Juba Teaching Hospital, South Sudan
Health Systems Strengthening Project

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1. City & State
Juba, Central Equatoria, Republic of South Sudan

2. Organization:
Real Medicine Foundation, South Sudan (www.realmedicinefoundation.org)
Medical Mission International (www.mminternational.org.uk)

3. Project Title:
Juba Teaching Hospital: Health Systems Strengthening

4. Reporting Period:
January 1st to March 31st 2014

5. Project Location (region & city/town/village):
Juba Teaching Hospital, Juba, Central Equatoria State, Republic of South Sudan

6. Target Population:
Direct project beneficiaries are approximately 444,680 people who are living in Juba and the immediate surrounding areas projected basing on 2008 South Sudan Population and Housing Census and referrals from all the 10 states to serve the country population of 9.86 million indirectly.

II. Project Information

7. Project Goals:
To improve the quality and sustainability of medical and surgical services provided in the Juba Teaching Hospital.

Juba Teaching Hospital is the only national referral hospital in the whole country of South Sudan and is located in Juba City, Central Equatoria State. With an estimated population of 9.86 million basing on annual population growth of 3% from a population census conducted in 2008 and lack of proper functioning primary health care facilities upcountry, many South Sudanese have nowhere to go to but to this national referral hospital. Some of the military and police personnel also share these limited facilities with civilians.

Juba Teaching Hospital is directly funded by the central government through the National Ministry of Health. Medical supplies and maintenance are handled through the National Ministry of Health of South Sudan with supplements coming from United Nations agencies and NGOs. The supplies are irregular, forcing patients to buy most of the consumables and pharmaceuticals from private pharmacies. Due to the high level of poverty, most vulnerable patients are not able to afford modern medicine hence increasing patient mortality in Juba.

8. Project Objectives:
1. Improve patient wards and build infrastructure within Juba Teaching Hospital starting with the Pediatric wards.
2. Assist in improving conditions for providing health care at Juba Teaching Hospital, including the policies and management of regular and medical waste.
3. Rehabilitate and/or purchase new medical equipment.
4. Provide basic medical supplies, disposables and pharmaceuticals for Juba Teaching Hospital starting with Pediatric Department, complementing those provided by the Ministry of Health.
5. Organize on-site clinical training, beginning with general equipment usage.
8. Summary of RMF/MMI-sponsored activities carried out during the reporting period under each project objective (note any changes from original plans):

1. Procured and provided adequate cleaning materials to Pediatric department to keep the wards clean.
2. Continued support of high speed WIFI internet services for Juba Teaching Hospital Resource Centre (JTHRC).
3. Developed Respectful Maternity Care (RMC) supervisory checklist to be used in maternity unit of JTH and neighboring PHCCs within Juba city.
4. Prepared the next step in remodeling the Accident and Emergency Department of JTH to be done in quarter 2, 2014.
5. Facilitated the visit of RMF CEO Dr. Martina Fuchs during the reporting quarter.
6. Facilitated the rapid assessment of the Internal Displaced People’s situation in Nimule. (Refer to separate Nimule trip report).
7. Procured and delivered foodstuffs worth $350 to the Internal Displace People (IDP) in Nimule during the assessment.
8. Facilitated the joint need assessment of South Sudanese Refugees in Adjumani district (Uganda).
9. Carryout the need assessment for Nimule hospital and provided them with 150 pairs of beddings.

10. Results and/or accomplishments achieved during this reporting period:

The Health System Strengthening project with more focused on Juba Teaching Hospital has achieved many notable milestones during the reporting quarter through the committed partnership with National Ministry of Health, JTH and its staff:

1. Prepared and submitted proposal to our Donors for improving the current Accident and Emergency Department of Juba Teaching Hospital following thorough assessment of the department
2. Prepared and submitted proposal for piloting Respective Health Care (RHC) training in Juba Teaching Hospital and all Primary Health Care Centers in Juba County
3. The Respectful Maternity Care (RMC) Master Trainers are now pre testing the developed RMC checklist in maternity ward targeting maternity staff and JCONAM students trained on RMC in the year 2013
4. Facilitated and performed regular monitoring and supportive supervision of the JTH healthcare workers and janitors on implementation of waste management policy guidelines
5. RMF continued to work closely with JTH administration and public health officers to ensure proper implementation of waste management policy guideline and regular waste removal
6. Continued provision of adequate cleaning materials to all Pediatric units to ensure proper cleaning and maintaining of the hygiene of the wards
7. Continued to follow up with Church of Jesus Christ of Latter - day Saints (LDS) on our proposals for provision of Ultrasound machine for maternity unit and improving water and sanitation situation at Juba Teaching Hospital
8. Support of high speed WIFI internet services for Juba Teaching Hospital Resource Centre which provides internet access to doctors and nurses at the hospital
9. Received visit from RMF CEO Dr. Martina Fuchs during the reporting quarter
10. Carryout the need assessment of Internal Displaced People (IDP) in Nimule and supported them with basic items like phoso, beans, cooking oil & papyrus mats during the visit, these are people who took refuge within the Country following the outbreak of fighting in mid December 2013
11. Together with RMF CEO Dr. Martina Fuchs, the team visited Nimule Hospital, identified gaps and discussed on possibility of collaboration in providing quality healthcare for the population and supported them with 150 pairs of beddings
12. Dr. Martina Fuchs together with RMF South Sudan and Ugandan team carryout joint need assessment of South Sudanese Refugees camping in Adjumani district, identified a number of striking problems, shared the report with our Donors hopping to intervene
11. Impact this project has on the community (who is benefiting and how):

1. The well renovated Pediatric Ward 5 coupled with provision of adequate cleaning materials has reduced re-infection rates among in-patients and also improved working conditions for healthcare professionals and JCONAM (Juba College of Nursing and Midwifery) students who are on their clinical rotations, and, above all, increased the quality of care patients receive and thus will increase the number of patients coming for medical treatment in time.

2. The JTH premises and the surrounding areas are preserved and kept clean and safe through regular removal of the waste which had posed a threat to the healthcare workers, patients, surrounding community and the environment.

3. The working condition of the hospital’s janitorial workers has been improved through implementation of the waste management policy, developed with the support of RMF staff.

4. The high speed WIFI internet services for the Juba Teaching Hospital Resource Centre that provide internet access to doctors and nurses at the hospital facilitate research and improve continuous medical education.

5. Throughout this reporting quarter, the hospital has been running on medical supplies provided by RMF in the last quarter.

6. The provision of beddings to Nimule Hospital has reduced re-infection rate among in-patients since the hospital now has adequate number of beddings for the patients.

7. The basic foodstuffs and papyrus mats given to the Internal Displaced People (IDP) in Nimule generated hope among themselves.

8. The visit of RMF team to South Sudanese Refugee camps in Adjumani (Uganda) generated joy, hope and unity among the refugees since the RMF team has South Sudanese nationals and been the first to listen to them.

12. Number served/number of direct project beneficiaries:

1. Direct project beneficiaries are approximately 444,680 people who lived in Juba and the immediate surrounding areas projected basing on 2008 Sudan Population and Housing Census.

2. The JCONAM students who do their clinical rotations in Juba Teaching Hospital are also direct beneficiaries of the project.

13. Number of indirect project beneficiaries (geographic coverage):

1. 9.86 million South Sudanese as per the 2008 Sudan Population and Housing Census from all the ten states of South Sudan as Juba Teaching Hospital is the only referral hospital for the entire country.

2. The entire business community from neighboring and other African countries, the working class from INGOs, UN Agencies etc

14. If applicable, please list the medical services provided:

N/A

15. Please list the most common health problems treated through this project.

1. Malaria

2. Diarrheal Diseases

3. Intestinal Worms

4. Respiratory Tract Infections

5. Skin Infections

6. Measles

7. Malnutrition

8. Enteric fever

16. Notable project challenges and obstacles.

The project has made notable progress during this year however has faced challenges in the following areas:

1. The deteriorated security situation in Juba following the fighting which erupted mid December 2013 couldn’t allow us accomplished our planned activity for quarter 1, 2014.
2. The renovated Pediatric ward 5 medical is still being occupied by wounded patients hence compromising the admission of Pediatric patients due to limited available space and hindering our work for Pediatric department.
3. Power instability at Juba Teaching Hospital hinders effective and efficient service delivery especially at night.
4. Shortage of clean water supply in the hospital compromises service delivery and infection control measures.

17. If applicable, plans for next reporting period:

1. Implementation of RMF annual work plan guided by MOU with MOH, including next steps in upgrade of infrastructure with more focus on Accident and Emergency Department and operations at Juba Teaching Hospital
2. Continue rehabilitating the equipment set at Juba Teaching Hospital with focus on the Pediatric Department.
3. Continued provision of basic medical supplies, disposables and pharmaceuticals for JTH especially pediatric department complementing those provided by the Ministry of Health.
4. To monitor, evaluate the impact of RMC training project and conduct follow up trainings.
5. To introduce basic concept of Respective Health Care (RHC) in JHT and healthcare facilities in Juba County.
6. Continued organization of on-site clinical training.

18. If applicable, summary of RMF/MMI-sponsored medical supply distribution and use:

N/A

19. Success story(s) highlighting project impact:

See Appendix A

20. Recommendations by the Head of the Pediatric Department to RMF for 2013

1. Need to strengthen the pediatric library through provision of Pediatric text books.
2. Need to improve data collection, analysis and dissemination through strengthening the statistic unit of the department, hiring data clerk and provision of furniture.
3. Need to install solar system in the nursery unit to ensure constant source of electricity for running different lifesaving equipments which will in turn reduce neonatal mortality rate in JTH.

III. Financial Information

21. Detailed summary of expenditures within each budget category as presented in your funded proposal (file attachment is fine). Please note any changes from plans.

Provided separately
Appendix A: Success Story

Internal Displaced People (IDPs) in Nimule, Magwi County - Eastern Equatoria State

Following the eruption of fighting in Juba from mid December 2013 which then quickly escalated to other States, a number of people are forced to leave their homes and moved to other safe locations for their life. Many people from Juba and Greater Bor County moved to Nimule which is a payam located at South Sudan –Uganda border. Some of the displaced people crossed to Uganda and others remained in Nimule who are regarded as IDPs. By the time RMF visited one of the site in Nimule, the population of the IDPs was more than 40,000 and the number kept increasing daily, the people were lacking basic needs such as clean drinking water, foodstuffs, shelter, basic healthcare services and educational materials among others. Most of the people we talked to were frustrated and angry because a number of organizations visited them, talked to them and promised to help but none had ever returned hence all had bad experiences. However, the few available gathered were able to share with RMF team their past experiences from their war torn areas up to Nimule. RMF through the leadership of the CEO Dr. Martina Fuchs mobilized resources, locally purchased and delivered phoso (maize flour), beans, cooking oil and papyrus mats to help them.

Then everybody gathered there was extremely happy for our support, one of the elderly woman who was initially frustrated and angry then smiles, became full of joy then told the mass that lets pray and she led the prayers thanking RMF for the support.

Dr. Martina sited among the IDPs and listening to their stories, left an elderly woman who was frustrated at first because many organizations visited them, took photos and promised to come but none turn up, this same woman was full of joy after receiving our support which was dramatic shift of attitudes and then prayed for us and renewed her belief in God.
RMF team purchasing cooking oil locally from Nimule market to be delivered to one IDP site_ Hai Kanisa
Purchased papyrus mats from Nimule market
Dr. Martina Fuchs consoling the IDPs after delivery of the purchased items
Rt: Rev Daniel Mabok serving as a translator, Centre: an elderly woman narrating to us her story and challenges they are facing in the camp site of Hai Kanisa in Nimule during our first visit in January 2014
Dr. Moses Taban Kenyi consoling the IDPs and encouraging them to be positive in life during this critical moment
Internal displaced people who gathered in the Church in Hai Kanisa
Appendix B: Other project photos

Purchased cleaning materials awaiting distribution to different pediatric wards
Ward cleaners packing the cleaning materials after receiving them from RMF office, Lt: The first two are cleaners for pediatric ward 5 medical while unit Rt: Cleaner for Pediatric ward 5 surgical unit.
A jubilant nurse taking cleaning materials for paediatric ward 5 emergency
Removal of non medical waste from the dumping site within JTH to be transported to the official site designated by Juba Town Council.
A truck leaving the dumping site after loading heading to the designated site.
A janitor removal some of the scattered non medical waste.
A cleared area after removal of all the wastes.
A hired sewage tank sucking the over flooded septic tank in JTH.
New waste collection bins placed next to all the wards and common gathering place within JTH for dumping all non medical waste to ensure proper segregations of wastes from the generation sites.
RMF team together with the four Respectful Maternity Care (RMC) Master Trainers discussing the next step for RMC project following the pilot training conducted in November-December 2013.
Patients at the corridors of the medical unit of Accident and Emergency Department of JTH due to lack of space.
Patient on the floor due to inadequate number of beds in the Accident and Emergency Department
Terminally ill patient laying on the floor of the medical unit of Accident and Emergency Department
Patient at Accident and Emergency Department only able to find space on the floor
Dr. Martina Fuchs handing over a bundle containing 150 pairs of beddings to the Medical Director of Nimule Hospital Dr. David Nyuma as a donation
Paediatric ward of Nimule hospital
Worn out delivery beds in the delivery suite of Nimule Hospital
RMF team together with Doctors of Nimule Hospital