ST ALBERT'S MISSION HOSPITAL



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REFERENCE:

MINISTRY OF HEALTH AND CHILD WELFARE St Albert's Mission Hospital Private Bag 9047 Centenary <u>ZIMBABWE</u>

Hospital Numbers: 0778 559 401/2

ST ALBERT'S MISSION HOSPITAL DISTRICT HOSPITAL FOR CENTENARY

TARGETTED APPROCACH FINANCED BY THE GOVERNMENT OF ZIMBABWE (MINISTRY OF FINANCE)

PROGRESS REPORT

2012



Welcome to St Albert's Mission Hospital

St Albert's Mission Hospital is so delighted to be amongst the few hospitals that had been chosen to benefit from the Targeted Approach Program that has been initiated by the government of Zimbabwe. We therefore wish to take this opportunity to express our sincere gratitude and appreciation to the Ministry of Health and Child Welfare for holistically trying to counter some of the problems that the health institutions are encountering through this funding. These funds if appropriately used will go a long way in trying to address some of the challenges that the health institutions are facing. It is also our hope that the Ministry of Health and Child Welfare will on our behalf express our sincere appreciation to the Ministry of Finance the funders of this project.

However we started implementing the Targeted Approach Program in March 2012 after invitation for tenders through advertising in the local news paper, the Herald. We went through the selection criteria and tenders were awarded to different bidders. On the issue of medicines, we first took the list to NatPharm to see if they could supply some of the medicines on the list and we were then authorized to purchase from private supplier by NatPharm through endorsing our list.



New look of the DMO's office with new furniture new furniture in the Administrator's office





Matron's office new furniture



Accounts office new furniture





New wards tables for nurses' station

new` furniture for the hospital board room

Hospital Equipment

Quite a number of hospital equipment is needed but currently we have managed to purchase the urgently needed equipment and drugs and payments were done.



One of the GMOs and Health information officer testing the communication radios



The new drug trolleys

the doppler machines





A 35KVA generator to be connected to three of the boreholes that supply water to the hospital

10 KVA generator to be connected to maternity dpt

TRANSPORT



Heavy duty compressor



New tyres for all vehicles and the hospital tractor

drums of engine oil

X-ray Departments

This was one of the worst affected departments in terms of resources. Most of the consumables ran out of stock beginning of the year and fortunate enough with the targeted funds we managed to purchase most of the requirements that were delivered at the hospital worthy and currently the department is well stocked. The items that were delivered include the following:

Laboratory

The list for the laboratory department was so long since it was also running short of most of the reagents and some tubes, jars and many more. It is one of the crucial departments that we had to prioritize. We bought reagents and other laboratory items. The following items were delivered at the hospital:

Pharmacy

We purchased the medicines worthy fifty thousand dollars but unfortunately some the suppliers who got the tender could not deliver and we were then forced to sit again and relook at the competitors whom we then award the tender.

RENOVATIONS

We engaged a contractor on a fix and supply basis. However, all the cracks on all hospital buildings and floors have been repaired. Some areas of the damaged buildings had been plastered in preparation for the repainting of the whole hospital. Replacement of ceiling was done in all the wards. On the other hand the incinerator foundation has already been dug but payment was not done.



The laundry block before and after renovations and painting



Laundry department tiled corridors and linen waiting ironing



Inside the laundry room with floors well tiled and all the machines well serviced and positioned



That is the kitchen just behind the tanks and the laundry department on the right side





The x-ray department before renovations

That is the new look after renovations



Male ward on the left, HDCU at the centre and x-ray department on the far right side before and after renovations



That is the outlook of the male ward block before and after some renovations and painting



Inside the female ward, well tiled with all old beds sprayed



Back side of maternity ward block before and after some renovations



Maternity block before renovations This is now the new look of maternity



The maternity department veranda and corridors





Inside maternity department with all floors tiled and painting well done



The new look of the toilets





Female ward block before the renovations and then after the renovations and repainting





Removal of all the ceiling

new ceiling and new electrical fittings



Old floors before tiling



new floors after tiling



That the female ward inside, well tiled with new ceiling and electrical fittings and new lockers



That is the inside new look of the pediatric ward



Rehabilitation block before renovations After renovations and repainting



The new start centre and FCH blocks before and after renovations



This is the front part of the Out Patients department before and after some renovations and repainting was done



The kitchen block and female ward on the far left

The x-ray and dressing room



These are just the corridors to the wards and ambulance off loading and loading zone on the right side



On the left are the guys fitting the screen and on the right are the pharmacy serving windows where patients collect their drugs



Inside the pharmacy department after the renovation, tiling, fitting of screen for securing ARVs and fitting of new shelves



This is the new look of the laboratory department after some renovations



The administration department and on the left is the new start centre block



These blair toilets were already build but they were just repainted



The new Prefabricated Out-Patient department block

Before the death of Dr Elizabeth Tarira former District Medical Officer for Centenary District, she sourced a donation of prefab materials from her friends, (Rock No War) in Italy for the construction of the Out-Patient Department. The materials arrived a week before her death so the construction work was done and is now complete but plumbing and electrification is yet to be done and it will then be ready for use.

General Comments

This program is so good and I wish if it can touch all health institutions in the country. The new OPD that the late Dr Tarira initiated is going to face the challenge of furniture and according to our budget allocation and what we have so far used we cannot afford to buy it from the current budget. Due to an over sight, there are some important works that are still pending such as the renovation of the mortuary, construction of an incinerator, repair of laundry machines and more others that cannot now met by our budget allocation. But however I would have done injustice if I do not request for more resources to make sure the good work we started is completed and from afar we will stand and stare at the hospital and say that is what we did with the Targeted Funding. To complete all the remaining works we would need an additional **\$200,000 to \$250,000** more.

Here are some works that are pending:



We still need to extend this old mortuary and as well try to upgrade its capacity. Currently the doctors do not have space for conducting postmortems. On the other hand it only accommodates six bodies only something that is just impossible for the district hospital. There are other times we transfer bodies to Mvurwi Hospital when accidents occur resulting in many deaths.



This is the district office block, it has cracks in most of the offices so it needs immediate attention otherwise it will not last longer. We also need to expand it so that we have enough offices since some are sharing offices and others are using hospital offices that are meant for other cadres.



It was just an oversight otherwise this incinerator was supposed to be one of the first priorities. This incinerator is too old and it has cracks all over and we are no longer using it instead we are burning all the rubbish in a pit something that is not recommended when we want to do infection control. So our waste management system has been compromised by not having the incinerator.



The hospital looks so good and nice but there are some corridors that are yet to be tiled. The main corridor that starts from the male ward via female to maternity and theatre is not yet tiled. This also applies to the rehabilitation block that was already renovated and painted.



This new OPD block is almost ready for use once plumbing and electrification is done. But however, there is no furniture and examining couches we thought some of these items could be bought using the targeted funds because we cannot see ourselves being able to acquire all these.

CHALLENGES

This

program is operating at a cash budget so funds may or may not be available when needed.

Plann

ing for the works is a bit difficult and you cannot have timeframe for the works or purchases because funds will not be readily available.

Some

The

suppliers who got tenders fail to deliver maybe because they did not have funds and expected to be advanced something that was discouraged.

budget allocation was not enough because some of the critical areas could not be covered but however we have presented this challenge.



That is the new look of St Albert's Mission Hospital from the outside appearance.

The Late Dr Elízabeth Taríra



This is the place just behind the main theatre where the late District Medical Officer – Dr Elizabeth was laid to rest and may her dear soul rest in eternal peace.

Report compiled by: Tapera Saizi Health services Administrator

St Albert's Mission Hospital CENTENARY DISTRICT

2012