### Juba Teaching Hospital, South Sudan
Health Systems Strengthening Project

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<th>Date:</th>
<th>Prepared by:</th>
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<td>31st January 2014</td>
<td>Dr. Taban Martin Vitale and Okang Wilson Ezekiel</td>
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1. **City & State**
   Juba, Central Equatoria, Republic of South Sudan

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

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

4. **Reporting Period:**
   October 1st to December 31st 2013

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 372,141 people who live in Juba and the immediate surrounding areas as per the 2008 South Sudan Population and Housing Census and referrals from all the 10 states to serve the country population of 9.6 million indirectly.

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**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 referral hospital in the whole country of South Sudan and is located in Juba City, Central Equatoria State. With an estimated population of 9.58 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 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 delivered and coordinated distribution of medical equipments, medicines and consumables worth $110,000 to Juba Teaching Hospital during the critical time following the fighting which erupted in Juba in mid December 2013, and later spilled over to other states (See Photos in Appendix and refer to more detailed separate report on the shipment).

2. Procured and delivered blood bags and lab reagents worth $5,000 to the Wau Teaching Hospital (See Photos in Appendix).

3. Identified and trained two medical officers working in maternity unit as master trainers for Respectful Maternity Care (RMC).

4. Facilitated and conducted the training for maternity staff from Juba Teaching Hospital and neighboring primary health care centers on Respectful Maternity Care (See separate report on RMC training).

5. Continued support of high speed WIFI internet services for Juba Teaching Hospital Resource Centre (JTHRC).

6. Continued to provide cleaning materials to Pediatric department regularly to keep the wards clean.

7. Conducted the assessment of Pediatric ward 5 emergency and derived next steps awaiting implementation.

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

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

1. The $110,000 worth of medical equipment, medicines and consumables delivered to Juba Teaching Hospital on January 10, 2014, greatly stabilized the situation after the conflict/crisis in December when the hospital was running low of urgently needed supplies.

2. The lab department was able to start a large blood donation/transfusion program for many patients after receiving the blood bags and lab reagents from the December supply delivery. Many lives were saved most of the patients admitted to JTH in late December required blood transfusions following gunshot wounds and other injuries suffered during the ongoing conflict.

3. The radiology department in JTH was able to resume performing X-ray services after receiving a resupply of X-ray film.

4. Malakal and Wau Teaching Hospitals also benefited from the shipped medical supplies following a division and distribution of the supplies by the National Ministry of Health.

5. Wau Teaching Hospital was able to initiate a blood donation/transfusion program after receiving blood bags and lab reagents worth US$5,000 from the second consignment following a request from Ministry of Health.

6. Respectful Maternity Care Training Program (see separate report for more details):

- Recently, maternity experts and global stakeholders have turned attention towards the presence of disrespect and abuse (D&A) by staff within health centers and hospitals as a deterrent to women seeking potentially lifesaving maternity services. Literature indicates that there is a strong correlation between how respectfully a woman is treated when receiving antenatal care and giving birth with how likely she is to utilize these services in the future. Negative experiences and perceptions of providers and health facilities also can spread across communities and deter large numbers of women from seeking care by skilled birth attendants. This is particularly alarming because the World Health Organization (WHO) recommends that a skilled attendant be present at every birth since they can prevent up to 90% of maternal deaths where they are authorized to practice their competencies and play a full role during pregnancy, childbirth and after birth.
- Transforming maternity care into a welcoming and supportive experience through the
systematic introduction of Respectful Maternity Care (RMC) will increase utilization of services, improve community and health system relationships, and improve staff morale and job satisfaction. RMC is possibly one of the most significant interventions that can be introduced in order to approach the goals of Millennium Development Goal (MDG) 5. Additionally, respectful care should not be viewed as a privilege but as a human right that needs to be guaranteed for vulnerable populations such as pregnant women and their families. Addressing this problem should be a priority because if women are not willing to seek lifesaving care, then improving training, equipment, medication stocks, and financial barriers will fail to reduce the number of women dying.

- The RMC training program at Juba Teaching Hospital, designed and conducted by RMF Coordinator, Maternal Child Health Programs, Cindy Stein Urbanc and RMF Master Trainer, Reagan Turner-Bell, consisted of 6 modules facilitated over a 2 day period with the following learning objectives:
  - Analyze caring behaviors and culturally sensitive interactions in the maternity setting
  - Discuss and practice therapeutic communication skills that lead to compassionate and humanized care
  - Examine professional role expectations and standards of practice when providing care
  - Describe key features of dignity
  - Describe the methods of collaboration with other health facility staff and community members.

- The training program was facilitated for 29 third year midwifery students from the Juba College of Nursing and Midwifery (JCONAM). The students represent both males and females from a variety of ethnic groups that came to study in Juba from different states in South Sudan.
- 4 Master Trainers were selected by the Ministry of Health and JCONAM administration: 2 practicing physicians and 2 midwifery tutors at JCONAM.
- The Master Trainers facilitated a 2 full day RMC training for 19 maternity staff from Juba Teaching Hospital and two local Primary Healthcare Centers (PHCCs), Munuki and Kator. The staff was comprised of: community midwives, nurse-midwives, physicians, lab technicians, and nurses.
- There has been a dramatic shift in attitudes among the maternity staff regarding best practices following RMC training, improving service delivery at maternity unit.

7. Facilitated and performed regular monitoring and supervision of the JTH healthcare workers and janitors on the implementation of waste management policy guidelines.
8. RMF continued to work closely with JTH administration and public health officers to ensure regular waste removing following the signed MoU with Juba Town Council.
9. Performed regular monitoring and supervision of the healthcare workers and ward cleaners on implementation of developed strategy for keeping Pediatric wards clean.
10. The Pediatric ward 5 is well maintained and clean as a result of the regular supply of cleaning supplies.
11. Carried out assessment and submitted proposals for establishing a mini blood bank in the the Maternity unit and procurement of a new Ultrasound for maternity department.
12. Continued to follow up with prospective donors on our proposal for improving water and sanitation situation at Juba Teaching Hospital.
13. The medical unit of fully renovated Pediatric Ward 5 is now fully occupied by wounded soldiers following the deteriorated security situation in Juba and some States.
14. Support of high speed WIFI internet services for Juba Teaching Hospital Resource Centre which provides internet access to doctors and nurses at the hospital.
15. Prepared the next step for renovation of Pediatric Ward 5 Emergency following our second assessment of the ward.

11. Impact this project has on the community (who is benefiting and how):
1. The medical supplies delivered to Juba Teaching Hospital has reduced the financial burden on patients who now get most of the essential medicines, radiological and laboratory services from the hospital instead of purchasing them from private facilities.

2. The delivered medical supplies also saved the life of most vulnerable patients who wouldn’t have made it without the essential medicines since are not able to purchase them from private pharmacies due to poverty.

3. The renovated Pediatric Ward 5 coupled with provision of 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.

4. 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 health workers, patients, surrounding community and the environment.

5. 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.

6. 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.

12. Number served/number of direct project beneficiaries:
   1. Direct project beneficiaries are approximately 372,141 people who live in Juba and the immediate surrounding areas as per the 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. 9.6 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 created many unforeseen challenges and didn’t enable us to complete our planned Pediatric Ward renovation activities.
   2. High patient’s turnover especially severe trauma cases following gunshots during the fighting forcing the limited medical professional to handle the overwhelmed number of cases compromising the level of quality in service delivery.
3. Most of the medical wards and our renovated Pediatric ward 5 are occupied by critical surgical cases, compromising the admission of Pediatric patients due to limited available space.
4. Power instability at Juba Teaching Hospital hinders effective and efficient service delivery especially at night.
5. 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 and operations at Juba Teaching Hospital
2. Continue rehabilitating the equipment set at Juba Teaching Hospital with a refocus 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. Continued organization of on-site clinical training

18. If applicable, summary of RMF/MMI-sponsored medical supply distribution and use:
See a different reports for the medical supplies provided

19. Success story(s) highlighting project impact:
See Appendix A

20. Recommendations by the Head of the Pediatric Department to RMF for 2013
The Pediatric Ward needs to hire an additional Consultant Pediatrician for efficient and effective service delivery.

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

Delivery of Medical Equipments/Consumable/Medicine to JTH

Following the eruption of fighting in Juba from mid December 2013 and ongoing fighting in other States, the only national referral hospital, Juba Teaching Hospital, became overwhelmed with an enormous number of patients; seriously wounded and severely ill civilians and military personnel. The hospital was running desperately low on urgently needed medicines, consumables and equipments to do its life saving work during the crisis. At that time, most of foreign government an non-governmental organizations and personnel were leaving Juba due to deteriorating security situation.

Despite the tense security situation the teams from RMF Uganda and RMF South Sudan together procured medical equipment, medicines and supplies worth US$110,000 in Kampala and transported by truck directly to Juba Teaching Hospital. This helped to greatly stabilize the situation in early January and up to the time of this reporting, the hospital still has adequate supplies according to the Director General, Dr. Wani Lolik.

RMF was the only organization which provided supplies to JTH during this critical moment.
Some of the supplies RMF purchased, boxed up at the Joint Medical Store in Kampala, Uganda ready for shipping

Charles Naku RMF Uganda Country Director standing among packed RMF consignments
Medicare Truck ready for loading

Loading in progress
Custom officials at the Ugandan side of the border verifying RMF documents
Truck arriving safely at Juba Teaching Hospital

Director General of JTH and JTH staff welcoming RMF staff and supplies
JTH pharmacist Dr. Gismalla, RMF’s Richard Ambayo, Dr Taban Martin Vitale, Okang Wilson Ezekiel, JTH DG Dr Wani Lolik Lado
Managing Director at Medicare Company and Lab Technician at JTH
Portion of the supplies to be transported directly to Malakal Teaching Hospital
Giemsa laboratory reagents requested by the head of lab department for JTH

One of the wheelchair delivered by RMF been allocated to Surgical ward 3
Blood Drive using the new equipment

Appendix B: Other project photos
Blood bags for Wau Teaching Hospital
L - 4th year Medical student from Juba University College of Medicine who offered to transport the consignments from Juba town to Juba Teaching Hospital store, R - one of the store personnel.

Offloading the cartons of blood collecting bags
Cindy and Reagan briefing the master trainers and South Sudan RMF team before the start of RMC training

Cindy and the team touring the JCONAM demonstration lab with more emphasis on RMC practices
Siama one of the master trainer leading the discussion during the training of maternity staff on RMC

Role play during the training
Role play during the training

Dr. Laja, one of the trainees, representing her group in plenary
Issuing Certificate of attendance to the participants

Renovated Pediatric Ward 5 now occupied mainly by wounded soldiers
Cleaning materials for Pediatric wards 5 and 7, bought and delivered by RMF

Cleaners receiving the cleaning materials
Jubilant nurses in Pediatric ward 5 which is clean and well maintained

A child recovering well from Severe Malaria in Pediatric ward 5, surgical unit
A child in treatment for burnt wound and recovering well in Pediatric ward 5, surgical unit

A cleared area after removal of the non medical waste by Juba Town Council following the signed MoU
*Functional incinerator where all the medical waste is burnt*