



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  
CUP H82C19000120005

## HEALTHPRO – NORTH DARFUR

### ASSESSMENT PHC CLINICS

- AL SALAAM A
- AL SALAAM B
- ABU SHOUK FAMILY PLANNING CLINIC

JANUARY 2022

#### ANNEXES:

1. Family Planning Abu Shouk Camp, clinic Profile
2. Staff Assessment Family Planning Clinic, Abu Shouk Camp clinic
3. Al Salaam A clinic Profile
4. Staff Assessment Al Salaam A clinic
5. Al Salaam B clinic profile
6. Staff Assessment Al Salaam B clinic
7. Need Assessment Facility Tool
8. Staff Assessment Tool
9. Drug list PHC



Humanitarian Development Nexus: Strengthening a Decentralized Health System for protracted displaced population (HealthPro) in al Fasher and Nyala – North and South Darfur States”-  
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## Preliminary assessment of HealthPro target PHC clinics in Al Fasher IDP Camps

### Description

The reconstruction and reactivation of all preventive and curative PHC services in Darfur region is a national priority. This could give rise to great opportunities for revitalizing the health sector and providing the needed resources. From another perspective the overdue restructuring process of key health institutions (in particular the NHIF and NMSF) might create a temporal vacuum and delay the operationalization of new strategies and approaches.

IDP camps in suburban areas of Al Fasher, where almost half of the people have decided to stay after the returning process, present an ideal condition to realize a health program based on the triple Nexus approach, progressively shifting social service management from the emergency modality to a development modality of full incorporation within the local government and public sectors.

Sudan FMoH National Health policy 2017-2030 and Health Sector strategic plan 2017-2021, both entailing EU Humanitarian Development and Peace Nexus approach, together with sector reforms, as the NHIF for the universal health coverage by 2020 give guidance to the EU to grant AICS through indirect management arrangements, a 3 year health intervention in Darfur aiming at strengthening the decentralized health system for sustainable and durable progress: Humanitarian Development Nexus: “Strengthening a Decentralized Health System for protracted displaced populations (HealthPro) in al Fasher and Nyala – North and South Darfur States “ T05-EUTF-HOA-SD-73-01

The HealthPro initiative, AICS component (HealthPro-AICS), aims at strengthening the decentralized health system in the suburban IDP camps in Darfur: Nyala (south Darfur State) and AlFasher (north Darfur State) towns. Main scope of the project is, in line with the triple Nexus approach and Sudan pacification process, to support the institutionalization and incorporation within the Public System of the health services, ensuring Government of Sudan (GoS) ownership and health care sustainability. The action intends to contribute to the Universal Health Coverage (SDG 3), strengthening health system governance and increasing accessibility to quality and comprehensive PHC to displaced population and host communities.

In close coordination with North Darfur SMoH, 3 PHC Clinics have been selected to implement Nexus approach, with a total catchment area of 149,531 people. All the clinics are situated within the camps surrounding Al Fasher town.

- Clinic is in Abu Shouk IDP Camp. It is supported by Family Planning Association, serving a catchment area of 44,531 people;
- Clinic in Al Salaam IDP Camp. Denominate Al Salaam A Clinic. It is supported by Patient Helping Fund (PHF), serving a catchment area of 27,000 people;
- Clinic in Al Salaam IDP Camp. Denominate Al Salaam B Clinic. It is supported by National Health Insurance Fund (NHIF), serving a catchment area of 78,000 people;

In this context the clinics have some similar institutional setting: these clinics are part of the public health system and are mainly funded by both regional governments (NHIF reimbursement system) and out of pocket payments. Alongside, Health System it is managed by local government and it is characterized by similar organizational models, basing its structure on the WHO District Model for decentralization of Health Services with the goal of the UHC.

These 3 clinics, since the beginning of the humanitarian crisis in Darfur, have been run by NGOs and one by the NHIF. In any case they all benefit from the NHIF purchasing system of services, although they don't fulfil all the standard criteria established by the accreditation system of the NHIF. Implementation of this credential system ensures efficiency in using resources and enables facilities to build their capabilities to provide the minimum service package. The credential processes do also ensure that healthcare providers are in the position to provide basic (minimum) quality health services to insured members in accordance with the Benefit Packages set by the Government.

NHIF started a process of drafting a set of Credential Standards that includes minimum set of standards based on the target benefit package provided by the particular level of healthcare facility; include: Facility readiness assessment standards and Performance Indicators/standards to assure certain level of quality of health services delivered (safety and effectiveness).

The clinics have been assessed merging NHIF draft standards and other Structure and Process indicators developing an assessment tool tailored to the specific situation of Darfur and the needs of Nexus Approach. These indicators don't capture the performance capacity of the clinic, but give essential metrics to measure the readiness of the facility to perform PHC services at Family Health Centre level.

This can be considered the first step of a process of measurement and analysis of Health System Performance. The level and depth of analysis is functional for decision makers and data restitution to Health Services Providers. It is not suitable for benchmarking because it is not part of a common framework although many indicators belong to common frameworks of measurements tools, commonly used, and that already underwent different processes of validation.

This assessment included 22 structural and process indicators, 184 sub-indicators for NHIF draft standards and 68 sub-indicators for drug availability in the centres.

Sub-indicators didn't undergo under a process of weighing. When weightings of performance indicators have been derived, they have proven to be more informative than the crude data collected. For the objectives and purpose of this assessment we consider adequate the crude data as it is collected.

A brief analysis of Human Resources working in the clinics have been carried out to identify completeness of cadres present in the clinic, level of education and length of service. Job satisfaction and in service education have been checked to explore motivation, professional satisfaction and career development.

## Methodology

Two main assessment tools have been developed:

- Need Assessment Facility Tool (Annex 1)
- Staff Assessment Tool (Annex 2)

The tools have been shared and validated by PHC Department, State Ministry of Health – North Darfur.

Data collection took two weeks: last week of January 2022 and the first week of February.

Data analysis completed on the 8<sup>th</sup> of February, 2022.

Full collaboration obtained from Clinic staff and Institutional Partners (SMoH) to complete successfully the assessment.

## Indicators

1. SERVICE AVAILABILITY
2. HOUR STAFF COVERAGE
3. COMMUNICATION
4. SOURCE OF WATER
5. POWER SUPPLY
6. EXTERNAL SUPERVISION
7. STAFFING
8. MANAGEMENT MEETINGS
9. QUALITY ASSURANCE
10. CLIENT OPINION AND FEEDBACK
11. REFERRALS
12. HMIS
13. WASTE MANAGEMENT
14. LABORATORY: 50 Sub-indicators
15. PHARMACY: 16 Sub-indicators
16. SHORT STAY: 25 Sub-indicators
17. MINOR THEATRE: 19 Sub-indicators
18. LABOUR ROOM: 29 Sub-indicators
19. OUT PATIENT DEPARTMENT: 22 Sub-indicators
20. MCH SERVICES: 23 Sub-indicators
21. ACCESSIBILITY
22. DRUGS: 68 Sub-indicators (list of drugs)

## Description

All indicators have been scored in a 1 to 5 scale with a representation of different grades of colour, from red to green.

1	2	3	4	5
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There is a rationale with a brief description given to each score.

### SERVICE AVAILABILITY

1	2	3	4	5
No daily service coverage	Morning hours service coverage	8 hrs service coverage	8 hrs service coverage. 24 hrs On Call for emergencies	24 hrs service

### HOUR STAFF COVERAGE

1	2	3	4	5
25% of PHC services are available. No maternity, nutrition services	25% of PHC services are available. Maternity and nutrition present	50% of PHC services are available. No maternity, nutrition services	75% of PHC services are available. Maternity, nutrition services present	100% PHC services available.

## COMMUNICATION

1	2	3	4	5
No communication tools in the clinic	Private telephone staff	1 communication tool present clinic	2 communication tools present	3 communication tools present

## SOURCE OF WATER

1	2	3	4	5
No regular supply. Quality 1 or 2	No regular supply. Quality > 2	Regular supply. Quality 1 or 2	Regular supply daily but not 24 hrs. Quality 3 or 4	Regular supply 24 hrs. Quality 4 or 5

## POWER SUPPLY

1	2	3	4	5
No connection to the national electricity grid. 1 alternative source not functioning	No connection to the national electricity grid. 1 alternative source partially functioning	No connection to the national electricity grid. 1 alternative source functioning	Connection to the national electricity grid. 1 alternative source partially functioning	Connection to the national electricity grid. 1 alternative source functioning

## EXTERNAL SUPERVISION

1	2	3	4	5
No supervision, no supervision plan	1 to 3 supervisions per year, no supervision plan	3 to 6 supervisions per year. No supervision plan	4 to 6 supervisions per year. Supervision plan present	1 supervision per month according to the supervision plan

## STAFFING

1	2	3	4	5
No Medical Doctor, no Medical Assistant no Midwife. 25% of all other cadres present	No Medical Doctor, no Medical Assistant no Midwife. 50% of all other cadres present	No Medical Doctor, 50% of all other cadres present	No Medical Doctor, 75% of all other cadres present	100% of all cadres present

## MANAGEMENT MEETINGS

1	2	3	4	5
No meetings and no records	Occasional informal meetings no records	Occasional formal meetings no records	Regular monthly meetings, no records	Regular monthly meetings, accurate records

## QUALITY ASSURANCE

1	2	3	4	5
No quality assurance strategy	No quality assurance strategy but informal concern to quality	Quality assurance plan but no implementation	Quality assurance plan but no regular records	Quality assurance plan and regular records

## CLIENT OPINION AND FEEDBACK

1	2	3	4	5
No client opinion detection strategy in place	Informal client opinion detection strategy in place. No actions taken	Formal client opinion detection strategy in place. No actions taken	Formal client opinion detection strategy in place. Random actions taken	Formal client opinion detection strategy in place. Actions taken and recorded

## REFERRALS

1	2	3	4	5
No referral system/protocol in place	Informal referral system but no continuity of care procedures	Informal referral system. Continuity of care procedures presents	Formal referral system. Public transport. Continuity of care procedures presents	Self reliant with transport. Formal referral system. Continuity of care procedures presents

## HMIS

1	2	3	4	5
No system in place to regularly collect health services data. No responsible person. No reports	There is a system in place to regularly collect health services data. No responsible person no reports	There is a system in place to regularly collect health services data. There is a responsible person no reports	There is a system in place to regularly collect health services data. There is a responsible person reports are submitted but not regular and accurate	There is a system in place to regularly collect health services data. There is a responsible person reports are submitted and are regular and accurate

## WASTE MANAGEMENT

1	2	3	4	5
No protocols for waste management. Open unprotected disposal for all type of waste	No protocols for waste management. Open burning of all type of waste. No differentiation	No protocols for waste management. Differentiation of different type of waste but unprotected disposal	Protocols for waste management. Differentiation of different type of waste and protected disposal	Protocols for waste management. Differentiation of different type of waste and standard procedures for disposal (incinerators)

## LABORATORIES

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## PHARMACY

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## SHORT STAY

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## MINOR THEATRE

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## LABOUR ROOM

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## OUT PATIENT DEPARTMENT

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## MCH SERVICES

1	2	3	4	5
0% - 25% standards accomplished (key standards missing)	0% - 25% standards accomplished (key standard present)	26% - 50% standards accomplished	51% - 75% standards accomplished	76% - 100% standards accomplished

## ACCESSIBILITY

1	2	3	4	5
Very difficult to access the clinic. No facilitation strategies in place.	Some obstacles to access the clinic. No facilitation strategies in place.	Some obstacles to access the clinic to access the clinic. Some facilitation strategies in place.	Few obstacles to access the clinic to access the clinic. Some facilitation strategies in place.	No obstacles to access the clinic to access the clinic.

## DRUGS

1	2	3	4	5
0% - 25% standards accomplished (key drugs missing)	0% - 25% standards accomplished (key drugs present)	25% - 50% standards accomplished	50% - 75% standards accomplished	75% - 100% standards accomplished

## Findings per clinic

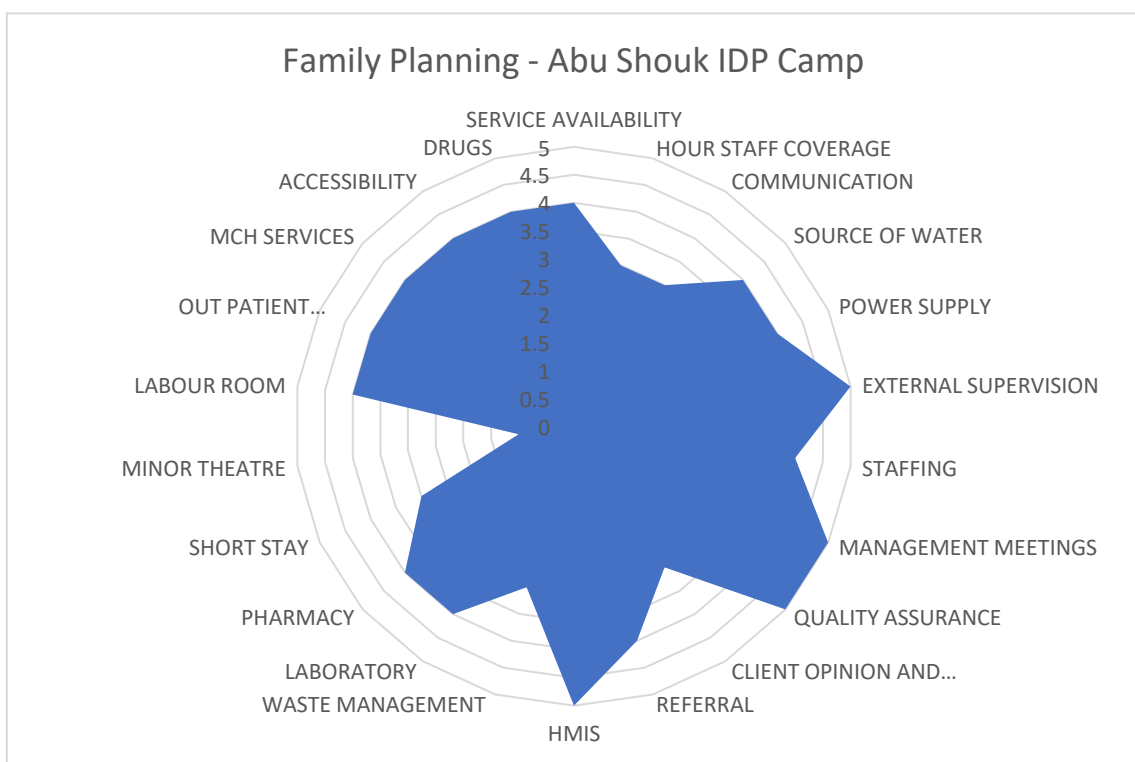
### Family Planning Clinic – Abu Shouk Camp

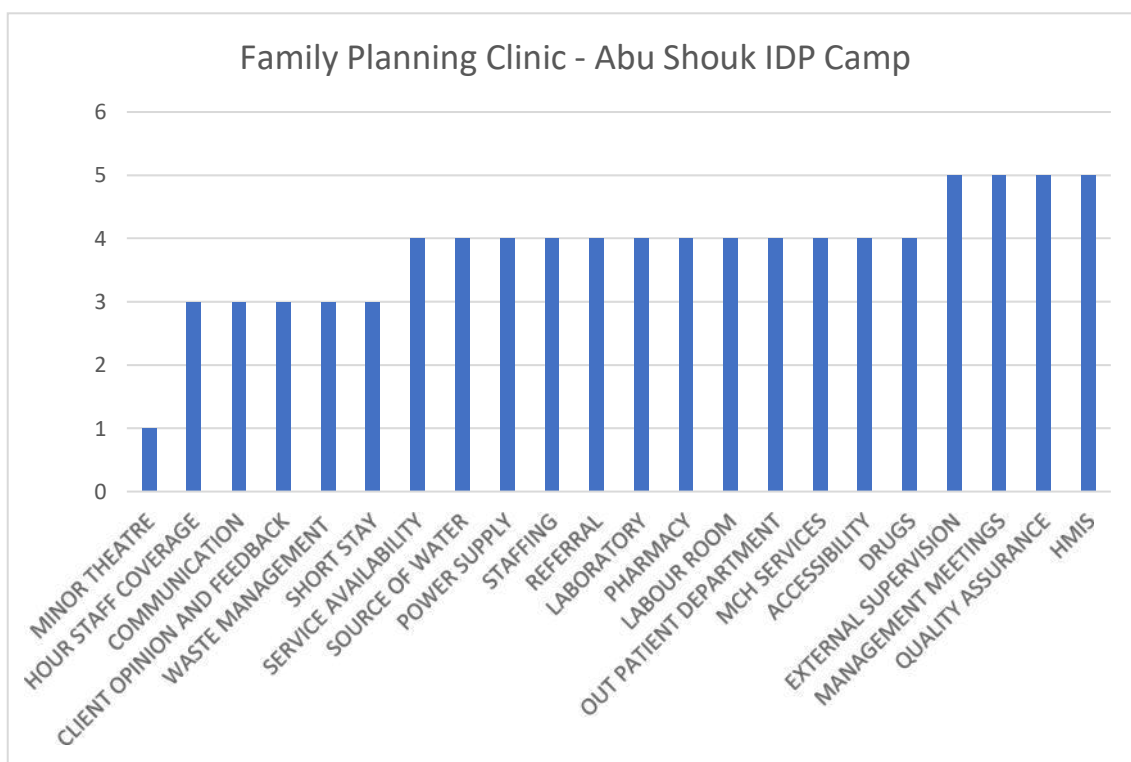
Readiness index: **0.76**

SERVICE AVAILABILITY	1	2	3	4	5
HOUR STAFF COVERAGE	1	2	3	4	5
COMMUNICATION	1	2	3	4	5
SOURCE OF WATER	1	2	3	4	5
POWER SUPPLY	1	2	3	4	5
EXTERNAL SUPERVISION	1	2	3	4	5
STAFFING	1	2	3	4	5
MANAGEMENT MEETINGS	1	2	3	4	5
QUALITY ASSURANCE	1	2	3	4	5
CLIENT OPINION AND FEEDBACK	1	2	3	4	5



REFERRAL	1	2	3	4	5
HMIS	1	2	3	4	5
WASTE MANAGEMENT	1	2	3	4	5
LABORATORY	1	2	3	4	5
PHARMACY	1	2	3	4	5
SHORT STAY	1	2	3	4	5
MINOR THEATRE	1	2	3	4	5
LABOUR ROOM	1	2	3	4	5
OUT PATIENT DEPARTMENT	1	2	3	4	5
MCH SERVICES	1	2	3	4	5
ACCESSIBILITY	1	2	3	4	5
DRUGS	1	2	3	4	5



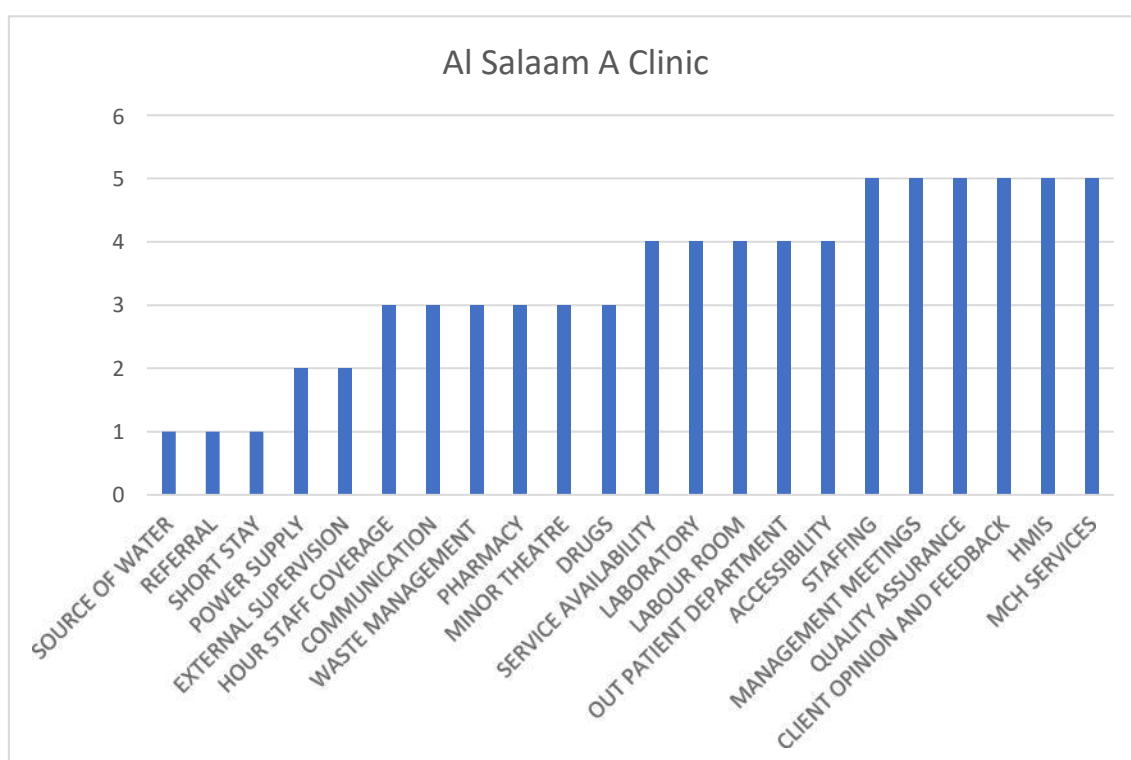
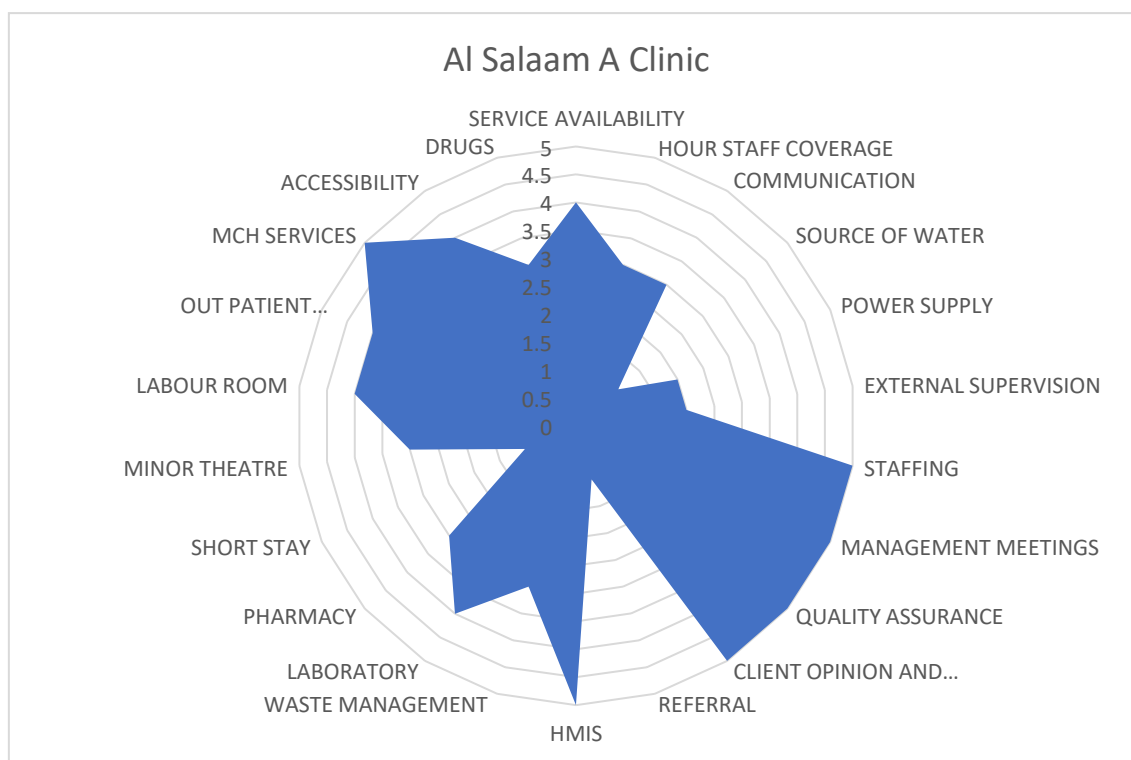


Al Salam A Clinic - Patient Helping Fund (PHF)

Readiness index: **0.68**

SERVICE AVAILABILITY	1	2	3	4	5
HOUR STAFF COVERAGE	1	2	3	4	5
COMMUNICATION	1	2	3	4	5
SOURCE OF WATER	1	2	3	4	5
POWER SUPPLY	1	2	3	4	5
EXTERNAL SUPERVISION	1	2	3	4	5
STAFFING	1	2	3	4	5
MANAGEMENT MEETINGS	1	2	3	4	5
QUALITY ASSURANCE	1	2	3	4	5
CLIENT OPINION AND FEEDBACK	1	2	3	4	5
REFERRAL	1	2	3	4	5
HMIS	1	2	3	4	5
WASTE MANAGEMENT	1	2	3	4	5
LABORATORY	1	2	3	4	5
PHARMACY	1	2	3	4	5
SHORT STAY	1	2	3	4	5
MINOR THEATRE	1	2	3	4	5
LABOUR ROOM	1	2	3	4	5

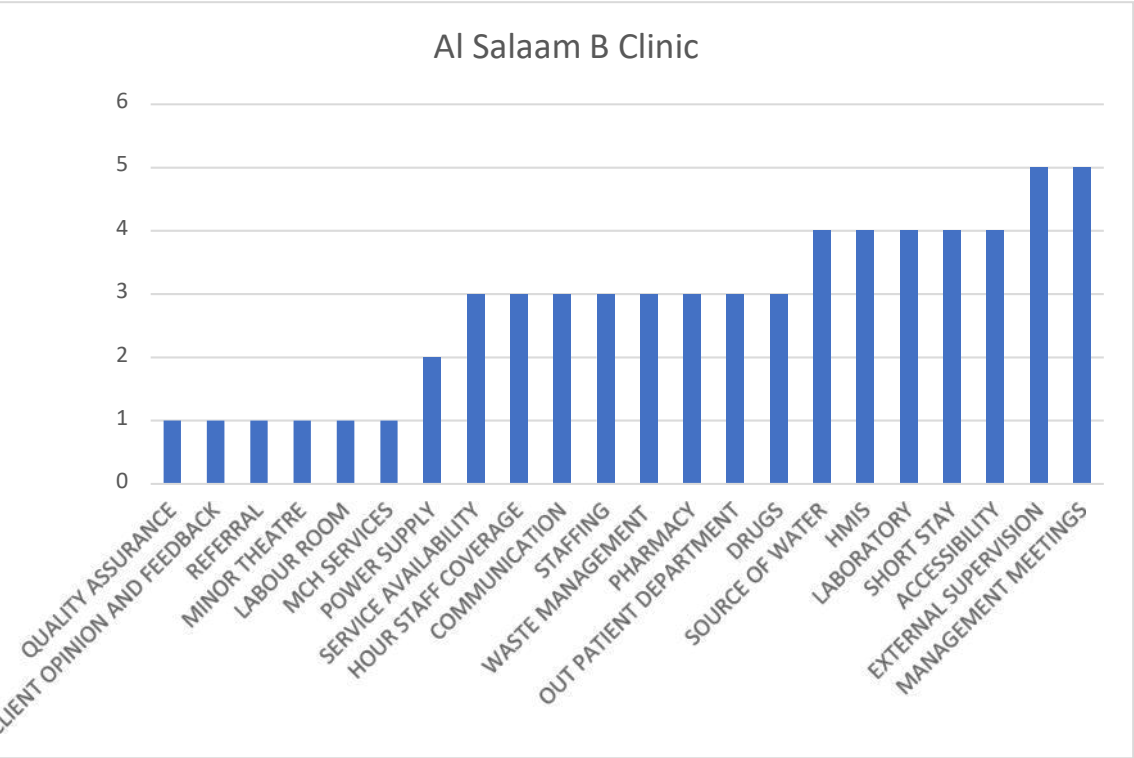
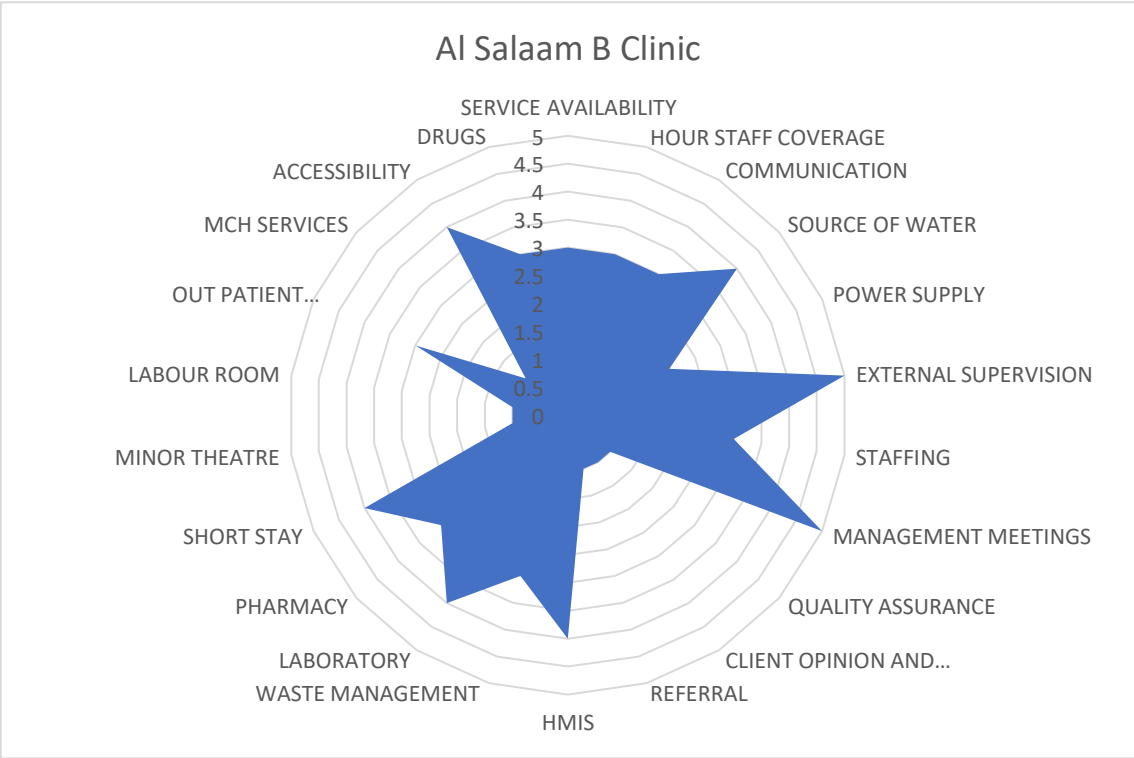
OUT PATIENT DEPARTMENT	1	2	3	4	5
MCH SERVICES	1	2	3	4	5
ACCESSIBILITY	1	2	3	4	5
DRUGS	1	2	3	4	5



Al Salam B Clinic – National Health Insurance Fund (NHIF)

Readiness index: **0.56**

SERVICE AVAILABILITY	1	2	3	4	5
HOUR STAFF COVERAGE	1	2	3	4	5
COMMUNICATION	1	2	3	4	5
SOURCE OF WATER	1	2	3	4	5
POWER SUPPLY	1	2	3	4	5
EXTERNAL SUPERVISION	1	2	3	4	5
STAFFING	1	2	3	4	5
MANAGEMENT MEETINGS	1	2	3	4	5
QUALITY ASSURANCE	1	2	3	4	5
CLIENT OPINION AND FEEDBACK	1	2	3	4	5
REFERRAL	1	2	3	4	5
HMIS	1	2	3	4	5
WASTE MANAGEMENT	1	2	3	4	5
LABORATORY	1	2	3	4	5
PHARMACY	1	2	3	4	5
SHORT STAY	1	2	3	4	5
MINOR THEATRE	1	2	3	4	5
LABOUR ROOM	1	2	3	4	5
OUT PATIENT DEPARTMENT	1	2	3	4	5
MCH SERVICES	1	2	3	4	5
ACCESSIBILITY	1	2	3	4	5
DRUGS	1	2	3	4	5



## Staff Assessment

Assessment has been carried out conducting face to face interviews, asking basic information regarding education, years of service, trainings and job satisfaction.

### Findings:

- Personnel is mainly female, 31 is the total number of respondents:
  - F: 21
  - M: 10
- The median number of years of service is 6. The senior staff has 30 years of service (1 person) and the junior has 1 year of service (2 persons).
- Level of education is in line with the position:
  - 2 Bachelor in medicine
  - 6 Bachelor in other sciences
  - 19 Diploma
  - 3 Secondary education
- 80% of the staff attended one in service training during last four years.
  - 1 person received last training in 2018
  - 3 person received last training in 2019
  - 17 person received last training in 2020
  - 1 person received last training in 2022
- In service training:
  - 6 persons have been trained on Covid 19 during 2020 and 2021. The cadres trained on covid 19 where 5 Lab technicians and Lab Assistants and 1 Pharmacist Assistant.
  - 3 persons have been trained on the Rational Use of Drugs. The cadres trained were Pharmacist assistants.
  - 3 Lab technicians have been trained on Quality Control and specific techniques for Leukaemia and semen analysis
  - Medical doctors received specific training on SGBV and Child Abuse
  - Other cadres attended technical training on Nursing skills, Sterilization, First Aid, Malaria protocol, IMCI and Clinical Management of Rape (CMR) and Family planning
  - 5 persons didn't receive any training.
- 27 of respondents stated that they want to remain in the same clinic and only 4 prefer to leave.
- In a scale from 1 to 5, the average level of satisfaction for the actual job is 3.46.
- Main reasons to remain are:
  - Good work environment (2 respondents)
  - Good work environment and proximity to home and family (2 respondents)
  - Proximity to home and family (4 respondents)
  - Professional growth (7 respondents)
  - Community feelings and attachment (12 respondents)
- 3 persons expressed the will to leave the clinic mainly because of professional aspects, looking for improvement and growth.

## Discussion

Clinic	Readiness index
Al Salaam B	<b>0.56</b>
Al Salaam A	<b>0.68</b>
Family Planning Clinic	<b>0.76</b>

Service readiness – a subset of the structural quality of care in the Donabedian triad of structure, process and outcome – is a prerequisite to the delivery of quality health care. In this case outcome measures have not been considered. Outcome indicators will be taken in consideration in future monitoring activities, because more informative about quality and performance of Health Clinics during routine monitoring and evaluation processes.

Readiness index is a composite index constructed with different level of analysis, adopting different indicators tailored for the specific scope required.

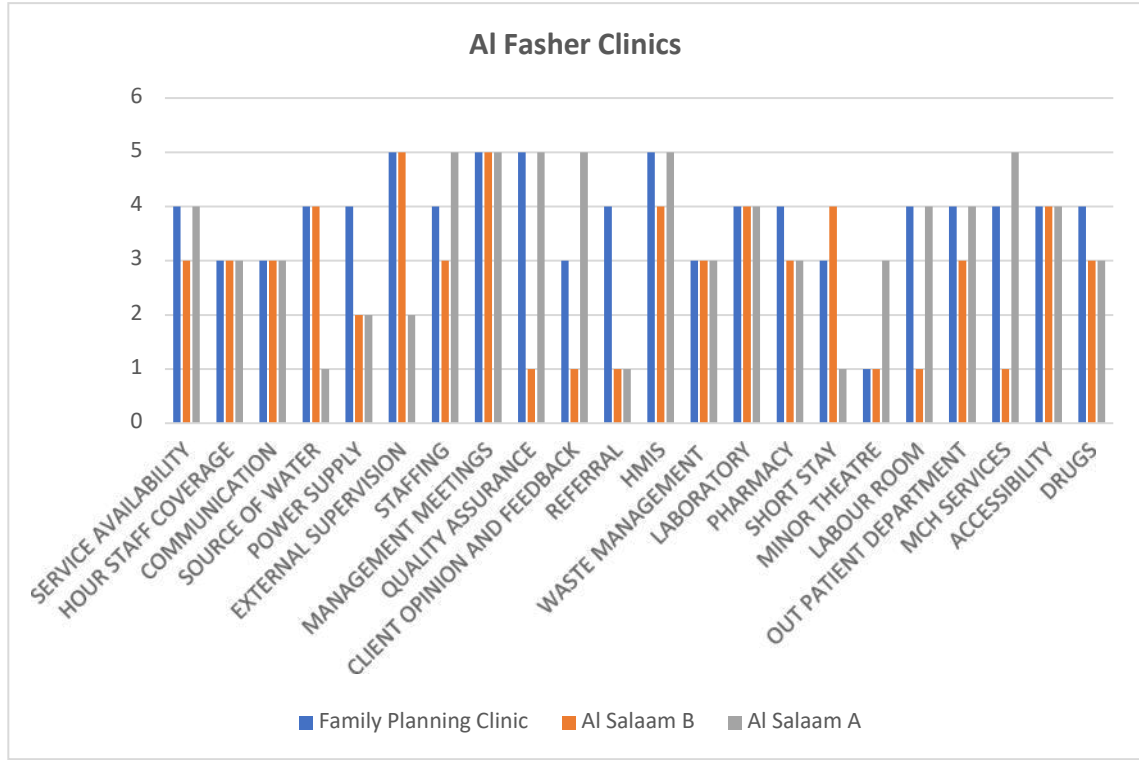
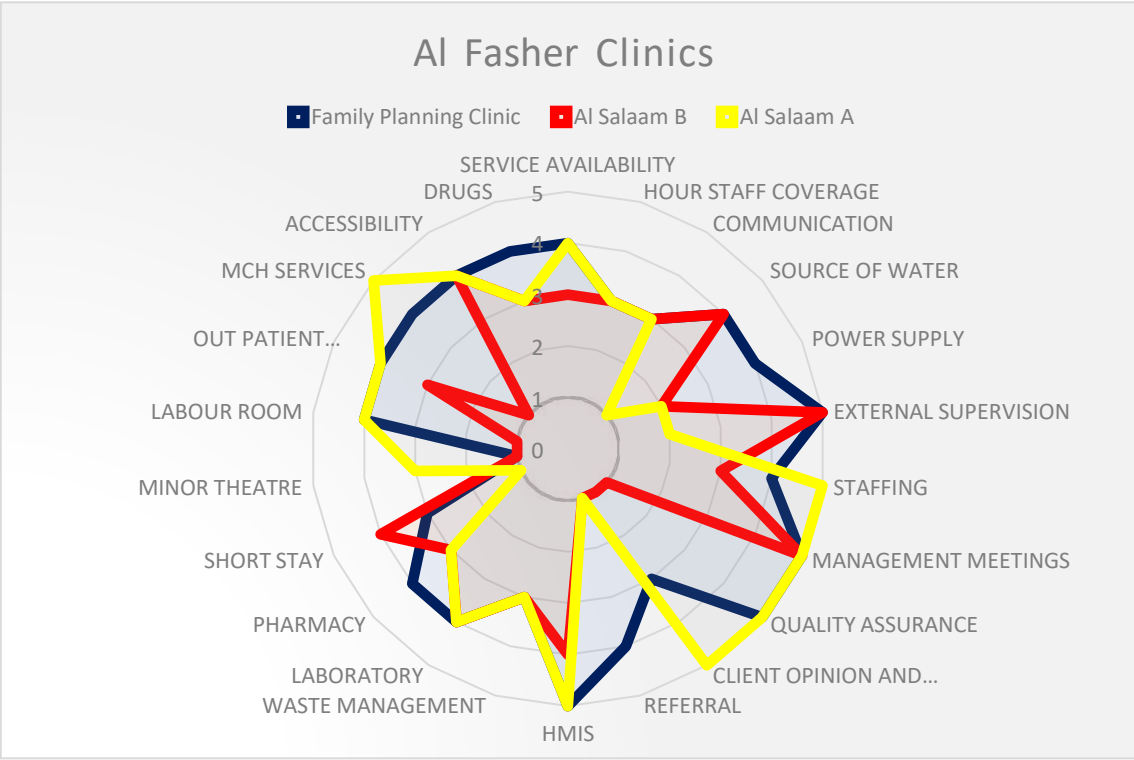
This ranking needs a deeper analysis of the findings to understand the specific reasons of performance.

Al Salaam B Clinic has an average performance in several indicators considered in this assessment. Most of the scoring is between 3 and 4, but the assessment pointed out at least 6 areas where the performance is very poor, scoring no more than 1. These areas showed that some services are absent (because not existing or not performing at all). Minor theatre, labour room and MHC services are not present and a consistent and organized referral system is not in place. There is no system of quality assurance and client feedback. Power supply is very weak and faulty (score is 2).

Al Salaam A has a better scoring in the general index. In common with Al Salaam B Clinic, has a very poor referral system for patients, but the other weak scores are in the area of water supply and short stay. As for the previous clinic, power supply is very weak and faulty (score is 2). This clinic also suffers from inconsistent external supervision.

Family Planning Clinic in Abu Shouk IDP Camp, has the best score in the readiness index. In fact suffers for the lack of Minor Theatre, but has very good scores (5) in management areas (supervision, quality assurance, management meetings and HMIS).

In the following charts there is visualization of the findings, benchmarking standards between the 3 clinics.





Date: 8<sup>th</sup> February 2022

Data collected by:

Dr Mohamed Bagas,

Medical Officer HealthPro

Redaction by:

Mr Stefano Vida,

Project Officer HealthPro

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## CLINIC PROFILE

NAME OF FACILITY

**Family Planning – Abu Shouk Camp**

TYPE OF FACILITY

Primary Health Care Center (PHC)

LOCATION OF FACILITY (State/town/locality/camp)

Abu Shouk Camp – Al Fasher. About 7 kms from SMOH

GPS

13.6595885, 25.3419952

NAME AND POSITION OF THE INTERVIEWED AND TELEPHONE CONTACT

Dr. Amel Ahmed, Medical Doctor. Tel.: 091 4823476



## DEMOGRAPHIC DATA

CATCHMENT AREA POPULATION	
Population Total	44.531
Population Male	
Population Female	
Under 5 Total	
Under 5 Male	
Under 5 Female	
Pregnant Women Total	
Lactating Woman Total	

## SERVICE AVAILABILITY

DESCRIPTION	YES	NO
Child vaccination services, either at the facility or as outreach		
Growth monitoring services, either at the facility or as outreach		
Curative care services for children under age 5		
Community services		
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)		

This clinic provides most of the PHC service package, but some key services are missing like PMCTC, TB. There is no Minor Theatre/dressing room for all those procedures and techniques applied on superficial tissues and minimal complications (stitching and dressing of wounds, first aid, basic traumatology etc.)

## HOURLY STAFF COVERAGE

Clinic opening hours:

8

DESCRIPTION	YES	NO
24-hour emergency		
On call staff		

There is a plan to increase the opening hours, but this plan has not been implemented until now.

## COMMUNICATION

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

## SOURCE OF WATER

Water supply is from town system.

Quality of the water (observation)

Poor			Excellent	
1	2	3	4	5

## POWER SUPPLY

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

During the day, power supply is constant and regular. They don't register major interruptions. During the night there is no power. The electric system (composed by solar and generator) have enough capacity to run all devices and cover all the needs of the clinic, but there are no batteries to guarantee regular power supply without daylight and diesel for generator is not always available.

## EXTERNAL SUPERVISION

DESCRIPTION	YES	NO
Does this 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?		

They received supervision visits from SMoH, Family Planning Society and UNFPA. Has not been mentioned the number of visits received during last year and if a support and supervision plan is in place.

## STAFFING

Facility Manager (Name and position) Dr. Amel Ahmed, Medical Director.

Tel.: 091 4823476

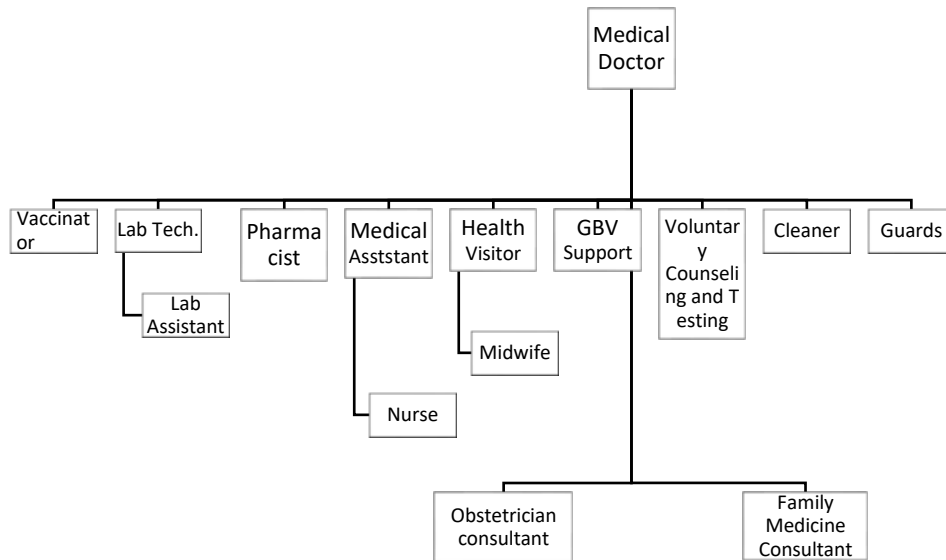
OCCUPATIONAL CATEGORIES		N.	Employed (Yes/No)	Full time/Part Time
1	Medical Doctors	2	Yes	Full time
2	Medical Assistant	1	Yes	Full time
3	Nurse	2	Yes	Full time
4	Midwife	2	Yes	Full time
5	Community Midwife	0		
6	Community Health worker	0		
7	Pharmacist	0	/	/
8	Assistant Pharmacist	3	Yes	Full time
9	Lab Technician	2	Yes	Full time
10	Assistant Lab technician	2	Yes	Full time
11	Vaccinator	1	Yes	Full time
12	Family Planning	2	Yes	Full time
13	Nutritionist	0		
14	Assistant Nutritionist	0		
15	Statistician	1	Yes	Full time
16	Assistant Statistician	0		
17	Volunteer	15	No	Part time
18	Guard	1	Yes	Full time
19	Cleaner	2	Yes	Full time

Others:

Family Medicine Consultant, 1 x week (Sunday)

Obstetrician Consultant, 3 x week (Sunday, Tuesday and Thursday)

## Family Planning – Abu Shouk Camp - Organogram



### 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?		

A monthly meeting, according to needs, is held with health service provider and with community health committees.

## 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?		

They have 1 x month an internal audit from SMOH and 2 x year an external audit from FMOH

## 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?		

Client opinion is collected using a complaint box.

## 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?		

There is a protocol for referral of emergency cases to secondary level or hospital. Patients use local transport and pay for it. There is no ambulance in the facility.

## 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?		

Reporting is done on paper and it is submitted weekly to SMOH. Reports of outbreak cases are delivered daily to SMOH, Reports are sent monthly to Family Planning Association.

Data are collected by statistician from PHC package (standard formats) and submitted to SMOH and Family Planning Association. For SGBV, reports are sent to Ministry of Social Welfare.

## HEALTH CARE WASTE MANAGEMENT AND CLIENT LATRINE

Most of the waste (sharp and medical) is burned using an incinerator and biological waste is buried. Some of the waste is removed outside in unprotected site

No differentiation and segregation of waste of different nature. No protocols in place.

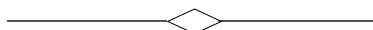
## HEALTH SERVICES' CHECK LIST

LABORATORY		
Sample collection area	Yes	No
Desk/table/ trolley		
Chair for the patient		
Chair for the collector		
Tourniquet		
Syringes		
Samples containers		
Label stackers		
Safety box		
Access to hand washing facilities		
Gloves		
Lab equipment	Yes	No
Microscope		
Water bath		
Centrifuge		
Mixer		
Bunsen burner		
Pipette		
ESR tubes		
ESR racks		
Colorimeter		
Refrigerator	Yes	No
Functioning refrigerator		
Temperature maintained at 2-8oC		
Lab registry	Yes	No
Available forms		
Available registry		
Consumables and reagents	Yes	No
Stock-outs control		
Stored at required temperature		
Stock control		
Syringes		
Needles		
Gloves		
Lancets		
Sample bottles		
Licence and guidelines	Yes	No



Operating licence		
Guidelines on laboratory procedures		
Safety guidelines including radiation protection		
Quality assurance guidelines		
Staff knowledge of the procedures in the guidelines		
<b>Standard process of sample taking, labelling, and giving results</b>	<b>Yes</b>	<b>No</b>
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		
<b>Reporting</b>	<b>Yes</b>	<b>No</b>
Available reports about lab investigations done and medicines distributed		
Statistics and medical reports produced		
Saving the reports		
<b>Assure internal quality control</b>	<b>Yes</b>	<b>No</b>
Regular calibration of equipment		
Use of controls to check of quality of results		
<b>Safety and ICP</b>	<b>Yes</b>	<b>No</b>
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		

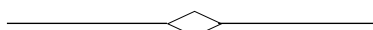
The Lab room is very small. Sample collection area is in the same room of the sample examination area without any separation.



PHARMACY		
<b>Well-furnished premises</b>	<b>Yes</b>	<b>No</b>
Glass and aluminium shelves		
Counter		
Electric signboard		
Ceramic floor		
Artificial roof		
<b>Air conditioner</b>	<b>Yes</b>	<b>No</b>
Air conditioner functioning		
Able to keep the temperature at 25oC		
<b>Medicines refrigerator</b>	<b>Yes</b>	<b>No</b>
Refrigerator dedicated to medicines available		
Set at temperature to preserve medicines such as vaccines		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Lab coats		
Water proof envelopes and labels		
<b>Medicines</b>	<b>Yes</b>	<b>No</b>
Availability of medicines	GO TO LIST	/

Storage conditions and expiry medications	/	
Registry for medicines in the facility		
<b>Standard dispensing processes</b>	<b>Yes</b>	<b>No</b>
Patient identification		
Drug doses, frequency, duration and administration modality		
Medication safety measures		
Correct labelling of medicines and safety measures to deal with expired medicines		

All drugs and medications are provided by MSF. Drugs are not free. Patient pays for the cost of medicines. Under 5 free drugs are provided by MSF but in scarce quantity.



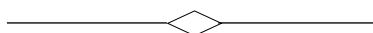
SHORT STAY		
<b>Bed and side accessories</b>	<b>Yes</b>	<b>No</b>
Able to elevate or lower foot end of bed		
Able to elevate or lower head end of bed		
Mattresses with pillows		
Bed sheets		
Bed side cabinets		
Chair		
Screen for privacy		
IV stand		
<b>Nurses' station</b>	<b>Yes</b>	<b>No</b>
Desk		
Chairs for the nurses		
Chair for patients		
Hand wash basin/area or alcohol rub		
Safety boxes		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Gloves		
Cotton wool		
Disinfectant		
<b>Hand washing area</b>	<b>Yes</b>	<b>No</b>
Ceramic/waterproof walls		
Flowing water		
Soap		
Means of drying hands		
<b>Patient admission and discharge registry</b>	<b>Yes</b>	<b>No</b>
Admission and discharges register		
Prescription forms		
Patients records keeping		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>

There is one room that serves both men and women.



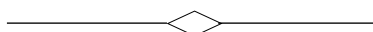
MINOR THEATRE		
Theatre equipment	Yes	No
Flowing water supply		
Table multi-directional adjustable		
Stool		
Ceiling lamb		
Minor surgical set		
Autoclave		
Essential supplies /equipment	Yes	No
Oxygen supply (in cylinders or piped		
Suction method		
Nitrous oxide supply		
Waste container		
Safety box		
Consumables	Yes	No
Gloves		
Cotton wool		
Disinfectant		
Local anaesthetic		
Sutures		
Suturing needles		
Guidelines	Yes	No
Hand wash checklist		
Guidelines on minor surgeries		

In the center there is no Minor Theatre or Dressing Room. Even very simple cases must be referred to the nearby hospital.



LABOUR ROOM		
Labour 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 pillow cases		

Bed side accessories		
<b>Delivery table</b>	<b>Yes</b>	<b>No</b>
Disposable sterile Macintosh or sheet		
Table can be manoeuvred in several directions		
Emergency supplies (O2 in cylinders)		
<b>Lifesaving drugs</b>	<b>Yes</b>	<b>No</b>
Emergency supplies (O2 in cylinders)		
Oxytocin		
Magnesium sulphate		
Anti-histamine		
Antihypertensive for emergency use (e.g. Labetolol)		
Ergometrine		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
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		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Needles and syringes		
IV fluid giving sets		
Cannulas		
Gloves and Cotton wool		
Disinfectant		
Urinary catheter		



OUT PATIENT DEPARTMENT		
<b>Consulting room</b>	<b>Yes</b>	<b>No</b>
Desks		
Chair for the MO/medical assistant		
Chair for the patient		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		
Safety box when sharps are used		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
Stethoscope		
Sphygmomanometer		
Thermometer		
Paediatric and adult weighing scales		

Diagnostic set including (Torch, tongue depressors,		
Dressing tray, autoclave, and kidney dish		
<b>Medical forms</b>	<b>Yes</b>	<b>No</b>
Prescription forms		
Forms for diagnostic investigations		
Patient records files		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
MCH protocols (IMCI, ANC, EPI guidelines)		
CDs treatment protocols (Malaria, ....)		
<b>Storage facilities</b>	<b>Yes</b>	<b>No</b>
Shelves		
Cabinets and cupboards		
<b>NHIF</b>	<b>Yes</b>	<b>No</b>
Client's health insurance		



<b>MCH SERVICES</b>		
<b>MCH services Room/ area to accommodate MCH services</b>	<b>Yes</b>	<b>No</b>
Desks		
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		
<b>RH equipment</b>	<b>Yes</b>	<b>No</b>
Fetal scope		
examination lamp		
Thermometer		
Cusco speculum, Sim retractor, artery forceps		
Examination tray		
Kidney dishes		
<b>Vaccination</b>	<b>Yes</b>	<b>No</b>
infant and adult weight scale		
Ice bag		
Thermometer		
Ice bag		
Vaccination carrier		
Cold boxes		
Vaccine Refrigerator		
vaccination vials monitor		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
high risk pregnancy and Vaccination schedule		
Cards for follow up (ANC, vaccination, growth charts)		

## ACCESSIBILITY

Are there any measures/initiatives in place to facilitate access and create a friendly environment for PWD?

Access is easy for all patients, there is flat ground that facilitates movements for people with difficulties in moving (because of motor disabilities, visual impairments, or other conditions that reduce the capacity of moving). The clinic is accessible just during the day from 8 am to 4 pm.

Are there any measures/initiatives in place to facilitate and create a friendly environment for women?

There are no specific measures to facilitate access to the clinic for women, but there are no obstacles and the environment within the clinic is friendly, safe and welcoming.

Data collected by Dr Mohamed Bagas, Medical officer HealthPro;

Drafting by Stefano Vida, Project Officer HealthPro

Date: 2<sup>nd</sup> February 2022

Dr Mohamed Bagas

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Mr. Stefano Vida

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**Ministry of Health - Sudan**  
**Directorate general of PHC**  
**PHC Drugs' list**

State: North darfur

Clinic: Family Planning -Abu Shoack

Date: 09/01/2022

n	Generic name	Dosage form	In stock	out of stock
1	Amoxicillin trihydrate 125mg/5ml susp	susp		1
2	Amoxicillin trihydrate 250mg/5ml forte susp	susp	1	
3	Amoxicillin trihydrate 250mg cap cap	cap	1	
4	Amoxicillin trihydrate 500mg forte cap	cap	1	
5	Erythromycin ethyl succinate 125mg/5ml susp	susp	1	
6	Erythromycin ethyl succinate 250mg/5ml susp	susp	1	
7	Erythromycin stearate 250mg tab	tab	1	
8	Septrin 240mg/5ml susp	susp	1	
9	Septrin 480mg tab tab 10 susp	tab		1
10	Cephalexin monohydrate 125mg/5ml susp	susp		1
11	Cephalexin monohydrate 250mg/5ml susp	susp	1	
12	Cephalexin monohydrate 250mg cap	cap		1
13	Cephalexin monohydrate 500mg cap	cap		1
14	Ampicillin trihydrate +Cloxacillin sodium 250mg/5ml susp	susp	1	
15	Ampicillin trihydrate + Cloxacillin sodium 500mg cap	susp	1	
16	Cough syrup for Exp	syrup		1
17	Cough syrup for DM	syrup		1
18	Cough Syrup for paed	syrup		1
19	Indomethacin 25mg cap	cap		1
20	Metronidazole benzoate ( Flagyl) 200mg/5ml susp	susp		1
21	Metronidazole 250mg tab	tab	1	
22	Metronidazole 500mg tab	tab	1	
23	Ibuprofen 200mg tab	tab		1
24	Ibuprofen 400mg tab	tab	1	
25	Salbutamol sulphate 2mg/5ml syrup	syrup		1
26	Salbutamol sulphate 4mg tab	tab		1
27	Salbutamol inhaler	inhaler		1
28	Ciprofloxacin HCl 500mg tab	tab	1	
29	Tetracycline HCl 250mg cap	cap		1
30	Tetracycline HCl 1% eye oint	oint		1
31	Tetracycline HCl 3% skin oint	oint		1
32	Paracetamol 120mg/5ml susp	susp		1
33	Paracetamol 500mg tab	tab	1	
34	Paracetamol supp 125 mg - 250 mg	supp	1	
35	Doxycycline HCl 100mg cap	cap		1
36	Fansidar 525mg tab	tab		1
37	Diclofenac sodium 25mg tab	tab	1	
38	Diclofenac sodium 75mg/3ml inj	inj		1
39	Hyoscine N-butylbromide 10mg tab	tab	1	
40	Hyoscine N-butylbromide 20mg/ml inj	inj	1	
41	Loperamide HCl 2mg tab	tab		1

42	Ferrous sulphate + Folic acid ( Fefol) cap	cap	1	
43	Folic Acid 5mg tab	tab	1	
44	Antacid tab	tab		1
45	Antacid 5ml susp	susp		1
46	Chlorphenamine maleate 2mg/5ml syrup	syrup		1
47	Chlorphenamine maleate 4mg tab	tab		1
48	Adrenaline inj	inj		1
49	Hydrocortisone sodium 100mg inj	inj		1
50	Benzyl Penicillin 1000000 IU inj	inj		1
51	Benzathine penicillin 2.4mega inj	inj		1
52	Benzathine penicillin 1.2mega inj	inj		1
53	Procaine penicillin Inj	inj		1
54	Bisacodyl 10mg tab	tab		1
55	Ferrous sulphate syrup	syrup		1
56	Metoclopramide inj Inj 57 B6 inj	inj		1
57	B6 inj	inj		1
58	Aspirin tab 100mg & 300mg & 75mg Tab	tab	1	
59	Mefenamic acid tab 250 mg & 500mg tab	tab	1	
60	Mefenamic acid susp	susp	1	
61	DNS ( dextrose with normal saline ) Infusion	infusion	1	
62	NS ( Normal saline) Infusion	infusion	1	
63	Dextrose 5% with water Infusion	infusion	1	
64	Ringer Lactate Infusion	infusion	1	
65	Waters for injection	Box	1	
66	Disposable syringe	Box	1	
67	Multi vitamin syrup	syrup		1
68	B-complex syrup	syrup		1

30 38  
44% 56%





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  
CUP H82C19000120005

## CLINIC PROFILE

NAME OF FACILITY

**Al Salam A – Patient Helping Fund (PHF)**

TYPE OF FACILITY

Primary Health Care Center (PHC)

LOCATION OF FACILITY (State/town/locality/camp)

Al Salam IDP Camp – Al Fasher - About 7.5 kms from SMOH

GPS

13°40'42.47"N, 25°22'23.70"E

NAME AND POSITION OF THE INTERVIEWED AND TELEPHONE CONTACT

Dr Ibrahim Ali – Medical Director Tel.: 091 7419805



DEMOGRAPHIC DATA

CATCHMENT AREA POPULATION	
Population Total	27.000
Population Male	
Population Female	
Under 5 Total	
Under 5 Male	
Under 5 Female	
Pregnant Women Total	
Lactating Woman Total	

## SERVICE AVAILABILITY

DESCRIPTION	YES	NO
Child vaccination services, either at the facility or as outreach		
Growth monitoring services, either at the facility or as outreach		
Curative care services for children under age 5		
Community services		
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)		

Al Salaam A clinic provides majority of PHC services. The facility is managed by a Medical Doctor. The MD provides outpatient consultation. The building is in very bad condition.

## HOOR STAFF COVERAGE

Clinic opening hours:

DESCRIPTION	YES	NO
24-hour emergency		
On call staff		

The clinic provides only day services. Currently there is no on call staff, but they are planning, with the NGO (PHF), to activate a 24 hours on call service as a support to the several Midwives operating in the camp.

## COMMUNICATION

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

## SOURCE OF WATER

Quality of water is very poor. There is no water supply from town system, and water is carried by donkeys then stored underground.

Quality of the water (observation)

Poor		Excellent		
1	2	3	4	5

## POWER SUPPLY

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

The only source of power is the solar system. The solar system is not enough to support all the facility

## EXTERNAL SUPERVISION

DESCRIPTION	YES	NO
Does this 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?		

DESCRIPTION	N
How many supervision visit did you received during the last 12 months?	2

Last visit was from SMoH 7 months ago.

## STAFFING

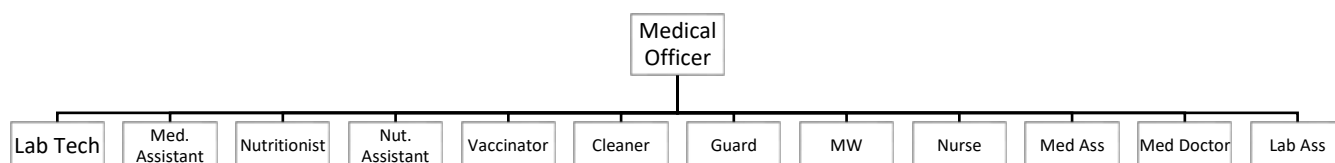
Dr Ibrahim Ali – Medical Director

Tel.: 091 7419805

OCCUPATIONAL CATEGORIES		N.	Employed (Yes/No)	Full time/Part Time
1	Medical Doctors	2	Yes	Full time
2	Medical Assistant	1	Yes	Full time
3	Nurse	24	Yes	Full time
4	Midwife	3	Yes	Full time
5	Community Midwife	2	No	No
6	Community Health worker	0	/	/
7	Pharmacist	0	/	/
8	Assistant Pharmacist	2	Yes	Full time
9	Lab Technician	2	Yes	Full time
10	Assistant Lab technician	2	Yes	Full time
11	Vaccinator	2	Yes	Full time
12	Family Planning	1	Yes	Full time
13	Nutritionist	1	Yes	Full time
14	Assistant Nutritionist	4	Yes	Full time
15	Statistician	1	Yes	Full time
16	Assistant Statistician	/	/	/
17	Volunteer	/	/	/
18	Guard	3	Yes	Full time
19	Cleaner	2	Yes	Full time

No external consultants.

## Al Salam A, PHF Clinic – Al Salam Camp - Organogram



### 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?		

Facility has routine staff meeting on weekly bases.

### 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?		

### 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?		

## 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?		

There is no clear protocol for referrals. The patient is responsible of all referral costs to secondary level. Referral form is compiled by the Doctor.

## 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?		

Reporting is done on paper. Reports are sent weekly and monthly. Monthly reports reports sent to SMOH and to patient helping fund and weekly for notification disease eg measles, malaria. diarrhoea.

## HEALTH CARE WASTE MANAGEMENT AND CLIENT LATRINE

All waste (sharp, medical and biological) is burned in drums or disposed in protected ground. There is no waste is visible.

No clear protocols in place.

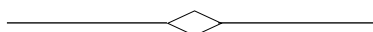
## HEALTH SERVICES' CHECK LIST

LABORATORY		
Sample collection area	Yes	No
Desk/table/ trolley		
Chair for the patient		
Chair for the collector		
Tourniquet		
Syringes		
Samples containers		
Label stickers		
Safety box		
Access to hand washing facilities		
Gloves		
Lab equipment	Yes	No

Microscope		
Water bath		
Centrifuge		
Mixer		
Bunsen burner		
Pipette		
ESR tubes		
ESR racks		
Colorimeter		
<b>Refrigerator</b>	<b>Yes</b>	<b>No</b>
Functioning refrigerator		
Temperature maintained at 2-8oC		
<b>Lab registry</b>	<b>Yes</b>	<b>No</b>
Available forms		
Available registry		
<b>Consumables and reagents</b>	<b>Yes</b>	<b>No</b>
Stock-outs control		
Stored at required temperature		
Stock control		
Syringes		
Needles		
Gloves		
Lancets		
Sample bottles		
<b>Licence and guidelines</b>	<b>Yes</b>	<b>No</b>
Operating licence		
Guidelines on laboratory procedures		
Safety guidelines including radiation protection		
Quality assurance guidelines		
Staff knowledge of the procedures in the guidelines		
<b>Standard process of sample taking, labelling, and giving results</b>	<b>Yes</b>	<b>No</b>
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		
<b>Reporting</b>	<b>Yes</b>	<b>No</b>
Available reports about lab investigations done and medicines distributed		
Statistics and medical reports produced		
Saving the reports		
<b>Assure internal quality control</b>	<b>Yes</b>	<b>No</b>
Regular calibration of equipment		
Use of controls to check of quality of results		
<b>Safety and ICP</b>	<b>Yes</b>	<b>No</b>
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		

The Lab room needs rehabilitation and equipment. Solar system capacity is not enough to run all lab equipment.



PHARMACY		
Well-furnished premises	Yes	No
Glass and aluminium shelves		
Counter		
Electric signboard		
Ceramic floor		
Artificial roof		
Air conditioner	Yes	No
Air conditioner functioning		
Able to keep the temperature at 25oC		
Medicines refrigerator	Yes	No
Refrigerator dedicated to medicines available		
Set at temperature to preserve medicines such as vaccines		
Consumables	Yes	No
Lab coats		
Water proof envelopes and labels		
Medicines	Yes	No
Availability of medicines <b>GO TO LIST</b>	/	
<del>Storage conditions and expiry medications</del>	/	
Registry for medicines in the facility		
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		

Shelves are very old and iron made (no glasses).



SHORT STAY		
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		
<b>Nurses' station</b>	<b>Yes</b>	<b>No</b>
Desk		
Chairs for the nurses		
Chair for patients		
Hand wash basin/area or alcohol rub		
Safety boxes		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Gloves		
Cotton wool		
Disinfectant		
<b>Hand washing area</b>	<b>Yes</b>	<b>No</b>
Ceramic/waterproof walls		
Flowing water		
Soap		
Means of drying hands		
<b>Patient admission and discharge registry</b>	<b>Yes</b>	<b>No</b>
Admission and discharges register		
Prescription forms		
Patients records keeping		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
Guidelines on the management /nursing care of common medical and surgical conditions		

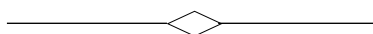
Short stay is a very simple and precarious structure made with iron sheets and not protected.



MINOR THEATRE		
<b>Theatre equipment</b>	<b>Yes</b>	<b>No</b>
Flowing water supply		
Table multi-directional adjustable		
Stool		
Ceiling lamb		
Minor surgical set		
Autoclave		
<b>Essential supplies /equipment</b>	<b>Yes</b>	<b>No</b>
Oxygen supply (in cylinders or piped		

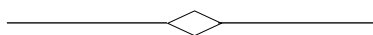
Suction method		
Nitrous oxide supply		
Waste container		
Safety box		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Gloves		
Cotton wool		
Disinfectant		
Local anaesthetic		
Sutures		
Suturing needles		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
Hand wash checklist		
Guidelines on minor surgeries		

Minor theatre is in poor conditions and needs rehabilitation and equipment.



LABOUR ROOM		
<b>Labour room beds</b>	<b>Yes</b>	<b>No</b>
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 pillow cases		
Bed side accessories		
<b>Delivery table</b>	<b>Yes</b>	<b>No</b>
Disposable sterile Macintosh or sheet		
Table can be manoeuvred in several directions		
Emergency supplies (O2 in cylinders)		
<b>Lifesaving drugs</b>	<b>Yes</b>	<b>No</b>
Emergency supplies (O2 in cylinders)		
Oxytocin		
Magnesium sulphate		
Anti-histamine		
Antihypertensive for emergency use (e.g. Labetolol)		
Ergometrine		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
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		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Needles and syringes		
IV fluid giving sets		
Cannulas		
Gloves and Cotton wool		
Disinfectant		
Urinary catheter		



OUT PATIENT DEPARTMENT		
<b>Consulting room</b>	<b>Yes</b>	<b>No</b>
Desks		
Chair for the MO/medical assistant		
Chair for the patient		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		
Safety box when sharps are used		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
Stethoscope		
Sphygmomanometer		
Thermometer		
Paediatric and adult weighing scales		
Diagnostic set including (Torch, tongue depressors,		
Dressing tray, autoclave, and kidney dish		
<b>Medical forms</b>	<b>Yes</b>	<b>No</b>
Prescription forms		
Forms for diagnostic investigations		
Patient records files		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
MCH protocols (IMCI, ANC, EPI guidelines)		
CDs treatment protocols (Malaria, ....)		
<b>Storage facilities</b>	<b>Yes</b>	<b>No</b>
Shelves		
Cabinets and cupboards		
<b>NHIF</b>	<b>Yes</b>	<b>No</b>
Client's health insurance		

No treatment protocols for communicable diseases, IMCI for outpatients.

—◆—

### MCH SERVICES

MCH services Room/ area to accommodate MCH services	Yes	No
Desks		
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		
<b>RH equipment</b>	<b>Yes</b>	<b>No</b>
Fetal scope		
examination lamp		
Thermometer		
Cusco speculum, Sim retractor, artery forceps		
Examination tray		
Kidney dishes		
<b>Vaccination</b>	<b>Yes</b>	<b>No</b>
infant and adult weight scale		
Ice bag		
Thermometer		
Ice bag		
Vaccination carrier		
Cold boxes		
Vaccine Refrigerator		
vaccination vials monitor		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
high risk pregnancy and Vaccination schedule		
Cards for follow up (ANC, vaccination, growth charts)		

OPD and MCH are in the same room, no separation.

### ACCESSIBILITY

Are there any measures/initiatives in place to facilitate access and create a friendly environment for PWD?

No specific initiative in the clinic, but the clinic is very easy to access..

Are there any measures/initiatives in place to facilitate and create a friendly environment for women?

The clinic is very friendly for pregnant women because all midwives are coming from the same community and can create very easy and positive relations.

Data collected by Dr Mohamed Bagas, Medical officer HealthPro;

Drafting by Stefano Vida, Project Officer HealthPro

Date: 6<sup>th</sup> February 2022

Dr Mohamed Bagas

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Mr. Stefano Vida

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**Ministry of Health - Sudan**  
**Directorate general of PHC**  
**PHC Drugs' list**

State: North darfur

Clinic: Al Salam AB - PHF

Date: 06/02/2022

n	Generic name	Dosage form	In stock	out of stock
1	Amoxicillin trihydrate 125mg/5ml susp	susp		
2	Amoxicillin trihydrate 250mg/5ml forte susp	susp		
3	Amoxicillin trihydrate 250mg cap cap	cap		
4	Amoxicillin trihydrate 500mg forte cap	cap		
5	Erythromycin ethyl succinate 125mg/5ml susp	susp		
6	Erythromycin ethyl succinate 250mg/5ml susp	susp		
7	Erythromycin stearate 250mg tab	tab		
8	Septrin 240mg/5ml susp	susp		
9	Septrin 480mg tab tab 10 susp	tab		
10	Cephalexin monohydrate 125mg/5ml susp	susp		
11	Cephalexin monohydrate 250mg/5ml susp	susp		
12	Cephalexin monohydrate 250mg cap	cap		
13	Cephalexin monohydrate 500mg cap	cap		
14	Ampicillin trihydrate + Cloxacillin sodium 250mg/5ml susp	susp		
15	Ampicillin trihydrate + Cloxacillin sodium 500mg cap	susp		
16	Cough syrup for Exp	syrup		
17	Cough syrup for DM	syrup		
18	Cough Syrup for paed	syrup		
19	Indomethacin 25mg cap	cap		
20	Metronidazole benzoate ( Flagyl) 200mg/5ml susp	susp		
21	Metronidazole 250mg tab	tab		
22	Metronidazole 500mg tab	tab		
23	Ibuprofen 200mg tab	tab		
24	Ibuprofen 400mg tab	tab		
25	Salbutamol sulphate 2mg/5ml syrup	syrup		
26	Salbutamol sulphate 4mg tab	tab		
27	Salbutamol inhaler	inhaler		
28	Ciprofloxacin HCl 500mg tab	tab		
29	Tetracycline HCl 250mg cap	cap		
30	Tetracycline HCl 1% eye oint	oint		
31	Tetracycline HCl 3% skin oint	oint		
32	Paracetamol 120mg/5ml susp	susp		
33	Paracetamol 500mg tab	tab		
34	Paracetamol supp 125 mg - 250 mg	supp		
35	Doxycycline HCl 100mg cap	cap		
36	Fansidar 525mg tab (Coartam)	tab		
37	Diclofenac sodium 25mg tab	tab		
38	Diclofenac sodium 75mg/3ml inj	inj		
39	Hyoscine N-butylbromide 10mg tab	tab		
40	Hyoscine N-butylbromide 20mg/ml inj	inj		
41	Loperamide HCl 2mg tab	tab		

42	Ferrous sulphate + Folic acid ( Fefol) cap	cap		
43	Folic Acid 5mg tab	tab		
44	Antacid tab	tab		
45	Antacid 5ml susp	susp		
46	Chlorphenamine maleate 2mg/5ml syrup	syrup		
47	Chlorphenamine maleate 4mg tab	tab		
48	Adrenaline inj	inj		
49	Hydrocortisone sodium 100mg inj	inj		
50	Benzyl Penicillin 1000000 IU inj	inj		
51	Benzathine penicillin 2.4mega inj	inj		
52	Benzathine penicillin 1.2mega inj	inj		
53	Procaine penicillin Inj	inj		
54	Bisacodyl 10mg tab	tab		
55	Ferrous sulphate syrup	syrup		
56	Metoclopramide inj Inj 57 B6 inj	inj		
57	B6 inj	inj		
58	Aspirin tab 100mg & 300mg & 75mg Tab	tab		
59	Mefenamic acid tab 250 mg & 500mg tab	tab		
60	Mefenamic acid susp	susp		
61	DNS ( dextrose with normal saline ) Infusion	infusion		
62	NS ( Normal saline) Infusion	infusion		
63	Dextrose 5% with water Infusion	infusion		
64	Ringer Lactate Infusion	infusion		
65	Waters for injection	Box		
66	Disposable syringe	Box		
67	Multi vitamin syrup	syrup		
68	B-complex syrup	syrup		

25 43  
37% 63%



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  
CUP H82C19000120005

## CLINIC PROFILE

NAME OF FACILITY

**Al Salam B - National Health Insurance Fund (NHIF)**

TYPE OF FACILITY

Primary Health Care Center (PHC)

LOCATION OF FACILITY (State/town/locality/camp)

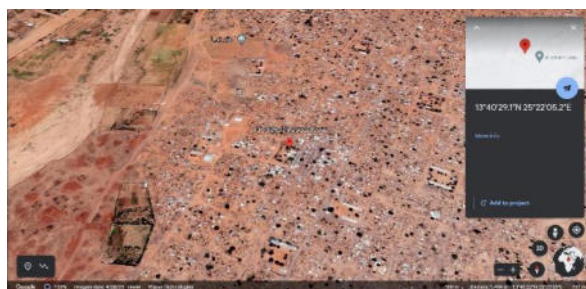
Al Salam IDP Camp – Al Fasher - About 7 kms from SMoH

GPS

13°40'29.06"N, 25°22'5.18"E

NAME AND POSITION OF THE INTERVIEWED AND TELEPHONE CONTACT

Abdelmajeed Ibrahim – Clinic Supervisor Tel.: 091 6030161



## DEMOGRAPHIC DATA

CATCHMENT AREA POPULATION	
Population Total	78.000
Population Male	
Population Female	
Under 5 Total	
Under 5 Male	
Under 5 Female	
Pregnant Women Total	
Lactating Woman Total	



## SERVICE AVAILABILITY

DESCRIPTION	YES	NO
Child vaccination services, either at the facility or as outreach		
Growth monitoring services, either at the facility or as outreach		
Curative care services for children under age 5		
Community services		
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)		

Majority of NHIF clinics don't provide immunization and nutrition services. In addition to that, Al Salam clinic doesn't provide HIV services and there is no treatment for non-communicable diseases because the clinic is run by Medical Assistant.

## HOUR STAFF COVERAGE

Clinic opening hours:

8

DESCRIPTION	YES	NO
24-hour emergency		
On call staff		

The clinic provides only day services. Only community Midwives provide 24-hour services for normal deliver at home. There is no formal incentive for these services from NHIF.

The community midwives work within the community as volunteer, trained by Ministry of health and provided with delivery bag.

## COMMUNICATION

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

Communication is managed by Clinic Supervisor for administrative matters and by heads of Departments for technical issues (request of medicines, consumables)

## SOURCE OF WATER

Water supply is from town system, pipeline. Distribution is done 1 hour per day so water is stored in tank for utilization during remaining hours of duty.

Quality of water is good because undergoes under purification process done by Water and sanitation Project Al Salam Camp.

Quality of the water (observation)

Poor				Excellent
1	2	3	4	5

## POWER SUPPLY

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

The only source of power is the generator which is old and often there is shortage of diesel.

## EXTERNAL SUPERVISION

DESCRIPTION	YES	NO
Does this 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?		

DESCRIPTION	N
How many supervision visit did you received during the last 12 months?	13

They received 12 supervision visits from NHIF, and 1 visit from SMoH.

## STAFFING

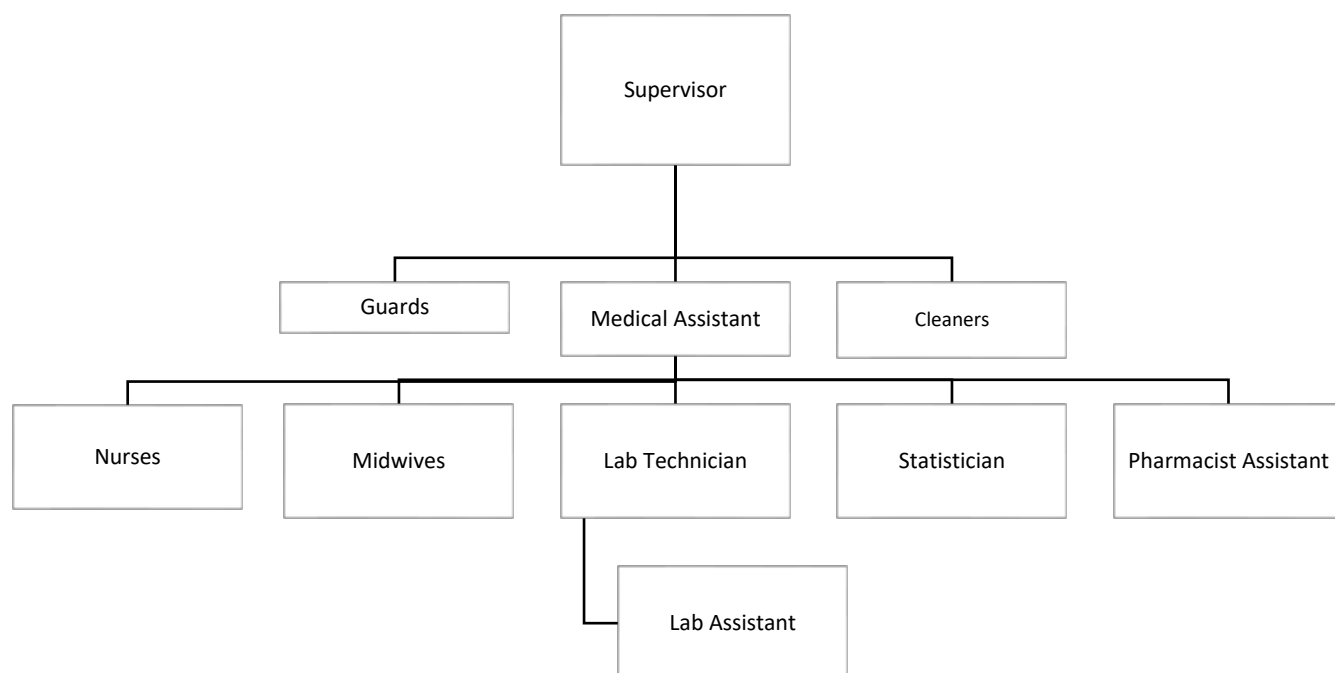
Facility Manager (Name and position): Abdelmajeed Ibrahim – Clinic Supervisor.

Tel.: 091 6030161

OCCUPATIONAL CATEGORIES		N.	Employed (Yes/No)	Full time/Part Time
1	Medical Doctors	0	/	/
2	Medical Assistant	2	Yes	Full time
3	Nurse	1	Yes	Full time
4	Midwife	2	Yes	Full time
5	Community Midwife	0	/	/
6	Community Health worker	0	/	/
7	Pharmacist	0	/	/
8	Assistant Pharmacist	2	Yes	Full time
9	Lab Technician	2	Yes	Full time
10	Assistant Lab technician	2	Yes	Full time
11	Vaccinator	0	/	/
12	Family Planning	0	/	/
13	Nutritionist	0	/	/
14	Assistant Nutritionist	0	/	/
15	Statistician	1	Yes	Full time
16	Assistant Statistician	0	/	/
17	Volunteer	0	/	/
18	Guard	2	Yes	Full time
19	Cleaner	2	Yes	Full time

No external consultants.

## NHIF Clinic – Al Salam Camp - Organogram



### 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?		

A monthly meeting, according to needs, is held with health service provider and with community health committees.

### 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?		

## 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?		

## 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?		

There is no specific protocol for referrals. The clinician fills in a paper with case descriptions and the client goes to the nearby diagnostic center for further investigation and treatment.

## 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?		

Reporting is done on paper and it is submitted weekly to NHIF, then sent to SMOH by NHIF. There is no organised data collection system. reports are prepared by each department, then compiled by the Clinic Supervisor and sent to NHIF.

## 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.

No differentiation and segregation of waste of different nature. No protocols in place.

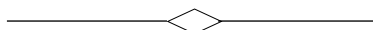
## HEALTH SERVICES' CHECK LIST

LABORATORY		
Sample collection area	Yes	No
Desk/table/ trolley		

Chair for the patient		
Chair for the collector		
Tourniquet		
Syringes		
Samples containers		
Label stickers		
Safety box		
Access to hand washing facilities		
Gloves		
<b>Lab equipment</b>	<b>Yes</b>	<b>No</b>
Microscope		
Water bath		
Centrifuge		
Mixer		
Bunsen burner		
Pipette		
ESR tubes		
ESR racks		
Colorimeter		
<b>Refrigerator</b>	<b>Yes</b>	<b>No</b>
Functioning refrigerator		
Temperature maintained at 2-8oC		
<b>Lab registry</b>	<b>Yes</b>	<b>No</b>
Available forms		
Available registry		
<b>Consumables and reagents</b>	<b>Yes</b>	<b>No</b>
Stock-outs control		
Stored at required temperature		
Stock control		
Syringes		
Needles		
Gloves		
Lancets		
Sample bottles		
<b>Licence and guidelines</b>	<b>Yes</b>	<b>No</b>
Operating licence		
Guidelines on laboratory procedures		
Safety guidelines including radiation protection		
Quality assurance guidelines		
Staff knowledge of the procedures in the guidelines		
<b>Standard process of sample taking, labelling, and giving results</b>	<b>Yes</b>	<b>No</b>
Check patient ID		
Check requested investigation		
Check integrity of sample		
Explain and Take sample into suitable container		
Correct labelling		

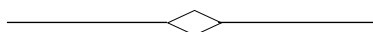
Registering of results and writing on result slip		
<b>Reporting</b>	<b>Yes</b>	<b>No</b>
Available reports about lab investigations done and medicines distributed		
Statistics and medical reports produced		
Saving the reports		
<b>Assure internal quality control</b>	<b>Yes</b>	<b>No</b>
Regular calibration of equipment		
Use of controls to check of quality of results		
<b>Safety and ICP</b>	<b>Yes</b>	<b>No</b>
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		

The Lab room is very small. Sample collection area is in the same room of the sample examination area without any separation and ventilation is very poor. Lab has no refrigerator and more equipment.



PHARMACY		
<b>Well-furnished premises</b>	<b>Yes</b>	<b>No</b>
Glass and aluminium shelves		
Counter		
Electric signboard		
Ceramic floor		
Artificial roof		
<b>Air conditioner</b>	<b>Yes</b>	<b>No</b>
Air conditioner functioning		
Able to keep the temperature at 25oC		
<b>Medicines refrigerator</b>	<b>Yes</b>	<b>No</b>
Refrigerator dedicated to medicines available		
Set at temperature to preserve medicines such as vaccines		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Lab coats		
Water proof envelopes and labels		
<b>Medicines</b>	<b>Yes</b>	<b>No</b>
Availability of medicines <b>GO TO LIST</b>	/	
<del>Storage conditions and expiry medications</del>	/	
Registry for medicines in the facility		
<b>Standard dispensing processes</b>	<b>Yes</b>	<b>No</b>
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, according to consumption. Supply is done every 2 weeks. The patients contribute with the 25% of the cost of drugs. Under 5 free drugs are provided by MSF, but supply is not regular and are frequently out of stock. The pharmacy is in very poor condition and its need rehabilitation for ceiling and floor. There is no refrigerator.



SHORT STAY		
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		
Nurses' station	Yes	No
Desk		
Chairs for the nurses		
Chair for patients		
Hand wash basin/area or alcohol rub		
Safety boxes		
Consumables	Yes	No
Gloves		
Cotton wool		
Disinfectant		
Hand washing area	Yes	No
Ceramic/waterproof walls		
Flowing water		
Soap		
Means of drying hands		
Patient admission and discharge registry	Yes	No
Admission and discharges register		
Prescription forms		
Patients records keeping		
Referral forms		
Guidelines	Yes	No
Guidelines on the management /nursing care of common medical and surgical conditions		

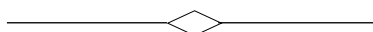
There is one room that serves both men and women. There is no desk for the nurse in charge.





MINOR THEATRE		
Theatre equipment	Yes	No
Flowing water supply		
Table multi-directional adjustable		
Stool		
Ceiling lamb		
Minor surgical set		
Autoclave		
Essential supplies /equipment	Yes	No
Oxygen supply (in cylinders or piped		
Suction method		
Nitrous oxide supply		
Waste container		
Safety box		
Consumables	Yes	No
Gloves		
Cotton wool		
Disinfectant		
Local anaesthetic		
Sutures		
Suturing needles		
Guidelines	Yes	No
Hand wash checklist		
Guidelines on minor surgeries		

In the center there is no Minor Theatre or Dressing Room. Even very simple cases must be referred to the nearby hospital.



LABOUR ROOM		
Labour 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 pillow cases		
Bed side accessories		
Delivery table	Yes	No
Disposable sterile Macintosh or sheet		
Table can be manoeuvred in several directions		
Emergency supplies (O2 in cylinders)		
Lifesaving drugs	Yes	No
Emergency supplies (O2 in cylinders)		

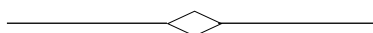
Oxytocin		
Magnesium sulphate		
Anti-histamine		
Antihypertensive for emergency use (e.g. Labetolol)		
Ergometrine		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
Mobile light, IV stand, and Scissors		
Adult and infant weighing scale		
Suturing set, needle, and sutures		
Suction device for baby		
Ventouse for baby extraction		
Cardio tochography		
Torch and Tongue depressor		
Access to ENT set		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Needles and syringes		
IV fluid giving sets		
Cannulas		
Gloves and Cotton wool		
Disinfectant		
Urinary catheter		

There is no delivery room. There is a Midwife conducting ANC and PNC using the short stay room.



OUT PATIENT DEPARTMENT		
<b>Consulting room</b>	<b>Yes</b>	<b>No</b>
Desks		
Chair for the MO/medical assistant		
Chair for the patient		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		
Safety box when sharps are used		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
Stethoscope		
Sphygmomanometer		
Thermometer		
Paediatric and adult weighing scales		
Diagnostic set including (Torch, tongue depressors,		
Dressing tray, autoclave, and kidney dish		
<b>Medical forms</b>	<b>Yes</b>	<b>No</b>
Prescription forms		
Forms for diagnostic investigations		

Patient records files		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
MCH protocols (IMCI, ANC, EPI guidelines)		
CDs treatment protocols (Malaria, ....)		
<b>Storage facilities</b>	<b>Yes</b>	<b>No</b>
Shelves		
Cabinets and cupboards		
<b>NHIF</b>	<b>Yes</b>	<b>No</b>
Client's health insurance		



<b>MCH SERVICES</b>		
<b>MCH services Room/ area to accommodate MCH services</b>	<b>Yes</b>	<b>No</b>
Desks		
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		
<b>RH equipment</b>	<b>Yes</b>	<b>No</b>
Fetal scope		
examination lamp		
Thermometer		
Cusco speculum, Sim retractor, artery forceps		
Examination tray		
Kidney dishes		
<b>Vaccination</b>	<b>Yes</b>	<b>No</b>
infant and adult weight scale		
Ice bag		
Thermometer		
Ice bag		
Vaccination carrier		
Cold boxes		
Vaccine Refrigerator		
vaccination vials monitor		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
high risk pregnancy and Vaccination schedule		
Cards for follow up (ANC, vaccination, growth charts)		

No vaccination, nutrition and MCH services in the clinic.

## ACCESSIBILITY

Are there any measures/initiatives in place to facilitate access and create a friendly environment for PWD?

No specific initiative in the clinic.

Are there any measures/initiatives in place to facilitate and create a friendly environment for women?

There is a very good and intimate relationship between the midwife and women coming to the clinic.

Data collected by Dr Mohamed Bagas, Medical officer HealthPro;

Drafting by Stefano Vida, Project Officer HealthPro

Date: 2<sup>nd</sup> February 2022

Dr Mohamed Bagas

Mr. Stefano Vida

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**Ministry of Health - Sudan**  
**Directorate general of PHC**  
**PHC Drugs' list**

State: North darfur

Clinic: Al Salam B - NHIF

Date: 09/01/2022

n	Generic name	Dosage form	In stock	out of stock
1	Amoxicillin trihydrate 125mg/5ml susp	susp	1	
2	Amoxicillin trihydrate 250mg/5ml forte susp	susp	1	
3	Amoxicillin trihydrate 250mg cap cap	cap	1	
4	Amoxicillin trihydrate 500mg forte cap	cap	1	
5	Erythromycin ethyl succinate 125mg/5ml susp	susp		1
6	Erythromycin ethyl succinate 250mg/5ml susp	susp		1
7	Erythromycin stearate 250mg tab	tab	1	
8	Septrin 240mg/5ml susp	susp	1	
9	Septrin 480mg tab tab 10 susp	tab		1
10	Cephalexin monohydrate 125mg/5ml susp	susp	1	
11	Cephalexin monohydrate 250mg/5ml susp	susp		1
12	Cephalexin monohydrate 250mg cap	cap		1
13	Cephalexin monohydrate 500mg cap	cap	1	
14	Ampicillin trihydrate + Cloxacillin sodium 250mg/5ml susp	susp		1
15	Ampicillin trihydrate + Cloxacillin sodium 500mg cap	susp		1
16	Cough syrup for Exp	syrup		1
17	Cough syrup for DM	syrup	1	
18	Cough Syrup for paed	syrup	1	
19	Indomethacin 25mg cap	cap		1
20	Metronidazole benzoate ( Flagyl) 200mg/5ml susp	susp		1
21	Metronidazole 250mg tab	tab		1
22	Metronidazole 500mg tab	tab	1	
23	Ibuprofen 200mg tab	tab		1
24	Ibuprofen 400mg tab	tab	1	
25	Salbutamol sulphate 2mg/5ml syrup	syrup	1	
26	Salbutamol sulphate 4mg tab	tab		1
27	Salbutamol inhaler	inhaler		1
28	Ciprofloxacin HCl 500mg tab	tab	1	
29	Tetracycline HCl 250mg cap	cap		1
30	Tetracycline HCl 1% eye oint	oint		1
31	Tetracycline HCl 3% skin oint	oint		1
32	Paracetamol 120mg/5ml susp	susp	1	
33	Paracetamol 500mg tab	tab	1	
34	Paracetamol supp 125 mg - 250 mg	supp	1	
35	Doxycycline HCl 100mg cap	cap	1	
36	Fansidar 525mg tab	tab		1
37	Diclofenac sodium 25mg tab	tab		1
38	Diclofenac sodium 75mg/3ml inj	inj	1	
39	Hyoscine N-butylbromide 10mg tab	tab	1	
40	Hyoscine N-butylbromide 20mg/ml inj	inj		1
41	Loperamide HCl 2mg tab	tab	1	

42	Ferrous sulphate + Folic acid ( Fefol) cap	cap		1
43	Folic Acid 5mg tab	tab	1	
44	Antacid tab	tab		1
45	Antacid 5ml susp	susp		1
46	Chlorphenamine maleate 2mg/5ml syrup	syrup		1
47	Chlorphenamine maleate 4mg tab	tab		1
48	Adrenaline inj	inj		1
49	Hydrocortisone sodium 100mg inj	inj		1
50	Benzyl Penicillin 1000000 IU inj	inj		1
51	Benzathine penicillin 2.4mega inj	inj		1
52	Benzathine penicillin 1.2mega inj	inj		1
53	Procaine penicillin Inj	inj		1
54	Bisacodyl 10mg tab	tab		1
55	Ferrous sulphate syrup	syrup		1
56	Metoclopramide inj Inj 57 B6 inj	inj	1	
57	B6 inj	inj		1
58	Aspirin tab 100mg & 300mg & 75mg Tab	tab		1
59	Mefenamic acid tab 250 mg & 500mg tab	tab		1
60	Mefenamic acid susp	susp		1
61	DNS ( dextrose with normal saline ) Infusion	infusion		1
62	NS ( Normal saline) Infusion	infusion	1	
63	Dextrose 5% with water Infusion	infusion		1
64	Ringer Lactate Infusion	infusion		1
65	Waters for injection	Box	1	
66	Disposable syringe	Box	1	
67	Multi vitamin syrup	syrup		1
68	B-complex syrup	syrup		1

26 42  
38% 62%



بتمويل من الاتحاد الأوروبي  
FUNDED BY EUROPEAN UNION



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  
CUP H82C19000120005

## Need Assessment – Health Facility

NAME OF FACILITY

TYPE OF FACILITY

LOCATION OF FACILITY (State/town/locality/camp)

GPS

NAME AND POSITION OF THE INTERVIEWED AND TELEPHONE CONTACT

DEMOGRAPHIC DATA

CATCHMENT AREA POPULATION	
Population Total	
Population Male	
Population Female	
Under 5 Total	
Under 5 Male	
Under 5 Female	
Pregnant Women Total	
Lactating Woman Total	



# SERVICE AVAILABILITY

DESCRIPTION	YES	NO
Child vaccination services, either at the facility or as outreach		
Growth monitoring services, either at the facility or as outreach		
Curative care services for children under age 5		
Community services		
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)		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## 1 HOUR STAFF COVERAGE

Clinic opening hours

DESCRIPTION	YES	NO
24-hour emergency		
On call staff		

Other

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## 2 COMMUNICATION

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

Other

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## 3 SOURCE OF WATER

What is the most commonly used source of water?

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Quality of the water (observation)

Poor					Excellent
1	2	3	4	5	

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 4 POWER SUPPLY

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

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 5 EXTERNAL SUPERVISION

DESCRIPTION	YES	NO
Does this 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?		

DESCRIPTION	N
How many supervision did you received during the last 12 months?	

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 6 STAFFING

Facility Manager (Name and position) \_\_\_\_\_  
Telephone contact \_\_\_\_\_

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

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Organizational structure:



Draw organizational structure in the annex 1

## 7 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?		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 8 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?		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 9 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?		



Please give an example \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 10 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?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 11 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)?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please explain the data flow

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## 12 HEALTH CARE WASTE MANAGEMENT AND CLIENT LATRINE

How does this facility finally dispose of sharps waste (e.g., filled sharps boxes)?

BURN IN INCINERATOR:

- ☐ Chamber Industrial (800-1000+°C)
- ☐ Chamber Drum/Brick

OPEN BURNING

- ☐ Flat ground – no protection
- ☐ Pit or protected ground

DUMP WITHOUT BURNING

- ☐ Flat ground – no protection
- ☐ Covered pit or pit latrine
- ☐ Open pit – no protection
- ☐ Protected ground or pit

REMOVE OFFSITE

- ☐ Stored in covered container
- ☐ Stored in another protected environment
- ☐ Stored unprotected

OTHER \_\_\_\_\_

How does this facility finally dispose of medical waste other than sharps boxes?

BURN IN INCINERATOR:

- ☐ Chamber Industrial (800-1000+°C)
- ☐ Chamber Drum/Brick

OPEN BURNING

- ☐ Flat ground – no protection
- ☐ Pit or protected ground
- ☐

#### DUMP WITHOUT BURNING

- ☐ Flat ground – no protection
- ☐ Covered pit or pit latrine
- ☐ Open pit – no protection
- ☐ Protected ground or pit

#### REMOVE OFFSITE

- ☐ Stored in covered container
- ☐ Stored in another protected environment
- ☐ Stored unprotected

OTHER \_\_\_\_\_

#### Sharpe and medical waste

- ☐ Waste visible, but protected area
- ☐ Waste visible, but no protected area
- ☐ No waste visible

### 13 HEALTH SERVICES' CHECK LIST

LABORATORY		
Sample collection area	Yes	No
Desk/table/ trolley		
Chair for the patient		
Chair for the collector		
Tourniquet		
Syringes		
Samples containers		
Label stackers		
Safety box		
Access to hand washing facilities		
Gloves		
Lab equipment	Yes	No
Microscope		
Water bath		
Centrifuge		
Mixer		
Bunsen burner		
Pipette		
ESR tubes		

ESR racks		
Colorimeter		
<b>Refrigerator</b>	Yes	No
Functioning refrigerator		
Temperature maintained at 2-8oC	Yes	No
<b>Lab registry</b>		
Available forms		
Available registry	Yes	No
<b>Consumables and reagents</b>		
Stock-outs control		
Stored at required temperature		
Stock control		
Syringes		
Needles		
Gloves		
Lancets		
Sample bottles	Yes	No
<b>Licence and guidelines</b>		
Operating licence		
Guidelines on laboratory procedures		
Safety guidelines including radiation protection		
Quality assurance guidelines		
Staff knowledge of the procedures in the guidelines		
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	Yes	No
<b>Reporting</b>		
Available reports about lab investigations done and medicines distributed		
Statistics and medical reports produced		
Saving the reports	Yes	No
<b>Assure internal quality control</b>		
Regular calibration of equipment		
Use of controls to check of quality of results	Yes	No
<b>Safety and ICP</b>		
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		



Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHARMACY		
<b>Well-furnished premises</b>	<b>Yes</b>	<b>No</b>
Glass and aluminium shelves		
Counter		
Electric signboard		
Ceramic floor		
Artificial roof		
<b>Air conditioner</b>	<b>Yes</b>	<b>No</b>
Air conditioner functioning		
Able to keep the temperature at 25oC		
<b>Medicines refrigerator</b>	<b>Yes</b>	<b>No</b>
Refrigerator dedicated to medicines available		
Set at temperature to preserve medicines such as vaccines		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Lab coats		
Water proof envelopes and labels		
<b>Medicines</b>	<b>Yes</b>	<b>No</b>
Availability of medicines <b>GO TO LIST</b>		
Storage conditions and expiry medications		
Registry for medicines in the facility		
<b>Standard dispensing processes</b>	<b>Yes</b>	<b>No</b>
Patient identification		
Drug doses, frequency, duration and administration modality		
Medication safety measures		
Correct labelling of medicines and safety measures to deal with expired medicines		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SHORT STAY		
<b>Bed and side accessories</b>	<b>Yes</b>	<b>No</b>
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		
<b>Nurses' station</b>	<b>Yes</b>	<b>No</b>
Desk		
Chairs for the nurses		
Chair for patients		
Hand wash basin/area or alcohol rub		
Safety boxes		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Gloves		
Cotton wool		
Disinfectant		
<b>Hand washing area</b>	<b>Yes</b>	<b>No</b>
Ceramic/waterproof walls		
Flowing water		
Soap		
Means of drying hands		
<b>Patient admission and discharge registry</b>	<b>Yes</b>	<b>No</b>
Admission and discharges register		
Prescription forms		
Patients records keeping		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
Guidelines on the management /nursing care of common medical and surgical conditions		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MINOR THEATRE		
<b>Theatre equipment</b>	Yes	No
Flowing water supply		
Table multi-directional adjustable		
Stool		
Ceiling lamb		
Minor surgical set		
Autoclave		
<b>Essential supplies /equipment</b>	Yes	No
Oxygen supply (in cylinders or piped		
Suction method		
Nitrous oxide supply		
Waste container		
Safety box		
<b>Consumables</b>	Yes	No
Gloves		
Cotton wool		
Disinfectant		
Local anaesthetic		
Sutures		
Suturing needles		
<b>Guidelines</b>	Yes	No
Hand wash checklist		
Guidelines on minor surgeries		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LABOUR ROOM		
<b>Labour room beds</b>	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 pillow cases		
Bed side accessories		
<b>Delivery table</b>	Yes	No
Disposable sterile Macintosh or sheet		
Table can be manoeuvred in several directions		
Emergency supplies (O2 in cylinders)		
<b>Lifesaving drugs</b>	Yes	No
Emergency supplies (O2 in cylinders)		



Oxytocin		
Magnesium sulphate		
Anti-histamine		
Antihypertensive for emergency use (e.g. Labetolol)		
Ergometrine		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
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		
<b>Consumables</b>	<b>Yes</b>	<b>No</b>
Needles and syringes		
IV fluid giving sets		
Cannulas		
Gloves and Cotton wool		
Disinfectant		
Urinary catheter		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OUT PATIENT DEPARTMENT		
	Yes	No
<b>Consulting room</b>		
Desks		
Chair for the MO/medical assistant		
Chair for the patient		
Examination couch		
Light source by couch		
Hand wash basin or alcohol rub		
Safety box when sharps are used		
<b>Equipment</b>	<b>Yes</b>	<b>No</b>
Stethoscope		
Sphygmomanometer		
Thermometer		
Pediatric and adult weighing scales		
Diagnostic set including (Torch, tongue depressors,		
Dressing tray, autoclave, and kidney dish		
<b>Medical forms</b>	<b>Yes</b>	<b>No</b>

Prescription forms		
Forms for diagnostic investigations		
Patient records files		
Referral forms		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>
MCH protocols (IMCI, ANC, EPI guidelines)		
CDs treatment protocols (Malaria, ....)		
<b>Storage facilities</b>	<b>Yes</b>	<b>No</b>
Shelves		
Cabinets and cupboards		
<b>NHIF</b>	<b>Yes</b>	<b>No</b>
Client's health insurance		

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MCH SERVICES		
<b>MCH services Room/ area to accommodate MCH services</b>	<b>Yes</b>	<b>No</b>
Desks		
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		
<b>RH equipment</b>	<b>Yes</b>	<b>No</b>
Fetal scope		
examination lamp		
Thermometer		
Cusco speculum, Sim retractor, artery forceps		
Examination tray		
Kidney dishes		
<b>Vaccination</b>	<b>Yes</b>	<b>No</b>
infant and adult weight scale		
Ice bag		
Thermometer		
Ice bag		
Vaccination carrier		
Cold boxes		
Vaccine Refrigerator		
vaccination vials monitor		
<b>Guidelines</b>	<b>Yes</b>	<b>No</b>

high risk pregnancy and Vaccination schedule			
Cards for follow up (ANC, vaccination, growth charts)			

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 14 ACCESSIBILITY

Are there any measures/initiatives in place to facilitate access and create a friendly environment for PWD?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are there any measures/initiatives in place to facilitate and create a friendly environment for women?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## STAFF ASSESMENT

ID	Name	Position	Sex M/F	Tel Contact	Type of interview: 1. Face to face 2. Telephone 3. Absent	Education
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						





STAFF ASSESMENT

ID	Place of origin: same village/same state/different state	Years of work/employment	Last training attended (year)	Topic of the training	Job satisfaction (from 1 to 5)	Will to remain in the same facility (Yes/No)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						



# STAFF ASSESSMENT

ID	3 reasons to stay (if previous answer is Yes)	3 reasons to leave (if previous answer is No)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		



Ministry of health  
Directorate General of PHC

Drugs list

State.....Clinic.....Date.....

NO	Generic Name	Dosage Form	In stock	Out of stock
1	Amoxicillin trihydrate 125mg/5ml susp	susp		
2	Amoxicillin trihydrate 250mg/5ml forte susp	susp		
3	Amoxicillin trihydrate 250mg cap	cap		
4	Amoxicillin trihydrate 500mg forte cap	cap		
5	Erythromycin ethyl succinate 125mg/5ml susp	susp		
6	Erythromycin ethyl succinate 250mg/5ml susp	susp		
7	Erythromycin stearate 250mg tab	tab		
8	Septrin 240mg/5ml susp	susp		
9	Septrin 480mg tab	tab		
10	Cephalexin monohydrate 125mg/5ml susp	susp		
11	Cephalexin monohydrate 250mg/5ml susp	susp		
12	Cephalexin monohydrate 250mg cap	cap		
13	Cephalexin monohydrate 500mg cap	cap		
14	Ampicillin trihydrate + Cloxacillin sodium 250mg/5ml susp	susp		
15	Ampicillin trihydrate + Cloxacillin sodium 500mg cap	susp		
16	Cough syrup for Exp	syrup		
17	Cough syrup for DM	syrup		
18	Cough Syrup for paed.	syrup		
19	Indomethacin 25mg cap	cap		
20	Metronidazole benzoate ( Flagyl ) 200mg/5ml susp	susp		
21	Metronidazole 250mg tab	tab		
22	Metronidazole 500mg tab	tab		



23	Ibuprofen 200mg tab	tab		
24	Ibuprofen 400mg tab	tab		
25	Salbutamol sulphate 2mg/5ml syrup	syrup		
26	Salbutamol sulphate 4mg tab	tab		
27	Salbutamol inhaler	inhaler		
28	Ciprofloxacin HCl 500mg tab	tab		
29	Tetracycline HCl 250mg cap	cap		
30	Tetracycline HCl 1% eye oint	oint		
31	Tetracycline HCl 3% skin oint	oint		
32	Paracetamol 120mg/5ml susp	Susp		
33	Paracetamol 500mg tab	tab		
34	Paracetamol supp 125 mg - 250 mg	supp		
35	Doxycycline HCl 100mg cap	cap		
36	Fansidar 525mg tab	tab		
37	Diclofenac sodium 25mg tab	tab		
38	Diclofenac sodium 75mg/3ml inj	inj		
39	Hyoscine N-butylbromide 10mg tab	tab		
40	Hyoscine N-butylbromide 20mg/ml inj	inj		
41	Loperamide HCl 2mg tab	tab		
42	Ferrous sulphate + Folic acid ( Fefol) cap	cap		
43	Folic Acid 5mg tab	tab		
44	Antacid tab	tab		
45	Antacid 5ml susp	susp		
46	Chlorphenamine maleate 2mg/5ml syrup	Syrup		
47	Chlorphenamine maleate 4mg tab	tab		
48	Adrenaline inj	inj		
49	Hydrocortisone sodium 100mg inj	Inj		
50	Benzyl Penicillin 1000000 IU inj	inj		

51	Benzathine penicillin 2.4mega inj	inj		
52	Benzathine penicillin 1.2mega inj	inj		
53	Procaine penicillin	Inj		
54	Bisacodyl 10mg tab	tab		
55	Ferrous sulphate syrup	syrup		
56	Metoclopramide inj	Inj		
57	B6 inj	Inj		
58	Aspirin tab 100mg & 300mg & 75mg	Tab		
59	Mefenamic acid tab 250 mg & 500mg	tab		
60	Mefenamic acid susp	susp		
61	DNS ( dextrose with normal saline ) Infusion	Infusion		
62	NS ( Normal saline) Infusion	Infusion		
63	Dextrose 5% with water Infusion	Infusion		
64	Ringer Lactate Infusion	Infusion		
65	Waters for injection	Box		
66	Disposable syringe	Box		
67	Multi vitamin syrup	Syrup		
68	B-complex syrup	Syrup		



**Emergency and Epidemic drugs for PHC Health center**

No	Items	Unit
1	Chloramfinicole (oily)	Ampul
2	Lomb Needle 22* 23	Pcs
3	Ringer Lactate	Bottle
4	Normal Saline	Bottle
5	O.R.S	Pack
6	Doxycycline	Tab
7	Erythromycin Syrup 125 m	Bottle
8	Erythromycin syrup 250 m	Tab
9	Examination Gloves	Pack
10	Canula- 16	Pcs
11	Canula- 18	"
12	Canula- 20	"
13	Canula 22	"
14	Canula- 24	"
15	Iron Dextrin	Ampul
16	Plasma Substitute	Bottle
17	Pensile Penicillin	"
18	Adrenaline	Ampul
19	Device for Diarrhea Test	Pcs
20	Devices for Meningitis test	"
21	Flagil Syrup	Bottle
22	Flagyl Tabs	Pcs
23	Hydrocortisone	Bottle

