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Humanitarian Development Nexus: Strengthening a Decentralized Health System for protracted displaced population (HealthPro) in al Fasher and Nyala – North and South Darfur States"-

T05-EUTF-HOA-SD-73-01

ANNEX I – NEED ASSESSMENT UTASH PRIMARY HEALTH

CENTRE 1 – HEALTH FACILITY PROFILE

1. LOCATION AND FACILITY DETAILS

1.1 Location (State/town/locality/camp)

South Darfur State, Nyala, Utash IDP (approximately 15 Km from SMoH).

1.2 Facility Name

Utash Primary Health Centre 1 (NHIF).

1.3 Type of Facility

Primary Health Centre.

1.4 GPS Position

12° 6'21.92"N, 24°54'40.34"E





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1.5 Name and position of the interviewed person

Amel Nour Eldin Adam – Facility Manager and Medical Doctor (Tel: 0912265630).

1.6 Camp Population Catchment Area

Total population: 120,000 – 150,000

Male:

Female:

Total Under 5:

Male:

Female:

Total Pregnant Women:

Total Lactating Women:

The Camp is sectioned into different centers. According to the PHC center administration, each center is estimated to contain approximately 600 people. The number of visitors is estimated to be 150-200 daily. Moreover, there is no Community health committee available.

2. SERVICE AVAILABILITY

DESCRIPTION	YES	NO
Child vaccination services, either at the facility or as outreach.		
Nutrition and Growth monitoring services, either at the facility or as outreach.		
Curative care services for children under 5.		
Community services.		
Health promotion and school health activities.		



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Any family planning services – including modern methods, fertility awareness 1 2 methods (natural family planning), male or female surgical sterilization.		
Antenatal care (ANC) services.		
Services for the prevention of mother-to-child transmission of HIV.		
Normal delivery.		
Diagnosis or treatment of malaria.		
Diagnosis or treatment of STIs, excluding HIV.		
Diagnosis, treatment prescription or treatment follow-up for TB.		
HIV testing and counseling services 1 2 12 HIV/AIDS antiretroviral prescription or antiretroviral treatment follow-up services.		
HIV/AIDS care and support services, including treatment of opportunistic 1 2 infections and provision of palliative care.		
Diagnosis or management of non-communicable diseases, specifically diabetes 1 2 cardiovascular diseases, and chronic respiratory conditions in adults.		
Minor surgical services, such as incision and drainage of abscesses and suturing of lacerations that do not require the use of a theatre.		
Laboratory diagnostic services, including any rapid diagnostic testing.		
Blood typing services.		
Blood transfusion services.		
Does this facility routinely provide in-patient care?		
Does this facility have beds for overnight observation? (Short stay)		

2.1 Other (e.g., Health promotion activities and community engagement)

For just one time they had a community activity held inside the health center. Not all the PHC service packages are provided. The center only has the Doctor, Laboratory, Pharmacy, and short stay ward.

The MCH (vaccination, nutrition and family planning, ANC services and health promotion, etc.) are not provided as a service package.

The HIV rapid test is the only service available. After testing, for confirmatory tests and treatment the



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patient is referred to other facility that provide the service, either hospital or treatment centre.

3. HOUR STAFF COVERAGE

3.1 Clinic opening hours

The clinic is open for 8 hours per day. From Saturday – as an extra day – to Thursday.

DESCRIPTION	YES	NO
24-hour emergency.		
On call staff.		

3.2 Other

The clinic provides only daily services.

4. COMMUNICATION

DESCRIPTION	YES	NO
Land line telephone.		
Cellular phone (private or clinic's).		
Short Wave Radio.		
Computer (email, skype).		
Reliable internet connection.		
Reliable connection.		

4.1 Other

There is only the cell phone that is designated for the health center communications. There is a computer in the pharmacy only for the medications monitoring and it has no internet connection.



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5. SOURCE OF WATER

5.1 Most commonly used source of water

A water well in the camp.

5.2 Quality of the water (observation)

POOR					EXCELLENT	
1	2	3	4	5		

5.3 Other

The water is taken from the camp's well. The water quality is very bad and it can't be used for drinking.

6. POWER SUPPLY

DESCRIPTION	YES	NO
Is this facility connected to the national electricity grid?		
Does the facility have other sources of electricity (Solar)?		
Does the facility have other sources of electricity (Generator)?		
Is the generator or solar functional?		

7. EXTERNAL SUPERVISION

DESCRIPTION	YES	NO
Does the facility receive any external supervision (e.g., from locality, state or national office)?		
When was the last time a supervisor from outside this facility came here on a supervisory visit? Was it within the past 6 months?		

7.1 Supervision visits

Within the last 12 months, the Facility received 12 visits.



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7.2 Other

They have received monthly supervision visits from NHIF but the impact of these visits is not seen. They didn't get any supervisory visits from SMOH.

8. STAFFING

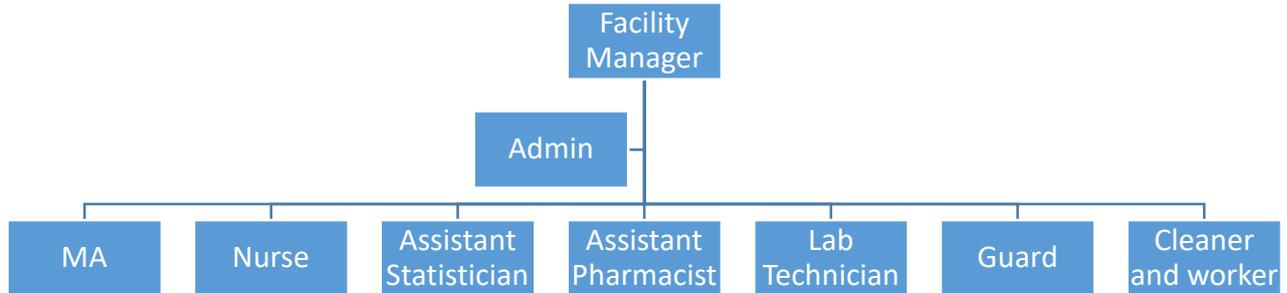
OCCUPATIONAL CATEGORIES		N.	Employed (Yes/No)	Full Time / PartTime
1	Medical Doctors	1	Yes	Full Time
2	Medical Assistant	1	Yes	Full Time
3	Nurse	3	Yes	Full Time
4	Midwife			
5	Community Midwife			
6	Community Health worker			
7	Pharmacist			
8	Assistant Pharmacist	2	Yes	Full Time
9	Lab Technician	1	Yes	Full Time
10	Assistant Lab technician			
11	Vaccinator			
12	Family Planning			
13	Nutritionist			
14	Assistant Nutritionist			
15	Statistician			
16	Assistant Statistician	2	Yes	Full Time
17	Volunteer		Yes	
18	Guard	2	Yes	Full Time
19	Cleaner and worker	3	Yes	Full Time



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8.1 Organizational Structure



8.2 Other

All are contracted through yearly contracts. The nurses assist in the lab and there is no pharmacist or statistician. There is a worker who is assigned to operate and doing regular maintenance of the electric generator.

9. MANAGEMENT MEETINGS

DESCRIPTION	YES	NO
Does this facility have routine facility staff meetings?		
Does the facility maintain official records of facility staff meetings?		
Is there any monitoring system and follow-up of action points of staff meetings?		
Are there any routine meetings about facility activities or management issues that include both facility staff and community/community committee members?		
Is an official record of the meetings with both facility staff and community members maintained?		

9.1 Other

They hold regular staff meeting without documentation, and the meetings are held sometimes according to the need and/or urgent issues.



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10. QUALITY ASSURANCE

DESCRIPTION	YES	NO
Does this facility routinely carry out quality assurance activities? An example may be facility-wide review of mortality, or periodic audit of registers.		
Is there an official record of any quality assurance carried out during the past year?		

10.1 Other

There is a periodic check of the registers and books. The follow up team from NHIF conduct checks for the facility records kept, to ensure completion of the data.

11. CLIENT OPINION AND FEEDBACK

DESCRIPTION	YES	NO
Does this facility have any system for determining clients' opinions about the health facility or its services?		
Has any action been taken based on the complaints of clients during the last 6 months?		

11.1 Other

The NHIF has a general telephone number for patient complaints, and to have their feedback. This is not related to the health center. They only receive verbal complaints from the patients but not as systematic process to have their feedback.

12. REFERRAL

DESCRIPTION	YES	NO
Is there any referral system functioning?		
Does this facility have a functional ambulance or other vehicle for emergency transportation for clients that is stationed at this facility and that operates from this facility?		
Is fuel available today?		

If there is no ambulance, please can you explain how referral system works?

The patients are referred through referral formats but they have to be responsible on their transportation.



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And all other related activities or costs are on the patient.

13. HMIS

DESCRIPTION	YES	NO
Does this facility have a system in place to regularly collect health services data?		
Does this facility regularly compile any reports containing health services information?		
Does this facility have a designated person, such as a data manager, who is responsible for health services data in this facility?		

What are the means of reporting (paper, electronic data)?

Paper forms for reporting.

Please explain the data flow.

A monthly report is produced and shared with NHIF.

14. HEALTH CARE WASTE MANAGEMENT AND CLIENT LATRINE

All waste (sharp, medical and biological) is burned in drums or disposed in protected ground. Some of the waste is removed outside in unprotected site. There are no segregation of waste of different nature nor protocols in place.

15. HEALTH SERVICES' CHECK LIST

1. LABORATORY		
1.1 Sample collection area	YES	NO
Desk/table/ trolley		
Chair for the patient		
Chair for the collector		
Tourniquet		
Syringes		



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Samples containers		
Label stickers		
Safety box		
Access to hand washing facilities		
Gloves		
1.2 Laboratory equipment	YES	NO
Microscope		
Water bath		
Centrifuge		
Mixer		
Bunsen burner		
Pipette		
ESR tubes		
ESR racks		
Colorimeter		
1.3 Refrigerator	YES	NO
Functioning refrigerator		
Temperature maintained at 2-8oC		
1.4 Lab registry	YES	NO
Available forms		
Available registry		
1.5 Consumables and reagents	YES	NO
Stock-outs control		
Stored at required temperature		
Stock control		
Syringes		
Needles		
Gloves		



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Lancets		
Sample bottles		
1.6 License and guidelines	YES	NO
Operating license		
Guidelines on laboratory procedures		
Safety guidelines including radiation protection		
Quality assurance guidelines		
Staff knowledge of the procedures in the guidelines		
1.7 Standard process of sample taking, labelling, and giving results	YES	NO
Check patient ID		
Check requested investigation		
Check integrity of sample		
Explain and Take sample into suitable container		
Correct labelling		
Registering of results and writing on result slip		
1.8 Reporting	YES	NO
Available reports about lab investigations done and medicines distributed		
Statistics and medical reports produced		
Saving the reports		
1.9 Assure internal quality control	YES	NO
Regular calibration of equipment		
Use of controls to check of quality of results		
1.10 Safety and IPC	YES	NO
Availability of PPEs (gloves, masks, and safety box with sharp disposal)		
Guidelines of safety measures and medical waste management		
Safety use of sharp disposals and radiation safety		

They follow on the general guidelines, which is more like a practical experience than guidelines. The lab is managed by a laboratory technician. For label stickers they use marker pens not paper stickers.



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2. PHARMACY		
2.1 Well-furnished premises	YES	NO
Glass and aluminum shelves		
Counter		
Electric signboard		
Ceramic floor		
Artificial roof		
2.2 Air conditioner	YES	NO
Air conditioner functioning		
Able to keep the temperature at 25oC		
2.3 Medicines refrigerator	YES	NO
Refrigerator dedicated to medicines available		
Set at temperature to preserve medicines such as vaccines		
2.4 Consumables	YES	NO
Lab coats		
Water proof envelopes and labels		
2.5 Medicines	YES	NO
Availability of medicines (See the List)		
Storage conditions and expiry medications		
Registry for medicines in the facility		
2.6 Standard dispensing processes	YES	NO
Patient identification		
Drug doses, frequency, duration, and administration modality		
Medication safety measures		
Correct labelling of medicines and safety measures to deal with expired medicines		

There is a regular supply of medicines, however they go out of stock frequently, the patients contribute with the 25% of the cost of drugs. The pharmacy is in very poor condition, and it needs rehabilitation for the ceiling, the floor and the air-conditioning. During hot weather, due to the inability of the



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generator to generate enough electricity, the refrigerator will be affected and be unable to keep medicines at the appropriate temperature.

3. SHORT STAY		
3.1 Bed and side accessories	YES	NO
Able to elevate or lower foot end of bed		
Able to elevate or lower head end of bed		
Mattresses with pillows		
Bed sheets		
Bed side cabinets		
Chair		
Screen for privacy		
IV stand		
3.2 Nurses' station	YES	NO
Desk		
Chairs for the nurses		
Chair for patients		
Hand wash basin/area or alcohol rub		
Safety boxes		
3.3 Consumables	YES	NO
Gloves		
Cotton wool		
Disinfectant		
3.4 Hand washing area	YES	NO
Ceramic/waterproof walls		
Flowing water		
Soap		
Means of drying hands		



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3.5 Patient admission and discharge registry	YES	NO
Admission and discharges register		
Prescription forms		
Patients' records keeping		
Referral forms		
3.6 Guidelines	YES	NO
Guidelines on the management /nursing care of common medical and surgical conditions		

The short stay ward is in very bad condition, the same room is used as a minor theatre room, there is no water tap. The room doesn't maintain the privacy for the patients.

4. MINOR THEATRE		
4.1 Theatre equipment	YES	NO
Flowing water supply		
Table multi-directional adjustable		
Stool		
Ceiling lamb		
Minor surgical set		
Autoclave		
4.2 Essential supplies /equipment	YES	NO
Oxygen supply (in cylinders or piped)		
Suction method		
Nitrous oxide supply		
Waste container		
Safety box		
4.3 Consumables	YES	NO
Gloves		
Cotton wool		



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Disinfectant		
Local anesthetic		
Sutures		
Suturing needles		
4.4 Guidelines	YES	NO
Hand wash checklist		
Guidelines on minor surgeries		

There is no minor theatre, the short stay room is used as minor theatre.

5. LABOUR ROOM		
5.1 Labor room beds	YES	NO
Able to elevate or lower foot end		
Able to elevate or lower head end		
Firm on the floor		
Screens for privacy		
Bed sheets and Pillows with pillowcases		
Bed side accessories		
5.2 Delivery table	YES	NO
Disposable sterile Macintosh or sheet		
Table can be maneuvered in several directions		
Emergency supplies (O2 in cylinders)		
5.3 Lifesaving drugs	YES	NO
Emergency supplies (O2 in cylinders)		
Oxytocin		
Magnesium sulphate		
Antihistamine		
Antihypertensive for emergency use (e.g., Labetalol)		



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Ergometrine		
5.4 Equipment	YES	NO
Mobile light, IV stand, and Scissors		
Adult and infant weighing scale		
Suturing set, needle, and sutures		
Suction device for baby		
Ventouse for baby extraction		
Cardio tochography		
Torch and Tongue depressor		
Access to ENT set		
5.5 Consumables	YES	NO
Needles and syringes		
IV fluid giving sets		
Cannulas		
Gloves and Cotton wool		
Disinfectant		
Urinary catheter		

There is no labor room or a midwifery service in the center.

6. OUTPATIENT DEPARTMENT		
6.1 Consulting room	YES	NO
Desks		
Chair for the MO/medical assistant		
Chair for the patient		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		



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Safety box when sharps are used		
6.2 Equipment	YES	NO
Stethoscope		
Sphygmomanometer		
Thermometer		
Pediatric and adult weighing scales		
Diagnostic set including (Torch, tongue depressors)		
Dressing tray, autoclave, and kidney dish		
6.3 Medical forms	YES	NO
Prescription forms		
Forms for diagnostic investigations		
Patient records files		
Referral forms		
6.4 Guidelines	YES	NO
MCH protocols (IMCI, ANC, EPI guidelines)		
CDs treatment protocols (Malaria,)		
6.5 Storage facilities	YES	NO
Shelves		
Cabinets and cupboards		
6.6 NHIF	YES	NO
Client's health insurance		

The center doesn't provide all the PHC service packages, from the protocols used in MCH services, The doctor only uses the IMCI protocol for treating under 5 children.

7. MCH SERVICES		
7.1 MCH services Room/ area to accommodate MCH services	YES	NO
Desks		



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Chairs for the staff		
Chairs for the women		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		
Safety box when sharps are used		
7.2 RH equipment	YES	NO
Fetal scope		
Examination lamp		
Thermometer		
Cusco speculum, Sim retractor, artery forceps		
Examination tray		
Kidney dishes		
7.3 Vaccination	YES	NO
Infant and adult weight scale		
Ice bag		
Thermometer		
Vaccination carrier		
Cold boxes		
Vaccine Refrigerator		
Vaccination vials monitor		
7.4 Guidelines	YES	NO
High risk pregnancy and Vaccination schedule		
Cards for follow up (ANC, vaccination, growth charts)		

There is no MCH services provided. The pregnant women and U5 children are seen by the doctor as all other patients.



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16. ACCESSIBILITY

16.1 Measures/initiatives in place to facilitate access and create a friendly environment for PWD

For people with disability the only measure used is a wheelchair lane (very simple ramp) to facilitate their movements. For other disabilities there is no measures in place.

16.2 Measures/initiatives in place to facilitate and create a friendly environment for women

There is no measurements or initiatives to provide women friendly environment. The short stay room doesn't maintain privacy, and no closed space for lactating mothers.

17. CIVIL WORKS AND CONSTRUCTION

NY02 Ottash Clinic is supported by NHIF. The centre is located on the northern side of the city of Nyala, 17 minutes away from the city centre. The compound has a perimeter of 172 m and a total internal area of 1,320 sqm. About 141 sqm covered surface for the main building, and the toilet block. The surrounding area of the clinic is densely populated. The location makes it easily accessible to the inhabitants of the IDPs camp of Ottash. The road to the clinic is quite rough.

The compound is composed of two blocks surrounded by a metal grid fence. Presence of 1 tanks of 3.000 L and 1 water tower of 1.000 L executed by UNAMID, UNICEF and WES in October 2019. Unfortunately, due to a pump damage, water does not reach the clinic rooms and water bottles are currently being used. A 420 V (0.42 kw) generator is available.



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Block A – 2 Medical consultation, 1 mix ward, 1 registration room, 1 lab, 1 pharmacy, 1 waiting area for a total surface of 133,65 sqm.

Block B – Toilets of 7,4 sqm.

To summarize, the planned interventions are:

- Cleaning and fencing of the area;
- External rehabilitation of the existing;
- Internal rehabilitation;
- Extension of the existing building (Block A);
- Erections of new access ramps and masonry mastaba around the building;
- Erection of new waiting areas;
- Excavation and erection of absorbing wells and two new toilet blocks;
- Erection of a new elevated water tank;
- Erection of a new medical waste disposal area;
- Erection of new fence and main gate;
- Plumbing system and electrical power supply.



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To this scope, the Contracting Authority will provide the technical documentation already developed and approved by the AICS Technical Office and the Engineering Department of the South Darfur State Ministry of Health. It includes the assessment report and all the construction technical documentation including final drawings, technical report, timetable and BoQ. The same approved documentation with stamp and signature of the SMOH will be provided.