in other villages.

**2.5 Palliative care: Chifundo project**

This project, funded by DFID through EMMS from Scotland, reaches out to palliative care patients and their families. It also supports the palliative care services at MMH. This project ends in June 2021.

MMH finished mentoring 6 health facilities i.e Chilinga, St Lukes, St Montfort in Chikwawa, Trinity in Nsanje, Makapwa in Thyolo and Thambani in Mwanza.

To improve the nutritional status of palliative patients, they are linked to agriculture and nutrition services within the project where they are trained and followed up by the lead farmers in their respective homes. Apart from the 6, MMH also worked with 6 other facilities on the agriculture part with the Palliative Care Support Trust (PCST). These are Malamulo in Thyolo, Mpiri in Machinga, Lulanga in Mangochi, St Joseph in Chiradzulu, Tsangano in Ntcheu and Utale in Balaka.

The biggest achievement of this project is that we have introduced Palliative care services in hospitals which did not have it, and patients are linked to Lead farmers who are helping them to have home gardens.

**2.6 Teenage pregnancy**

 This project aimed at reducing teenage pregnancies in the catchment area of Mulanje mission hospital.

 The project had 4 sub-goals as follows:

Establish mentor networks -
In making sure that adolescent girls and boys are reached with sexual reproductive health services and rights, the project identified and trained 60 mentors from the youth clubs between the age group of 20 – 24 years in the catchment area.

Revamp youth friendly health services -
As one way of increasing access to information and services the project also aimed at strengthen the already existing Youth Friendly Health Services by conducting a refresher course in YFHS to 12 health workers

Improve education on sexuality -

In order to reach out to adolescent girls and boys with sexual reproductive health rights and services the project conducted comprehensive sexuality education for in school adolescent girls and boys. Comprehensive Sexuality education for in and out of School Youth in Southern and Eastern Africa is a result of organization’s commitment to young people and interest in developing a comprehensive resource for teaching in and out of school youth about sexuality, reproductive health, gender, rights, services and related life skills aligned to international standards, the project reached to 1,200 adolescent girls and boys. The project also conducted youth talent and reached out to 40 youth clubs

Raise awareness in the community -
In order to raise more awareness on sexual reproductive health for youth a radio program was established.  Also, community dialogue sessions were conducted in 15 group village headmen and 504 community members were reached (among which caregivers and church leaders).

**2.7 Sustainable Maternal Neonatal Child Health**

Mulanje Mission Hospital continues strengthening Maternal and Neonatal, Child Health with support from Presbyterian World Service and Development as a sustainability phase of the past MNCH project. It aims at improving the quality and supply of essential health care services at both the facility and community level by improving the skills and attitudes of health care workers. It also ensures that the facility has quality standards and resources are available. The ultimate goal of the project is to contribute to reducing child and maternal mortality and morbidity through high quality hospital maternal, neonatal and child health services, raising awareness and expanding knowledge around SRH amongst community members, and sustaining the activities of community structures such as VSMCs and CBDAs contributing to MNCH.

 In the period under review (July- December 2020) all the planned activities were done because funding was readily available, and community members were very motivated to take part. The activities done include procurement of Infection Prevention materials and SRH materials, supportive supervision in IPC measures, SRH standards, VSMCs, VHCs and CBDAs. This supervision helps to promote and maintain good standard of work and ensures that providers follow relevant policies and procedures. It also helps them to understand their roles and responsibilities thereby providing high quality care/services which the clients deserves.

In addition trainings for Health Care Workers were done. This was to equip Nurses and Clinicians with knowledge and skills necessary for management and caring of women and their neonates using evidence based approaches. Furthermore Safe motherhood audits were also done which helps in finding out answers to why mothers and neonates die, learning from the circumstances around each death & taking positive action on the results and improve obstetric service delivery thereby preventing further NNDs and Maternal Deaths.

**2.8 Environmental Health**

The EH team improves and repairs boreholes in the catchment area, with support from Copper Creek church in the USA.

The EH team is also supervising the tuberculosis programme, vaccinations and the work of health surveillance assistants in the area.

**2.9 TB, WASH and COVID-19: Mokwanira Project**

In December 2020, an agreement was signed with EMMS International for a new, rolling project. In the first phase, tuberculosis services in Mulanje district will be improved in the area of MMH and six healthcentres. Also, healthcentres’ water and sanitation will be upgraded to the required standard for prevention of COVID-19. In future further investment in the solar system and watersupply at MMH will be considered.

**2.10 Cervical cancer screening**

The hospital continues to provide cervical cancer screening and immediate treatment to women at MMH and in outreach clinics. Some of the resources are provided by Baylor College of Medicine.

**3. Human Resources**

**3.1 Staff changes 1st January 2020 - 31st December 2020**

(Edited for website use)

**3.2 Staff on training programmes**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Post** | **Programme** | **Starting date** |
| (edited for website) | NMT | Diploma In Anaethesia | November, 2019 |
|  | NMT | BSc in Palliative care | August, 2017 |
|  | NMT | Upgrading Diploma in Nursing | May, 2018 |
|  | NMT | E-Learning Upgrading Diploma in Nursing | June, 2018 |
|  | CO | Bachelor of Science in Obstetrics and Gynaecology | August, 2018 |
|  | Pharmacy Assistant | Diploma in Pharmacy | September, 2018 |
|  | RN | Bachelor of Science in Nursing | November, 2018 |
|  | Accountant | Masters Degree in Accounting | August 2017 |
|  | Snr Assistant Accountant | Bachelor of Accountancy | October, 2018 |
|  | Nurse Midwife Technician | Degree in Midwifery | September, 2019 |

|  |  |  |
| --- | --- | --- |
| **Staff returning from training programmes** | **Programme** | **Date reported for duties** |
| (edited) | BSc Obstetrics and Gynaecology | 1-12-2020 |

**4. Financial report**

The hospital continues to be supported by the Malawi Ministry of Health, through the payment of salaries via CHAM. The Service Level Agreement reached with Mulanje DHO is due to be paid for September-December 2020, with outstanding amounts going back to 2016. The total outstanding SLA payment is MK 128,985,278 as per 31-12-2020.

 Accounts have been audited to end June 2020 and will be signed on 20th February, 2021.

Income and expenditure statements for July 2020 – December 2020 will be presented to the Synod Health Board together with the audited accounts.

Submitted for the information of the Blantyre Synod Health Board.

For more information and reports: see www.mmh.mw

MMH Management Team

11th February, 2021