TARIQ MAHMOOD,
ADDITIONAL PROGRAMME DIRECTOR (ID),
PUNJAB HEALTH SECTOR REFORMS PROGRAM

Dates of Visit: 10-04-2009 and 11-04-2009

i. TEHSIL HEADQUARTER HOSPITAL GUJAR KHAN DISTRICT RAWALPINDI

Date of visit 10-04-2009 at 08:30 AM.

1. Location is on the main GT Road, Gujar Khan.
2. Signboard / Direction Board was displayed on main road.
3. THQ Hospital was established in 1976.
4. Target Population is 6 Lac.
5. THQ Hospital has sanctioned capacity of 60 beds.
6. Total area of THQ is 42 Kanals.
7. Dr. Muhammad Pewrvaiz Akhtar, Medical Superintendnet was yet to reach in his office. Later on he joined us at hospital.
8. Dr. Aamir Naveed (Anesthetist), Dr. Sarmad Kiyani (MO), Dr. Muhammad Saleem (MO), Nisar Ahmed Raja (Dawa Saaz) and Shoukat Ali (Storekeeper) were late.
9. Facility of Residences was not sufficient as per requirements.
10. Twenty Eight posts of following categories were vacant:- APWMOs (2), Gynecologist (1), Orthopedic Surgeon (1), Pathologist (1), EYE Specialist (1), Radiologist (1), Statistical Assistant (1), Dispenser / Dresser (2), Ward Servant (1), OTA (2), Sanitary Workers (5), Cook (2), Chowkidar (1), Storekeeper (1), Tubewell Operator (1), Baildar (3), Lab Tech (1) & Data Entry Operator (1).

Medical Superintendnet was requested to make efforts for the recruitment against vacant posts and take necessary action as per policy and rules.

11. During visit of main medicine store, it was observed that the performance of Mr. Taimoor Fazil, Hospital Pharmacist was not satisfactory because he did not properly inspect the main medicine store resultant discrepancies in medicine store were noted, the relevant entries in record of medicines was not being made regularly. Similarly the maintenance of record regarding daily expense of medicines dispensed to the visiting patients was also not updated and bundles of OPD tickets were found in dispensary which were yet to be entered. Pharmacist was sensitized about his job description and he was urged to fulfill his commitment towards duty with required attention and dedication.

12. Antibiotic Syrup, Anti-emetic Inj. Inj Mannitol 20%, Dextro 5% (1000cc) & Anti-epileptic Tab were Out of Stock.
13. Defibrillator was not available in THQ Hospital.
14. The Medical Superintendent raised the issue regarding delay in DTL of medicines which ultimately hampers the delivery of healthcare services.

15. The Medical Superintendent informed that requirement of water for THQ Hospital is 15000 Gallons per day while TMA Gujar Khan is supplying just 5000 Gallons per day. Rough cost estimate for the provision of ½ Cusec Tubewell and Water Pipe Line of THQ Hospital have already been forwarded to the EDO (F&P) Rawalpindi. M S requested to resolve the problem of Water Shortage and he also proposed that possibility of Water Supply Pipe Line from Technical Training Centre, Government of the Punjab to THQ Hospital may also be considered, where total distance is hardly 01 KM. *EDO (F&P) and EDO (Health) are requested to attend this issue.*

16. Problem of parking place / garage for official vehicles, staff motorcycle was also noted during round of hospital.

17. Mr. Imtinan ur Rashid (qualified lab technician from PIMS) working as Lab Assistant (BS-05) discussed his case for promotion as Lab Technician, which was under consideration in the office of Dr. Khalid Randhawa (DOH) Rawalpindi. *EDO (Health) Rawalpindi to look into this.*

**ii. TEHSIL HEADQUARTER HOSPITAL MUREE DISTRICT RAWALPINDI**

*Date of visit 11-04-2009 at 08:30 AM.*

1. Location is near GPO Chowk Jinnah Hall, Muree and outlook of Hospital is satisfactory.
2. Signboards were displayed.
3. THQ Hospital was established in 1985.
4. Target Population is 2.25 Lac.
5. THQ Hospital has sanctioned capacity of 82 beds.
6. Total area of THQ is 13 Kanals without proper Boundary Wall.
7. Residential facilities were poor and insufficient.
8. Dr. Shahid Pervaiz Khan, Medical Superintendent was yet to reach in hospital. He was informed by his staff about visit of PHSRP team; later on he joined us.
9. Map of Tehsil Muree was displayed in the office of M S.
10. Organogram, Statistics of the Tehsil, Monthly Report, OPD / Indoor Patients Data during last month, No. of Deliveries conducted during last month, Vacancy Position and Slogan of the Day was not displayed.
11. Dr. Ali Khan (CMO) & Dr. Waheed Afsar Bajwa (CMO) were not on duty and attendance register / movement register was silent about these doctors. Later on M S informed that both the doctors were in a Medico-legal training session in Rawalpindi.
12. Dr. Iram Sheikh (Dental Surgeon), Dr. M. Arshad (SMO), Mr. Abrar Abbasi (Homeo Doctor) and Hafiz Naseer Ahmed (Hakeem) were late without intimation.
13. Mr. Musadaq Abbasi (Dispenser) and Mr. Shahzad Aamir (Dental Asstt) were absent from duty without intimation / permission since 01-04-2009. Muhammad Faraz (Vaccinator) & Mr. Mansoor ul Haq (Clerk) were also late.
14. Operation Theater and Labour Room was well equipped.
15. Medical Superintendent of THQ Hospital Murree raised the issue that Zakat / Social Welfare Funds were not being received for the last one year to facilitate the poor / deserving patients for their proper treatment. 
*EDO (Health) is requested to look into this.*
16. The most striking issue/problem of THQ Hospital Murree was that *Nine Sanctioned Posts of Specialists* including Surgeon, Pediatric, Gynae & Obs, Anaesthist, Physician, Ophthalmologist, Pathologist, Radiologist and Orthopedic were vacant. Similarly twelve posts of MOs / WMOs were vacant against eighteen sanctioned posts. Two sanctioned posts of APMO were also vacant.

*Such a large number of vacant posts may provide sufficient food for thought at the level of policy makers and senior administration. One can imagine the hardships of poor rural masses in such a scenario, because they merely look towards government hospitals for the delivery of specialized care/services. Administrative Department may kindly examine this serious issue to evolve / adopt a comprehensive policy and to take appropriate decisions to resolve this problem (unfilled posts) on permanent basis.*

17. Defibrillator was not available in the hospital.
18. Fourteen Posts of various categories are vacant including Dispensers (6), Naib Qasids (2) & Sweepers (6).

*EDO (Health) is requested to spare some moments to look into this issue.*
19. Medical Superintendent expressed his administrative problems to manage the availability of Specialists, Medical Officers, Nurses and other supporting staff at Evening & Night Shifts, due to acute shortage.

*EDO (Health) is requested to look into this.*

### iii. GOVT. DISTRICT HEADQUARTER SANATORIUM SAMLI, RAWALPINDI

*Date of visit 11-04-2009*

1. Location is near Company Bagh, Rawalpindi-Murree Road.
2. Signboards were displayed.
3. Hospital was established in 1928.
4. Hospital caters quality services to patients of TB & Chest diseases as specialized area from all over the country. During summer season the bed occupancy is almost 100% while during winter it is 50 to 60 percent.
5. Hospital has sanctioned capacity of 360 beds.
6. Total area of hospital is 368 Kanals.
7. Dr. Muhammad Azhar Hayat, Medical Superintendent was present on duty and he was holding the charge of MS office since 01-08-2008.
8. Daily OPD of hospital is about 300 and annual OPD is ranging from 65 to 80 Thousands.

9. MS informed that post of specialized surgeon of Government TB Sanatorium Samli Hospital has been shifted DHQ Hospital Chakwal.

10. Seventy Posts of various categories were vacant including:- Radiologist (1), Pathologist (1), Chest Specialist (2), AMS (1), WMO (1), Anesthetist (1), Head Nurse (10), Charge Nurses (11), Male Nurse (1), Dietician (1), OTA (1), Radiographer (2), Dispenser / Dresser (6), Lab Asst (1), Dark Room Asstt (3), Jr. Clerk (1), Aya (4), Head Cook (1), Cooks (4), Dispensary Attendant (1), Water Carrier (1), Mali (1), Chowkidar (1), Ward Servant/Bearer (2) and Ward Cleaner (10).

    EDO (Health) Rawalpindi to look into this.

11. Defibrillator was not available in the Hospital.

12. In case of Emergency only First Aid Medical Facility and Minor Procedures were available at the hospital.

13. Medical Superintendent informed that Facility of T.B Risk Allowance for Staff Working in Hospital was not available in the hospital, which may kindly be provided.

14. Residences were not sufficient as per requirement and major repair was also required.

15. MS was requested to ensure the display of Organogram, Data/Information about visiting patients and slogan of the day.