
i. **DISTRICT HEAD QUARTER HOSPITAL SHEIKHUPURA.**

   *Date of visit* 18-03-2009 at 08:30 AM.

1. Location is on the main road and outlook of Hospital is satisfactory.
2. Signboard / Direction Board was not displayed on first entrance gate of the hospital on main Lahore/Sheikhupura Road, while same was displayed on second gate of the hospital.
3. DHQ Hospital was established in 1922 and first regular Medical Superintendent was appointed in 1969.
4. DHQ Hospital has total Three Hundred & Sixty Seven Beds including forty beds of TB Hospital.
5. Maqbool Hussain (Head Clerk, MS Office) & Zia Ullah (PA to MS) was present in their office at 08:40 AM.
6. Dr. Mubashir Ahmed, Additional MS (ADMN) met in main block of the hospital at 08:50 AM, who informed that he went to a court for evidence.
7. Dr. Dildar Ahmed Khan Vardag, Medical Superintendent of DHQ Hospital, Sheikhupura is holding the office since 17-09-2008, who was yet to reach in his office. He was informed by the AMS regarding the visit of PHSRP team and later on he came after 09:00 AM.
8. Organogram was displayed, other Statistics / Informations of the District & Up to date Vacancy Position was not displayed in MS Office.
9. Following Doctors were yet to reach in Hospital for duty:
   - Dr. Muhammad Farooq Anwar (Late)
   - Dr. Fazal ur Rehman (Late)
   - Dr. Noor Muhammad (went for court evidence)
   - Dr. Qazi Mohsin Azeem (Late)
   - Dr. Zaheer Ahmad (went for DOH Office Meeting)
   - Dr. Javaild Hassan Jafari (Late)
   - Dr. Uzma Yasmin (Late)
   - Dr. Muhammad Naeem Qureshi (went for Lecture in DHDC)
   - Dr. Muhammad Naeem Hasmi (Late)
10. Following Paramedical / Other Staff was yet to reach in Hospital for their duty:
   - Mr. Muhammad Ashraf Ghori (Dispenser)
   - Mr. Khalid Mehmood (Lab Assistant)
   - Mr. Muhammad Ilyas Sajjid (B.Tech)
   - Mr. Sajjid Mehmood (O.T. Attendant)
   - Mr. Ghulam Masood (Junior Clerk)

11. Utilities are available like Electricity, Telephone & Functional Water Supply System.

12. Sewerage System of DHQ Hospital was chocked. Dirty water was overflowing and giving an ugly look.

   Medical Superintendent was requested to take action for cleanliness of hospital and removal of garbage from blocked gutters. He was further informed that follow up progress in this regard would be checked. Both MS & AMS assured that same would be done positively today.

   Next day i.e. 19-03-2009, I again visited DHQ Hospital, gutters were still chocked and dirty water was overflowing and there was no improvement in this regard. The sense of ownership and responsibility on the part of senior management of DHQ Hospital was speaking a lot.

13. Against Four Hundred & Fourteen sanctioned posts of various categories, One Hundred & Five posts with following details were vacant:-
PWMO (1), APMO (1), APWMOs (2), DMS (1 Female + 1 Male), Physician (1), Senior Consultant (1), ENT Specialist (1), Pediatrician (1), Radiologist (1), Pathologist (1), Gynecologist (1), SMOs (2), CMO (1), MOs (46), WMOs (12), Physiotherapist (1), Head Nurses (4), House Officers (8), Charge Nurses (2), Dental Technician (1), ECG Technician (1), X-Ray Assist / Radiographer (3), Homeo Dispenser (1), Junior Clerk (1), Lab Assistant(1), Daftri (1), Attendant (1), Bearer (1) & Sanitary Workers (5).

Medical Superintendent was requested to take action as per policy and rules to fill the vacant posts.

14. During visit of main medical store, it was revealed that Antibiotic Tab, Antibiotic Syrup, Antibiotic Capsules, ORS, Anti-emetic Inj & Flajyl Tab were out of stock.

15. Hospital Management is arranging Antibiotic Tab & Flajyl Tab through LP.

16. Services of dialysis are being provided properly. Since January, 01 2009 till March 18, 2009, Two Hundred & Sixteen Patients were taken care.

17. There are proper arrangements for Blood Transfusion Services.

18. Incubator of Children Ward was Non-Functional. Dr. Israr ur Haq Child Specialist requested for at least two new incubators to meet the requirements.

Medical Superintendent was requested to attend this issue.

19. Dr. Muhammad Naeem Hasmi, Incharge Surgeon Orthopedic ward informed that he is conducting on average one hundred operations per month but necessary equipment is not available in Operation Theatre. He has also not been accommodated with a proper Orthopedic Surgery Ward.

Medical Superintendent was requested to ensure the provision of these items.

20. Separate ECG Machine & Defibrillator is not available in Emergency Department.

21. The tap of toilet of Emergency Department was missing and water was flowing in huge quantity and nobody was bothered to attend this waste of water.

22. Efforts are being made for the uplift of front lawn of DHQ Hospital.

23. Fetal Heart Detector of DHQ was Non Functional.

Medical Superintendent was requested to ensure the repair.

24. All three Anesthesia Machines were out of order and Repairable.

Medical Superintendent was requested to ensure the repair.

25. Three incubators of DHQ equipment stock were reported as Unserviceable.

Medical Superintendent was requested to ensure the availability of new incubators.

26. System of Evening & Night Shifts in DHQ is in place as per record.

27. The main dispensary of DHQ Hospital did not portray fair state of affairs. The Daily Expense Register of Medicines was not being maintained and there was no
proper record of dispensed medicines to the visiting patients from central dispensary of DHQ Hospital. Although Incharge Senior Dispenser, Mr. Shafqat Mahmood admitted before M S that he is a trained and experienced paramedical staff member of DHQ Hospital but poor quality of his work was brought into the knowledge of M S when major discrepancies and mismanagement was found during physical verification of medicines.

*Medical Superintendent was requested to spare some moments from his official engagements at DHQ for making improvements in dispensary.*

28. The state of affairs regarding medicines management in Main Store of DHQ was also not encouraging. Mst Asma (Duty Pharmacist) and Muhammad Akmal (Incharge Dispenser of Store) were not maintaining record of medicines properly. Necessary entries in Stock Register and Bin Cards were not made.

*Medical Superintendent was requested to depute an officer to look after the Medicine Store for proper maintenance of record.*

29. The Purchae Fee of DHQ Hospital for the months of December 2008, January & February, 2009 was not deposited which is serious matter.

*Medical Superintendent was requested to ensure deposit of Purchi Fee & verification of Voucher from Treasury / Accounts Office.*

30. The M S was also sensitized about the in time and regular Reconciliation of Accounts of Expenditures & Receipts.

31. M S was also requested to regularly examine and sign the Cash Book especially at the close of month.

32. The Sanitation and Cleanliness condition of Doctor's Residential Colony was also unsatisfactory. Heaps of garbage and solid waste was lying open.

*Medical Superintendent was requested to ensure removal of garbage and make efforts for improvement in staff colony from cleanliness point of view.*

33. Huma Chohan Welfare Kitchen is providing three time meals to all patients admitted in Hospital free of cost.

34. Main Mosque of DHQ is under construction through financial assistance of local philanthropist.
ii. RURAL HEALTH CENTRE JANDIALA SHER KHAN, DISTRICT SHEIKHUPURA.

*Date of visit* 19-03-2009

1. RHC was established in 1983.
2. Location is on the main road and outlook of Hospital is satisfactory.
3. Signboard / Direction Board was displayed.
4. The Posts of WMO and MO were vacant.
5. Two Posts of Charge Nurses, One Lab Technician, One Dental Technician, One X-Ray Assistant, One OTA, One Anesthesia Assistant, One R.H.I, One Tubewell Operator & Two Sanitary Workers were also vacant.
   *Incharge Senior Medical Officer was requested to take action as per policy and rules to fill the vacant posts of all categories.*
6. The utilities like Electricity, Telephone, Water Supply System and Sewerage System of RHC were functional.
7. The availability of medicines in RHC was satisfactory.
8. The inspection of equipments revealed that RHC is without proper O.T. Table. There was no Air-Conditioner for Operation Theater. Facility of Ultrasound Machine & Computer/Printer is also not available at the RHC. Only one Oxygen Cylinder was filled and functional. Generator was also not provided to RHC.
   *Incharge Senior Medical Officer was requested to take appropriate action.*
9. Sterilizer was not available in Dental Unit of RHC. Dental Surgeon requested for a separate Sterilizer.
10. Only Incharge SMO is available on call at Evening / Night Shift.

iii. BASIC HEALTH UNIT WARN OF DICTRICT SHEIKHUPURA.

*Date of visit* 19-03-2009

1. BHU was established in 2002.
2. Location is on the main road and outlook of Hospital is satisfactory.
3. Signboard / Direction Board was displayed.
4. The Posts of Sanitary Inspector is vacant.
5. Mst. Farzana Jabeen, LHV is on general duty at DHDC Sheikhupura since June 2005, and she never visited the BHU. Ante-natal & other services related to MNCH Program are suffering adversely due to non availability of services of LHV.
   *EDO (Health) may look into this personally and ensure the availability of LHV at her original duty place i.e. BHU Warn.*
6. The Transformer of BHU was stolen and replacement is yet to be made by WAPDA.  
   EDO (Health) may look into this and resolve the problem.

7. Salary is not being disbursed after December, 2008 to five Lady Health Workers i.e. Mst. Khadija Abid, Mst. Shaishhta Perveen, Mst. Kubra, Mst. Sarwat & Mst. Misbah, performing duties at BHU Warn. Similarly, daily allowance @ Rs. 35/- per day is also not being paid to LHWs for Polio Training Meetings for last two years. LHWs further requested for special incentive / allowance to perform polio duty in far flung rural areas.  
   EDO (Health) may look into this and facilitate the LHWs & to resolve the problem of non-disbursement of salary on priority basis.

8. Equipments like Nebulizer, Baby Weighing Scale, Adult Weighing Scale & Glucometer is not available at BHU Warn.

9. Purchese Fee for the Months of January & February, 2009 was yet to be deposited.

10. Sewerage System of BHU was non functional.

11. Shortage of Antibiotic Tabs/Capsules was noted.

12. Chloroquine & Anti-Histamine Tabs were out of stock.

13. Oxygen Cylinders were non functional.

14. Facility of Auto Clave, Proper Sterilization System and Stitching Equipments were not available at the BHU.

15. Incharge Medical Officer was of the view that Quality of Medicines is not better and Quantity of Medicines is insufficient. Chain of Supply of Quality Medicines should not be disturbed.

iv. TEHSIL HEAD QUARTER HOSPITAL MURIDKE DISTRICT SHEIKHUPURA

**Date of visit** 21-03-2009 at 18:00 HRs.

1. Location is on the main road and outlook of Hospital is satisfactory.

2. Signboard / Direction Board was displayed.

3. THQ Hospital was established in 1992.

4. THQ Hospital has total 60 Beds.

5. Dr. Abdul Mateen, Medical Officer was performing duty in evening shift along with Dr. Adeela Zaheer, WMO & Two Staff Nurses.

6. Fifty bags of Medicines and related items were readily available to meet any emergency.
7. ORS is out of stock.
8. Dental Unit is functional but needs replacement.
9. Ultrasound Machine is there in the THQ but due to non availability of services of an Ultra sinologist, same is not being used properly.
10. General Surgery Instrument Set and Obstetric Instrument Set are not complete.
11. Fetal Heart Detector is not available.
12. Incubator is not available.
13. Anaesthesia Machine is there but no Anesthetist is serving in THQ.
14. The services of four Lady Doctors have been provided by Dr. Yasmin Rashid under Safe Motherhood Program with collaboration of UNICEF to ensure safe deliveries and C-Sections round the clock at Tehsil Headquarter Hospital.
15. Toilets & Sanitation Conditions of THQ were poor.
16. For Blood Transfusion Services in case of emergency only lab facilities were available.
17. Three Posts of MO / WMO were vacant against Seven Sanctioned Posts.
18. M S is facing difficulties to manage delivery of emergency services in Night shift due to shortage of doctors.
19. Services of Only One Chowkidar are available against two sanctioned posts which also create problem, when only chowkidar wants to avail leave.
20. Due to Non-Availability of Services of Dhobi, Plumber & Electrician, difficulties were being faced to properly serve the patients.