



DHTF REPORT

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Executive Summary

DHTF in collaboration with Rural Health Mission Nigeria have conducted several medical outreaches in various communities on the Mamabilla plateau since 2015. Each time the lessons learned from these outreaches shows a great need for a sustainable access to health services in these communities. This inspires the founder of DHTF to establish a modern primary health clinic in Gembu community to improve access to healthcare. The Trust Fund adopted the community based insurance model which involves resource pooling through premium subscription by the beneficiaries with the aim of reducing healthcare cost on poor families as well as making services readily available and accessible at all time.

About 63 subscribers had pre-registered prior to the kick off date on October 28, and over the 3 days continuous medical services to subscribed patients by RHEMN Volunteer Health Corps (VHC) over 50 new subscribers was registered. 7 Volunteers health corps participated in this kick off exercise and who offered 10hrs per day for 3 consecutive days (October 28-30, 2019). They provided professional consultation of patients, manages the laboratory and training onsite staff of the clinic on the proper use of new equipment.

Activities

First Meeting

We convened a briefing with all clinic staff and volunteers health corps to explain the community-based insurance model of the DHTF to ensure that every staff understands the operational model of the clinic. We also explained the roles of each volunteer and staff for the 3 days and started planning for the management of the clinic after RHEMN volunteer Health Corps leaves.

Consultation/laboratory services

Two volunteers were dedicated to carefully consult and treat patients who are already queued up while others focused on arranging the clinic including wards, waiting areas etc. The laboratory services only offered hepatitis B, blood sugar screening, malaria RDT and urinalyses.

Subscription of beneficiaries

Another team dedicated on educating the community on the model and subscribing new beneficiaries and a total 30 new beneficiaries were registered in 3 days making a total 93 beneficiaries.

Recruitment of staff.

It was noted that the clinic had only 1 active staff who is the project manager even though there were few applicants among volunteers who are available to offer services. We interviewed all applicants and recommended the following positions to be filled;

- Program manager – 1
- Clinic In-charge (Nurse/Midwife) – 1
- Clinical staff (CHWs) – 2
- Medical Assistants – 2
- Laboratory staff – 2
- Record staff – 1
- Cleaner -1

- **Security – 1**

The names of the staff to fill the position above have been handed to the program manager for consideration by the trustees.

Training: Another RHEMN volunteers dedicated the 3 days to training the clinical staff on correct use of various equipment such as cardiac monitors, oxygen concentrators etc and some basic lifesaving skills.

Donation: Rural Health Mission Nigeria donated some basic drugs to support the clinic which includes;

1. Vitamin A caps 100,000iu – 10 tins (10000 doses)
2. Vitamin A caps 200,000iu – 10 tins (10000 doses)
3. Albendazole tabs 400mg – 5 tins (5000 doses)
4. Prenatal supplement (multivitamin) – 50 tins (9000 doses)
5. Family planning implants – 20 pieces

The staff were also trained on the correct use of the implant and how to manage complications.

Final meeting: We convened the last meeting with all staff and volunteers to evaluate their readiness and competence to manage the clinic without RHEMN volunteers and the feedbacks were good. (See recommendations below)

Challenges

- **Funding:** The funds available for this kick off was grossly insufficient. Because of this we had to cut down the days planned to be spent from 7 to 3 days to accommodate the budget. (See financial report below).
- **Medical supplies:** Most of the prescribed drugs during the event were out-of-stock because the doctor's pack ordered from UK couldn't reach us at the time of the event. We have assured patients to come back for the out-of-stock medications when available.
- **Insufficient volunteers:** There was only 1 active onsite staff and 3 volunteers assisting during the event. We had to call for more volunteers and even conduct interview with hope to get approval from trustees to engage them permanently to convince them to volunteer.

Recommendations

Funding: We recommend that the trustees should set aside a special fund enough to cover for medical supplies, consumables and staff salaries for the first 6 months of operation until adequate subscription is achieved to self-sustain operations.

Staff: The list of applicants interviewed and submitted for approval should to be swiftly considered to avoid counter-productive effect of RHEMN volunteers leaving.

We also recommend that RHEMN volunteer should visit the clinic at least every 2 months for the next 12 months to sustain the hope of the community in quality service.

Management of drug supply: A drug revolving fund committee to sustain supply of local drugs and consumables should be setup. This committee will be responsible for making orders for foreign packs and Prioritize widely use high quality local drugs.

Daily operation: We recommend the clinic to run only 2 shifts (morning and evening), clinic to open by 7:00am and close at 8: pm. Only minor cases can be treated and referrals prioritized. Emergencies are observed for the maximum of 6 hours not exceeding 8:00pm. All emergencies should be stabilized if possible before referrals.

Summary of beneficiaries

Services	Total reached
Consultation	93
New subscription	30
RDTs	19
Hepatitis B screening	9
RBS screening	24
Referrals	0
Staff trained	9

Volunteers

S/N	Name	Profession
1	Mohammed Adamu Suleh	Nurse
2	Yusuf Suleh	Laboratory technician
3	Tukur Jibrin M	Nurse
4	Hafsat Abubakar	Midwife
5	Amina Yakubu	Midwife
6	Muhammad A. Saddiq	Nurse
7	Zulfkiflu Shehu	Health educator

Financial Report

Summary			
Total Received	₦ 230,000.00		
Total Spent	₦ 242,500.00		
Balance	- ₦ 12,500.00 (Deficit)		
Description	Quantity	Unit price	Amount
Travels			
Gombe to Gembu & Gembu to Gombe	2	48000	₦ 96000
Feeding & refreshments enroute x 7 volunteers	2	5500	₦ 11000
Feeding in Gembu per day	4	14500	₦ 58000
Sub-total			₦ 165000.00
Printings			
Folders	200	120	₦ 24000

Prescription booklets	15	1000	₦ 15000
Laboratory request booklets	10	1000	₦ 10000
Referral booklets	10	1000	₦ 10000
Rim of A4 papers	1	1500	₦ 1500
Sub-total			₦65000.00
Medical supplies			
Hepatitis B kits	2	3500	₦ 7000
Malaria RDT kits	2	2500	₦ 5000
Blood sugar strips	2	2500	₦ 5000
Sub-total			₦17000.00
Grand Total			₦242500.00

Photo Gallery

See field photos here;

https://drive.google.com/drive/folders/1B_5ExSfpUsjC_qXvF-odWD9IjKyr-_Yc?usp=sharing