



UATH

UNIVERSITY OF ABUJA TEACHING
HOSPITAL, GWAGWALADA, ABUJA

2023 ANNUAL REPORT





**UNIVERSITY OF ABUJA TEACHING HOSPITAL,
GWAGWALADA, ABUJA, NIGERIA**

2023

**ANNUAL
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OUR VISION

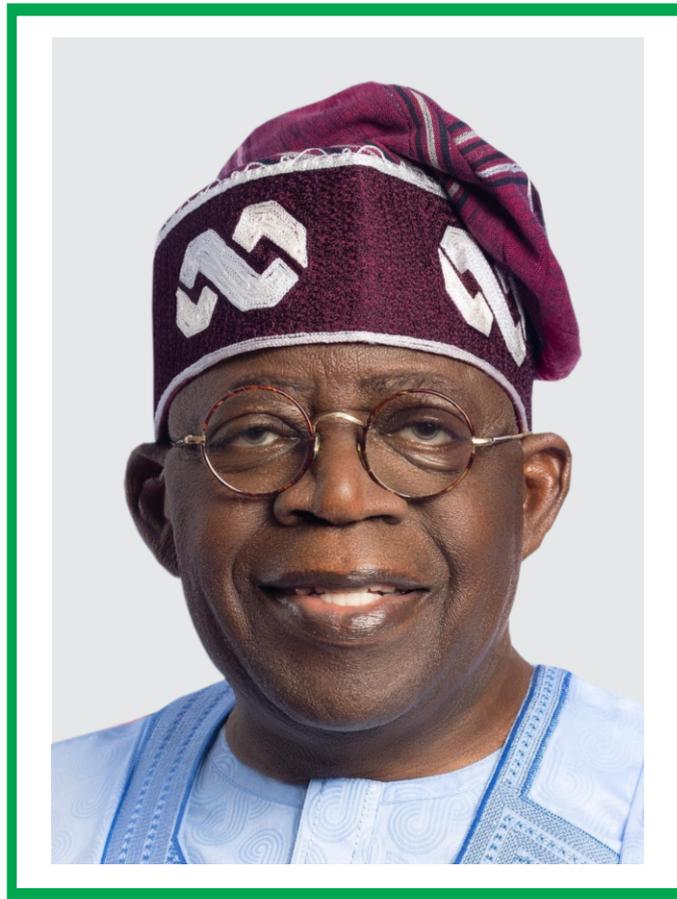
To render qualitative and effective specialists' health care services through well-motivated staff at an affordable rate.

MISSION

Our corporate mission is that of a well-equipped, modern tertiary health facility with a dedicated manpower to fulfill the following functions:

1. Render efficient and effective health care services to all categories of patients/clients within and outside the Federal Capital Territory.
2. Provide clinical teaching in all medical fields at undergraduate and postgraduate levels.
3. Carry out health-related researches to the benefit of humanity.

MANAGEMENT



His Excellency
BOLA AHMED TINUBU, GCFR
President, Commander-in-Chief of the Armed Forces,
of the Federal Republic of Nigeria



PROF. MUHAMMAD ALI PATE, CON
The Honourable Minister of Health & Social Welfare,
Federal Republic of Nigeria



DR. TUNJI ALAUSA
The Honourable Minister of State for Health &
Social Welfare,
Federal Republic of Nigeria

MEMBERS OF 5TH BOARD OF MANAGEMENT



Prof. Bissallah Ahmed Ekele
Chief Medical Director



Mrs. Modupe K. Adebajo
Director of Administration



Hajia Abu S. Fawa
Representing Public Interest



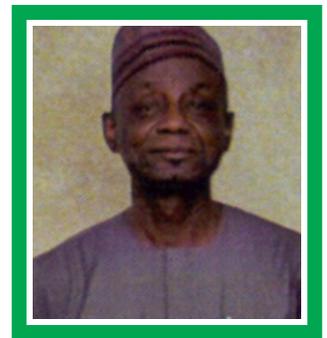
Mrs. Omobola A. Yusuf
Representing Public Interest



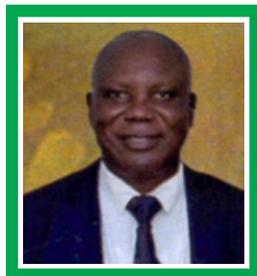
Hon. Chiagozie Ahanonu
Representing Public Interest



Dr. Sam Sam Jaja
Board Chairman



Dr. O. J. Amedu mni
Representing Federal
Ministry of Health



Dr. Teddy Eyeofun Agida
Representative of
Vice Chancellor,
University of Abuja



Dr. Bob Ukonu
Chairman,
Medical Advisory Committee
UATH, Gwagwalada, Abuja



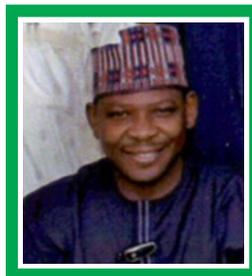
Prof. Mustapha J. Abubakar
Provost, College of Health
Sciences, University of Abuja



Prof. Felicia Anumah
Representative of
Senate, University of Abuja



Dr. Abubakar Ahmadu
Representative of
Host Community (FCT)



Prof. Solomon Avidime
Representative of
Nigerian Medical Association



Dr. (Mrs) Olufunke Ajiboye
Representative of
Joint Health Sector Union/
Assembly of Health Care Professionals

MEMBERS OF TOP MANAGEMENT COMMITTEE



Prof. Bissallah Ahmed Ekele
Chief Medical Director/Chief Executive Officer



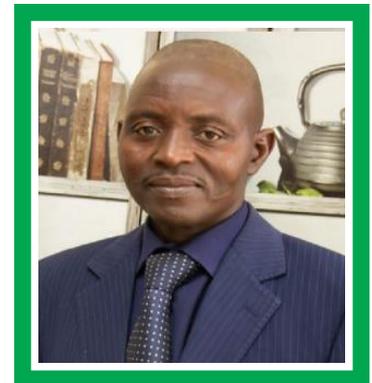
Mrs. Neoma Agulana
Director of Finance & Accounts



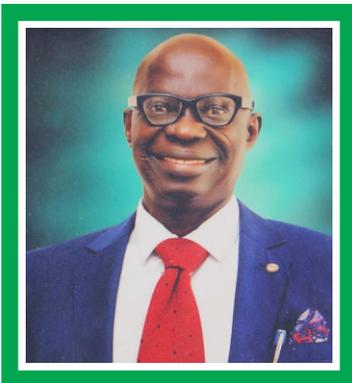
Dr. Bob Ukonu
Chairman,
Medical Advisory Committee



Mrs. Khadijat Modupe Adebajo
Director of Administration



Prof. Aliyu Y. Isah
Deputy Chairman, Medical Advisory
Committee (Research & Training)



Mr. Solomon Oyewole
Head, Internal Audit



Dr. Joseph Obande
Deputy Chairman, Medical
Advisory Committee (Clinical)



Engr. Dolapo Osodin
Head, Works/Engineering



Mrs. Rose H. Musa
Head of Nursing Services



Pharm. Mohammed Garba
Head of Pharmacy



Mr. Yusufu Hassan,
Secretary to Committee

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FOREWORD

It is an honour and a privilege to write the foreword of the 2023 Annual Report. The period under review was remarkable in every facet as the hospital continued her steady growth in infrastructure, personnel, teaching/training and research activities.

2023 could be described as one of the best years in the history of the Hospital as we had 100% release of capital funds and enjoyed generous donations from individuals and organizations. We were therefore able to complete the construction of the Mental Health Block; furnish the Composite Pathology Laboratory, construct and furnish the PCR Laboratory and the Junior Staff Quarters at the Workers Village. We were also able to renovate the Female Surgical Ward, Female Medical Ward, Male Orthopedic Ward, Pediatrics Medical Ward and the Laundry Department. The Senator Joshua Dariye Block at the Professor Felicia Anumah Endocrine Centre was fully furnished and equipped by the immediate Past First Lady, Aisha Muhammadu Buhari.

The collaboration with the University of Abuja yielded fruits as a TETFUND grant led to the equipping of a twin-theatre for the Renal Transplant Project and the acquisition of Endo-urology equipment, Tissue Typing Laboratory and a Chemistry Laboratory. KidsOR and Smile Train organizations equipped a Theatre Suite at the Trauma Centre for pediatric surgeries. The procurement of a C-arm, Gastroscope, Endoscopic surgery accessories, ENT consoles, basic IVF equipment and OCT Machine significantly improved our scope of diagnosis and treatment!

The Board in 2023 promoted two hundred and fifty-seven (257) senior and junior staff. One hundred and fifty (150) new staff were also employed and successfully captured by IPPIS. Two hundred and seven staff (270) benefitted from sponsored training or support to attend conferences as it was the year of massive human capital development! The hospital anchored free Vesicovaginal Fistula (VVF) repairs and craniofacial surgeries. We had accreditation visits from the National Postgraduate Medical College (Internal Medicine and Family Dentistry) and the West African College of Surgeons (Orthopedics, Obstetrics and Gynecology). Two resident doctors (Dr. Amina Buba and Dr. Abiola Adejumo) won College Prizes in Urology and Anaesthesia respectively at the exit examination!!

Donations were received from individuals and corporate bodies such as Nasfat Agency for Zakat and Sadaqat (NAZAS); Okapi Children Foundation; Zolon Health Care Ltd; Fistula Care Initiative; 100% Jesus Organization; Sight Savers; Nigeria IDP Diaspora Support (NIDS) group; Dr. Oluwatoyin Akinlada; Prof. Stephen Obaro (IFAIN); and many others that assisted indigent patients.

The Hospital hosted the 2023 AGM of Committee of Chief Medical Directors (CCMDs) in December that coincided with the Annual Staff Award. The presence of over forty CEOs added colour and candor to the ceremony that saw **Engr. Bala Mangut** winning the coveted prize of Best Staff of the Year while the **Emergency Pediatrics Unit** (EPU) won the Best Department of the Year Award.

We would not have attained this much without the guidance, counsel, and support of the Board of Management under the leadership of **Dr. Sam Sam Jaja** (*KSC and Balolo of Opobo*). Despite these modest achievements, there were still challenges as documented by Units and Departments. With more resources and judicious use of funds, we should overcome some of them in the coming years. Finally, I want to appreciate the team responsible for preparing this report for a good job and the entire UATH staff for their dedication and support. Remember our mantra: **Do not get tired and do not get angry as long as you are getting good results!**

To God be the glory!

**Professor Bissallah Ahmed Ekele,
Chief Medical Director.**

OFFICE OF THE CHIEF MEDICAL DIRECTOR

1.0 INTRODUCTION

Professor Bissallah Ahmed Ekele is the Chief Medical Director and Chief Executive Officer of the institution. The office staff strength of six (6) personnel consists of a Senior Confidential Secretary, a Program Analyst 1, a Clerk, a chauffeur and 2 Corps Members.

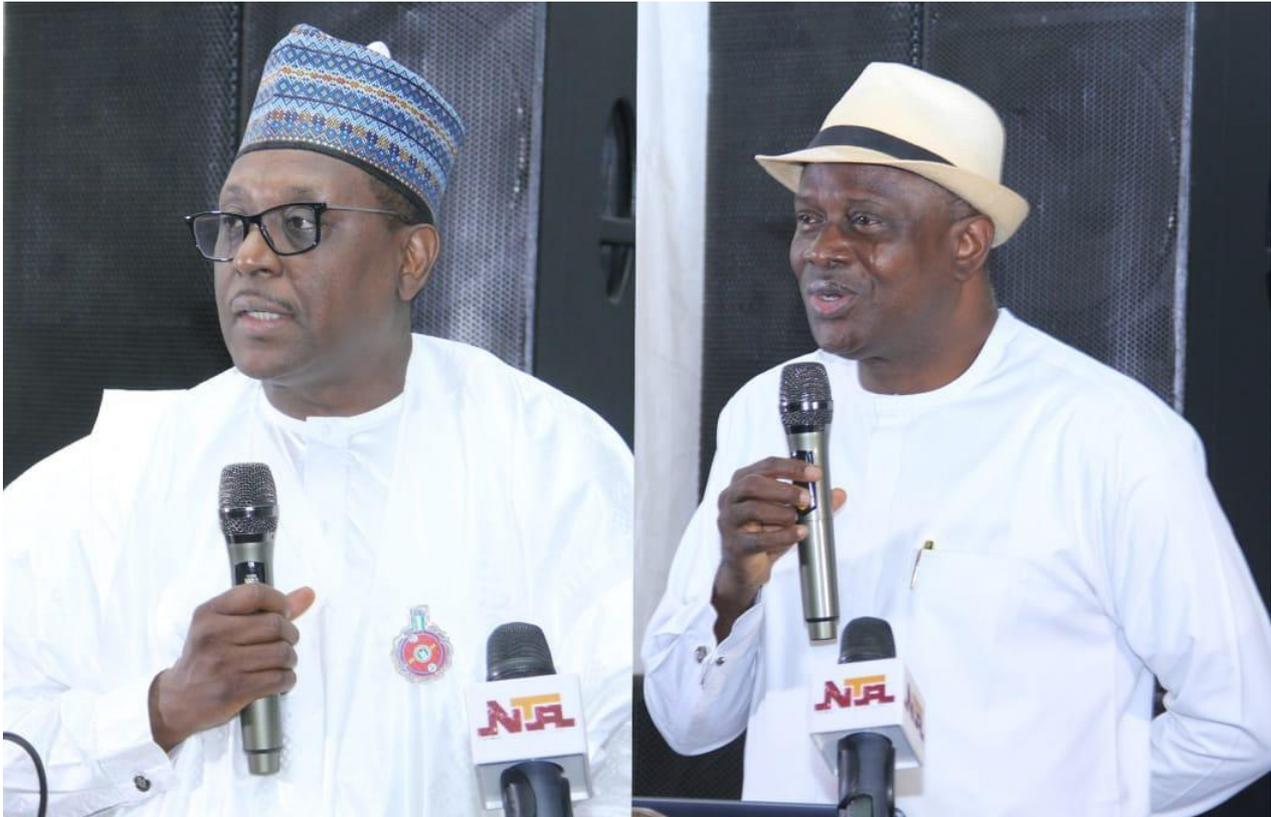
2.0 RESPONSIBILITY

The office is saddled with the day-to-day running of the Hospital and coordinates the activities of the Directorates of Administration and Clinical Services (CMAC).

2.1. Other Responsibilities

The following Departments and Units report directly to the Chief Medical Director:

- Corporate Affairs/Public Relations.
- Finance & Account.
- Internal Audit.
- Legal Unit.
- Planning Unit.
- Procurement Unit.
- SERVICOM Unit.
- Security Department
- Works and Engineering Department.



Coordinating Minister of Health and Social Welfare, Prof Muhammad Ali Pate and the CMD, Prof Bissallah Ekele at the AGM of CMDs Hosted by UATH, December 2023.

DEPARTMENT OF FINANCE & ACCOUNTS

1.0 INTRODUCTION

The Department of Finance and Accounts is headed by a Director who oversees the daily activities of the various Units and report to the Chief Medical Director.

The Hospital had a remarkable financial performance in the year 2023. The sole responsibility of the department is providing effective and efficient funds management for achieving the mandate of the Hospital.

Despite some challenges, financial prudence has been the cardinal point of the Chief Medical Director who through his articulated strategy and leadership, insists on judicious utilization of scarce financial resources allocated to the Hospital.

The Hospital achieved a respectable level of infrastructural development in the following areas:

- Construction of New Entrance Gate and Parameter Fencing.
- Construction of Mental Health Block.
- Construction of Call Duty Block.
- Renovation of Othopaedic Ward.
- Procurement of Hospital Equipment.
- Procurement of Emergency Paediatric Equipment.
- Procurement of Generator Set.
- Procurement of Endoscopy Tower.
- Procurement of C-ARM Machine.

2.0 Staff Strength:

The Department has a total of 80 staff as listed below:

▪ Director of Finance & Accounts	-	1
▪ Deputy Director Finance	-	4
▪ Assistant Director Finance	-	3
▪ Chief Accountant	-	8
▪ Assistant Chief Accountant	-	7
▪ Principal Accountant	-	8
▪ Senior Accountant	-	8
▪ Accountant I	-	5
▪ Accountant II	-	7
▪ Chief Executive Officer (Accounts)	-	9
▪ Assistant Chief Executive Officer (Accounts)	-	1
▪ Principal Executive Officer I (Accounts)	-	8
▪ Principal Executive Officer II (Accounts)	-	3
▪ Senior Executive Officer (Accounts)	-	2
▪ Higher Executive Officer (Accounts)	-	2
▪ Executive Officer (Accounts)	-	1
▪ Assistant Executive Officer (Accounts)	-	1
▪ Chief Clerical Officer (Accounts)	-	2

Office of the Director of Finance & Accounts: responsible for giving professional advice to the Accounting Officer and other Directors on matters relating to finance, appropriations and other

technical treasury circulars. He supervises all accounting functions to ensure compliance as well as regulatory framework.

3.0 Budget Unit

The unit is responsible for the preparation of the annual budget proposal of the hospital, recurrent and Capital as determined by the vision of the central government, and are responsible for the monitoring and evaluation of Budget implementation.

4.0 Revenue Unit

Revenue Unit is saddled with the responsibilities of billing, invoicing, fund collection through Point of Sales (POS) terminals, bills/deposit allocation, monitoring the activities of ready cash staff, resolving disputes arising from patient's payment. Revenues are also generated through the National Health Insurance. Work responsibility includes patient invoicing, claim preparation of fee-for-service and reconciliation of capitation and fee-for-service paid.

The staff strength of the Unit is 37 (thirty-seven). Out of this number, 10 (ten) staff work in the NHIS.

5.0 Other Charges Unit

The other charges unit is saddle with the responsibility of raising payment vouchers such as:

- Contracts – Payment vouchers for supplies (Capital and Recurrent Expenditures).
- Cash Advances.
- Inter departmental transfers.
- Retirement/Adjustment vouchers.
- Claims.

5.1 Staff Strength - Six

5.2 Achievements

1. Proper maintenance of incoming and outgoing registers.
2. Orderly indexed register/codes for all vouchers and files.
3. Ensure payment vouchers are duly and carefully raised with supporting documents
4. Careful management of the working materials – computers, photocopy machine, printers.

6.0 Checking Unit

Responsible for checking Payment Vouchers in the organization to ensure compliance with Financial Regulations (revised edition Jan. 2009).

6.1 Activities

1. The unit ensures that all the requirements of a valid voucher are on the payment voucher.
2. The unit ensures that the vouchers are "stamped and passed" for payment, duly signed to that effect by the checking officer in the appropriate place on the voucher.
3. The vouchers are registered in the appropriate books and passed to the next place of action.

6.2 Achievements

1. The Unit successfully performed its duties and responsibility for the period under review.
2. The necessary books were kept.
3. Issues about incorrect documents were successfully sorted out.

7.0 Central Pay Office (CPO)

Staff strength of five (5) and headed by a --- Accounting officer

7.1 Activities

1. Maintenance of cash books (Capital, Overhead and Revolving Fund).
2. Preparation of payment schedule to banks.
3. Accurate Filing of payment vouchers.
4. Preparation of TAXES including Enterprise Tax to the FCT(IRS).
5. Maintenance of the Hospital's Running cost.

7.2 Achievements

1. Prompt Remittance of Tax Deductions to the relevant authorities (FIRS, FCTIRS).
2. The first point of call for all Inspectors of the Hospital's books of Accounts.
3. Maintained accurate and relevant Accounting books and other Records.

8.0 Capital Expenditure Unit

The unit is responsible for keeping the fixed asset register of the hospital where the entire hospital fixed asset are documented showing the type, the category, the location, the movement (for moveable assets), the condition, annual depreciation including the accumulated depreciation and carrying value of the assets at a giving period. Staff strength is two (2).

8.1 Functions

1. To maintain adequate Fixed Asset register of the Hospital.
2. To determine the total number, location and movement of all fixed assets.
3. To calculate the annual depreciation of all fixed assets.
4. To estimate the carrying value of all fixed assets.
5. To conduct comprehensive stock taking of the hospital fixed assets.

8.2 Activities

1. Comprehensive stock taking of all Fixed Assets of the hospital.
2. Documentation and typing of all Fixed Assets of the hospital.
3. Categorizing the Fixed Assets into various asset groups e.g. Furniture and Fittings, Computer Equipment, Office Equipment and Medical Equipment.
4. Categorizing all fixed assets into their functional conditions e.g. Good, Fair and Bad.

9.0 Checking Unit

Staff strength of five (5)

9.1 Activities

1. The unit ensures that all the requirements of a valid voucher are on the payment voucher.
2. Ensures that the vouchers are "stamped and passed" for payment, duly signed to that effect by the checking officer in the appropriate place on the voucher.
3. Register vouchers in the appropriate books and pass to the next place of action.

9.2 Achievements

1. The Unit successfully performed its duties and responsibility for the period under review.

2. The necessary books were kept.
3. Issues about incorrect documents were successfully sorted out.

10.0 Salary Unit

10.1 Activities

1. Preparation of salary using the DONAK accounting software and financial reforms (IPPIS).
2. Proper keeping of all documents and books relating to staff salaries.
3. Validation of staff variation such as upgrading (increase in level and step) and increment.
4. Issuing of pay slip to staff.
5. Raising of payment voucher involving salaries.
6. Preparation of Bank schedule and payroll.
7. Recording of incoming and outgoing related correspondence.

10.2 Achievements

1. Most of the regular staff temporarily on GIFMIS, have been moved to IPPIS.
2. New Hazard allowance approved WEF 1/12/2021 fully implemented on both IPPIS and GIFMIS.
3. Staff on the IPPIS platform were fully paid their Arrears of the new hazard allowance.
4. Staff on the GIFMIS platform were also paid their arrears of the new hazard allowance while that of interns who served within 2021/2022 are yet to be paid.
5. Repatriation allowance paid up to 31/12/2023.
6. 2023 promotion fully implemented and paid.
7. Proper placement of nurses with B.sc and all backlog related have been settled.

11.0 Final Account

The Final Account Unit of Finance department is responsible among other things for the preparation of the following subsidiary books and Financial Statements. Staff Strength of four (4).

11.1 Activities

1. Receivable Ledgers, Trade Payable Ledgers.
2. Cash Book Analysis of Receipt and Expenditure.
3. Journal postings of DRF, Overhead and Capital Receipts and Expenditure.
4. Creditors Summary and Store Issue Receipt.
5. Preparation of the Income and Expenditure Statement of the Hospital.
6. Preparation of Annual Financial Statement of the organization.
7. All other Report that may be required from time to time.

12.0 Billing Unit

Billing unit is saddled with the responsibility of billing patients on admission in the Hospital with the exception of amenity ward. I.e. those not on National Health Insurance Scheme (NHIS). The unit has seventeen (17) staff, headed by a chief accounting Officer.

13.0 Special Treatment Clinic (STC) UNIT

13.1 Activities

1. The unit head is the chief accountant who oversee the daily activity of the unit.
2. Sourcing fund and managing the finance of the clinic.
3. The tracking and recording of the activity of the STC such as payment of Consultation.
4. Laboratory investigation (CD4).
5. Raising of payment voucher and control the payment of staff allowances under STC clinic.
6. Book keeping with a payment point control by the unit.

- Control the income and expenditure records of the clinic as well as other related matters from institute of human virology, Nigeria.

13.2 Achievement

- Total computerization by Health-in-a-Box to increase revenue to the hospital and encourage paperless health care delivery
- Health in a box point was given to the unit for collections of consultation.
- Ensure a well-trained and motivated staff for efficient and prompt service delivery.

14.0 Challenges

- Lack of adequate manpower to cover all six (6) points in the hospital.
- Persistent network failure of the hospital intranet. This is also a reason for over-crowding of patients at pay point.
- Insufficient point of sales machine to effectively cover our pay points.
- Lack of adequate training of staff in the operation of electronic medical record.
- Lack of proper training of staff on National Health Insurance procedure.
- Lack of conducive working environment for staff in pay points.
- Lack of awareness on the proper usage of the NHIA and FHIS procedure. This is causing a huge problem to both patients and Management.

Mrs. Agulanna A. Nneoma
Director of Finance & Accounts



Dr. Nimfa Zwalbong (Out-going, DFA) Handing Over to Mrs. Agnes Agulanna (Incoming, DFA)

INTERNAL AUDIT

1.0 INTRODUCTION

The Department is headed by a Deputy Director who oversees all its activities and report directly to the Chief Medical Director.

2.0 STAFF STRENGTH

We have the following staff in the department.

• Chief Accountants (Audit)	2
• Senior Accountant (Audit)	1
• Account Officer II (Audit)	1
• Principal Executive Officer I (Audit)	1
• Higher Executive Officers (Audit)	2
• Senior Executive Officer (Audit)	1
• Principal Confidential Secretary II	1

3.0 ACTIVITIES/FUNCTIONS

1. Serve as a watch dog and advises management on financial and control measures.
2. Ensure compliance with management policies/regulations.
3. Assess the high-risk areas (collection points) and make proper recommendations.
4. Safeguarding the assets of the hospital against losses and pilferages.
5. Identifying shortfalls or gaps in processes.
6. Evaluate internal control system and make recommendations for improvement
7. Carry out special investigation for the management.
8. Prevention and detection of frauds with emphasis on prevention.
9. Ensuring adequate and reliable financial records in accordance with the current accounting standards and practices.

4.0 ACHIEVEMENTS

1. Proper audit programs were put in place as a guide for effective performance.
2. Enforcement of business registration and renewal by contractors.
3. Recovery of funds from over payment of salaries and cash advance to some staff as well as payment to some contractors.
4. There was prompt retirement of cash advances by the staff.
5. Ensured that short dated drugs were rejected and thereby reduced loss of funds through expired drugs.
6. The award for the year 2023 to contractors was properly documented with regard to award letters/LPO and supplies done as per specifications.
7. Pushed for the corrections of discrepancies in health-in-the-box.
8. Ensured that the relevant books of account were maintained and updated.
9. Daily monitoring of revenue generated to ensure proper recording and lodgments.
10. Effective pre and post auditing of all payment vouchers.
11. Working with the team of external auditors we were able to verify the 2023 end of the year stock taking for immediate correction according to the extant laws.

5.0 CHALLENGES

1. Need to increase the workforce in the department especially with the current expansion in the hospital.

2. The staff skills and knowledge are not updated through training/workshop to enhance their performance to meet up with the current auditing practices.
3. Reconciliation on Integrated Personnel and Payroll Information System (IPPIS) was difficult as it is being handled by the Office of the Accountant-General of the Federation.
4. It was difficult to reconcile the revenue generated by some departments due to poor record keeping.
5. Network failure makes it difficult at times to assess records in health-in-the-box.

6.0 FUTURE PLANS

1. To have the department computerized for effective monitoring, evaluation and report writing.
2. To concentrate on the high-risk areas (collection points) in the hospital for possible prevention of loss of revenue.
3. To promptly submit all reports as per financial regulation requirements.
4. To ensure close monitoring on low performing departments, close gaps for possible improvement
5. To effectively implement more of preventive measures in fund management/fraud detection rather than investigative activities.

Mr. Solomon Okewole
Head of Internal Audit



Medical Equipment Purchased for the Renovated Wards

LEGAL UNIT

1.0 INTRODUCTION

The Legal unit is headed by a Principal State Counsel who oversees all its activities and report directly to the Chief Medical Director. He is assisted by a Senior State Counsel, a State Counsel, an Administrative Staff and a Corps Member.

2.0 ACTIVITIES/FUNCTIONS

Functions of the unit includes but not limited to the following:

1. Legal Counseling.
2. Drafting of Agreements and Memoranda.
3. Brief writing to the Hospital Solicitors.
4. Legal representation in Courts.
5. Attendance at Police Stations and facilitation of Bail for staff.
6. Lectures/Talks.

3.0 COURT CASES

The following cases are on appeal

1. Pius Kwado vs UATH.
2. Dr. Kawu Abdulkadir vs UATH.
3. Islamiyat Abdulfatai vs UATH.

The following cases are at different stages

1. Christy Daniel vs UATH on hearing at FCT High Court.
2. Pius Kwado vs UATH & 2 ORS.
3. Abubakar Sadiq vs UATH.
4. Mr. Ajisafe Vs UATH.
5. Alhaji Yakubu Maiyaki Vs UATH.

4.0 ACHIEVEMENT

1. The Unit have been able to effectively keep to the mandate behind it's establishment, to wit, advising the Chief Medical Director, who is our Team Leader and by extension, the Hospital management about the legality or otherwise of core actions taken in the day to day running of the Hospital.
2. Again, during the year under review, for the first time in its history, the Unit had a smooth hand over process of leadership change after the former Head of Unit retired from the civil service and and hand over the baton of leadership to his erstwhile second in command, Olabiyi Sosanwo Esq. albeit in capacity.

5.0 CHALLENGES

1. Books and Reference materials.
2. Utility vehicle to facilitate the work of the unit.
3. Internet facilities for ease of references and research.
4. There is urgent need for Photocopier machine and 3 office chairs and table for the Unit.

APPRECIATION

The unit is quite appreciative to the Chief Medical Director and the management for employing a lawyer and an administrative staff and graciously adding them to the Unit. This is a reflection of the fatherly role the Chief Medical Director, who directly oversees the Unit has been playing in the Unit.

Bar. Olabiyi Sosanwo, Esq.
Ag. Head of Unit.



Barr. Jonathan Muru (Left) Handing Over to Barr. Olabiyi Sosanwo After His Retirement.

PLANNING UNIT

1.0 INTRODUCTION

The planning unit which is newly created is headed by a Chief Planning Officer under direct supervision of the Chief Medical Director.

2.0 STAFF STRENGTH

The unit is staffed with two other experienced staff an Assistant Chief Administrative Officer and an Administrative officer 1.

3.0 ACTIVITIES/FUNCTIONS

The unit has the mandate to carry out the following functions, among others:

1. In collaboration with strategic stake holders prepare annual plans/budget.
2. Develop strategic plans and work plans for the Hospital.
3. Monitoring, evaluating and coordinating the implementation of Hospital projects.
4. Collection of reports of the departments of specific achievements.

4.0. CHALLENGES

1. Inadequate office space.
2. There is need for modern office furniture.
3. Office equipment (computers, printers, internet facilities).
4. Inadequate Staff.
5. There is the need for Training and Retraining of the unit personnel.

5.0 FUTURE PLANS

1. To have the Planning activities computerized for effective monitoring.
2. To have an effective planning system understood by all stakeholders.
3. To see the unit, grow in to a department under the Office of the Chief Medical Director.

Mall. Musa Ibrahim
Head of Unit

PROCUREMENT UNIT

1.0 INTRODUCTION

The procurement unit is headed by a Deputy Director who oversees the activities of the unit and report directly to the Chief Medical Director.

2.0 STAFF STRENGTH

The unit is staffed with experienced staff who have received the requisite basic Bureau of Public Procurement (BPP) training.

- | | |
|----------------------------------|---|
| • Deputy Director | 1 |
| • Chief Procurement Officers | 2 |
| • Principal Procurement Officers | 2 |
| • Senior Procurement officer | 1 |
| • Principal Store officer | 1 |
| • Procurement Officer I | 2 |
| • Procurement Officer II | 1 |
| • Program Analyst | 1 |
| • A Corps member | 1 |

3.0 ACTIVITIES/FUNCTIONS

The function of the unit is the procurement of goods, works and services within the guidelines stipulated by BPP. These include procurement planning, project monitoring and evaluation, tenders' procedure and implementation of approved budgets. The unit ensures that due process of contract award and execution is strictly followed in line with Public Procurement Act 2007.

3.1. The unit also carries out the following activities:

- Issuance of award letters to suitably qualified contractors/suppliers as may be approved by the Accounting Officer and the Hospital Tenders Board.
- Organize periodic inspection of capital projects as required by the Federal Ministry of Health or Federal Ministry of Works and Housing.
- Routine monitoring of outsourced staff to ensure compliance.
- Other ad-hoc duties that may be assigned by the accounting Officer.

4.0 ACHIEVEMENTS

1. Successful implementation of 2023 capital projects.
2. One additional Procurement Officer was employed.
3. Four (4) Procurement officers were appointed secretaries of various Departmental Revolving Fund Committees to ensure BPP compliance in their procurement activities.
4. Two staff attended the BPP conversion/induction training program.
5. The Drug Revolving Fund Committee now has a Chief Procurement Officer and two trained Procurement Officers to ensure BPP compliance.

5.0 CHALLENGES

There is need for office space to function maximally. Most user departments/units still have difficulties in understanding procurement processes, hence the need to regularly carry out enlightenment on procurement procedures in compliance with BPP Act 2007. Also there is need to organized update courses for the Procurement officers.

6.0 FUTURE PLANS

Our future plan is to expand our horizon in the training & retraining/development of procurement staff, fully equipped office environment in line with evolving E-procurement practice to meet up with standard best global practices.

7.0 CONCLUSION

The Management is appreciated for the slots given to three staff to attend BPP conversion training program in December 2023. The unit also wishes to express its profound gratitude to the Management for providing it with the conducive atmosphere for the discharge of its assigned responsibilities.

Mrs. E. J. M. SWAM
Head of Procurement



Block of Six-Flats Constructed for Junior Staff.

PUBLIC RELATIONS/CORPORATE AFFIARS UNIT

1.0 INTRODUCTION

The Public Relations Unit is saddled with the responsibility of disseminating information on the activities taking place in the hospital as well as promoting the image of the facility. It is headed by a Deputy Director (Information) who reports directly to the Office of the Chief Medical Director.

2.0 STAFF STRENGTH

The unit has eleven (13) Staff

• Deputy Director Information	1
• Principal Information Officer	1
• Senior Information Officers	2
• Information Officer I	1
• Admin. Officer II	1
• Assistant Chief Executive Officer	1
• Principal Executive Officer I (information)	1
• Senior Executive Officer (Graphics)	1
• Higher Executive Officer	1
• Senior Clerical Officer	1
• Photographers	2

3.0 ACTIVITIES

1. Promoting the cooperate image of the hospital.
2. Protocol arrangement.
3. Issuing press statements and production of quarterly news Bulletins.
4. Production of staff identification cards.
5. Distribution of mails and circulars.
6. Photographic activities of the hospital events.
7. Dissemination of information of vital importance to the hospital community.
8. Assisting in organizing hospital events.
9. Furnishing ICT Unit with the latest happenings and photographs for the update of the hospital website.
10. Scouting for news within the facility.
11. Any other duties as directed by the Chief Medical Director.

4.0 ACHIEVEMENTS

1. Successfully hosted the 2023 Annual General Meeting (AGM) of Committee of Chief Medical Directors & Medical Directors of Federal Tertiary Hospitals (CCMDFTH).
2. Sustained the production and renewal of staff identification cards.
3. The UATH quarterly Bulletin was also sustained throughout the year.
4. Regular Unit Meetings every Wednesday of the week.
5. Sensitizing the hospital community on the world health days such as World Diabetes Day, World Sickle cell day, world cancer day just to mention a few.
6. Strengthened working synergy between the ServiCom Unit and Public Relations Unit.

5.0 CHALLENGES

1. Inadequate office accommodation.
2. There is the need for central external hard disk for archives (Laptops and Desktop computer).
3. Lack of access to internet facility.
4. Inadequate training and re-training of staff.

6.0 FUTURE PLAN

1. The need for training through workshops and update courses to keep staff abreast on modern trends in the profession.
2. The need for the staff to be inducted into National Institute of Public Relation (NIPR).
3. Organizing quarterly media briefings by the CMD.
4. Deployment / Recruitment of more staff to the unit.

Mal. Sani M. Suleiman (FNGE)
Head of Unit



DD (Information) Mal. Sani M. Suleiman and Some Staff at the Okapi 2023 Step to Survival Event, Jabi, Abuja

SECURITY DEPARTMENT

1.0 INTRODUCTION

The Department is headed by Major Usman Aliyu (Rtd). He is responsible for the general security coordination and reports directly to the Chief Medical Director. The security outfit of UATH is outsourced to Crown Continental Security Limited that has two (2) Senior Managers.

2.0 STAFF STRENGTH

Total staff strength of 226 and the breakdown is as follows;

a. Male security operatives	=	162
b. Female security operatives	=	64
Grand Total	=	226

3.0 ACTIVITIES

The following are major functions of the department of security.

1. Protective security within UATH.
2. Coordinating the security activities in UATH.
3. Liaison with other security agencies on matters of security interest to UATH.
4. Provision of security briefs/reports to the Chief Medical Director.
5. Investigation of likely security breaches.
6. Security awareness lectures to members of UATH Staff.
7. Performing any other function as may be directed by the Chief Medical Director.

4.0 ACHIEVEMENTS

The following are the achievements of the department during the period under review.

1. Interception of stolen items belonging to UATH from miscreants/hoodlums.
2. Arrest and handing over of miscreants to the Nigerian Police Gwagwalada Command for offences related to assault on medical staff and scamming activities within UATH Complex.
3. Training and retraining of security operatives for efficiency and professionalism.
4. Effective and successful security coverage during official and private functions within UATH Complex during the period under review.
5. Effective and frequent patrols, static and mobile surveillance within UATH complex.

5.0 CHALLENGES

1. Inadequate lighting around the UATH Perimeter fence.
2. Inadequate CCTV coverage of the House officers'/interns quarters for efficient security coverage.
3. Inadequate Street light around the UATH residential quarters.

6.0 FUTURE PLANS

1. A wider CCTV coverage at all vulnerable and key points within UATH Complex.
2. Unarmed combat and proactive security training for security staff.
3. Creation of Police outpost unit within the hospital.
4. The continuation of the reconstruction of perimeter fence/Security barb-wire on the fence.
5. Mobile/Static surveillance training and firefighting drill for the security staff and other departmental/unit staff.
6. Submission of security appraisal to the Management for the redesign of faded traffic line/slot for staff and visitor's car packs within the UATH Complex.

Major Usman Aliyu (Rtd)
Chief Security Officer.



The Chief Security Officer, Major Aliyu Usman (rtd) and Operatives in Morning Routine Exercise

SERVICOM UNIT

1.0 INTRODUCTION

The SERVICOM Unit is headed by the Nodal Officer who oversees the activities and reports directly to the Chief Medical Director. He is assisted by 3 principal officers namely: Complaint Desk Officer, Charter Desk Officer and Service Improvement Officer.

2.0 STAFF STRENGTH

The Unit has a staff strength of 9 and 1 Corps member that cover a 24-hour shift.

3.0 ACTIVITIES

1. The Unit receives complaints of Service failure and promptly respond by ensuring complainants grievances are addressed promptly and satisfactorily.
2. Conducts client satisfaction surveys after which interactions are made with supervisors and frontline staff in a bid to improve service delivery.
3. Observe and report service failures as well as recommend to Management ways to improve better service delivery.
4. Organizes the Annual Staff Award Ceremonies

4.0 ACHIEVEMENTS

1. The Unit received several written and verbal complaints from clients. These complaints were promptly handled to the satisfaction of the complainants.
2. Presented papers in the Monthly Clinical Grand Rounds of the Hospital that held in March on the topic "Dealing with Difficult Patients: A Servicom Approach" and in July 2022 on the topic "Patient Centered Care".
3. The Staff Award for the year was held on the 8th of December 2023 and was graced with the attendance of The Committee of Chief Medical Directors and Medical Directors of Federal Tertiary Hospitals in Nigeria, dignitaries and staff in attendance. A total of fifty-four (54) staff and seven (7) organizations were honoured for their hard-work, dedication, excellence in service and for their positive impact on the development of the Hospital.

5.0 CHALLENGES

1. Limited opportunity for staff trainings and attendance of conferences organized by Servicom for improvement in knowledge and skills relating to service improvement.
2. Poor network service causing longer waiting time for patients.
3. Limited pay points also causing prolong waiting time.
4. Occasional overbilling of patients.
5. Delay in the commencement of clinics time due to prolonged clinical meetings.
6. Limited opportunity for staff trainings and attendance of conferences organized by Servicom for improvement in knowledge and skills to service improvement.
7. Lack of a computer in the unit and unit not enlisted in 'Health in the Box'.
8. Seats, table and television in poor state, no smart phone for communication and recording where need be.
9. No imprest is given for urgent needs.
10. Outdated University of Abuja Teaching Hospital service charter.

6.0 RECOMMENDATIONS

1. Improvement of network service and creation of more pay point.
2. Provision of a computer in the unit and the unit be put unit not in 'Health in the Box' for easy reporting and access.
3. Renovate seats, table and television in the unit.
4. Provision for smart phone that can recording where there may be need.
5. Staff trainings and attendance of conferences organized by Servicom for improvement in knowledge and skills for effective service improvement.
6. Need to launch the Revision of the university of Abuja teaching hospital service charter.

7.0 FUTURE PLANS

Initiate the Revision of the UATH Service Charter

Dr. Anthony Bawa
Nodal Officer/Head of Unit



Newly Inaugurated SERVICOM Team in a Group Photograph with the Hospital Management. The SERVICOM Nodal Officer, Dr Anthony Bawa is seated 2nd from left.

DEPARTMENT OF WORKS AND ENGINEERING

1.0 INTRODUCTION

The Department is headed by an Assistant Director who is responsible for the administration, co-ordination and supervision of the department and reports directly to the Chief Medical Director. The Department is a support service department which stands to serve the needs of all other departments of the entire hospital.

2.0 STRUCTURE

The Works and Engineering Department comprises of the following units.

1. Biomedical Engineering Unit.
2. Electrical and Electronic Engineering Unit.
3. Mechanical Engineering Unit.
4. Building Unit.
5. Communication Unit.
6. Refrigerator and Air Conditioner Unit.
7. Water Unit.
8. Quantity Surveying Unit.

3.0 STAFF STRENGTH

▪ Head of Department	-	1
▪ Senior Staff	-	26
▪ Junior staff	-	39
▪ IT students	-	6
▪ NYSC	-	2

Two of our members exited the system from active service this year, Engr. Mangut Bala and Mr. Victor Summonu.

4.0 FUNCTIONS

1. Weekly maintenance work in all departments, wards and clinics.
2. The department effectively manages all hospital equipment, buildings and facilities.
3. Established and maintained standard modern technological maintenance approach to hospital equipment and facilities.
4. Ensure efficient maintenance of hospital buildings, utilities such as electricity, water and other infrastructures.
5. Coordinating all engineering /technical activities of the hospital.
6. Providing technical input to the Management.
7. Supervises contractors of the hospital for equipment, buildings and other hospital facilities.
8. Ensures all equipment /generating plants are functioning well and always.
9. Train students on Industrial attachment from various institutions of higher learning.

5.0 BIOMEDICAL ENGINEERING UNIT

The Biomedical Engineering Unit has a total number of 13 staff (3 Engineers, 5 Technologists, and 5 Technicians).

5.1 Activities

The Biomedical unit is saddle with preventive, corrective and breakdown maintenance of every now and then depending on last maintenance. Staff are stationed in critical areas in the hospital e.g. S.C.B.U, Theatre, Laboratory, Oxygen plant for prompt prevention of breakdown of equipment.

5.2 Achievements:

The goal of the is geared towards, taking over various maintenance of equipment that was handled by contractors and also installation of various medical equipment in the hospital. Also guiding the procurement unit in purchasing of medical equipment. Installation of equipment in renal transplant center in trauma center. The unit carried out the following activities in the year 2023.

1. Installation of equipment in renal transplant center at Trauma Center.
2. Installation of Apheresis machine in Pediatric Oncology unit.
3. Installation of various medical equipment in Endocrine center.
4. Installation of theatre lamp, baby incubator, delivery beds in Maternity center.
5. Repair and installation of mammography machine in Radiology department.
6. Installation of Digitizer in Isolation centre.
7. Installation of ICU beds, ventilators in trauma centre ICU.
8. Installation of ECG Machine in cardiology center.
9. Installation of Anaesthetic Machine in Main theatre.
10. Repairs of Room 3 X-ray Machine.
11. Guiding the procurement unit in purchasing of medical equipment.

5.3 Challenges

- There is the need for additional manpower in the Junior Cadre to meet up with expansion of the Hospital and staff Training.

5.4 Future Plans

The Biomedical team wish to see the reporting of faults/faulty equipment are done through internet connection through a networking server for prompt response and also have an audited equipment ledger for proper record.

6.0 ELECTRICAL AND ELECTRONIC ENGINEERING UNIT

The electrical unit is headed by an Assistant Director Electrical Engineer who oversees the daily activities of the unit and reports to the Head of Department. The unit is responsible for working in a team to improve the standard of electrical installation in the hospital thereby promoting

safety of lives and property and prevention of potential dangers of fire outbreak and other hazards.

The unit has staff strength of eight (8) and saddled with the following responsibilities:

1. Supervising, inspecting and testing of new installation, addition/ extension and alteration before electricity is supplied to the installation.
2. Periodic inspection of electrical installations.
3. Carrying out preventive and breakdown maintenance.
4. Design and implementation of electrical drawings.
5. Recommending/prescribing safe electrical materials in accordance with Standard Organization of Nigeria (SON) and Institute of Electrical Engineers' (IEE) wiring regulation.
6. Advice on electrical installation best practice.

6.1 Achievements

The following were achieved during the year under review:

1. Upgrading of endocrine electrical supply from recline conductor to overhead aluminum conductor.
2. Installation of 33KV gang isolator at injection substation for easy operation.
3. Supervision of call duty and house officer's quarters under construction.
4. Creation of central water heater in O&G, Female and Male wards.
5. Rehabilitation of Electrical facilities in the wards.
6. Rehabilitation of electrical facilities in trauma center.
7. Installation of Indelec lighting arrestors on communication masts.
8. Maintenance of Electrical facilities in the wards.
9. Installation of 100KVA generator at ne maternity.
10. Connection of CSSD & Bulk Store to lab generator.
11. The unit successfully trained six (6) IT students and two (2) youth corps members during the year.

6.2 Future Plans

1. Installation of 33KV breaker and panel for the hospital.
2. Bulk purchase of electrical consumables.
3. Provide professional electrical tools and equipment.
4. Training staff from the unit on modern technology in Electrical Engineering.
5. It is **strongly recommended** to provide accommodation for at least one Electrical staff in the hospital quarters for rapid response to call and emergencies, especially at night.

7.0 MECHANICAL ENGINEERING UNIT

The unit is headed by an Assistant Chief Technical Officer (Mechanical).

This unit is saddled with the responsibility of generating and distributing electricity to every department of the hospital when there is Power outage from Abuja Electricity Distribution Company (AEDC) in the Hospital.

The unit also carries out repairs, fabrication and welding works of chairs, hospital beds, cardboards, wheelchairs, and other iron works.

7.1 Staff Strength

The unit has nine staff, 9 permanents staff and 2 stipend staff.

7.2 Activities

The unit has recorded some level of achievement in the year 2023 as follows:

1. 500 KVA – Mocopolo Generator – At the main power house.
2. 275 KVA - Theatre Generator – Close to Admin Block.
3. 145 KVA – X- Ray Generator – Close to Admin Block.
4. 375 KVA – Aisha Buhari Trauma Centre/Medical Accident and Emergency/IDC/ICN School.
5. 350 KVA - Laboratory/Dialysis Generator.
6. 150 KVA – Special treatment Clinic generator – Opposite STC.
7. 100 KVA - Oxygen Plant Generator – Behind main laboratory Department.
8. 100KVA PCR Lab generator.
9. 275KVA generator for C - T Scan.
10. 100KVA generator for GOPD/NHIS Complex.
11. Our Usual daily routine and regular maintenance work on the Generators starting and changing over the generators whenever there is power outage from AEDC and vice visa.
12. We have been able to do the repair works on chairs, beds, drip stand etc.

7.3 Achievements:

The unit has recorded some level of achievement in the year 2023 as follows:

1. The Unit has been able to supply power to the entire hospital with the generator available.
2. We have been able to do the repair works on chairs, beds, drip stand etc.
3. Connecting the new IDC centre to 375KVA generator.
4. Relocating the Mikano 350KVA generator to laboratory department.
5. The 60KVA moved from Isolation centre to PCR Lab.
6. Procurement of a new 850KVA Generator.

7.4 Challenges:

1. There is the need for increase in manpower to manage the generators on ground.
2. Some clinical areas have to wait for some time before supply from generator after AEDC outage, due to the breakdown of the 1100KVA generator.
3. Fuel distribution to the outlet generator is also vary challenging using manual trolley.

7.4 Future Plans:

1. The hospital needs 2 new generators of 2500KVA capacity.
2. There is the need for a Tricycle for easy distribution of diesel to the outlet generators.

8.0 BUILDING UNIT

The section is headed by an Assistant Chief Building Officer. The section has staff strength of eight (8) members as follows; 1 Assistant Chief Building Officer, 1 Chief Technical officer, 4 Principal Technical officers, 1 Technical Officer and 1 Artisan.

8.1 Achievements:

1. Supervision of the Construction of cardio-vascular research centre.
2. Supervision of the Construction of call duty block.
3. Reconstruction of soak away in the Hospital quarters.
4. Control of roof leakages of various roofs in the hospital and quarters.
5. Renovation of House Officers quarters.
6. Supervision of the construction of waiting area at the PCR laboratory.
7. Supervision of the construction of junior staff quarters.
8. Supervision of the Construction of the mental health building.
10. Renovations of Gynae and Post-Natal ward.
11. Renovation of female medical and surgical ward.
12. Supervision of consultant block and fence work.
13. Renovation of Orthopedic Ward.
14. Routine maintenance work of buildings.

8.2 Challenges:

1. The unit is in need of working equipment and tools.
2. More staff (Junior Staff).
3. Needs spare material in store e.g. keys, hinges, ceiling boards, paints and other associated consumables.
4. There is need for steel ladder to enable our work men access height with ease.
5. Operational vehicle is needed as it will greatly enhance performance.
6. We need a concrete mixer and a poker vibrator.
7. Scaffoldings are also needed by the unit.
8. Workshop uniform/Lab coat.
9. Furniture needs replacement.

8.3 Future Plan

- The staff needed to be trained for more efficiency and better productivity.
- There is need for staff to add more qualification.

9.0 TELECOMMUNICATION UNIT

The telecommunication unit is headed by Principal Technical Officer who oversees the daily activities of the unit and report directly to the head of department.

The unit is responsible to ensure the functioning of communication system in the hospital.

9.1 Activities

The unit is saddled with the responsibility of working with other department to improve communication system in the hospital.

1. Installation and repair of intercom systems.
2. Carrying out preventive and breakdown maintenance on intercom system.
3. Repair and maintenance of power stabilizers.
4. Maintenance of all side wards and clinical televisions in the wards.
5. Maintenance of nurse call room systems in the wards.
6. Maintaining of public address system.

9.2 Achievements

The following were achieved during the year under review;

1. Installation of intercom to new Eye ward at Trauma Centre.
2. Reinstallation of intercom at ECG Room.
3. Repair and installation of 38-nos of 5000W Power Stabilizers.
4. Reinstallation of intercom to new Burnt Unit, Amenity Rooms and Clinics.
5. Maintenance and repair of faulty Intercom lines in the hospital.

9.3 Challenges

1. There is the need for more new power stabilizers.
2. The unit require a public address system.
3. Extension of intercom to IDC Department.
4. Extension of intercom to Prof. Felicia Anumah's Endocrine and Diabetes Center, Maternity Center and Composite Pathology Laboratory Block.

10.0 REFRIGERATOR AND AIR CONDITIONER UNIT

10.1 Staff Strength: The Refrigerator and Air Conditioner Unit of Maintenance Department is having staff strength of three (3) personnel.

10.2 Activities/Functions: The activities of the unit consist of routine maintenance and servicing of Air conditioners, washing of filters, refilling of gas in air conditioners and refrigerators for wards, hospital housing estate and offices. Also we carry out installations of new air conditioners in wards, offices, clinics, theatre and mortuary of the hospital.

10.3 Achievements: We have achieved a lot; in the year under review, our achievement includes: Installation and servicing of Air conditioners in the wards, changing of compressors and refrigerator. Compressors replacement for motors in Air conditioners, replacement of evaporations in the fridge overload and relay replacement, we have been able to replace some capacitors Air conditioners and for motors, we have also carried out servicing and repairs in the following places in the hospital at Eye ward in Trauma Centre, Eye Clinic, GOPD, SOPD, MOPD, EPU both Old and New Emergencies, Laboratory and other part of the hospital.

10.4 Challenges:

- There is no Up-to-date modern equipment for diagnosis of new model Air conditioners and Refrigerators.
- Inadequate manpower to carry out work as expected due to the number of ACs in the Hospital which is over a thousand.
- Unavailability of spare parts in the store for use immediately when the need arises.

10.5 Future Plans:

To make sure all the air conditioners and refrigerators in the hospital are all working fine as expected.

11.0 WATER ENGINEERING UNIT

The Water Unit has 8 Staff (1 Scientific Officer, 1 Technical Officer, 2 Plumbers and 4 Craftsman).

11.1 SOURCES OF WATER SUPPLY TO THE HOSPITAL

The hospital has two sources of water supply;

- **FCT Water Board:** The Water Board supply water to the hospital underground tanks at least twice a week.
- **Boreholes:** The hospital has ten Boreholes. they are functional These boreholes are located at Admin Block, SOPD, Water works, New A & E – 2 boreholes, IDC, Near ICU School, Near Trauma Centre, Near Central Store and Mental Health Block.

11.2 Activities:

1. Receiving water from FCT Water Board into storage tanks, pumping water from boreholes into storage tanks from where the water is distributed to the hospital, wards, clinics, departments, theatre and staff quarters.
2. Maintenance of all water supply and distribution lines within the hospital.
3. Preventive and maintenance of all breakdown water installations in the hospital.
4. Maintenance of sewage lines in the hospital.
5. Repair and replacement of plumbing items in the hospital.
6. Maintenance of submersible and surface pumps.
7. Supervising and inspecting of new installations, addition/extension and alterations for water supply to new facilities.
8. Rendering advice to the hospital Management on water resources management.

11.3 Achievements:

1. Installation of 2,000 litres overhead tank in the new Mortuary.
2. Replacement of broken W/C, wash hand basin and taps in the House Officers quarters.
3. Evacuation of solid waste in male and female sewer line.
4. Connection of water board and borehole line to Trauma Centre and IDC.

11.4 Challenges:

1. Lack of alternative source of power supply to pump water from boreholes from 4:00 pm to 7:00 pm, whenever there is power failure from AEDC as generator are powered by 7:00 pm.

11.5 Future Plan:

1. Sensitization of patients on how to use the water systems.

12.0 QUANTITY SURVEYING UNIT

The unit is headed by a Principal Technical officer (QS) who is a Registered Quantity Surveyor with the Nigerian Institute of Quantity Surveyors (NIQS) as well as Quantity Surveyors Registration Board of Nigeria (QSRBN) Respectively.

12.1 Activities:

1. Advising on the financial aspects of various projects.
2. Preparing Bills of Quantities and approximate cost estimates for projects.
3. Act with the architect and engineers to ensure that the financial provisions of the contract are properly interpreted and applied so that the client's financial interest is safeguarded.
4. Carrying out valuation for interim certificates and settlement of accounts.
5. Assist in Procurement planning for capital projects and technical evaluation of tenders.
6. Participate in general contract administration; (monitoring, supervision; management).
7. Participated in general maintenance activities of hospital facilities.
8. Carrying out property condition surveys as well as compilation of schedule of dilapidations and costing.

12.2 Achievements

1. Prepared Bills of Quantities/Tenders Documents for the Construction of **PCR LABORATORY.**
2. Prepared Bills of Quantities/Tenders Documents for the Construction of **JUNIOR STAFF QUARTERS.**
3. Prepared Bills of Quantities/Tenders Documents for the Construction of **Renovation of Orthopaedic ward's block.**
4. Prepared Bills of Quantities/Tenders Documents for the Construction Cardiovascular Research Laboratory.
5. Prepared Bills of Quantities/Tenders Documents for the Completion of Call Duty Mental Health Blocks respectively.
6. Prepared Bills of Quantities/Tenders Documents for the proposed Renovation of the Labour ward, Antenatal Clinic, /theatre block and main laboratory blocks.
7. Prepared Final accounts / Penultimate Valuation for the completed projects within the period under review.
8. Participated in general maintenance activities of hospital facilities.

12.3 Challenges

- Equipping of the unit with high performance Laptops and printers with latest estimate Software's for more enhance productivity.
- Need for adequate training through Continuous Professional Development and seminar organized by both Nigerian Institute of Quantity Surveyors and also the Quantity Surveyors Registration board of Nigeria (QSRBN) respectively to be able to meet up with the current global cost management standards.

13.0 RECOMMENDATIONS

- 1) Management to provide adequate staff and equipment for optimum performance.
- 2) Training and retraining of the staff be top priority to develop their skills.
- 3) AEDC power supply has not really improved; Management should provide two additional 1000KVA generators to meet up the electric power needs of the hospital.
- 4) Technology acquisition should be highly encouraged by permitting Works and Engineering department staff to attend Engineering assemblies, seminars and workshops etc.to develop human capacity.

- 5) Bulk purchase of electrical, plumbing, biomedical and refrigeration and air conditioning consumables and fittings will go a long way in addressing breakdown.

14.0 CONCLUSION

The department is delighted with prompt response by the Management which had resulted into the high level of success recorded in the year under review. The department appreciate the Management and Chief Medical Director.

In the year under review, the hospital has added Six (6) gigantic building structures to the hospital, viz: Call Duty Block (under construction), Composite Pathology Block, Mental Health block, Cardiovascular Research block (under construction), Intern block (under construction), Consultant block (under construction), and procurement of a 850KVA Generator.

Bldr. (Mrs.) Osodin Dolapo (FNIQB, QAA)
Ag. Head of Department



The Six Lucky Staff Allocated One-Bed-Room Flats at Junior Staff Quarters - Engr. Bala Mangut Block.

DIRECTORATE OF ADMINISTRATION

1.0 INTRODUCTION

Mrs. Modupe Khadijat Adebajo is the Director of Administration and Head of the Directorate. She is responsible for overseeing the day-to-day activities of the divisions and reports directly to the Chief Medical Director. The Department comprises the following Divisions:

1. Appointment, Promotion and Discipline.
2. Training, Education and Staff Welfare.
3. General Administration.
4. Records, Statistics and Pension.
5. Central Stores.
6. I.C.T.
7. The Department also oversees some units like, National Health Insurance Scheme (NHIS) and the Clinical Secretariat.

The 2023 Annual Report of the Department is presented under each Division.

2.0 APPOINTMENT, PROMOTION AND DISCIPLINE/BOARD SECRETARIAT

The Division is headed by a Deputy Director – Yusuf Hassan, who is responsible for the activities of the division and reports directly to the Director of Administration. Other Staff in the Division are: Assistant Director, a Chief Administrative Officer, an Administrative Officer, and a Confidential Secretary.

2.1 ACTIVITIES

The primary function of the division includes, Appointment, promotion, and Discipline other functions include upgrading, conversion, transfer of service, documentation of newly employed staff. The Division also serve as the Board Secretariat.

2.2 ACHIEVEMENTS:

- In the year under review 228 interns and house officers were employed.
- 52 Youth Corps members.
- 145 were offered provisional appointments to various Departments.
- 19 Resident Doctors from other hospitals were engaged under the Supernumerary Residency Training Program.
- 8 staff were accepted on transfer of service while 5 staff were released on transfer of service to other hospitals.
- Prepare and processed the 2023 workforce planning which was approved by the Head of Civil Service of the Federation.

1. **PROMOTION:** In 2023 11 junior staff and 246 senior staff were promoted.
2. **CONVERSION & UPGRADING:** Fifty-eight (58) staff who completed various types of training were converted and upgraded 2023.
3. **APPOINTMENT:** Three hundred and ninety-two (392) staff were employed, these include House officers, Interns and Youth Corps members. 19 Residents Doctors from other hospital were engaged under the Supernumerary Residency Training Program.

2.3 CHALLENGES

- Inadequate office space.
- Office equipment such as file cabinets, tables, chairs and UPS.
- No running imprest.

2.4 FUTURE PLAN

1. Expansion of the office.
2. To align with the overall objectives of the hospital in ensuring efficiency and effectiveness in service delivery.

3.0 TRAINING EDUCATION AND STAFF WELFARE

The division is made up of three units, these includes Training, Education and Staff Welfare matters, headed by a Deputy Director – Constantine Nwaka, who oversees the activities of the various units.

3.1 Staff Strength

○ Deputy Director		1
○ Chief Admin Officer		1
○ Assistant Chief Admin. Officer		1
○ Principal Admin Officer	1	
○ Admin Officer II		1
○ Asst. Chief Executive Officer		1
○ Asst. Confidential Secretary		1
○ Corps Member		1
○ IT Student		1
Total		9

3.2 Activities/Functions:

In charge of all Training, Education and Staff Welfare related matters i.e registration and refund of National Housing fund contributions to staff that have retired and are contributors to the scheme, Leave and Continuous Education Programme, NYSC matters.

3.3 Achievements:

1. Approved Training Policy.
2. Proposed Staff Welfare Policy (still awaiting approval).
3. Proposed organization of workshop for other hospitals to participate as a revenue generation drive. (still awaiting approval).
4. Monthly departmental presentation on wide range of topical issues bordering on Administration.
5. 14 staff went on training.
6. 4 staff have resumed.
7. Several others were granted permission to undergo various programmes under the part-time/Distance learning scheme.

3.4 Challenges:

1. Inadequate Office Space.
2. Lack of stationeries.

3. Inadequate Office Furniture such as table, chairs, photocopier, file cabinet etc.
4. Lack of regular feedback on outcome of proposals sent to Management.

3.5 Future Plans

1. To ensure that all our proposals are well implemented when approved.
2. To go digital in approving leave and conveyance of Management's decision to minimize the use of consumables.
3. To register our institution with NSITF as that will cover staff Insurance Policy.
4. Updating each contributor of NHF contribution electronically via phone and gadgets.
5. To ensure that this hospital becomes a training center where all hospital come for a wide range of training in both Clinical and Management related issues.
6. To follow-up our staff who are undergoing school programs.

4.0 GENERAL ADMINISTRATION

The division is headed by an Assistant Director – Mrs. Monica O. Agida. She reports to the director of Administration on matters relating to:

- i. Housing and Utility
- ii. Transport and outsourced services.
 - a. Transport
 - b. Hospital Canteen
 - c. Outsourced services:
 - Crown Continental
 - Ochija & Co
 - ICONS Services
- iii. Housekeeping Unit

4.1.1 Housing:

Staff strength: The unit is overseen by a Chief Executive Officer & a Corps member who takes charge of all the staff and House Officer's quarters.

4.1.2 Activities:

- a) The unit ensures that all houses and occupants are properly documented and kept for record purposes.
- b) All occupants are legally allocated and ushered into the houses in line with hospital's housing policy.
- c) Identify and enlist vacant houses for possible reallocation to other eligible staff in collaboration with the hospital housing committee.
- d) Identify and report to Management in case of any need for a maintenance work within the quarters.
- e) Recommend for recovery of rent from salary of staff allocated official accommodation.

4.1.3 Achievements:

- a) Complete reconstruction of House Officer Quarters to accommodate more House Officers in line with MDCN requirements.
- b) Complete furnishing of the additional rooms in the House Officers quarters.
- c) Complete repairs/Renovation and allocation of a 3 one bedroom self-contained located at block C, Unity Quarters to Nurse Interns.
- d) A newly constructed 6 blocks of one bed room self-contained quarters for junior staff.
- e) Continuous allocation of staff quarters to COVID – 19 personnel.
- f) Continuous renovation and repairs of broken/blocked or leaking soak away in the quarters.

4.1.4 Utility: The Utility unit involves monitoring to make sure that all requisite services from electricity, water, and NIPOST are properly rendered with due payments made accordingly.

4.1.5 Achievements:

- a) All utility bills received were duly processed and paid in good time.
- b) All mails are accordingly received and dispatched with no record of any complaint or missing record.

4.1.6 Challenges (Housing/Utility):

- a) The unit is understaffed and needs motorcycle for dispatch.
- b) More houses need renovation and continuous evacuation/repairs of soak away.
- c) An improved rate of response to routine needs of repairs or maintenance work in the quarters is needed.

4.1.7 Future Plan

- a. Building of more accommodation for interns and house officers.
- b. Befitting secretariat for Housing Unit.
- c. Improvement in utilities of the hospital i.e water, Wifi (Internet).
- d. There is a need for provision of sports/ social amenity for the House Officers & Interns quarters, such as Table Tennis, Badminton and Television in their sitting rooms.

4.2.0 Transport and Outsourced Unit

The Transport Unit is headed by a Chief Administrative Officer, others are 1 Chief Administrative Officer, an Administrative officer I and a Corps member. The unit oversees the transport system of the Hospital and report to the head of division, General Administration. The unit also takes charge of the multipurpose hall and other spaces in the hospital.

The effective control and maintenance in the use of government vehicles is under the supervision of the unit.

4.2.1 Transport:

During the year under review, the unit has seventeen (17) drivers.

The hospital has sixteen (16) vehicles eleven (11) are serviceable while five (5) are not serviceable.

4.2.2 Activities/Achievements:

1. The unit ensure good maintenance of government vehicles to avoid break down.
2. The unit maintained proper supervision of the drivers and ensure that duties are perform satisfactorily.
3. Keeping records of all movement of the approved vehicles before embarking on any journey.
4. In the year under review none of the hospital driver was involved in road traffic accident with government vehicles. The unit also process insurance cover, timely renewal of vehicle particulars and registration of procured vehicles by the hospital.

4.2.3 Challenges:

1. The major challenges facing the transport unit is inadequate manpower.
2. Utility and official vehicles for Top Management staff are inadequate.
3. The driver's office needs good furniture such as tables, chairs and Air-Conditioner.
4. There is the need for training and retraining of drivers.

4.2.4 Future Plans:

1. The need for manpower is very imperative.
2. Provision of new uniforms at least two pairs for each driver.
3. Procurement of additional utility and official vehicles for Top Management staff.
4. Drivers are to be given a slot to attend training in a year.

4.3.0 Out Sourced Services/The Multipurpose Hall:

In the year under review, the hospital canteen has been adequately utilized though it has potential to generate revenue for the hospital.

4.3.1 Achievement:

1. In the year under review, the sum of N421,000.00.
2. The 3 outsource companies: Ochija & Cleaning Co., ICON (Porters) and Crown Continental (Security unit) have performed their duties excellently.

4.3.1 Challenges:

1. The need for total renovation of the hall also to provide good seats. This will improve revenue generation for the hospital.
2. Lack of standby generator as alternative means to A.E.D.C.
3. Replacement of key to the convenience (Toilet).

4.3.2 Future plans for canteen hall:

1. Upward review of charges for hiring of the hall after renovation.
2. Provision of good chairs and tables.
3. The renovation of the canteen.
4. Alternative means of power supply should be made available.

4.4.0 Security Department

The Unit is headed by Major Usman Aliyu (Rtd). Details are as earlier presented elsewhere!

4.5.0 Ochija & Co. Limited

The 2023 Annual Report of M/S Ochija & Company Limited is hereby presented.

4.5.1 Staff Strength

There are two hundred and ninety-eight (298) staff.

4.5.2 Activities/Functions:

These staff carry out cleaning services in the hospital, both internal and external and the removal of waste from dumping site to designated area.

The major work of the external compound cleaners is clearing of grasses, removal of dirt's from drainages, maintenance/watering of flowers, sweeping of the entire surrounding general checking and surroundings. While the major work of internal staff is to clean the wards, clinics and offices.

4.5.3 Achievements:

The company has improved tremendously over the years in terms of service delivery as a result of frequent meetings with the staff, punctuality to work has improved and there is effectiveness and efficiency in cleaning services rendered by the company. There are commendations from people in and outside the hospital on the general cleanliness of the hospital. People can now walk around or eat anywhere in the hospital without fear of being infected or contact disease due to the general cleanliness of the hospital environment.

4.5.4 Challenges:

1. Inadequate waste bin and absence of bin lining which makes it difficult to segregate waste in the wards and other places.
2. Inappropriate disposal of sharp waste into the waste bins by the doctors and nurses after use.

4.5.5 Future Plans:

1. To improve staff welfare to achieve maximum efficiency.
2. To make the Hospital environmentally friendly to both staff and patients.
3. To make the Hospital number one in terms of cleanliness/neatness in Nigeria.

4.6.0 ICON Nigeria Limited

4.6.1 Staff Strength

The staff strength is one hundred and ninety (190).

4.6.2 Activities:

Our activities involve assisting the doctors, nurses and patients of the hospital in achieving optimal healthcare delivery/services. We post our well-trained personnel to different units and wards.

4.6.3 Achievements:

1. Good working relationship with the staff in the year under review.
2. Maintained a steady standard of operation to meet the Hospital's expectation.
3. As a result of observance of safety rules, our personnel have not recorded any form of casualty or accident on duty in the year under review.
4. It is our desire to continue to deliver our services to the hospital without hindrances, while optimizing our services continually.

4.6.4 Future Plans

1. We are determined to maintain our standard of service and improve in areas that are necessary.
2. We are determined to compliment the effort of the hospital in preventing the spread of the virus by sensitizing our personnel regularly on the need to stay safe and healthy.
3. We will maintain our usual tradition of organizing training for our personnel to add to their knowledge and improve on their service delivery.
4. We shall strive towards a closer synergy between our staff and the hospital's staff, as this will lead to a smooth relationship and improved service delivery to the patients.
5. It is our desire and plans to continue to deliver our service to the hospital without hindrance.

4.7.0 House Keeping Unit

The house keeping unit is responsible for:

1. The maintenance of the Post-Basic Critical Care Nursing School hostel.
2. House officers' quarters.
3. Interns' quarters.
4. CMD's Guesthouse.
5. Annual Christmas Decorations.

4.7.1 Staff strength

This unit has four Officers who manned the affairs of the unit.

- Chief Catering officers: 2
- Chief cleaners: 2
- Steward: 1

4.7.2 Number of Rooms

- House Officers quarters: 60 rooms
- SPBCCN Hostel: 15 rooms
- Interns Quarters: 18 rooms
- CMD's guesthouse: 4 rooms

4.7.3 Achievements

- 1) Furnishing of 22 rooms with cushions, beds, pillow, tables plastic chairs with Iron legs etc.
- 2) Reconstruction of 10 additional rooms to the house officer's block.

4.7.4 Challenges:

- 1) General renovation and repair of the Interns quarters at NO. 6 Robuchi street: Painting, Ceiling fans, refrigerator.
- 2) Boy's quarters also need refrigerator and change of doors for kitchen and bath rooms.
- 3) Intern quarters flat 1 block need new mattresses for all the beds.
- 4) Provision of new bed and beddings in the SPBCCN hostel.
- 5) Provision of new mattresses and pillows for the hospital guest house.
- 6) Repairs of generator in the CMD guest house.

- Withdrawal of service - --
- Resignation of Appointment - --
- Deceased - 4

5.4 Challenges

- Lack of office space.
- Obsolete furniture and fittings.

5.5 Future Plan

- I. Digitalization or Computerization of the unit.
- II. Training of Staff.
- III. There is need for a Laptop for keeping statistical data for ease of access and white board for periodic orientation/training of staff on record update.

5.2.0 Secret Registry

5.2.1 Staff Strength

- Assistant Chief Executive Officer (Unit Head) - 1
- Admin Officer I - 1

5.2.2 Functions

1. Custody of Secret/Confidential files.
2. Retrieving of files on demand.
3. Custody of APER forms and Record of Service.
4. Scoring of (APER).
5. Other duties assigned to the unit.

5.2.3 Achievements

- The Secret Registry being in custody of files containing confidential issues had lived up to expectations by ensuring that all such matters are kept intact.
- There was no incidence of divulging of official secret nor falsification of records.

5.2.4 Challenges

- Inadequate office space.
- Lack of working equipment like office cabinets, laptop and furniture.

5.2.5 Future Plan

Computerization of the unit.

5.3.0 Open Registry

Open Registry is a unit that is responsible for keeping personal and general files of the hospital and by a Chief Executive Officer.

5.3.1 Staff Strength

The unit has a total of eight (8) staff.

• Chief Executive Officer	-	1
• Principle Admin Officers	-	4
• Senior Executive Officer	-	1
• Chief Clerical Officer	-	1
• Clerical Officer II	-	1

5.3.2 Activities

1. Custody of both Personal and General files.
2. Retrieving files (Incoming/Outgoing) on demand.
3. Stamping of official letters and certificates such as Medical Reports, Excuse Duty, Certificate of fitness, Death certificates, etc.
4. Taking/recording of data of newly employed staff.

5.3.3 Achievements:

- There is a reduction in cases of "Missing Files".
- Improve method of filing both general and open files safe and accessible with ease.

5.3.4 Challenges

- In adequate offices
- Inadequate manpower.
- Lack of office equipment.
- There is the need for digitizing or Computerization of records in the unit.
- There is the need to replace old office chairs & tables with modern ones.

5.3.5 Future Plan

- It is hopefully believed that the Registry will soon be computerized as the world is relating through internet connections.
- Need for expansion of the unit.

5.4.0 Pension Unit

This unit have two Senior Officers including the Head of Division.

5.4.1 Functions

1. Keeping Records of staff that are to retire from service.
2. Develop information resources, including the provision of seminars and training sessions for potential retirees.
3. Resolving complex and controversial issues that may arise within individual pension claims.
4. Processing and submission of data of deceased staff to both Pension Fund Administrators and Insurance Companies.

5.4.2 Achievements

1. In the year under review, forty-one (41) staff retired from service. They were taken to the National Pension Commission for their enrollment.
2. On a sad note, the Division lost four (4) staff in the year under review.

5.4.3 Challenges.

- The Unit lacks a dedicated office to carry out its functions.

5.4.4 Future Plan

- The Pension Unit hopes to create a standard Pension office that will improve the service delivery of the unit.

6.0 STORE UNIT

This unit is headed by a Chief Store officer - Mrs. Shekari Jummai who oversees the activities of the unit. All the activities and transactions carried out in the store are reported directly to the Director of Administration. It functions fewer than seven (7) servicing departments for prompt attention and for easy flow of materials to users' department. The departmental store include: Central Store, Pharmacy drug bulk store, Radiology store, Laboratory departmental stores, National Health Insurance Pharmacy bulk store, Theatre store and Dental store.

6.1 Staff Strength

• Central Store	-	4
• Pharmacy drug bulk store	-	3
• Laboratory departmental store	-	2
• Radiology Store	-	1
• NHIS	-	2
• Dental Store	-	1
• Theatre Store	-	2

6.2 Activities

- 1) Documentation of sources of supplies.
- 2) Receiving/issuing of materials to users' department on approval by the Management.
- 3) Report on stock levels of materials commonly in use in the hospital for replenishment.
- 4) Furnish the audit unit with quarterly reports on receipts and consumptions for analysis to enable management take decision on materials to re-order, reliability of sources of supply and consumption rate of every product in use in the hospital etc.
- 5) Checking, handling and storage of storage of stores received.
- 6) Recorded all cash advances to staff for retirements.

6.3 Achievements

- 1) We had a very successful end of year 2023 stock taking/verification.
- 2) We adhere to stores rules and regulations by using the proper and correct store book
- 3) We had proper control of irregular issues of stores.
- 4) The unit ensured that attractive stores were well protected and managed.
- 5) All issues of items were responded on duly approved requisition forms.
- 6) Successful inter store transfer of materials and items to respond to needs.

6.4 Challenges

- 1) Inadequate manpower to meet the increased workload at the unit.
- 2) Insufficient storage space especially in the theatre, laboratory and pharmacy bulk store.
- 3) Inadequate office space.
- 4) Inadequate modern office equipment.

7.0 ICT UNIT

This unit is headed by a Senior Program Analyst – Mr. Komolafe Olatunji who oversees the activities of the unit.

7.1 Staff Strength

The unit has a total of seventeen (17) staff which include

• Senior Programme Analyst	2
• Programme Analyst II	11
• Scientific Officer II	1
• Higher Data Processing Officer	1
• Technical Officer	1
• Clerical Officer	1

7.2 Activities

The core function of the ICT unit is to take care of the Information and Communication needs of the Hospital which include but not limited to Computerization of the Hospital (Clinical and Human Resources), Networking, Hardware and Software installation and Maintenance, Websites update and development, Hospital Database Management, CCTV installation, e.t.c.

7.3 Achievements

Within the year under-review, the ICT unit achievements include:

- 1) Networking, Computerization and deployment of e-Health solution to Prof. Felicia Anumah Annex (Dermatology block), Amenity Clinic and Ward, Maternity Annex (NLNG), Histopathology and Composite Laboratory Department, and PCR Laboratory. In addition to these, we also expanded the number of systems in the wards and the introduction of wireless services to enable use of wireless devices such as tablets and phones.
- 2) The Unit was able to upgrade the inverter power backup with additional solar panels and inverter batteries to increase backup time available.
- 3) Integrated the PACs server and radiology images view across the entire clinics and wards.
- 4) Installation of brand-new inverter and lithium-ion phosphate battery at the Admin Server room.
- 5) Expansion of services, purchase and deployment of forty-five (45) additional computers across the hospital.
- 6) Regular update on the Hospital websites on events and happenings within the hospital.
- 7) On the EMR, there was the introduction of patient digital card to replace the paper card that has been in use within the hospital.

7.4 Challenges

The under listed are some challenges faced by the unit:

- 1) Resistance and or knowledge gap from end users.
- 2) Limited office space.
- 3) Inadequate skilled manpower.

7.5 Future Plans:

To facilitate an ICT compliant Hospital while ensuring prompt solutions to ICT problems.



Administrative Block Area of UATH, Abuja.

OFFICE OF THE CHAIRMAN MEDICAL ADVISORY COMMITTEE/ DIRECTORATE OF CLINICAL SERVICES

1.0 INTRODUCTION

The Directorate is solely responsible for assisting the Management in coordinating clinical activities, Departments and Training/Research. Head by Dr. Bob Ukonu, Chairman, Medical Advisory Committee/Directorate of clinical Services. It is saddled with the following obligation: Maintaining the supply and distribution of consumables, Ensuring the adequate utilization of drugs to check wastages, Daily evaluation of Resident Doctors training progression, Training of house officers, doctors on clinical elective posting and industrial training students, Receiving correspondences on all clinical matters and responding according, Supervision of clinical departments to ensure optimal performance with minimal hitches, Helping in resolving issues/challenges emanating from the daily running of the hospital, Coordinating the recruitment process of interns/house officers, Initiating support for indigents who don't have means to pay their medical bills, Coordination of research activities in the hospital in collaboration with external interest.

2.0 STAFF STRENGTH

The office staff strength are:

- Deputy CMAC (Research and Training) 1
- Deputy CMAC (Clinical) 1
- Chief Admin. Officer 1
- Chief Executive Officer 1
- Chief Confidential Secretary 2
- Principal Admin. Officer 1
- Admin. Officer II 2
- Clerical Officers 2
- Drivers 5

3.0 RESPONSIBILITY

The office is saddled with the responsibility to coordinate and oversees the activities of the Directorate of Clinical Services;

4.0 DEPARTMENT/UNIT UNDER

All department/units under the directorate of clinical services report directly to the Chairman, Medical Advisory Committee.

Presented under each Division is the 2023 Annual report.



UATH Principal Officers with AXENA Group on a Courtesy Visit.



Staff Training on Neurosurgical Operating Microscope

AMENITY CLINICAL SERVICES

1.0 INTRODUCTION

The Amenity/VIP unit was inaugurated on the 19th of November, 2021 and commenced operations fully on the 10th of December, 2021. The unit is headed by a Consultant Family Physician who reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTH

There are Sixty-seven (67) staff, the unit had a total resident 37 members of staff with over 30 others coming in to render different forms of services at different points as the need arose. Those permanently in the department, were as follows:

• Consultants	1
• Senior Registrars	2
• Pharmacists	2
• Health Information officer	1
• Nurses	13
• Hygienists	10
• Laboratory scientists	4
• Porters	8
• Cleaners	7

3.0 FUNCTIONS OF THE DEPARTMENT

- To increase IGR for the hospital.
- Provide optimal services for patients/ clients.
- A source of financial support for indigent patients.
- Daily outpatient clinics in different specialities.
- In patient management of different cases.

4.0 ACHIEVEMENTS

1. A total of 117 patients were admitted into the ward and 376 were managed as outpatients in the clinic. We had approximately 50 surgeries among which 5 were Caesarean surgeries.
2. The trauma center theatre became functional which was a great relief and improved surgical services tremendously.
3. Provision of oxygen pipes in the ward.
4. Increased awareness of the amenity unit by patients.
5. Provision of equipment by the management such as an infusion pump, bedside monitor, blood pressure machines, and 2 tablets.
6. Improved water supply to the unit.

5.0 CHALLENGES

- The break-down of our CT-scan machine and absence of an MRI machine was a significant challenge. This resulted in making external arrangements for patients to do these investigations outside the hospital and the logistics were quite cumbersome.
- The Amenity and even the LNG do not have facilities for emergency obstetric management and this has been a challenge.

6.0 FUTURE PLANS

1. To get a place for the support staff to stay.
2. Get services like physiotherapy to the complex.
3. Get a bigger space that can house the entire unit without fragmentation.
4. Improve laboratory services.
5. Provision of services for emergency obstetric care.

7.0 CONCLUSION

My profound gratitude to God almighty for a successful year of service and functioning at the amenity clinical service. The support and trust from the management was overwhelming and I remain grateful. Special thanks also to the numerous members of staff I had to interface with at different times.

Dr. Blessing Akor
Head of Unit



Amenity Ward is on the First Floor of the Trauma Centre

INFECTIOUS DISEASE CENTER

1.0 INTRODUCTION

The IDC unit was commissioned on the 25th of September, 2020 by the then Honourable Minister of Health of the Federal Republic of Nigeria, Dr. Osagie Ehanire.

The Centre serves as an isolation facility for the hospital where very infectious cases such as COVID-19, Lassa fever, Monkey pox (currently known as Mpox) are managed.

The unit is headed by a Consultant Infectious Disease who reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTH

There are Nine (9) staff in the unit

- | | |
|------------------|---|
| • Consultants | 2 |
| • Nurses | 2 |
| • Porters | 2 |
| • Security - men | 3 |

3.0 FUNCTIONS OF THE UNIT

The centre is responsible for managing very infectious disease cases that have the potential to spread within the hospital community and the nation at large. These cases include COVID-19, Lassa fever, Mpox etc.

4.0 ACHIEVEMENTS

The centre managed a total of five cases during the year under review:

- Two cases of Lassa fever and three cases of Mpox.
- Worthy of note is the case of a 20-year-old pregnant Fulani woman who was admitted in third trimester of pregnancy with severe Lassa fever. Contrary to what is usually seen in such cases, she was successfully managed and discharged home. A couple weeks after discharge she gave birth to a healthy baby!

5.0 CHALLENGES

- None for now.

6.0 FUTURE PLANS

- The plan of the centre is to continue to manage infectious disease cases that pose a threat to the hospital community and the nation at large.

Dr. Vivian Kwaghe
Head, I.D.C.

SPECIAL TREATMENT UNIT

1.0 INTRODUCTION

The special treatment clinic (STC), also known as the PEPFAR clinic was established in February 2005. It was built with the support of both the Federal Ministry of Health (FMOH) and American Centre for Disease Control (through the institute of Human Virology) to train physicians, nurses and ancillary health care workers to provide high-quality and effective comprehensive, multidisciplinary care and treatment services for People Living with HIV/AIDS.

The unit is headed by a Consultant Infectious Disease who reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTH

There are Seventy-eight (78) staff in the unit

- | | |
|---------------------------|----|
| • Consultants | 8 |
| • Nurses | 10 |
| • Pharmacists | |
| • Laboratory scientists | |
| • Laboratory Technicians | |
| • Counselors | |
| • Clinical Psychologists | |
| • Administrative Officers | |

3.0 FUNCTIONS OF THE UNIT

The STC is the largest provider of HIV care, treatment and support services in the Federal Capital Territory. The clinic offers the following services:

- HIV Counseling and Testing.
- Prevention of Mother to Child Transmission.
- Prevention with Positives.
- Adult ARV treatment services.
- Pediatric ARV treatment services.
- Opportunistic Diseases diagnosis and management.
- TB/HIV collaborative services.
- Laboratory Services.
- Basic Care and Support (Adults and Children including OVC).
- Home Based and Community Care.
- Promotion of safe blood and injection practices.
- Cervical cancer screening.

4.0 ACHIEVEMENTS

The STC runs from Monday to Friday with an average of 50 patients in attendance on a daily basis. The clinic has 18,000 patients ever enrolled, of whom 4,586 are currently accessing HIV services. During the year under review, the clinic had a total of 18,948 clinic visits.

5.0 CHALLENGES

1. The building currently housing the STC has major cracks on the walls and may collapse in the near future if nothing is done. The roof also is leaking in many places.

2. The STC is largely supported by the Institute of Human Virology and this support has been dwindling over the past years; the management of the University of Abuja Teaching Hospital need to take complete ownership of the clinic and support all the various aspects of HIV services that the clinic is currently offering.

6.0 FUTURE PLANS

Continue to render high quality services to people infected/affected by HIV/AIDS

Dr. Vivian Kwaghe
Head, S.T.C.



The Renovated Female Medical Ward.

DEPARTMENT OF ANAESTHESIA AND INTENSIVE CARE

1.0 INTRODUCTION

The Department of Anaesthesia is headed by a Consultant Anesthesiologist. It comprises the following units: Nurse Anaesthetists, Recovery Room, Intensive Care, Residents and Oxygen Production Unit.

2.0 STAFF STRENGTH

There are eighteen (21) staff in the department

- | | |
|--------------------------|---|
| • Consultants | 6 |
| • Senior Registrars | 4 |
| • Registrars | 9 |
| • Chief Medical Officers | 2 |

2.1 ACCREDITATION

In the year under review, accreditation team from the National Postgraduate Medical College visited the department. Consequent upon this, the department received partial accreditation for training of eighteen Residents (6 senior Residents and 12 Junior Residents).

3.0 FUNCTIONS OF THE DEPARTMENT

- Pain management.
- Provision of local and general analgesia.
- Management of patients in the ICU.
- Training of residents from other specialties.
- Training of residents from other institutions for Diploma and Fellowship in Anaesthesia.
- Transfer of critically ill patients intra and inter hospital.

4.0 ACHIEVEMENTS

1. Commencement of Activities at the 10 bedded ICU at the Trauma Centre.
2. Success of two (2) residents at Postgraduate medical colleges to be elevated to the position of Senior Registrars.
3. Establishment of the Obstetric Anaesthesia Unit for the Hospital.
4. Appointment of two (2) senior registrars to the rank of Consultant.
5. The engagement of an Anaesthetic Technician in the department by Management.
6. Supply of modern Anaesthetics machine to the department.
7. Improved service delivery of anaesthesia and other services to the patients.
8. Successful Reaccreditation of the department for the training of Resident doctors by both Postgraduate Colleges.

5.0 CHALLENGES

- Need for more manpower.
- Need for ABG Ventilators, modern multiparameter monitors & accessories.
- Need for training and retraining of staff.
- Need to have a stand-by Anaesthetic Technicians in the theatre for maintenance.

6.0 FUTURE PLANS

1. Engagement of more Consultants.
2. There is need for more Residents.
3. Need for an Anaesthetic Technician.
4. Provision of more Anaesthetic Machine, Mechanical Ventilators, Suction Machine.

7.0 ADMINISTRATIVE STAFF TWO (2)

Chief Confidential Secretary	1
Senior Clerical Officer	1

7.1 ACTIVITIES/FUNCTONS

1. Typing and printing of documents.
2. Taking care of departmental and personal files.
3. Dispatching of letters to other departments within the hospital and to the Management.

8.0 I.C.U**8.1 STAFF STRENGTH**

The unit has sixteen (16) staff as follows,

• Assistant Director Nursing	3
• Chief Nursing Officer (CNO)	3
• Assistant Chief Nursing Officer (ACNO)	4
• Senior Nursing Officer (SN)	1
• Nursing Officer I (NO I)	2
• Nursing Officer I (NO II)	3

8.2 ACTIVITIES/ FUNCTIONS

General and specific care including the following

1. Cardiopulmonary Resuscitation (CPR) of patients.
2. Care for the mechanically ventilated patients.
3. Provision of haemodynamic monitoring of patients and pain management.
4. General Nursing and medical management.
5. Ensuring adequate documentation and management of patient.
6. Monthly patients' case-study presentations and had a pharmaceutical company presentation on MANAGING COVID-19 SCENARIO – NURSES PERSPECTIVE.

8.3 ACHIVEMENTS

1. Some staff were promoted to new ranks.
2. Two new mechanical ventilators were supplied to the unit.
3. Poor prognosis patients were successfully transferred & discharged home afterwards.

11.4 CHALLENGES

As in anesthesia above.

11.5 FUTURE PLANS

Looking forward to addressing the challenges above.

9.0 RECOVERY ROOM

The Recovery Room or Post-Anaesthetic care unit (PACU) is a unit in the theatre where post-operative patients are managed before they are transfer to the ward.

There are two (2) recovery rooms, one in the main theatre while the 2nd one is in the casualty theatre. Both are being management by the same set of critical care nurses.

9.1 STAFF STRENGTH OF THE UNIT:

The unit is manned by sixteen (16) trained critical care nurses.

• Assistants Director Nursing	2
• Chief Nursing Officers	8
• Assistant Chief Nursing Officer	1
• Principal Nursing Officer	1
• Senior Nursing Officer	1
• Nursing Officer I	1
• Nursing Officers II	3

9.2 SUPPORT STAFF

- The unit has 1 porter.

9.3 ACTIVITIES/FUNCTIONS

1. General and specific care of the critically ill patients.
2. Pain management.
3. Airway management.
4. Ensuring no abnormal bleeding from operative sites and inform surgeon if any abnormality or bleeding is observed.
5. Reassure patients and relatives.
6. Cardio-Pulmonary Resuscitation (CPR).
7. Mechanical Ventilations of patients.
8. Hemodynamic monitoring.
9. Ensuring adequate documentation of patients' management.

9.4 ACHIEVEMENTS:

- In the year under review, there was no record of death.

9.5 CHALLENGES

1. There is need for central oxygen piping.
2. There is need for male porters to aid with lifting of patients.
3. The unit needs more manpower.

9.6 FUTURE PLANS

The unit is looking forward to the above challenges being addressed.

10.0 NURSE ANAESTHETISTS.

The unit provides both local and general Anaesthesia to surgical patients.

10.1 STAFF STRENGTH

The unit has one Chief Nurse – Anaesthetist as Unit Head, one Deputy Unit Head who is also a Chief Nurse Anaesthetist. The Unit is currently being manned by seventeen (17) Certified Nurse Anaesthetists and two (2) porters.

10.2 ACTIVITIES

Work in synergy with the anesthetists.

10.3 ACHIEVEMENTS

As documented under anesthesia.

10.4 CHALLENGES

As documented under anesthesia.

10.5 FUTURE PLANS

1. Due to the rapid growth and development of the Teaching Hospital as a whole, there is need for an atmosphere for good working relationship with the rest of the team members – Physician Anaesthetists, staff Per-operative Nurses, Sub-staff, Hospital Community.
2. The management should consider establishing a Nurse Anaesthesia Training program in the Hospital, which will not only solve the challenges of shortage of manpower often experienced but will also be a major source of revenue generation for the institution.
3. Increase the slot for anaesthesia training nurses that are interested to about five to ten (5-10) slots or the management should consider employing Nurse Anaesthetists or those that will come on transfer of service.

10.6 PRAYERS

- Employment of more Consultants in the department/
- Employment of more Residents.
- Employment of Anaesthetic Technician (Only one staff in this this cadre for now).
- Provision of more Anaesthetic Machines, Mechanical Ventilators, Suction Machine, Monitors and accessories for the smooth running of services.

Dr. Olumide A. Akitoye
Head of Department

DEPARTMENT OF CHEMICAL PATHOLOGY (RESEARCH LABORATORY)

1.0 INTRODUCTION

The department is headed by a Consultant Chemical Pathologist, who oversees the daily activities of the department and reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTH

The department has on its roll,

Consultants	-	3
Total	-	3

3.0 ACTIVITIES

1. Laboratory investigations for the hospital.
2. Consultation of ward patients: on request.
3. Specialist consultation: In and outpatient: on request.
4. Interpretation / review of laboratory results on request.
5. Research.
6. Training of SIWES (Students Industrial Work Experience Scheme): A total of 20 students have passed through the department in the year under review.

4.0 ACADEMIC ACTIVITIES

Industrial training student seminar	-	Monday
Postgraduate seminar	-	Thursday
Tutorial	-	Unscheduled
Journal review	-	Friday

Grand pathology round every first Thursday of the month.

5.0 CHALLENGES

1. Inability of the chemical pathologist to interpret laboratory result from the routine laboratory.
2. Non availability of office- space for consultants and residents.
3. Shortage of Resident doctors (None available).

6.0 PLANS/RECOMMENDATIONS

1. Employment of resident doctors.
2. Provision of Consultant offices.
3. Procurement of equipment such as Spectrophotometer for effective residency training.
4. To establish a well-structured residency training program.
5. Intimation of Lab. Scientist to make results available for interpretation by Chemical Pathologists.

Dr. Maxwell Nwegbu
Head of Department

DEPARTMENT OF COMMUNITY MEDICINE

1.0 INTRODUCTION

The Department is headed by a Consultant Community Health Physician who oversees the daily activities and smooth running of the Department and reports to the Chairman, Medical Advisory Committee.

The Department provides preventive and Social Health Services, as well as Out-patient and In-patient care. It is also involved in teaching of Resident Doctors, medical students, student nurses and midwives, as well as scientific research.

2.0 STAFF STRENGTH

There are forty-four (44) staff in the Department and comprises of Consultant, Registrars, Public Health Nurses and Midwives, Scientific Officer, Community Health Officers (CHO) and Community Health Extension Workers (CHEW).

2.0 ACTIVITIES

1. Patient care in DOTS Clinic.
2. Patient care and other Primary Health Care services at DOBI PHC.
3. Child welfare services.
4. Environmental Health services.
5. Disease surveillance and control in the event of an outbreak or epidemics.

2.1 Activities in DOTS clinic

1. Daily clinic consultation.
2. Consult from other clinics and wards.
3. Diagnosing patients for TB/HIV services.
4. Treating and monitoring patients on treatment.
5. Follow up services.

2.2 Services at Dobi PHC

i) Facility Based Activities

1. Routine outpatient consultations.
2. Maternity services.
3. Immunizations.
4. In patient management.
5. Under five clinics.
6. Nutrition and growth monitoring.
7. Minor surgical procedures (PENDING).
8. Health care provider capacity building.

ii) Community Based Activities

1. Monthly Ward Development Committee (WDC) meetings.
2. Home visits.
3. Community health education.
4. Health Screening for non-communicable diseases.
5. Health awareness campaigns for communicable diseases of epidemic importance.

2.2 Activities in NPI Unit

1. Daily immunization services.
2. Health education on topics such as vaccine preventable diseases, AEFI, personal and Environmental hygiene, family planning etc.
3. Inoculation of routine and non-routine vaccines.
4. Vaccinating women of child bearing age against maternal tetanus using Tetanus and Diphtheria antigen.
5. Generating data on routine immunization for both Gwagwalada Area Council and Primary Health Care Development Board.
6. Maintenance of quality cold chain system.
7. Participating in all public health activities and immunization program in FCT.
8. Issuing of immunization certificates to babies that have completed their routine vaccines.

Note: Rotavirus vaccine has been integrated into the childhood routine immunization schedule and this has taken effect at NPI unit, UATH in August.

Note: Human Papilloma Virus vaccine has been provided for female from ages 9 to 14 and this has taken effect from September 2023.

2.3 Achievement in NPI unit

1. Commencement of the Maternal and Child Welfare Clinic consultation.
2. Always up to date in child's routine immunization schedule.
3. Inclusion of Human Papilloma Virus vaccine for ages 9 years -14 years and Rotasil vaccine (6 weeks -14 weeks) in the routine vaccination schedule of the NPI.
4. Inoculation of new born babies at the maternity wards.

2.4 Activities in Environmental Unit

1. The unit carries out incineration of waste materials, using hospital Incinerator Machine.
2. We carry out fumigation activities within the hospital environment.
3. The unit embarked on horticultural activities within the hospital premises (e.g) planting of different flowers for beautification.
4. The unit supervised and liaised with Ochija Company Limited for Environmental sanitation of the entire hospital.
5. We carry out firefighting activities within the hospital environment.
6. Evacuation of unserviceable items within the hospital environment to designated area for safe keeping.
7. Trimming/cutting down unwanted trees when constitutes measure to the building and those obstructing electricity poles/cable high tension wires.
8. We collect all the waste generated within the hospital environment and we dispose them properly.

3.0 ACHIEVEMENTS/NUMBER OF PATIENTS RECEIVED

A total of one thousand four hundred and ninety-six (1,496) presumptive cases were seen in the clinic in 2023. One hundred and sixty-nine (169) patients were diagnosed positive for tuberculosis and registered for treatment in the clinic.

Of this number 169 (95%) were genexpert positive pulmonary TB and 19(8%) were extra-pulmonary TB. The number that were adults were 134, the male has the highest ---(--%), female 68(30%) and children add up with 189(--%)

TB/HIV Clinic Collaboration

The table below summarizes the collaborative activities between TB DOTS clinic and special treatment clinic. All TB patients enrolled in 2023 for treatment were screened for HIV, 19(10%) were positive for HIV and referred for treatment and care in PEPFAR clinic i.e administration of ART, CPT and IPT.

The DOTS clinic is charged with the responsibility for diagnosing of presumptive cases, placing those positive on treatment, give care and support, monitor the patients to ensure adherence to the treatment and completion of treatment. 169 cases were attended to in 2023.

The clinic is on from Monday – Friday, both old and new patients are seen throughout the week. The clinic receives referrals from all clinics and consults from the wards. There are resident doctors on ground to attend to both old and new patients.

3.1 Achievement in NPI unit

- NPI unit continued her in service care for the new born of the ward.
- Continuous administration of the non-routine vaccines.
- Increase in the number of routine vaccine demand.
- Continuous COVID-19 vaccination in UATH.

3.2 Achievements in Environmental Unit

1. We embarked on evacuation of unserviceable items from the various wards and other places within or around the hospital premises to the dump site or incinerator site.
2. Planting of royal palm trees around the hospital boundaries is equally been done.
3. Proper incineration of waste materials.
4. Proper evacuation of all waste residues to the outside hospital.
5. We carry out fumigation activities within the hospital and its environment /surroundings.

4.0 Challenges

1. Need for more consultants.
2. Non- availability of departmental library.

4.1 Challenges in DOTS unit

1. No Staff office.
2. No chairs for both staffs and patients.
3. Lack of functional Air conditioner at the drugstore.
4. Lack of water.
5. No Rest room for both staff and patients.
6. Needs renovation, the offices are not in good condition.

Challenges at Dobi PHC

1. Inadequate staff strength.
2. Lack of equipment for minor surgeries.
3. Inadequate delivery gowns and screens.
4. No rider for the provided hospital bike.
5. Faulty lighting system.
6. Faulty toilet system.
7. Lack of facility telephone.
8. Insecurity (low number of security staff).

4.2 Challenge in NPI unit

- Lack of space is a major challenge.

5.0 FUTURE PLANS

- To commence the CHO training.
- Regular health promotion and sensitization activities in the hospital.
- It will be appreciated if NPI clinic can be closer to ANC and PNW for better and improved access to our clients.

5.1 Dobi PHC

1. To run a 24-hour shift.
2. Demand creation (sustain and improve ongoing health outreaches to catchment communities).
3. Engage the community to source for more volunteers.
4. Advocacy visit to the management of the school of nursing and midwifery on the possible use of our facility for some of their students' community posting.

5.2 NPI unit

To have a full **community** health service in the hospital life.

5.3 Environmental unit

1. To carry out morning and night wastes materials incineration activities.
2. Intensification of revenue generation for the unit, department and hospital.
3. Co-current monitoring and evaluation of all waste generation, collection and management.

Dr. Biyaya Beatrice Nwankwo
Head, Department of Community Medicine



UATH CMD, Prof B. A. Ekele with Faculty Chairman, Prof Ali Samba and Faculty Secretary, Prof Patrick Daru on Accreditation Visit to O & G Department, October 2023.

DEPARTMENT OF DENTAL AND MAXILLOFACIAL SURGERY

1.0 INTRODUCTION

The Department is headed by a Consultant Restorative Dentist, who oversees the daily activities of the various units and reports to the Chairman Medical Advisory Committee. The department is made up of (4) units; each headed by a consultant; Preventive Dentistry, Child Oral Health, Restorative Dentistry and Oral & Maxillofacial Surgery.

2.0 STAFF STRENGTH

The staff disposition is as follow:

Restorative Dentists	2
Oral & Maxillofacial Surgeons	2
Child Oral Health	1
Preventive	1
Orthodontist	0

Senior Residents

Chief Dental Surgeon	1
Senior Registrars	0
Junior Registrars	3
Dental Technologists	3
Dental Technologist Interns	5
Dental Therapists	5
Dental Therapist Interns	5
Dental Surgery Technicians	9
Store Officer	1
Admin Officer	1
Confidential Secretary	1
Cleaners	2
Porters	2

2.1 SUMMARY OF STAFF DISPOSITION

Number of Dentists	17
Dental Therapists (with interns)	10
Dental Technologists (with interns)	7
Dental Surgery Technicians	11
Others	8
TOTAL	53

3.0 ACTIVITIES/FUNCTIONS

a) Preventive Dentistry/Oral Diagnosis

(i) Clinic Days	Mondays	-	Fridays
(ii) Dental Therapy clinic-	Wednesdays	-	Fridays.

b) Restorative Dentistry

Clinic Days	Mondays	-	Fridays
Consultant clinic	Wednesday	&	Fridays.
Postgraduate seminars	Fridays 8.00 am -		9.00 am

c) Child Oral Health

(i) Clinic Days	Mondays	-	Fridays
(ii) Consultant clinic-	Wednesdays	&	Fridays
(iii) Postgraduate seminars	Tuesdays 8.00 am		9.00 am.

d) Oral & Maxillofacial Surgery

Clinic Days	Mondays	-	Fridays
Consultant Clinic	Mondays.		
Theatre	Wednesdays.		
Consultant Ward Round	Mondays & Thursdays.		
Residents Ward Round	Tuesdays & Fridays.		

Total patient seen in 2023 = 3,734.

4.0 ACADEMIC ACTIVITIES

- i. Departmental Postgraduate seminars/ Journal Review- Thursdays 8.00 -9.00 am
- ii. General Departmental Seminar (Monthly) - Thursdays 8.00 -9.00am

5.0 ACHIEVEMENTS

1. A senior resident doctor passed Part Two/ Final Fellowship examination of the West Africa College of Surgeon.
2. Restorative Dental Clinic was furnished with 2 new state of the art dental chairs and with facilities for Dental Implant Services, Tooth Whitening Kits and Flexible Dentures.
3. Commencement of Dental Implant Services.
4. A state-of-the-art dental chair was added to the Oral & Maxillofacial Surgery clinic.
5. Dental X Ray unit was digitalized.

6.0 CHALLENGES

1. The existing Dental block is grossly inadequate for Dental and Maxillofacial services of a Teaching Hospital.
2. Withdrawal of training slots for dental housemanship by MDCN due some deficiencies during accreditation.
3. Shortage of Manpower.
4. Shortage and poor maintenance of equipment because there is no Biomedical Technician specialized in Dental equipment.

7.0 FUTURE PLANS

1. Departmentalization. Restorative Dentistry, Preventive Dentistry, Child Oral Health, and Oral & Maxillofacial Surgery should be made to function as full departments.
2. A new Dental Block/Complex is recommended to accommodate efficient delivery of oral health care.
3. Employment of more Consultants to be able to provide effective oral health care delivery and to train our resident doctors in various disciplines of Dentistry.
4. Employment of more resident doctors to meet with the challenges of increase in the volume of work.
5. Biomedical engineer experienced and exposed to the services and maintenance of Dental equipment should be employed.

Dr. Olatunji A. B.
Head of Department.



The Newly acquired 850KVA Generator for the Hospital

DEPARTMENT OF NUTRITION AND DIETETICS

1.0 INTRODUCTION

The department is headed by a Director who oversees the activities of the department and reports to the Chairman, Medical Advisory Committee (C-MAC).

2.0 STAFF STRENGTH

The summary of staff strength;

• Director	-	1
• Assistant Chief Dietitian	-	1
• Principal Dietitian	-	1
• Principal Scientific Officer	-	1
• Senior Assistant Dietitian	-	1
• Dietitian I	-	1
• Nutrition Officer II	-	2
• Higher Nutrition Assistant	-	1
• Nutrition Assistant I	.	1
• Chief Clerical Officer (Dietetics)	-	2
Total staff	-	12

3.0 ACTIVITIES/FUNCTIONS

In the year under review, the activities of the department continued to grow and expand progressively as a result of increased number of patients assessing nutritional care and dietary services.

The activities performed are as follows;

1. **Patient Feeding:** Patients in various wards requiring therapeutic dietary regimen were fed with varied modified meals and fluids diet accordingly. The department served **1,283** plates to in-patients.
2. **Nutrition Clinic:** The department conducts daily nutrition education/health talk at various out-patient clinics as well as individualized dietary counseling. The total number of out-patients referred to the department was **90**.
3. **Routine Ward Round:** This is usually conducted with the consultants and healthcare team to evaluate patients, institute appropriate dietary regimen and follow-up visits to ensure dietary compliance. The total number of in-patients referred to the department was **250**. Grand total = **340** patients. The low number of patients fed and attended to was as a result of the pandemic that almost ravaged the world.
4. **Teaching & Training of SIWES Students:** The department trained **20** students on industrial training from various higher institutions of learning accordingly and **8** Doctors from Community Medicine Department.

4.0 CHALLENGES

1. The greatest challenge is inadequate number of Dietitians, Diet cooks and other supporting staff. The department is **grossly understaffed** and this has negatively affected its growth and the few of us to carry out our duties optimally.
2. Inadequate processing and storage facilities for our perishable food items. This made us to do **retail buying** which is not cost-effective when compared to **bulk purchasing**.
3. Lack of office accommodation for Dietitians.
4. Lack of office equipment/facilities/accessories such as computers, photocopier and printer for smooth running of the department.
5. Delay and refusal to refer patients to Dietitians for dietary review and nutritional evaluation from various wards and clinics. Most times, the consults/referrals are sent-in while patient is being discharged. Sometimes, managing team sees and discharges without referring to the Department.
6. Lack of Dietetics Internship Program: This department is the only department in the clinical directorate that is not training interns. If this program is approved, it will in no small measure increase our activities and our duties will be carried out optimally.
7. Lack of Feeding Policy: The hospital has no feeding policy as a teaching hospital. This has grossly affected the revenue generation of the department.

5.0 ACHIEVEMENTS

- Three seniors staff were promoted and two clerical officers were converted and upgraded to Nutrition Officers.
- A Dietitian and Nutrition Officer were employed to the Department in January 2023.

6.0 FUTURE PLANS

1. To have a full-fledged nutrition and dietetics department that will be involved in the holistic care of patients in the hospital.
2. To ensure accreditation and commencement of clinical dietetics internship program to train prospective dietetic interns.
3. To collaborate with other clinical departments to carry out evidence-based research activities in the hospital.
4. If the processing and storage facilities are provided for the department, and feeding policy is approved our revenue generating capacity will increase greatly.

7.0 CONCLUSION

We sincerely appreciate the support of the Management for keeping faith in some of their promises, while looking forward to a greater collaboration.

Com. Joshua Ugwu Chijioke, (Jp)
Head of Department

DEPARTMENT OF OTORHINOLARYNGOLOGY (ENT)

1.0 INTRODUCTION

The year under review was a very good year for the department of Otorhinolaryngology; we give Almighty God all the praise for His sustenance and help throughout the year.

2.0 STAFF STRENGTH

STAFF	NUMBER(S)
Professor	1
Consultant ENT Surgeons	4
Senior Registrars	6
Junior Registrars	6
Supernumerary Residents	1
Deputy Director of Nursing	1
Assistant Director Of Nursing	2
Chief Nursing Officers	2
Principal Nursing Officer	1
Audio Therapist Technician	1
Audiologist/Speech Therapist	1
Secretary	1
Record Officer	1
Clerical Officer	1
Potters	2
Cleaners	2

3.0 THE RANGE OF SERVICES RENDERED BY OUR DEPARTMENT

The department runs primary, secondary and tertiary level health care to all ages and sexes. They are divided into three basic areas.

- Clinical/Surgical services.
- Training.
- Research.

THE DAILY ROUTINES/CLINICS OF THE DEPARTMENT

DAYS OF THE WEEK	ACTIVITIES
MONDAY	WARD ROUND (TEAM A)
	CLINIC SESSION (TEAM B)
	ENDOSCOPY
	EAR SYRINGING
	HEALTH TALK
TUESDAY	THEATRE (TEAM B)
	WARD ROUND (TEAM A)
	ENDOSCOPY
	EAR SYRINGING
WEDNESDAY	THEATRE (TEAM A)
	WARD ROUND (TEAM B)
	ENDOSCOPY
	EAR SYRINGING
THURSDAY	JOURNALS' REVIEW
	CLINIC SESSION (TEAM A)
	ENDOSCOPY
	EAR SYRINGING
	HEALTH TALK
FRIDAY	CLINICAL PRESENTATION
	GRAND WARD ROUND
	ENDOSCOPY
	HEALTH TALK
	EAR SYRINGING

NB: Audiological investigations and speech therapy sessions are carried out daily.

4.0 CLINIC ATTENDANCE

Total number of patients seen in 2023 was **3,442**

5.0 ACHIEVEMENTS

1. One of our Resident (Supernumerary) passed his Membership Examination.
2. Two doctors were elevated to the Cadre of Consultants.
3. One of the Nurses was promoted to the Post of a Chief Nursing Officer (CNO).
4. The renovation of the Doctors & Nurses common room by a former Professor of the Department in July 2023.
5. We also hosted the West African College of Surgeons Examinations for both Part I and Part II in the year under review.
6. A Consultant was elected as the Chairman of International Advisory Board of American Academy of Otorhinolaryngology.

6.0 CHALLENGES/RECOMMENDATIONS

1. There is the need for a standard audiology and speech laboratory in the department.
2. The department is in need of a Side-Laboratory to offer effective health care.

3. To curtail the influx of patients to the department, there is need to expand the clinic in order to accommodate the number of clients.
4. We plan to establish an ENT research/training centre in collaboration with international partners for post fellowship training and community bases research in ENT.

7.0 CONCLUSION

I want to use this medium to sincerely appreciate the Management for their love and support through the year 2023. We pray God Almighty will continue to bless and keep you always. Our special gratitude for the opening of the new proposed building for us which was used for hosting WACS last examination. We promise to discharge our duty better than ever.

The department appreciates God for success throughout the year.

Dr. E. A. Dahilo
Head of Department



Newly Procured ENT Consoles

DEPARTMENT OF FAMILY DENTISTRY

1.0 INTRODUCTION

The Department of Family Dentistry is headed by a consultant Family Dentist. it operates within the building that also houses the Department of Dental & Maxillofacial Surgery.

The department offers clinical services in *Oral diagnosis, Oral Medicine & Oral Pathology* and *Preventive dentistry*. In fact, Family Dentistry department is the *GOPD* of dentistry.

2.0 STAFF STRENGTH

Department current staff strength is as follow:

- Consultant – 3
- Senior Resident - 3

3.0 ACTIVITIES/FUNCTIONS

These are highlighted below:

1. **Clinic:** Family Dentistry oversees both Oral Diagnosis and Preventive Dentistry Clinics. Oral Medicine & Pathology patients were also routinely seen in our clinics. We operated our out-patient clinics every day of the week except weekends. The week is divided between the two consultants except on Fridays which was ran jointly.
2. **Procedure day:** Clinical procedures were scheduled to hold every Friday of the week and these included complicated periodontal procedures.
3. **Kwali General hospital community out-post:** Residents were posted to Kwali general hospital for community posting once a week.
4. **Departmental seminars:** Our seminars are held every Tuesday with alternate week dedicated only for the resident training.
5. Family dentistry also participated in the joint weekly presentations with Dental and Maxillofacial department which were held every Thursday of the week.

4.0 ACHIEVEMENTS/NUMBER OF PATIENTS RECEIVED:

The following were some the achievements recorded in the year 2023:

1. We had successes in the part one National Postgraduate Medical Examination.
2. Three out of four of our registrars are now senior residents after success in their part one examination.
3. The department has been connected to the hospital server to ensure seamless clinical service delivery as this eliminates much of paper works.
4. The department is in the process of re-accreditation which is expected to take place in January 2024.

TOTAL NUMBER OF PATIENTS SEEN IN 2023 = 1,827.

5.0 CHALLENGES

1. **Manpower shortage:** We need personnel in these areas: dental nurses, junior residents' doctors.
2. **Server or network downtime:** resultant delay in patients' presentation at our clinic. Because of this, patients were sometimes seen before payments were made and, in some cases, these patients abscond after receiving treatments leading to loss of revenue.
3. Currently only one of the two dental units in our clinic is functional as the second one is no longer serviceable and need replacement.

6.0 FUTURE PLANS:

- The department still look forward to getting a space that is conducive and spacious as this will enhance our service delivery.
- We also look forward to expanding the scope of clinical services to include procedures that require emergency services.
- There is also the need to increase the staff strength for both clinical services and administration.

Dr. Joseph Ademola
Head of Department



Newly Constructed and Equipped PCR Laboratory

DEPARTMENT OF FAMILY MEDICINE

1.0 INTRODUCTION

The department of Family Medicine is located within the NHIS Complex of the hospital. Headed by a Consultant Family Physician who coordinates the activities of the various units and reports to the CMAC. The GOPC is the point of entry for most patients accessing healthcare in university of Abuja Teaching Hospital. It offers comprehensive, continuous and coordinated healthcare to patients with undifferentiated medical conditions irrespective of their age or gender. It provides care for both NHIS enrolled patients and patients whose healthcare is being financed out of pocket. Below is the summary of the department's staff strength, activities, achievements, Challenges and future plans.

2.0 STAFF STRENGTH

Consultants	11	(One on study leave and one on sabbatical)
Senior Resident Doctors	14	
Junior Resident Doctors	10	
Medical Officer	1	
Nurses	11	
Community health extension workers	1	
Departmental Secretary	1	
Porters	4	
Cleaners	8	

N.B: Six (6) Senior Registrars were disengaged effective from 31st December, 2023 leaving a total of 30 doctors, consisting of 10 Junior Residents and eight (8) Senior Registrars.

3.0 ACTIVITIES/FUNCTIONS

1. Patient consultations in Outpatient Clinic (GOPC) every day from 8am -8pm.
2. Running of special clinics including Genetics, Adolescent, care of the elderly and wellness.
3. Provision of emergency care to patient in the clinics observation room where they are stabilized and managed before being transferred to the ward for further management.
4. Wound dressing, suturing of minor lacerations and other minor procedures in the procedure room.
5. Running of point of care investigations such as packed cell volume, pregnancy test, malaria parasite test, Urinalysis, blood glucose estimation amongst others in the side Laboratory.
6. Training of resident doctors.
7. Research.

4.0 ACHIEVEMENTS

1. Remarkable improvement in service delivery as evidence by reduced patients waiting time, good quality of service rendered.
2. Remarkable improvement in consultation sequel to usage of "Health-in-the-Box"
3. There was an increase in number of patients that attended the GOPC from a total of 46,200 in 2022 to 75,982 in 2023.

5.0 CHALLENGES

1. Shortage of manpower (Nurses and junior resident Doctors).
2. Server/Network downtime with electronic health records system at times with resultant disruption of consultations and increase in patients' waiting time.

6.0 FUTURE PLANS

- The Department of family medicine aspires to ensure prompt an uninterrupted continuous coordinated, comprehensive, holistic and patient centered service delivery to patients.

Dr. Joel Abu
Head of Department



New UATH, Gwagwalada, Abuja – Panoramic View

HAEMATOLOGY AND BLOOD TRANSFUSION

1.0 INTRODUCTION

The Department is headed by a Consultant Haematologist and provides high quality Clinical and Laboratory Haematological investigations and Blood transfusion services to the teeming clients who access health care services and conduct researches in haematology and blood transfusion. Involved in the training of undergraduate Medical Students of College of Health Sciences, University of Abuja, and postgraduate Residency; Medical Lab Scientists interns; Medical Laboratory Technicians and Assistants, and Biological Sciences students on attachment from Schools of Health Technology and Universities across the Country.

2.0 STAFF STRENGTH

- Consultants 4
- Residents 3(1 Senior and 2 Registrars)
- Medical Officer 1

3.0 CLINICAL & CLINICAL LABORATORY SERVICES:

The Haematology Department staff diligently render clinical and clinical haematology laboratory investigation and blood transfusion services.

1. Clinical services:

The Consultant Haematologists and Resident doctors run weekly Haematology out-patient clinic on Wednesdays at the Medical Out-patient Department (MOPD), attend to in-patients with Haematologic disorders as well as haematologic manifestations of non-haematologic disorders, perform bone marrow aspiration and biopsy for diagnosis and management of diseases. They also perform and/or review full blood count for diagnosis and management of other medical disorders when required.

2. Haematology Research Laboratory

The services rendered at the haematology research laboratory include: Processing and Bone marrow aspiration smear films, performing FBC, PCV, ESR, PT, PTTK and Hb electrophoresis services for haematology out-patients on clinic days, haematology in-patients and on special request by clinicians from other clinical Departments.

5.0 DEPARTMENTAL ACTIVITIES

1. Ward rounds: Mondays, Tuesdays, Thursdays and Fridays.
2. Haematology Clinic: Wednesdays at the Medical Outpatient Department.
3. Seminars: Thursdays.
4. Daily Haematology Day Care Emergencies and administration of chemotherapy.
5. Daily review of in-patients consultations from other clinical Departments.
6. Daily routine general Haematology laboratory tests.
7. Day Care - Chemotherapy, blood transfusion and management of SCD crises on day case basis.

5.0 SUMMARY OF THE CLINICAL AND LABORATORY TURNOVER OF YEAR 2023

Out-Patients Seen at Haematology Clinic In 2023 = 803

In-Patients' Admissions for 2023 = 181

Haematology Patients In Casualty 2023/Emergency = 195

6.0 ACHIEVEMENTS:

- There is increase in patient turnout in the year under review. Doctors in the Department rendered both clinical and laboratory services our patients.
- An increase in the number of Day Care (Research Lab.) 2023 was 40 patients.

7.0 CHALLENGES:

1. Expiration of the accreditation for the training of Resident doctors.
2. Day Care Centre, The Department has been using make-shift spaces for the day cases.
3. A call-duty room is needed, especially since none of the Residents is accommodated within the hospital.
4. Office accommodation for two Consultants.
5. Increasing workload as a result of the growth and expansion of the Hospital. Employment of 2 or more additional Residents will be helpful.

FUTURE PLANS

1. Accreditation by the two Colleges (National and West Africa) with the support of the Management.
2. Additional Clinic Day.

Dr. Hezekiah Alkali Isa
Head of Department

DEPARTMENT OF HEALTH INFORMATION MANAGEMENT

1.0 INTRODUCTION

The department is headed by an assistant director who oversees the daily activities and smooth running of the various sections of the department and report to the Chairman, Medical Advisory Committee.

The department provides accurate and timely information about every patient seen in the hospital. Through patient record initiation, storage, reproduction and presentation for treatment, care continuity, education, planning, research, statistics, medical advancement and legal purposes of patient/client, health professionals and the institution at large.

2.0 STAFF STRENGTH

The department has 91 staff of various ranks distributed as follows

• Deputy Directors	3
• Chief Health Information Management Officers	10
• Assistant Chief Health Information Management Officers	10
• Principal Health Record Technicians	23
• Senior Health Record Technicians	7
• Health Record Technicians	31
• Health Record Clerks	7

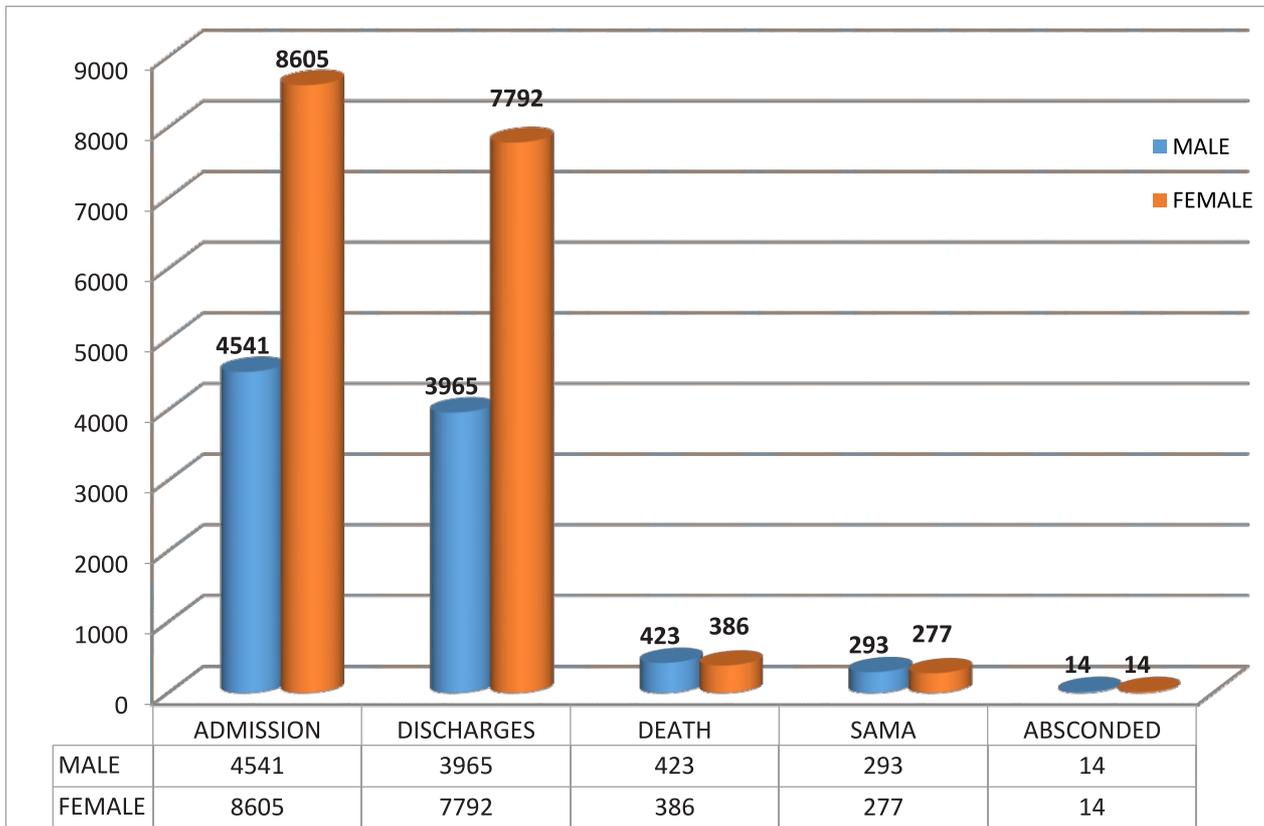
4.0 ACTIVITIES

1. Ensuring that patient's information is secured and protected.
2. Registration of all new patients both in and out-patients.
3. Activate patient record visit.
4. Monitor patient records movement.
5. Book appointment for patents follow-up.
6. Admit and discharge/ issue gate pass to discharge patients.
7. Analysis patients records quantitatively and qualitatively.
8. Filing and retrieval of patients records.
9. Editing of patient information when necessary.
10. Capture, code, store and reproduce all disease diagnosis in the hospital for use in research, training, education and teaching.
11. Collection of cancer data from all catchment areas Kwali, Abaji.

4.1 IN-PATIENTS AND OUT-PATIENT ACTIVITIES

• Total in-patient and out-patient attendance	----	30,979
• Total admission	-----	16,620
• Total discharge	-----	14,359
• Total death	-----	---

CLUSTERED CYLINDER SHOWING IN-PATIENT ANALYSIS FOR THE YEAR 2023



5.0 ACHIEVEMENTS

1. Continuous maintenance of functional and improved healthcare services in all clinical areas.
2. General outpatient department (GOPD) is waxing stronger in its paperless service delivery.
3. So many consultant clinics have keyed into the electronic health records/information services though yet to be stabilized.
4. The introduction of appointment system in GOPD has helped in managing the ever-increasing influx of patients in the clinic.
5. The decongestion of National Health Insurance Records/information Library for better service.
6. Successful coverage of medical and surgical emergency unit for 24 hours.
7. Successful setting of ophthalmology clinic office has improved the services of the clinic.
8. The introduction of computer to the wards has improved admission and discharge services.
9. Improved coding and indexing of patient’s diagnosis and other related health conditions.
10. Team work via synergy within the department and other departments in the hospital.
11. Active participation in various committees in the hospital.
12. Effective and efficient usage of study room for research work.
13. Successful training of students on industrial training (IT).
14. Promotion of some staff in the department in the year under review.
15. The department is grateful to the management for increasing the staff strength towards the end of the year.

6.0 CHALLENGES

1. Inadequate computer accessories (UPS, toner cartridges, inverter, stabilizer) to facilitate the job.
2. Inadequate number of staff. (Shortage of manpower).
3. Faulty air-conditioners in units such as admission and discharge; library; obstetrics & gynecology should be fixed.
4. Need for training on "Health-In-Box" application usage.
5. In e – health-record (health in the box) access is availed to non HIM – professionals to carry out duties on HIM – modules such as; Patient discharge with disease not relevant in ICD specification.
6. Incessant power supply led to delay in patient waiting time.
7. Need for an office space in pediatrics out- patient clinics (POPC).

7.0 FUTURE PLANS

- Improvements in clinic organization.
- Regular training and retraining of staff.
- Upgrading HIM – dept. module in health-in-the-box.
- Improve staff strength.
- To deploy and implement ICD 11 edition and related health problems.
- To make microfilm, microfiche of the traditional paper-based records.
- To run 24-hours service delivery in the whole wards.

8.0 CONCLUSION

We sincerely appreciate the leadership of the hospital under Prof. B.A Ekele, members of Top Management Committee, for prompt response to issues of the department. Also thanking various departmental unit heads, and to all the staff, God bless you!

Mrs. Veronica Umoh
Head of Department

DEPARTMENT OF HISTOPATHOLOGY

1.0 INTRODUCTION

The Department of Pathology is one of the clinical departments that offer Laboratory Services in areas of Histology, Cytology, Embalmmnt and Post Mortem Examination (Autopsy).

2.0 STAFF STRENGTH

The department has twenty-three (23) staff:

1.	Consultants	-	5 (3 are Honorary Consultant)
2.	CMO	-	1
3.	Medical Lab. Scientists	-	6
4.	Medical Lab. Technicians	-	2
5.	Medical Lab. Assistant	-	1
6.	Scientific Officer	-	1
7.	Mortuary Staff	-	7
8.	Departmental Secretary	-	1

3.0 ACTIVITIES IN THE DEPARTMENT

1. Processing and diagnosis of tissue specimens (Histology).
2. Processing and diagnosis of cytological specimens.
3. Carrying out fine Needle Aspiration for cytology.
4. Embalmmnt and preservation of bodies.
5. Introduction of liquid based cytology.
6. Performing of Post Mortem Examination/Autopsy when necessary.

SN	DESCRIPTION	YEAR 2019	YEAR 2020	YEAR 2021	YEAR 2022	YEAR 2023
1.	Histology	3,120	2,260	2,173		2,432
2.	Cytology	1,438	812	926	1,163	179
3.	Corpses preserved/received	1,476	1,470	760		1,007
4.	Body embalmmnt	864	470	280		836
5.	Autopsy	5	9	6		10

The department had the following Residents on posting ranging from 2 weeks to 1 month.

1.	Internal Medicine	-	5	}	Total 8
2.	O & G Department	-	2		
3.	Urology	-	1		

4.0 ACHIEVEMENTS:

1. Addition of two (2) Consultant Pathologists.
2. Addition of two (2) Medical Laboratory Scientists.
3. Addition of one (1) Medical Laboratory Technician.
4. Completion and handing over of the new Composite Pathology Laboratory.
5. Relocation of the Department of Pathology from the main Laboratory to the new Composite Pathology Laboratory.

5.0 CHALLENGES

1. Lack of full accreditation of both WACP and NPMCN for Residency program.
2. Shortage of resident doctors in the Department
3. No enough Microscopes as the new additional consultants do not have any to use.
4. Lack of immunohistochemistry and Frozen sections to support cancer diagnosis and management.
5. Lack of adequate mortuary cooling systems.

6.0 FUTURE PLANS

1. Urgent Pursuit accreditation for Residency of National Postgraduate Medical College of Nigeria and West African College of Physicians.
2. Employment of 2 Senior Registrars and 4 Registrars as per West African College of Physicians, WACP (Lab. Medicine) partial accreditation approval.
3. Purchase of more Microscopes.
4. Introduction of Immunohistochemistry and Frozen section techniques.
5. Full connection of the Department to health in the box so as to eliminate printing of laboratory results.
6. Expansion of the mortuary to accommodate 100 bodies, therefore, new additional 50 body chambers are needed, though already captured in 2022 Budget.

7.0 NECROPSY

The department lost one (1) member of its staff, Dr. B. A. Abimiku (Honorary Consultant) during the year in review.

Dr. Oluwasesan Adelowo Abdul
Head of Department



The Late Dr. B. A. Abimiku, Former HOD Histopathology.

DEPARTMENT OF INTERNAL MEDICINE

The Department is headed by a Consultant, who oversees the various subspecialties and reports to the Chairman, Medical Advisory Committee.

It offers care at the specialist level to patients seeking care at the hospital. It is also a portal of training residents through a program accredited by the West African College of Physicians as well as the National Postgraduate Medical College of Nigeria, towards ensuring better quality of care provided to patients.

2.0 STAFF STRENGTH

The manpower of the Department in the year 2023 constitutes different cadres of doctors as below:

Cadre	No. of Doctors
Consultants	25
Senior Registrars	21
Registrars	14
House Officers (at Present)	28

Subspecialty	No. of Consultants
Nephrology	2
Cardiology	1
Neurology	3
Gastroenterology	4
Endocrinology	4
Dermatology/Infectious Diseases/Clinical Pharmacology	6
Pulmonology	1
Emergency unit	3

3.0 MANDATE

The Department focuses on three functions, namely:

1. Provision of patient care services.
2. Academic activities and training.
3. Research and capacity building.

3.1 Provision of Patient Care

The Department of Medicine offers services to patients on an Out-patient and In-patient basis. Consultation requests are also received from other departments of the hospital for expert advice and input in their patients' management.

The units in the Department of Medicine have structured weekly activities through which they offer care to patients in the hospital. These activities include ward rounds, clinics and investigative/therapeutic procedures.

Departmental Units Weekly Activities As Represented by Table Below

Unit	Monday	Tuesday	Wednesday	Thursday	Friday
ALL: 8am-9am	Morning Review	Morning Review	Departmental Seminar	Departmental Seminar	House Officer's Presentation
Nephrology	Consultant's Ward Round	Registrar's Ward Round	Clinic	Consultant's Ward Rounds	Senior Registrar's Ward Rounds
Cardiology	Senior Registrar's Ward Rounds Echocardiography	Clinic	Consultant's Ward Rounds Echocardiography	Clinic Registrar's Ward Rounds Echocardiography	Consultant's Ward Rounds Echocardiography
Neurology	Consultant's Ward Rounds	Registrar's Ward Rounds EEG	Consultant's Ward Rounds Clinic	Clinic EEG	Senior Registrar's Ward Rounds
Gastroenterology	Senior Registrar's Ward Rounds Endoscopy	Consultant's Ward Rounds Clinic	Endoscopy Registrar's Ward Rounds	Registrar's Ward Rounds	Clinic Endoscopy
Endocrinology	Consultant's Ward Rounds	Registrar's Ward Rounds	Consultant's Ward rounds Clinic	Clinic	Senior Registrar's Ward Rounds
Dermatology/Infectious Diseases	Infectious Diseases Clinic Dermatology Consultant Ward Rounds	Dermatology Procedures	Registrar's Ward Rounds	Infectious Diseases Consultant Ward Rounds	Dermatology Clinic Senior Registrar's Ward Rounds
Pulmonology	Clinic	Consultant's Ward rounds	Registrar's Ward rounds	Senior Registrar's Ward round	Consultant's ward rounds.

Out Patient Care in the MOPC

Total number of patients seen at MOPD in 2023 - 16,150

In Patient Care in the Medical Wards

Total number of patients admitted into the Medical Ward in 2022 - 972
 Female Medical ward admitted - 760
 Infectious Disease Centre admitted - 19
 Total Emergency cases seen in 2023 - 1,853

3.2 ACHIEVEMENTS:

1. Full accreditation by the West African College of Physicians for General Medicine, Gastroenterology and Infectious Diseases.
2. The Internal Medicine Department successfully hosted some International Webinars on Nutrition and medicine, and implementation medicine.
3. Appointment of Dr. Meliga and Dr. Abdulai as consultants.
4. Three senior registrars passed the Fellowship Examinations to become fellows.
5. Four junior Registrars passed the membership/part 1 examinations to become senior registrars.
6. Addition of five (5) new residents to the department.
7. Renovation of Female Medical Ward by the Management.

Procedures offered by specialties in the department of medicine in 2023 are as below:

Team	Procedure	Number done
A	Haemodialysis	374
	Total Sessions	1,189
	Renal Biopsy	-
	Neckline Insertion	-
B	Electrocardiography	5,703
	Stress ECG	8
	Holter Monitoring	45
	ABMP	19
	Echocardiography	1,617
C	Holter ECG	277
D	UGI endoscopy	440
	Colonoscopy	177
	AVBL	29
	Liver biopsy/aspiration	8
F	Skin Biopsy, PUVA, Electrodesiccation	285
G	Spirometry	-

4.0 CHALLENGES

1. Need MRI services and services CT angiography (rising cases of coronary artery diseases).
2. Need for facilities for gastro therapeutic procedures such as endoscopy hemoclips, hemo sprays, hot polypectomy etc.
3. Blood gas analyzers and need for more cardiac monitors.
4. Need for another 24-Hour ECG Monitoring machine.
5. Need for more Resident doctors to improve the speed and efficiency of service delivery.
6. Improvement in pharmacy services at the Medicine Emergency during emergency hours.
7. Possible 24-hour coverage of Medicine Emergency Laboratory.
8. Need to beef up further security for the health workers, especially during call hours.

5.0 FUTURE PLANS

1. Global visibility of Internal Medicine Department through hosting of external Faculties either online or physically.
2. To promote exchange programs with foreign institutions mainly online for global exposure.

Professor Dike Ojji
Head of Department



Prof. Felicia Anumah Conducting a Consultant Ward Round at the Female Medical Ward

MEDICAL LIBRARY

1.0 INTRODUCTION

The Library was established in 1994 for the purpose of providing the required materials for education, learning, research and reference activities for members of staff. The unit is headed by a Director of Library Services, who is responsible for Administration Coordination and supervision of the library services and reports directly to the Chief Medical Advisory Committee (CMAC).

2.0 STAFF STRENGTH

The Medical Library has only 7 staff in the hospital's Nominal Roll

• Director	-	1
• Deputy Directors	-	3
• Principal Library Officer	-	1
• Higher Library Officer	-	1
• Senior Library Assistant	-	1

3.0 FUNCTIONS

The Library acquires information materials relevant to members of staff.

1. Materials acquired are organized, processed and made available for library users.
2. The Library has book and non-book/e-materials.
3. The library has been rendering HINARI service to help meet information needs of her patrons.
4. She renders selective dissemination of information (SDI) service.
5. She gives Current Awareness Services through her shelves display of new arrivals (CAS) services.
6. She is reputed to providing loan/borrowers service,
7. Provide reference services etc to her clients.

4.0 ACHIEVEMENTS

Some members of staff who had the interest of the library in their hearts donated books and journals to the library.

1. Two members of library staff were promoted to Deputy Director and Principal Library Officer respectively in the last promotion exercise.
2. Some members of staff donated Books and Journals to the Library.
3. The Medical Library maintained a very conducive environment for studies and research during the period under review.
4. The Library had Twelve (12) students trained as part of their (SIWES) Student Industrial Attachment Experience Program.
5. Orientation lectures were carried out for temporary staff during the period under review.

5.0 CHALLENGES

1. Inadequate up-to-date books and journals.
2. Out-dated computer sets which need upgrading.
3. Out-dated office furniture.

6.0 FUTURE PLANS

1. Acquisition of up-to-date materials and functional internet connectivity
2. Having a library complex.
3. Full subscription to HINARI service can maximize its services.
4. Having laptop/computers to assist us in providing online services.

Mrs. Mary Badu
Head of Department



CMD, Prof B. A. Ekele Welcomes the Honourable Minister of State for Education, Dr. Yusuf Tanko Sununu to UATH, Gwagwalada.

DEPARTMENT OF MEDICAL SOCIAL SERVICES

1.0 INTRODUCTION

The Department of Medical Social Services acts as a link between the hospital Management and patient family/relations in the community outside the hospital to render social services to indigent patients both in and out patients, and report to the Chairman, Medical Advisory Committee (C-MAC).

2.0 STAFF STRENGTH

The staff strength is 12, distributed to various units as shown below:

- | | |
|--|---|
| • Head of department Office. | 4 |
| • Treatment support specialist (TSS) Unit. | 1 |
| • Adult Adherence Unit. | 3 |
| • Paediatric Adherence Unit. | 3 |
| • Main Operating Theatre. | 1 |

3.0 ACTIVITIES

1. Counseling of indigent patients
2. Mediation between patients in social crises.
3. Mobilization of funds needed to render medical services to indigents patients.
4. Embarking or advocacy to individuals, private and public organizations and NGO's to partner with the hospital in providing the needed social welfare assistance to indigent patients.
5. Facilitating delivery of social welfare services to indigent patients.

3.0 ACHIEVEMENTS

In the year under review, the department achieved the following. Donation to indigent patients from NGO's and individual.

1. ESOSO Abueku Foundation, from Bikers Association Abuja donated the sum of Three Hundred-Six Thousand Naira (₦360,000).
2. Lady Helen Health foundation donated the sum of Three hundred and ten thousand Naira ₦310,000.
3. Initiation for Improved Humanity Foundation, Life Camp-Garki, donated the sum of ₦240,000 Two Hundred and Forty Thousand Naira.
4. Adeyemi Ilori Biodun Adekouya Foundation, donated the sum of Five Hundred and Seventy Thousand Naira ₦570,000.
5. Zakat and Nafsat Abuja, donated Two Hundred and Twenty-three Thousand Naira ₦223,000 to two patients (babies).
6. An anonymous person donated Fifty Thousand Naira (₦50,000) to patient.

7. UATH Admin Welfare initiative scheme fund assisted patient with the sum of Five Hundred Thousand Naira ₦500,000.
8. Mr. John Yamusa donated the sum of One Hundred Thousand Naira ₦100,000.
9. Waiver granted by the hospital Management to patients who were discharged and could not afford to settle their hospital bill, the sum of ₦545,620 Five Hundred and Forty-Five Thousand Six Hundred and Twenty Naira.
10. Discounts-Also granted by the hospital Management to patients who were discharged and were not able to settle their total bills the sum of ₦2,361, 286.00 Two Million Three Hundred and Sixty-One Thousand, Two Hundred and Eighty-Six Naira.
11. Amount recovered from patient after discharge. The sum of Twenty-Five Million Eight Hundred and Forty-Eight Thousand, Four Hundred and Fifteen Naira ₦25,848,415.
12. Mr. Adams C. O. donated the sum of Sixty Thousand Naira ₦60,000 to patient.
13. One Hundred Percent (100%) Jesus, Airport Road Abuja donated the sum of Four hundred and Thirteen Thousand Naira ₦413,000 in to the Hospital's account to offset the bills of Eleven (11) indigent patients.
14. Batambu Unity and Development Initiative Abuja, Women Wing donated the sum of Ninety Thousand Naira ₦90,000
15. Central Bank Officials, donated the sum of One Million Naira ₦1,000,000 to patients.
16. Expenditure on indigent patients from UATH Welfare Initiative Scheme Five Hundred and Ninety-Five Thousand Naira ₦595,000.

5.0 CHALLENGES:

1. Unsettled hospital bills owned by patients who are discharged and sureteed by the hospital staff through the department.
2. Renovation of the departmental convenience(toilet) within the office.
3. There is no prompt or regular response from NGO's and individual in terms of financial support to indigent patients.
4. There is the need for transport vehicle to facilitate in the tracking of patients in regards to counselling, follow-up visits and recovery of hospital bills.
5. There is the need for a computer set to backup patients' data for efficiency.

6.0 FUTURE PLANS

- The department plans to improve on resources mobilization so as to impact on more indigent patients.

NOTE: For the attention of the hospital community and the general public donation for the needy patients, UATH Welfare Initiative account is domicile in **First Bank Gwagwalada**
Account number: 2016519280.

8.0 SUMMARY

We appreciate the Management for the support given to her to carry out its duties to her indigent patients in the year under review. We look forward to a fruitful year 2024.

Mrs. Iyakura Justina S. A.
Head of Department



Renovated and Equipped Laundry Department

DEPARTMENT OF MENTAL HEALTH

1.0 INTRODUCTION

The Department is headed by a Consultant Psychiatrist who oversees the activities and reports to the Chairman, Medical Advisory Committee (CMAC). It is a core department of the Hospital, saddled with the responsibility of providing essential services in the prevention, promotion and management of mental and substance use disorders.

2.0 STAFF STRENGTH

The Department has a total of thirteen (10) staff:

Consultant psychiatrists	3
Senior Registrar	1
Psychologists	7

3.0 ACTIVITIES

The range of services rendered by the department include: out-patient clinics, in-patient consultation-liaison psychiatric services across other clinical departments in the hospital and emergency mental health services through the accident and emergency unit of the hospital.

Other services rendered include: psychological assessment, psychotherapy, counseling, pre-employment mental health assessment, forensic mental health evaluation, HIV counseling and testing, Mental health psychosocial support (MHPSS) for migrants, Orphans and Vulnerable children (OVCs), community mental health outreaches.

3.1 CLINICS

The Department runs out-patient clinic at the Medical Out-Patient Clinic (MOPD) on

Mondays: 8 am

Thursdays: 1 pm (at NHIS building)

Departmental academic meeting

Wednesdays 8.30am

Monthly departmental meeting

3rd Wednesday of every month

4.0 ACHIEVEMENTS

1. Community Mental Awareness Campaigns.
2. Attended to a total of 666 HIV/AIDS patients: 556 negatives; 110 positives.
3. Attended to a total of 173 psychological cases via referrals.
4. Ongoing construction of mental health ward by the management. We are very grateful to the management for this as this will transform the landscape of mental health service delivery in the hospital and the entire FCT and the neighboring states.

5.0 CHALLENGES

1. Inadequate human resources.

2. Lack of admission space for inpatient care.
3. Lack of equipment and assessment instruments for psychological services.
4. Need for reconstruction and refurbishing of the heart-to-heart center to provide decent office accommodation for staff of the unit and the site Laboratory scientists.
5. The need to integrate clinical psychology unit into the health-in-the-box network.
6. Training and retraining of staff in mental health.

6.0 FUTURE PLANS

1. To commence the child and adolescent psychiatry clinic at MOPD on Thursdays (commences February 2024).
2. To commence in patient care as soon as the ward is completed.
3. To commence residency training after the commencement of in patient's care.

Dr. Abah S. O. U.
Head of Department



The New OCT Machine at Ophthamology Department

DEPARTMENT OF MICROBIOLOGY AND PARASITOLOGY

1.0 INTRODUCTION

The Department of Medical Microbiology and Parasitology is one of the pathology-based departments that mainly involves in Microscopic and immunology diagnosis. Samples from various departments are analyzed, such report are presented to the physician for further action. The department is headed by a Consultant who oversees the activities of the various units and reports to the Chairman, Medical Advisory Committee.

The department forms a bridge between Basic Clinical Sciences of infectious diseases and the art of Clinical practice at its best. It analyses the samples relevant to Parasitology, Bacteriology, Mycology, Immunology and Virology applied to Clinical practice. These units are managed by competent scientists.

2.0 STAFF STRENGTH

▪ Honorary Consultants	3
▪ Laboratory Scientists	11
▪ Laboratory Technicians	4
▪ Laboratory Assistants	4
▪ Laboratory Auxiliary	2
▪ Secretarial Staff	0

3.0 ACADEMIC PROGRAM

- Monday Review of call samples,
Departmental meeting,
Venereology/STI Clinic.
- Tuesday Update for ongoing research activity in the department,
Ward rounds,
Venereology/STI Clinic.
- Wednesday Undergraduates students' training,
Venereology /STI Clinic.
- Thursday Departmental Seminar,
Review of local Antibiogram/AMR in UATH,
Review of IPC reports.
- Friday Journal Club,
Residents training.

4.0 ACTIVITIES

1. Analyses of relevant UATH patient's Clinical samples brought to the department.
2. Review of request for patient's Consults from all requesting UATH units.
3. Analyses of relevant clinical samples from requesting health institutions.
4. Coordinating department on behalf of UATH for the hospital such as, IHVN/UATH collaboration, DOT/UATH collaboration, PEPFAR/UATH collaboration.
5. Running Venereology Clinics.
6. Championing IPC programs in UATH.
7. Training program for resident doctors, medical students, Laboratory interns.

4.1 Clinical consults

The Consultant Microbiologist regularly receives requests to review patients from Consultants in other clinical departments.

The Sexually Transmitted Infections (Venereology) Clinic takes care of patients presenting to the hospital with complaints related to sexually transmitted infections. The Clinic operates at either MOPD or NHIS facility by a Consultant Microbiologist. The UATH Infection Prevention and Control (IPC) Committee is multi-sectoral in composition and is currently chaired by a Consultant Microbiologist.

4.2 Service Laboratory

The service laboratory is further divided into various benches, namely: Reception/Dispatch bench, Sputum bench, Urine bench, Genitals bench, Stool bench, General bench, Mycology bench, Blood culture bench and Serology bench.

4.3 Research Laboratory

To the glory of God, a brand-new Research Molecular Laboratory has been added to the department. This is a dream come true for cutting edge molecular biology research in UATH. It will serve as a bridge between basic clinical science and clinical practice in UATH. This development ensures that molecular analyses is in-cooperated into our research and will therefore raise the standard of research output in our environment to an international grade. Apart from the molecular research laboratory, the building also has offices and a seminar hall; we cannot thank the current UATH management enough for this!

5.0 CHALLENGES

1. Non availability of Resident Doctors in Medical Microbiology.
2. Practical implementation of the UATH organogram for Laboratory services is still awaited.
3. Non availability of dedicated Sexually Transmitted Infections Clinic.

Dr. Jonah Y. Peter
Head of Department



Tissue Typing Training in Session, Coordinated by the Medical Microbiology Department.

DEPARTMENT OF NURSING

1.0 Introduction

Department of Nursing is headed by a Director Nursing Services that oversees the affairs of the department and report to the Chairman, Medical Advisory Committee. The department experienced a remarkably progress in service delivery in the year 2023. Nurses provided patient focused care in a friendly environment and specialist services to all the existing departments of the Hospital.

2.0 STAFF STRENGTH

There are five hundred and forty-eight (548) nursing staff. Below is the breakdown of the cadres.

▪ Director, Nursing	-	1
▪ Deputy Director, Nursing	-	23
▪ Assistant Director, Nursing	-	62
▪ Chief Nursing Officers	-	132
▪ Assistant Chief Nursing Officers	-	25
▪ Principal Nursing Officers	-	70
▪ Senior Nursing Officers	-	78
▪ Nursing Officers, I	-	27
▪ Nursing Officers II	-	89
▪ Staff Nurse	-	33
▪ Staff Midwife	-	8
TOTAL	-	<u>548</u>

3.0 ACTIVITIES/FUNCTIONS

The department provides high-quality nursing care to both out-patients and in-patients of the hospital. These include bedside care, perioperative care, critical patients' care perinatal patient, care training, research and more. This is achieved using the main nursing tool "Nursing Process".

4.0 ACHIEVEMENTS

1. Improved documentation of care given to patients and report writing.
2. Commissioning of the Amenity wing of the hospital
3. Posting of Assistant Director of Nursing Services (ADNS) to QIU, to improve supervision and ensure Quality Patient Care.
4. Ongoing computerization all nursing activities and all service windows in the hospital.
5. DDNS Rose. H. Musa emerged as the new HOD Nursing following retirement of the former HOD Dr L.N. Chukwu
6. Robust and regular interaction with top Management for constructive innovations and problem solving.
7. Positive attitude/prompt response to patients/clients.
8. Positive attitudinal change towards ourselves, other Health Care Workers, patients/clients and the society at large.
9. Enhancement of team work with other Professionals.
10. Discipline and respect among the Nurses and other Health Care Workers.

5.0 CHALLENGES

1. Brain drain /retirement of skillful staff and its resultant devastating effects on the health care delivery still remain a major challenge to the department, hence overstretching its limit in the present expansion of the Hospital.

2. Due to the high patients turn over, units and wards easily use up their consumable supplies, and equipment easily gets bad, hence a need for a more sustainable means of uninterrupted supply of consumables.
3. Extension of ICT to QIU to facilitate their duties.
4. GOPC lack office space to accommodate the staff changing room, rest or common room and toilet for staff.
5. Training on social skills to improve inter-professional cooperation and overall productivity.
6. There is need for more wheelchairs in the wards for easy transportation of patients from one unit to the other.

6.0 FUTURE PLANS

- a) Providing a safe environment and enough staff nurses to carry out their duties.
- b) Continuing training and retraining of nurses in different specialties.
- c) Set up additional Post Basic Nursing programs, such as: Accident and Emergency Nursing program, Perioperative Nursing program and Burns and Plastic Nursing.

6.0 CONCLUSION

The department wishes to thank the management of the hospital under the distinguished leadership of Prof. B. A. Ekele, for promptly responding to the challenges of the department. The department also appreciates the Coordinators and Managers for providing effective leadership at the different units.

Mrs. Rose H. Musa
Head of Department



Dr. (Mrs) Lydia Chukwu, Head of Nursing Department Handing Over to Mrs. Rose Musa on Retirement from Service.

DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

1.0 INTRODUCTION

The Department is headed by a Consultant who oversees the daily activities of the various units and reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTH

Consultants:	16
Senior Registrars:	11 (Fellows 11; Senior Registrars 16)
Registrars:	15
Nursing Staff:	82
Admin. Officer	1
Departmental Secretary	1

3.0 DEPARTMENTAL STRUCTURE:

3.1 Family Planning Unit

- Focuses on child spacing and provided services relating to contraception and prevention of sexually transmitted infections.
- Houses a mini theatre for Bilateral Tubal Ligation (BTL).

3.1.1 Activities

- New acceptors (Contraceptives): 287.
- Total no. of follow up visits: 2,292
- Colposcopy: no. of patients screened 34; Biopsy: 5 BTL: 5.

3.2 Labour Ward:

3.2.1 Activities:

• Total deliveries (Vaginal + C/S)	-	1,573
▪ Vaginal deliveries	-	1,032
▪ Caesarean sections	-	462
▪ Emergency Caesarean sections	-	822
▪ Electives Caesarean sections	-	--
○ Maternal deaths	-	11
○ Stillbirths	-	87
○ Transfer in	-	471
○ Referrals	-	269

3.3 Gynecology Ward

This unit comprises of four functional sections viz:

- Gynecology in-patients.
- Gynecology emergency room.
- Ultrasound scanning room.
- Manual Vacuum Aspiration (MVA) room.
- Colposcopy Room.

3.4 Maternity Ward.

3.4.2 Activities:

- Total no. of patients admitted 1,123.
- Doctors conduct ward rounds everyday including weekends and holidays.

3.5 The Clinics

The Antenatal clinic, Gynaecology clinic, Post-natal clinic and Prevention of Mother to Child Transmission (PMCT) services are available daily under different sub specialties.

3.5.2 Activities:

Antenatal clinic

• Booked cases	2,211.
• Ante natal clinic	10,593.
Total number of patients seen	19,856.

Postnatal visits

1,742.

Gynae clinic

• Total no. of patients seen	5,310.
------------------------------	--------

3.6 Theatre

Major cases	1,246
Intermediate/minor	83

4.0 Routine Weekly Schedule

Our routine schedule which includes antenatal, gynaecological and postnatal clinics run five days a week. There are four sub-specialties/Teams. The various teams have their different days for elective surgeries, while emergency surgeries are handled on a daily basis by the team on call.

5.0 Achievements/High Points

1. Re - accreditation visit by West African College of Surgeons.
2. Acquisition of initial equipment for Assisted conception therapy for commencement of IUI.
3. Good interpersonal relationship between all health professional in O/G department.
4. Cubicle Nursing – it enhances active communication between the patient and the nurses.
5. Oxygen piping in progress in the department.
6. The management provided labour ward with a patient monitor and CTG (cardio tocograph) machine in the year 2023.
7. Increase in number of patients for ante-natal care and delivery at LNG-Maternity Centre
8. Restructuring of the Department into sub-specialties units viz:
 - Materno-Fetal Medicine Unit (MFMU) - Formerly Blue Team.
 - Reproductive Medicine Unit (RMU) - Former Purple Team.
 - Urogynaecology Unit (UGU) - Former Pink Team.
 - Gynaecological Oncology Unit (GOU) - Former Green Team.

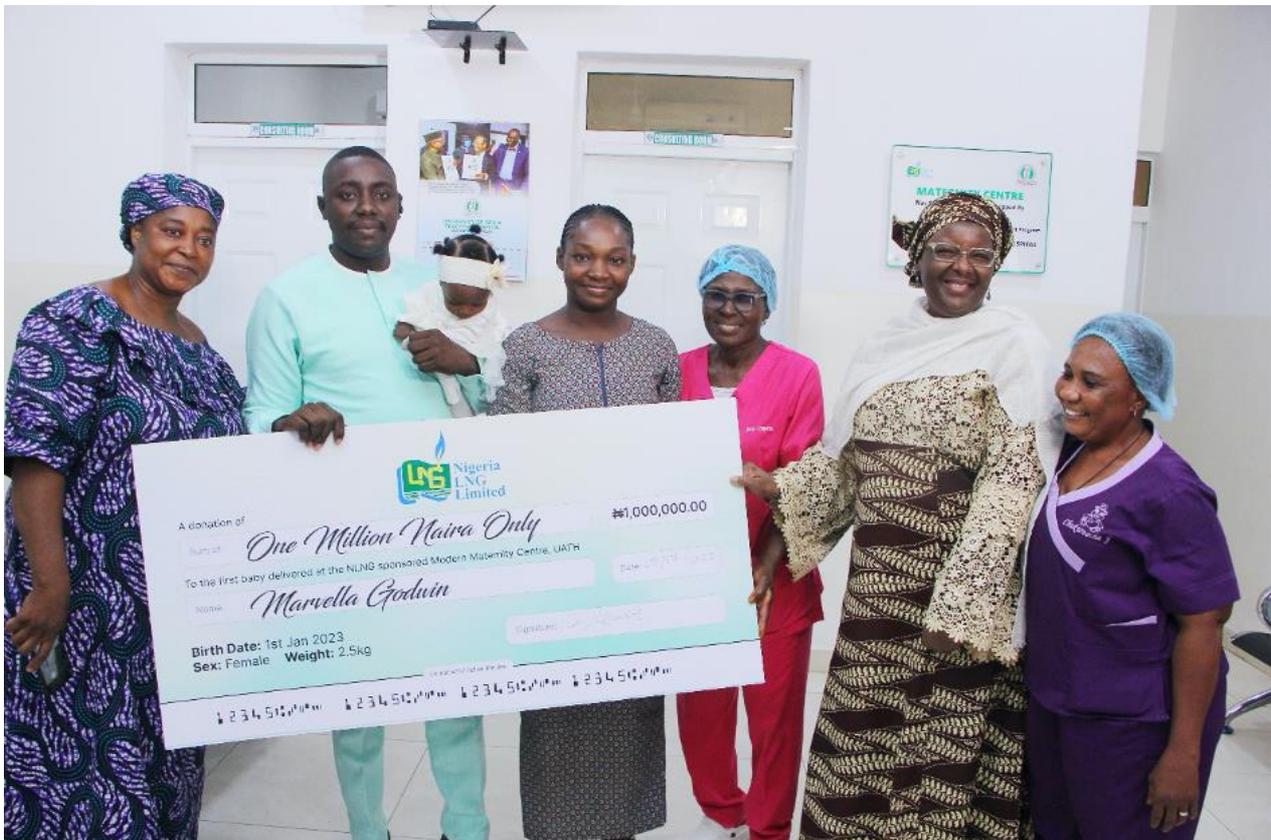
6.0 CHALLENGES

1. Inadequate offices for the Consultants.
2. Absence of High Dependency Unit in the Labour ward.
3. Completion of furniture in side wards, Consultant offices, Nursing changing room, manager/coordinator office.
4. There is the need for a Computer-set in family planning clinic.

7.0 FUTURE PLANS/RECOMMENDATIONS

- Provision of more office space for consultants.
- Provision of a fully equipped IVF centre.
- Provision of a separation of antenatal and postnatal / post - CS wards.
- Renovation of Antenatal and Family planning clinics.

Dr. Nathaniel Adewole
Head of Department



The Parents of the "2023 First Baby of the Year" Mr. and Mrs. Godwin Obaje with the Cheque Donated by NLNG Limited

DEPARTMENT OF OPHTHALMOLOGY

1.0 INTRODUCTION

The Department of Ophthalmology is one of the oldest core clinical departments of University of Abuja Teaching Hospital (UATH). It consists of various units including Optometry, Eye Clinic, Eye theatre and Eye ward. The staff and various units work as eye care team delivering comprehensive eye care. The department has been operating from the trauma center since April 2021.

The Department is headed by a consultant who oversees the daily activities of the various units within the department and reports to the Chairman, Medical Advisory Committee.

The year ended 2023 the department provided a total **8,371 clinic consultations**, performed **375 surgeries**. The reports from these units are attached however, the major highlights from the Ophthalmology department in 2023 is being presented.

2.0 STAFF STRENGTH

• Consultants	-	7
• Senior Registrars	-	8
• Registrars	-	5
• Optometrists	-	6
• Ophthalmic Nurses	-	5
• Opticians	-	5
• Record Officers	-	2
• Departmental Secretary	-	1
• Health Information Officer	-	1
• Porters	-	7
• Cleaners	-	7

3.0 CLINIC SESSIONS

- i. **General Ophthalmology clinic:** There are four eye clinic sessions per week. The Tuesday and Wednesday clinics are manned by 2 consultants each while the Mondays and Thursdays clinics are manned by one consultant each.
- ii. **Sub-specialty clinic:** The following sub-specialty clinic sessions run parallel to the General Ophthalmology clinic each week.

a) <i>Oculoplasty and Medical Retina</i>	(Monday),
b) <i>Anterior Segment and Glaucoma</i>	(Tuesday),
c) <i>Retinopathy of Prematurity Screening in Special Care Baby Unit (SCBU)</i>	(Tuesday/Fridays)
d) <i>Pediatric Ophthalmology and strabismus</i>	(Wednesday)
e) <i>Anterior segment and Cornea</i>	(Thursday)
- iii. **The Emergency Clinical Services** are available for 24 hours daily in the Eye Clinic and the Casualty unit.
- iv. **The Requests for Ophthalmic Consultation** from all Clinical Departments are attended to promptly as the need arises.

3.0 ACHIEVEMENTS

1. In the year under review, 8,872 were seen.

4.0 EYE THEATRE UNIT

With two operating tables and 2 operating microscopes, the eye theatre, provides both elective and emergency surgical services, there are four elective operation days in a week. The eye theatre has a staff strength of five nursing officers supported by two support staff (a porter and a cleaner). Unfortunately, the theatre manager Mr. Kolawole Suraju died in March, 2023 (May his gentle soul rest in Peace Ameen). The theatre has the following: An operating suite with 2 microscopes, A changing room, waiting area for patients which also serves as the recovery area for general anesthesia patients, a scrub area and a store that houses consumables. Surgeries are also conducted sometimes at the dedicated theatre suite provided for the department at Kwali General Hospital.

4.1 Staff Strength

Staff in theatre Unit = 5 Certified Ophthalmic nurses

Revenue generated by Eye theatre in 2023 = N10,087,500.00

4.2 Eye Surgeries

In the year under review, four hundred and sixty-two different eye surgeries were performed in 2022 of which eighty-five (85) were done free of charge at UATH while three hundred and thirty-two (332). surgeries were done at our outreach station located at Kwali General Hospital (KGH). A total of Seven Hundred and ninety-four surgeries were performed in the department of ophthalmology in 2022 (794). Cataract extractions, pterygium excision, and oculo-adnexal repairs were the most common eye surgeries in 2022.

Eye surgeries in eye theatre in 2023 = 794

4.3. Eye Ward

The ward has 8 Ophthalmic Nurses and 8 support staff (4 porters and 4 cleaners).

Patients admitted into the Eye Ward in 2023 = 375

5.0 THE EYE CARE SERVICES AND ACADEMIC ACTIVITIES AT DEPARTMENT OF OPHTHALMOLOGY

Generally, the eye care services at UATH are rendered round the clock. However, the main services occurred during the working hours (0008 – 1600 hours). The physicians provide ophthalmic services as team. A team consists of the consultant(s) and trainee ophthalmologists. There are Six teams (A-F) in the department. As shown in the table below, most of the eye care and educational activities in the department.

Table 8: The Department of Ophthalmology weekly activities

Activity	Monday	Tuesday	Wednesday	Thursday	Friday
Consultant clinic	0008 – 1600 hrs, Team A and E	0008 – 1600 hrs, Team B, Team F	0008 – 1600 hrs, Team C,	0008 – 1600 hrs, Team D	Trainees' Postgraduate Training Day
Theatre	0008 – 1600 hrs, Team D	0008 – 1600 hrs, Team A	0008 – 1600 hrs, Team B, Team F	0008 – 1600 hrs, Team C, Team E	
Refraction	0008 – 1600 hours Daily				
Seminar					0008- 0010 hrs
Grand round			0008-0009 hrs Fortnightly (All physicians)		
Journal review		0008 - 0009 hrs Fortnightly (All physicians)			
Morbidity & Mortality review and Departmental meeting					1st Friday of every month (All cadres of eye care team)
Ward round	Aside regular joint round by the trainee Ophthalmologists, each consultant supervises ward rounds on patients on admission in his/her team.				
Call duty	A team (consultant and trainees) is on call duty during the period specified in a monthly roster. The team attends to all emergencies and referrals during the period.				
Wet lab	Besides trainees' self-skill acquisition, trainees have supervised wet lab session on theatre day/other specified period. A wet-lab register is available				
Medical students education	During posting in Ophthalmology the medical students acquire attitude, knowledge and skills in eye care services through didactic lectures (by consultants), tutorials (by trainees) and teachings in the clinics, ward and theatre.				
Further activity	Structured lectures, Residents' Tutorial/Discussion on selected topics.				
Membership portfolio	All successful seminars and clinical case presentations are printed and filed after endorsement by the Residency Training Coordinator. The required number will be included in each trainee's Membership portfolio.				
MOCK	Mock examination is conducted periodically				
Trainee's Annual report	Records of each trainee for the 2023 is available				

6.0 TRAINING, ACCREDITATION AND RESEARCH

The department currently has 5 registrars, 1 senior resident doctor passed the dissertation aspect of the fellowship examinations in Public Health for Eye care., 2 registrars left the department and 1 post fellowship senior registrar left the department in the period under review. 1 consultant (trained in the department) was employed, 4 Registrars were also employed.

The department conducts weekly seminar, fortnightly grand rounds and journal reviews as well as monthly morbidity and mortality review and departmental meeting (Table 17). Others include wet laboratory and refraction sessions for the trainee ophthalmologists. Trainees from Family Medicine, Otorhinolaryngology and Neurology do relevant postings in Ophthalmology. Optometrist (inter and extern) as well as optician externs were also trained in the department within the period under review. The major research activities include trainees' dissertation and individual personnel research works. There is ongoing Keep Sight Initiative (KSI), a partnership UATH Ophthalmology-Sights avers project with glaucoma management including surgery and research component.

7.0 OUTREACH SERVICES

The Department has rural eye care services at Kwali General Hospital. The trainees had 3-month Rural Eye posting at Kwali Rural Eye care Centre at Kwali General Hospital as required/ necessary. The Department provided free glaucoma and eye screening services to staff and members of the public during the 2023 Glaucoma Week and World Sight Day.

8.0 KWALI GENERAL HOSPITAL

A Public Health Facility owned by Federal Capital Development Authority (FCDA), Abuja. Kwali General Hospital (KGH) is a designated fellowship rural training outpost by the University of Abuja Teaching Hospital (UATH) for specialties. The KGH sub serves rural Ophthalmic Posting and Outreach Centre. Since the last quarter of 2018, the ophthalmology department has commenced basic eye care service delivery at the hospital including optical and medical services, and cataract surgical outreaches. Only two hundred and twenty-four ophthalmic cases were seen in KGH in 2023 and fourteen cataract surgeries (14) were done ophthalmic cases seen in 2023.

Patients seen at Kwali Outpatient Clinic 2023 = 224

9.0 PARTNERSHIPS/DONATIONS

1. Sightsavers-Allergan Keep Sight Initiative Project. The Department of Ophthalmology is partnering the Sightsavers-Allergan in a project Keep Sight Initiative. The project aims at reducing glaucoma blindness by supporting glaucoma patients. Patients suspected to have glaucoma are screened in the communities and referred to the department of ophthalmology where the diagnosis of glaucoma is confirmed or ruled out. The project also aims to provide free glaucoma surgeries along with post op medications to 50 indigent patients from communities in Gwagwalada. So far 30 free glaucoma surgeries have been done under the keep sight initiative.
2. Sight savers donated a brand new slit lamp biomicroscope with anterior segment camera to the department.
3. The department which is now a center for International Council of Ophthalmology (ICO) examinations successfully conducted two ICO examinations in March and October 2023.
4. The department successfully hosted/conducted two (2) West African College of Surgeons, Faculty of Ophthalmology Examinations in April and October 2023.
5. The department hosted the first ever Glaucoma Surgical Simulation training (GLASS) in Nigeria in January 2023 with 19 trainees and 4 trainers where didactic lectures, hands on simulation and live surgeries were carried out.

6. The Ultramodern Humphrey Fields Perimetry Machine (HFA) donated to the department by Dr. Fatima Kyari was also put to use within the year.
7. A public Private Partnership (PPP) between the department/Hospital and Rachel Ventures limited commenced in October to equip our optical lab and provide optical services including supply and fitting of frames and lenses. The officially commenced work in October 2023 after they had partitioned the large hall allocated to the department by management into optical lab, store, showroom/ reception and 4 offices.
8. Three nursing staff were promoted, 2 of them to the rank of Assistant Director Nursing Survives and one was promoted to the rank of Chief Nursing Officer (CNO).
9. The department lost one of its most dedicated staff. Nurse Kolawale Suraju.(CNO) in March 2023, he was a Chief Nursing Officer and Theatre Manager in the department.
10. One (1) consultant ophthalmologist, four (4) new Resident doctors, two (2) nurses two (2) optometrists and two (2) dispensing opticians were employed within the Year under review.

10.0 CHALLENGES

1. Inadequate manpower.
2. Inadequate office space.
3. Lack of routine maintenance of ophthalmic equipment.

11.0 FUTURE PLANS

1. To have purposely built and well-equipped eye building with adequate space for outpatient clinics, optical workshop, optometry unit, eye theatre, eye ward, offices, library, wet laboratory, seminar room, call rooms, canteen and conveniences.
2. Provision of lens surfacing machine for production of lenses for the department and other hospitals providing eye care services. This will reduce delay in fixing patients lenses and glasses and generate a lot of revenue for the department.
3. To get more support for eye care outreaches in Abuja especially rural eye-care service at Kwali General Hospital.
4. To recruit more well motivated young eye care professionals who are passionate to deliver quality eye care service.
5. To recruit young ophthalmologists who will provide subspecialized eye care services to members of the Public.

12.0 CONCLUSION

We delivered eye care services to many Nigerians including subsidized and free services in conjunction with our partners. We were also able to continue with our training and research activities.

The rural eye care services at Kwali General Hospital provided several consultation and free and subsidized surgery to indigent patients.

There is ongoing UATH Ophthalmology-Sightsavers partnership Keep Sight Initiative Project with potential to reduce the burden of glaucoma blindness. There were equipment and financial supports to Ophthalmology from our partners.

The WACS Fellowship examinations were conducted in April and October 2023 and the department is poised to host the International Council of Ophthalmology (ICO) exams from March and October 2024. The Department strives to meet its mandate amidst limited resources.

Dr. Rilwan Chiroma Muhammad
Head, Department of Ophthalmology



Group Photograph of Course (GLASS) Participants and Facilitators with CMD and CMAC.

DEPARTMENT OF ORTHOPAEDICS AND TRAUMA

1.0 INTRODUCTION

The department is one of the clinical departments in the Hospital that renders academic and clinical services in the treatment of the diseases that affects the bone and all structures that move the bone.

The Department is made up of four units (Orthopaedic Super-Specialties). All units run Trauma calls.

2.0 STAFF STRENGTH

• Consultants	10
• Principal medical officer (With MSc Orthopaedic Surgery)	1
• Senior residents	3
• Junior residents	6
• Cast technicians	-
• Prosthetist and Orthotist	2
• Secretarial staff	2

3.0 ACTIVITIES

1. Managing Trauma patients in the Emergency unit.
2. Running of orthopaedic and trauma clinics.
3. Performing emergency and elective surgeries.
4. Care of in-patients.
5. Academic activities to residents, Students and the General Hospital Community.

4.0 CLINICAL ACTIVITIES

Team A: Dr. Oguche O. E. & Dr. Bassey A. E.

Consultant ward round	Wednesday
Clinic SOPD	Monday
Theatre	Tuesday
Residents ward round	Thursday
House officers' ward round	Friday

Team B: Dr. Sha D. G. Dr. Ugwoke K. I. & Dr. Abah R. U.

Consultant ward round	Tuesday
Clinic SOPD	Wednesday
Theatre	Monday
Residents ward round	Thursday
H. O. ward round	Friday

Team C: Dr. Songden Z. D.; Dr Ejembi P. A. & Dr. Abubakar H.

Consultant ward round	Monday
Clinic SOPD	Tuesday & Thursday (Club foot Clinic)
Theatre	Wednesday
Residents ward round	Thursday
H. O. ward round	Friday

Team D: Dr. Okoye; Dr. Salihu M. N.

Consultant ward rounds	Wednesday
Clinic SOPD	Friday
Theatre	Thursday
Residents ward round	Monday
House officers' ward round	Tuesday

Statistics 2023 = 485 Major, Minor and Emergency Cases

5.ACADEMIC ACTIVITY SUMMARY

S/N	ACTIVITY	TIME	DAYS	VENUE
1.	Call Summary/ Trauma Meetings	8am	Tuesday/Weekly	Surgery Seminar Room
2.	Topic Presentation	8am	Tuesday/Weekly	Surgery Seminar Room
3.	Mortality/ Morbidity	8am	Quarterly	Surgery Seminar Room
4.	Bedside Teaching	3pm	Wednesday/Weekly	Wards
5.	Grand Round	8am	Last Tuesday/Monthly	Surgery Seminar Room
6.	House Officers Presentations	3pm	Wednesday/Weekly	Orthopedic Ward

6.0 ACHIEVEMENTS

1. The UATH management has given a block to the department named after Late Prof H. C. Nwadiaro. This has taken care of spaces for more activities within the department.
2. Four new consultants were appointed from among our trained residents.
3. Donations from MSN Laboratory, Al-Tinez Pharma Ltd and Ortho Care Support Ltd, have helped in equipping the departmental Library, departmental office and Seminar room respectively.
4. **Dr. Muryi Abubakar**, a retired Consultant from the Department donated 4 split units of Air Conditioners to the Consulting rooms at the Professor Nwadiaro Block.

6.0 CHALLENGES

1. Non availability of Fracture Table and arthroscopy set.
2. Old and depleted implant sets.
3. Epileptic functioning of the C-arm.
4. Lack of space equipment in the prosthetic and orthotics room.
5. Lack of venue for more academic activities.
6. Non-availability of call room for senior residents.
7. Furniture for HOD office and the secretary table and chair.

7.0 RECOMMENDATIONS

1. Procurement of Arthroscopies for sports medicine unit.
2. Procurement of lead aprons, fracture table, orthopedic sets.
3. Procurement of new C-arm and Orthopaedics sets.
4. Equipping the prosthetics and Orthotics Room.
5. Procurement of HOD and secretariat furnishing.
6. The department is in need of urgent replacement of four (4) or more Cast Technicians.

8.0 FUTURE PLANS

1. To get the trauma theatre functioning for 24hrs.
2. To attain full accreditation of the West African College of Surgeons and National Post Graduate Medical College of Nigeria.

Dr. Salihu M. N.
Head, Department of Orthopaedics



The New C-arm Installed at Main Theatre Suite 3.

DEPARTMENT OF PAEDIATRICS

1.0 INTRODUCTION

The year 2023 was a very productive year for the department. The Department of Paediatrics was able to improve and sustain improved services to patients and the community.

Our mandate is to provide sound leadership, excellent research, robust postgraduate training, and excellent clinical services to paediatric patients.

2.0 STAFF STRENGTH

Consultants	-	12
Senior Registrars	-	13
Registrars	-	11
Medical Officer	-	2
Nurses	-	76
SCBU	-	20
SCBU (LNG)	-	7
PMSW	-	19
EPU	-	19
POPD	-	19
PSTC	-	2
Support Staff (CHEW, counselor, cleaners & potters)	-	59
Secretary	-	1
Clerical Officer	-	1

3.0 Clinical Activities Monday to Friday

- Out-patient clinical services are rendered daily at POPD and PSTC.
- Specialist Clinics

✓ Cardiology	Mondays	10.00 am – 1.00 pm.
✓ Pulmonology	Mondays	1.00 pm – 4.00 pm.
✓ Haematology	Tuesdays	10.00 am – 2.00 pm.
✓ Haematology (Adolescent)	Thursday	1.00 pm – 4.00 pm.
✓ Nephrology	Wednesday	10.00 am – 2.00 pm.
✓ Neonatology	Wednesday	10.00 am – 2.00 pm.
✓ Neurology/Developmental Paediatrics	Thursday	10.00 am – 2.00 pm.
✓ Infectious Disease	Friday	10.00 am - 2.00 pm.
✓ Endocrinology	Friday	10.00 am - 2.00 pm.
✓ Gastroenterology/Nutrition	Wednesday	1.00 pm - 4.00 pm
- **Diagnostic Services:**

✓ Transthoracic Echocardiography	-	Tuesday, 8.00a.m. to 4.00 p.m
✓ Electrocardiography (ECG)	-	Done daily in conjunction with the Scientist in ECG lab.
✓ Side laboratory services	-	Monday–Friday - Lab. Scientist.
	-	Weekend: Done by Doctors-on-call.
✓ Paediatric dialysis	-	Done PRN
- Ward rounds under NCDC rules are conducted by various teams in EPU, SCBU, PMW
- Community Posting at General Hospital, Kwali.

Saturday

- Outpatient clinical services in EPU by team on call.
- Weekend ward round in EPU, SCBU, PMW by team on call.

Sunday

- Outpatient clinical services in EPU by team on call.
- Weekend ward rounds in EPU, PMW, SCBU by team on call.

Statistics of Patients Consultations = 9,844

Statistics of wards Admissions

• Emergency Paediatric Unit	-	1,477
• Paediatric Medical Ward	-	401
• Special Care Baby Unit	-	719
• Special Care Baby Unit LNG	-	36
• Paediatric Medical and Surgical Ward	-	358
• Paediatric Oncology	-	370

Academic Activities

- Monday; Weekend admissions review.
- Wednesday; Bedside, Seminars, journal reviews and topic presentation.
- Thursday; morbidity and mortality review, ground rounds.
- Friday; Nelson club, House officers' presentations, unit presentations • Community posting at General Hospital Kwali.

Achievements

1. Best Department of the year award was given to EPU for 2023.
2. Equipping and take off of the SCBU-LNG annex.
3. Establishment of a diarrhoe treatment unit (DTU) for the management of acute watery diarrhea.
4. Ongoing research Grants and Clinical Trials in the Department.
5. Successful celebration of the world sickle cell day, prematurity day and world breast feeding week.
6. Successful celebration of the world diabetic day with health/diabetic education and free medical screening (Blood pressure and Random Blood Sugar test).
7. Promotion of medical and nursing staff.
8. Provision of 4 tablets to the units and a projector by a research team.
9. Two residents got a fellowship in paediatrics this year.
10. Three residents passed the part 1 Fellowship Exam in paediatrics.

4.0 CHALLENGES

1. The seminar room is small and unable to accommodate medical students and doctors during Monday weekend admission reviews.
2. Insufficient outpatient clinic space especially for the adolescent patients.
3. Provision of a sickle cell center will go a long way to relieve the clinic space constraints and enhance qualitative care for the teeming population of sickle cell children that access care in our center.
4. The internet service is poor resulting in inability of doctors to document or access the e-folder and patients are unable to make payment or submit blood samples to the laboratory.
5. The solar provides light only to few points in EPU such that any disruption in power supply leaves a good part of the EPU in darkness, consequently disrupting provision of clinical care to patients.
6. Inadequate health workforce.
7. Lack of funds for the management of indigent patients.
8. The following equipment are needed in the unit;
Pulse oximeter (EPU), peak flow meter, spirometer with reusable accessories, mercury sphygmomanometer with different cuff sizes, CPAP Machine, 2 Auroscopes, wooden spatulas, an ophthalmoscope.

4.0 FUTURE PLAN

Our future plans include the establishment of the following:

1. To Create more awareness of the major clinical condition affecting children by celebrating and observing activities on the awareness days.
2. Upgrade of the Emergency Paediatric Unit in terms of space and provision of services.
3. Setting up new units such as Paediatrics Intensive Care (PICU) and rheumatology unit for improved patient care and training of residents.
4. Optimising the use of PMW for effective service delivery and decongestion of the Emergency Paediatric Unit.
5. Finding resources for more training of consultants and residents within and outside the country.
6. We need more Registrars as many have passed exams to become Senior Registrars.
7. Doctor's Call room in Oncology Ward: An Air conditioner, a Reading Desk and a Chair Nurses:
8. Equip Common rooms for nurses in EPU, PMW, SCBU, POPD, PSTC.

New Units to be created:

9. Paediatric Intensive care unit (PICU).
10. Paediatric Rheumatology.

Prof. Uche Agumadu
Head of Department

DEPARTMENT OF PHARMACY

1.0 INTRODUCTION

The Department is headed by a Director who oversees the activities of the various Units and reports to the Chairman, Medical Advisory Committee. It is with great pleasure to present the department of pharmaceutical services 2023 annual activities report. The department is saddled with the responsibility of providing quality pharmaceutical services in accordance with the hospital goals, mission and vision.

2.0 STAFF STRENGTH

- Director 1
- Deputy Directors 5
- Assistant Directors 5
- Chief Pharmacists 13
- Principal Pharmacists 5
- Pharm. Officers 1 7
- Pharm. Technicians 1
- Intern Pharmacists 23

3.0 STRUCTURE

Pharmaceutical services basically cover these work sections:

1. Pharmaceutical emergencies.
2. Pharmaceutical Out-patient.
3. In-Patients Management.
4. Procurement/Supplies and distribution.
5. Research/ Training/ Professional Development.
6. Production and quality assurance services. (Pharmaceutical Outlets that services the hospital community).
7. Drug Information and Pharmacovigilance services.

4.0 FUNCTIONS/ACTIVITIES

1. Pharmaceutical care services (screening of prescriptions, dispensing/patient counseling, drug therapy monitoring, etc.).
2. Training and research: Over twenty-four (24) intern pharmacists were trained in the period under review. About four (4) IT Students were also trained.
3. Drug information and pharmacovigilance services.
4. Drug procurement, storage and distribution.
5. Pharmaceutical Production and quality assurance: The department produced much more cleaning materials and disinfectants for use in the hospital by both staff and patients in 2021 especially as the COVID-19 pandemic raged including hand hygiene products, methylated spirit etc.
6. Weekly clinical presentation meetings where about 36 clinical presentations held in the period under review.

ACHIEVEMENTS

1. Despite shortage of manpower, the department was able to open two additional units (Oncology and A&E Medical Pharmacy unit).
2. Engaged in clinical researches conducted, some have been successfully published in Nigerian Journal of Clinical Pharmacists. While others have been submitted for publication.
3. Volume-price negotiation with multinational companies which helps the hospital purchase drugs at a reduced cost.
4. Improvement on revenue generation compared to previous years through commitment and dedication to work by the pharmacists.
5. Decentralization of NHIS Pharmaceutical services there by reducing stress in accessing drugs by NHIS patients.
6. Enlighten patient on the need to patronized hospital pharmaceutical services through 'Pharmacounsel'.
7. Streamlining of procurement to reduce loss through expiration by making NHIS procure more of tablets (80%) and the hospital more of injectable and consumables (80%) and it will also reduce our debt burden by curtailing unnecessary purchases.

6.0 CHALLENGES

1. There is the need for conducive working environment, as office furniture need replacement and renovation.
2. Spaces for effective operations e.g. call rooms, bulk store, outlets, narcotic, oncology units and cold room for vaccines and thermo-labile products.
3. Inadequate equipment and space for the Production and Quality Assurance services.
4. Out of stock due to price fluctuation as a result of changes in dollar rate.
5. There is immediate need for mini laboratory to regularly check the quality drug.

6.0 FUTURE PLANS/EXPECTATIONS

1. Establishment of Water/ Infusion production plant.
2. Functional Drug Information and Pharmacovigilance centre.
3. Engaging all pharmacist's specialist on clinical ward rounds.
4. Establishment of Oncology reconstitution unit with laminar flow and other necessary equipment.

Pharm. Muhammad Garba
Head of Department

DEPARTMENT OF PHYSIOTHERAPY

1.0 INTRODUCTION

With give gratitude to Almighty God. The year under review, most of the restrictions that came with COVID-19 pandemic were either completely removed or reduced to the barest minimum. There was industrial harmony among the various Health Care Workers Unions and Management, the lengthy strike by ASUU in the year under review notwithstanding.

2.0 STAFF STRENGTH

- Permanent staff (Physiotherapists). 6
- Occupational Therapist 2
- Physiotherapist Assistant 1
- Biomedical Technician 2
- Health Record Officer 1
- Intern Physiotherapists 15
- Outsourced Staff. 4

3.0 ACTIVITIES

1. The department attends to all cases needing Physical Therapy/Rehabilitation in the Hospital.
2. Receive referrals from clinical departments and units such as Surgery/ Trauma/ spinal, Medicine/Neurology, O&G, Paediatrics, Oncology/Palliative Care and from neighboring states such as Niger, Kaduna, Nasarawa and Kogi.
3. Direct registration of clients for Physiotherapy after due registration in the hospital.
4. Training and Mentoring of Interns Physiotherapists; students on Industrial Attachment and on Clinical Affiliation.

4.0 ACHIEVEMENTS

1. The 2022/2023 Interns assumed duty early in the year.
2. Full integration of Locum staff to our workforce.
3. The number of permanent staff rose to 15 and 2 new Locum staff as at close of 2023.
4. The department was privileged to also benefit from the adjusted resumption date for the successful 2023/2024 set of Interns.
5. Occupational Therapy that has been approved to be a unit under Physiotherapy received a nod to submit request for some equipment.
6. Incorporation of the Department into the Health-in-the-Box (paperless) policy.
7. Two staff were promoted in the year under review.
8. 2 staff were released to attend Annual Conference/Scientific seminar.
9. A physiotherapist and an intern were recipient of the 2023 Annual Staff Award
10. Total number of patients managed was over 8,000.

4.0 CHALLENGES

- Inadequate Physiotherapy Equipment.
- Lack of office space and office equipment

5.0 FUTURE PLANS

- Changing of all wooden structures/ partitioning in the department.
- Procuring Short Wave Diathermy Machine and Electrical Muscle Stimulating Machine.
- Additional manpower so as to have Physiotherapists dedicated to I.C.U, Geriatrics, Community Physiotherapy, Casualty and other emerging sub- specialties.
- Adjustable couches.
- Provision of offices and office equipment.
- Construction of Ultra-Modern Physiotherapy department with Hydro-Therapy Pool.

Mr. Solomon Babadiya
Head of Department



**Dr Samson Olori and Team Operating at the New Theater Suite
Equipped by KidsOR and Smile Train at the Aisha Muhammadu
Buhari Trauma Center**

DEPARTMENT OF RADIOLOGY

1.0 INTRODUCTION

The Department of Radiology is headed by a Consultant Radiologist who oversees all the units of the department and reports to the Chairman, Medical Advisory Committee.

2.0 STAFF STRENGTHH

• Consultant Radiologists	-	10
• Resident Doctors	-	10
• Imaging Scientists (Radiographers)	-	10
• X- Ray Technician	-	2
• Scientific officer	-	2
• Dark room Assistants	-	1
• Intern Radiographers	-	3
• Nurses	-	3
• Corps Members	-	2
• Store officer	-	1
• Clerical officer	-	5
• Secretary	-	2

3.0 STRUCTURE OF THE DEPARTMENT

The Department comprises of the following interdependent units.

- X ray Routine Imaging Unit.
- Ultrasound Unit with Doppler Facilities.
- Darkroom Unit.
- Digital/Mobile Unit.
- Special X-ray Procedures Unit.
- Reporting.
- Computed Tomography Scan Unit.
- Mammography Machine Unit.

4.0 ACTIVITIES

MONDAYS: REPORTING (MAMMOGRAPHY & CONVENTIONAL FILMS) AND COMPUTED TOMOGRAPHY SCAN.

TUESDAYS: I.V.U/MCU/RUG ROUTINE X RAYS, GENERAL & SPECIAL ULTRASOUND, REPORTING (MAMMOGRAPHY & CONVENTIONAL FILMS) AND CT SCAN.

WEDNESDAYS: I.V.U /MCU/RUG, ROUTINE X RAYS GENERAL & SPECIAL ULTRASOUND, REPORTING (MAMMOGRAPHY & CONVENTIONAL FILMS) AND CT SCAN.

THURSDAYS: HSG, ROUTINE X RAYS, GENERAL & SPECIAL ULTRASOUND, REPORTING (MAMMOGRAPHY & CONVENTIONAL FILMS) AND CT SCAN.

FRIDAYS: UPPER AND LOWER GI SERIES (CONTRAST MEAL, SWALLOW AND ENEMA), ROUTINE X RAYS, REPORTING (MAMMOGRAPHY & CONVENTIONAL FILMS), CT SCAN AND GENERAL & SPECIAL ULTRASOUND SERVICES.

SATURDAYS: EMERGENCIES/CALL DUTIES IN ALL OUR SERVICES (X-RAY, ULTRASOUND, FLUOROSCOPY AND CT SCAN).

SUNDAYS: EMERGENCIES/CALL DUTIES IN ALL OUR SERVICES (X-RAY, ULTRASOUND, FLUOROSCOPY AND CT SCAN).

The Department successfully provides 24hours services to patients and Emergencies. Ward Radiography is also very functional with mobile x-ray Machines and emergency to patient in Infectious Disease Centre.

5.0 ACADEMIC ACTIVITIES/TEACHING

1. Weekly seminar with Resident Doctors.
2. Lectures/Teaching of Resident Doctors by Consultants.
3. Radiographers' weekly seminar.
4. Lectures for Physics students by Radiographers.

TRAINING

1. The Department Trains Junior and Senior Residents for membership and fellowship examinations of National Postgraduate Medical College and West African College of Surgeons.
2. Training of undergraduate Physics students on SIWES experience. Six (6) students from various Universities across the country were trained in the year under review.
3. Training of undergraduate Radiography students on clinical attachment. Four (4) of such students from various Universities across the country were trained in the year under review.
4. Training of undergraduate Human Anatomy students on clinical attachment. Two (2) of such students from various University across the country were trained in the year under review.
5. Training of Intern Radiographers Three (3) of such interns benefited from the training, across the country were trained in the year under review.

6.0 PATIENTS' STATISTICS

The total number of patients received during the year: 82,866.

From the statistics, the Department records high turnover compared to the previous year. largely due to acquisition of a new static x-ray machine in the previous year and continuous uninterrupted service delivery in the absence of resident and health workers strike in the year under review.

7.0 ACHIEVEMENTS

In the year under review, a lot of achievements were recorded.

1. More equipment.
2. More personnel
3. Restoration of Dosimetry services for selected staff monitoring against radiation.
4. 2 Resident Doctors successfully passed their part 1 WACS & NPMCN in the year under review.
5. 3 staff (an X-ray Technician, a Scientific officer & a Radiographer) was promoted.

Award/Honours:

Two (2) staff of the department were honoured with the End of the year awards as best staff for 2023.

Equipment

The following equipment were procured, and we appreciate the efforts of the Management for that.

- a) A new static GE X-ray machine in Room 3.
- b) GE 4D Colour Doppler Ultrasound machine in Trauma Centre.
- c) One Mobile X-ray unit in Infectious Disease center.

Personnel:

- One Dark-room Technician was employed.
- Two consultants were employed.
- Annual recruitment of 3 Interns Radiographers.
- Two Youth Corps member were posted to the Department to complement the secretarial work.
- Radiation Safety Committee was constituted but yet to be inaugurated.
- Two Technicians were retired from the service under the year under review.

7.1 IMPROVEMENT IN QUALITY OF SERVICE

The quality-of-service provision has drastically improved. Patient waiting time has reduced both for X-ray services, film reporting and ultrasound.

The Department also responded well and effectively handled EMERGENCY services in the hospital.

8.0 CHALLENGES

1. Lack of Magnetic Resonance Machine in the hospital.
2. Insufficient office space for some of our senior staff.
3. Lack of CT machine in the hospital.
4. The office furniture are obsolete, worn-out and broken.

9.0 FUTURE PLANS/RECOMMENDATIONS

1. Procurement of MRI machine and CT-Scan machine.
2. Procurement of Fluoroscopy machine.
3. Replacement of old furniture at the reception and in the offices
4. Employment of more Resident Doctors and Radiographers.
5. To attain full accreditation of the West African College of Surgeons.

10.0 CONCLUSION

The Department appreciates the Management for the acquisition of a new digital x-ray machine and installation of Picture Archiving, and Communication System (PACS) in the department.

Dr. Kolade-Yunusa H. O.
Head, Department of Radiology



Newly Procured Neurosurgical Operating Microscope (Zeiss)

DEPARTMENT OF SURGERY

1.0 INTRODUCTION

The year, 2023 under review the department experienced an increase of its activities generally in all areas of its clinical endeavours because of decreased global effects of the COVID-19 pandemics. The department is headed by Dr. Amina Abubakar (Acting capacity). The outpatient, inpatient and operative services recorded an upsurge of the number of patients. Under listed are some of the achievements and challenges during the year review.

2.0 STAFF STRENGTH

1. Consultants: Total	28
- Honorary,	11
- Hospital,	17 (2 on leave of Absence)
2. Residents	31
- Senior Registrars	21
- Hospital	6
- Supernumerary	15
- Registrars	10
3. Nurses	66
4. Secretariat	
- Departmental Secretary	1
- Clerical officer	1
5. Medical Record officers	2

3.0 ACTIVITIES

The Department consists of five divisions and each division subdivided into subspecialties as follows:

- General Surgery division:** Oncology unit, Hepatobiliary unit, Breast and endocrine unit, and Gastrointestinal unit
- Paediatric Surgery division:** Paediatric Urology and Paediatric Colorectal units
- Urology Divisions:** Team A and Team B.
- Neurosurgical division
- Plastic and reconstructive division.

Each of these units of divisions had their days of outpatient clinics, Ward rounds, Call duties and Theatre sessions. We also had undergraduate and postgraduate programs every week.

4.0 ACHIEVEMENTS

- Successful conduct of the Part1 membership and Part 11 Fellowship examinations of the West African College of Surgeons in April 2023 and October 2023.
- Organized West African College of Surgeons revision course Mock examinations.
- Organized the Basic Surgical Skill Course.
- The Department produced seven (7) new Fellows.

5.0 CHALLENGES

- Lack of accommodation for New outpatient.
- Call rooms for Senior Registrars (Female Senior Registrars).
- Expansion of Surgical Outpatient Department.

6.0 FUTURE PLANS

1. To have a Day case surgery at the burns theatre at the Trauma Centre.
2. To have an expanded clinic spaces for new out-patient care.
3. Renovation of Surgical Outpatient Clinic and Wards.
4. To have a Post Basic Burn Nurse Training Centre.
5. Oncology Training Fellowship under WACS.
6. Advance Surgical Skill Training Centre.

Dr. Amina Abubakar I.
Ag. Head of Surgery



The WACS Accreditation team members visit to the Department in a group photograph with the Hospital Management

NATIONAL HEALTH INSURANCE AUTHORITY (NHIA) UNIT

1.0 PREAMBLE

The NHIS Unit is headed by a Consultant Family Physician who oversees the daily activities of the unit and reports to the CMAC. The unit coordinates the activities of the Health Insurance Scheme in the Hospital. It attends to enrollees under the National Health Insurance Authority (NHIA), Federal Capital Territory Health Insurance Scheme (FHIS) and Private Health Insurance. In addition, it attends to members of staff of companies/organizations under medical retainership with the hospital. The activities of the unit are carried out in accordance with the National operational guidelines of the NHIA which cut across primary, secondary and tertiary levels of health care.

2.0 STAFF STRENGTH

1.	Family Medicine	-	36
2.	Nursing	-	12(including 1 CHEO)
3.	Pharmacy	-	6 (including 2 Interns)
4.	Administration	-	21 (Including 4 Corps Members)
5.	Accounts	-	14 (Including 4 Corps members)
6.	Health Information	-	3

3.0 ACTIVITIES/FUNCTIONS

For ease of operation, the unit activities are segmented into five (5) sections as follows: -

1. Clinical Section

The Unit renders various levels of healthcare services to her registered enrollees through the NHIS/GOP clinics. These services are undifferentiated and include:

- Outpatients medical care within the confine of General medical practice/Family medicine to her primary and external (referred) enrollees.
- In patient care in the GOPD observation Room and wards.
- Simple surgical procedures.
- Specialty care upon referrals to other specialists' clinics.

2. Pharmacy Section

- Maintained safe dispense practice and procedure.
- Dispensing of drugs and counseling of patients on how to use their drugs.
- Identifying and resolving drug therapy problems.
- Drug information, education, monitoring and inventory management.
- Training of interns.

3. Administrative Section

- Confirmation of enrollees on the current NHIA/FHIS register after proper identification.
- Provision of Service Rendering Forms to both Primary and Secondary patients.
- Liaise with HMO's for generation of authorization codes for secondary/tertiary care.
- Retrieval and sorting of the service Rendering forms for Billings.
- Liaising with the NHIA and FHIS offices for the updated list of enrollees.
- Ward rounds to ensure that enrollees on admission have approval codes for admission and to address any complaints they may have regarding their health insurance.

4 Health Information Section

Activities in this section include: Filing and retrieval of case folders; Documentation and registration of patients; Record visit, folder movement amongst others.

5. Account section

This section is responsible for the Preparation and distribution of bills; Reconciliation of bills with various HMOs; Patient Invoicing; Discharging of NHIA Patients.

3.0 ACHIEVEMENTS/NUMBER OF PATIENTS

1. In view of the quality of services rendered to enrollees by the hospital through the NHIS Unit, enrollees and HMO's are continually attracted to our facility resulting to the retention of enrollees and HMOs. At present, the total number of HMOs collaborating with the hospital stands at 47. Our services had also attracted a retainership agreement with Central Bank of Nigeria (CBN), Zenith Bank PLC and African Natural Resources and mines limited, Transmission Company of Nigeria (TCN)- Abuja Operation Region is at the concluding stage of retainership agreement with the hospital.
2. There is however an increase in the number of enrollees under NHIA and FHS from 39,974 in 2022 to 40,594 in 2023.
3. Creation of a second outlet for generation of approval codes. This has significantly improved service delivery to our enrollees.
4. Decentralization of the NHIS pharmacy.
5. Face-lift of NHIS pharmacy.
6. Increased availability of medications at NHIS pharmacy.

4.0 CHALLENGES

1. Inadequate manpower in the Unit.
2. Inadequate funds to meet the growing needs of the Unit.
3. Inadequate office equipment e.g laptops and other electronic systems.
4. Delay in the Turn-Around-Time in the issuing of authorization codes by some HMOs thus increased patients' waiting time.

5.0 FUTURE PLANS

- To significantly reduce enrollees' waiting time in accessing care in our facility.
- Deployment of more staff to the unit.
- Provision of more computers and smart phones for the unit.

6.0 CONCLUSION

The unit sincerely appreciates the hospital management for the support received in the year under review. We humbly solicit for continued support in 2024 and beyond.

Dr. Rukayat Abdulkareem
Co-ordinator, NHIA



**Engr. Bala Mangut, HOD Works & Engineering (middle),
Receiving the Best Staff Award from the Chairman, CCMDs Prof.
Emem Bassey, Supported by Prof Ahmed Ahidjo, CMD, UMTH,
Maiduguri, at the 2023 UATH Annual Staff Award Ceremony.**

SCHOOL OF POST BASIC CRITICAL CARE NURSING

1.0 INTRODUCTION

The year 2023 started on a good note with the resumption of our students from their Christmas and New year holiday. Their lectures started with commitment and vigor from both the internal and guest lecturers.

2.0 STAFF STRENGTH

The school started the year with a total of 8 academic staff and 2 administrative staff, though one academic staff was added from the clinical area to serve as a clinical instructor. The school now has a total of 9 academic staff.

Support Staff: The school have one gardener and 2 cleaners. One hey see to the cleanliness of the school environment.

The school also has security personnel guiding both the hostel and the school all-round the clock. They are from the hospital contracted security outfit.

3.0 ACTIVITIES

The school is saddled with the responsibility of producing quality critical care nurses who are registered with the Nursing and Midwifery Council of Nigeria (NMCN). Therefore, our core activity/responsibility is teaching of these students using the State-of-the-Art Infrastructures and methods.

- The students had their lectures as at when due. They had their first-semester examinations in January, second-semester examination in April and hospital final examination in July. The NMCN final qualifying examination for the students which signaled the end of their program was held in November. The result was released in December with 84.21 per cent passes from a total of 57 students (50 regular students, 6 refreshers students and 1 resear student) that sat for the examination. This final qualifying examination was a Computer-Based Test (CBT) examination which took place outside the school premises, at the NMCN-designated CBT centre in Gwarinpa; and Computer Aided Objective Structured Clinical Examination was conducted at the College of Nursing Sciences, Gwagwalada.
- The students also had series of clinical postings to our hospital here and National Hospital, Abuja in the Critical Care unit, Special Baby Care Unit, Dialysis Unit and the Theatre
- **Sales of Forms and Admission:** The school commenced her sales of entrance examination forms in February, conducted the exams in May and the new students resumed in November. Their resumption signaled the commencement of a new academic session.

4.0 ACHIEVEMENTS:

- With the recent restructuring efforts of the Nursing and Midwifery Council of Nigeria to see that all Nursing training schools are either affiliated or assimilated into the University; the School has opened a line of discussion with the Faculty of Nursing and Allied Health Sciences to affiliate the Critical Care Nursing program to the University of Abuja. The process is at an advanced stage.

5.0 CHALLENGES

- Inadequate hostel space to accommodate students. This is due to increase in the quota of students. Therefore, the school is soliciting with the Management to upgrade the school hostel accommodation capacity to 50 students.
- There is the need to have a well-equipped simulation laboratory with a state-of-the-art high-fidelity mannequin.

6.0 FUTURE PLANS

- The Nursing and Midwifery Council of Nigeria has changed the final qualifying examinations to Computer Based Test (CBT) and has therefore mandated all the schools to also change all the internal examinations to CBT. The school is therefore soliciting for the building of a new CBT centre (at least 70-seater capacity equip with the state-of-the-art facilities) for the school where our students will be having their continuous assessments and examinations.
- With proposed affiliation with the University of Abuja, which is already in progress, the school plans to be training prospective students in Post Graduate Diploma in Critical Care Nursing (PGDCCN); Masters of Critical Care Nursing (M.CCN) and Doctor of Critical Care Nursing (D.CCN).

**Mrs. Joy Anyo Egbunu,
The School Coordinator.**



**Students of Set 26 Post Basic Critical Care Nursing
in a Group Photograph with UATH Management.**



STAFF AWARD FOR THE YEAR 2023

**BEST DEPARTMENT/UNIT:
EMERGENCY PEDIATRICS UNIT (EPU)**

**BEST NGO:
MÉDECINS SANS FRONTIERES (MSF)
(Doctors Without Borders)**



ENGR. BALA MANGUT
BEST STAFF

 DR. IGBITI OMOKHGBE JUSTICE MEDICINE	 DR. UDOH ARIT SURGERY	 DR. SAMBO TSITERMAM THOMAS O&G	 DR. AGWINDU LINUS NKOSI OPHTHALMOLOGY	 DR. WILLSON EHI AMUTA FAMILY MEDICINE	 DR. NNENA OJI COMMUNITY MEDICINE	 DR. AMARACHI IBE ANAESTHESIA	 DR. AKWU NOAH E.M.T	 DR. WILLIAM JONAH DENTAL MAXILLOFACIAL
 DR. TSAV MENSAH SETH RADIOLOGY	 DR. SHOLA IBRAHIM PAEDIATRICS	 DR. BELLO JOSEPH PATHOLOGY	 DR. AFAMEFUNYA ONYEGULU HOUSE OFFICER	 KUMBET MOSES MENTAL HEALTH	 OGBAJI ESTHER MEDICINE	 PIUS SAMSON SURGERY	 OGBOLE SALOME FAMILY MEDICINE	 ADAMU SALOME ANAESTHESIA
 UMAR HAFSAT E.N.T	 ALFRED JANET THEATRE (PERIOPERATIVE)	 NYITSE BENEDICTA OPHTHALMOLOGY	 OGENE ONOLU PAEDIATRICS	 OYEDIRAN VICTORIA O & G		 SAMBO NAOMI QUALITY IMPROVEMENT UNIT	 SARATU HASSAN ORTHOPAEDICS & TRAUMA	 EMMANUEL MAMUDU NURSING, BURNS & PLASTIC
 ABALIKE AMINA MERCY ENDO CENTRE (MEDICINE)	 ATAWA IBRAHIM BLAKWALA INTERN NURSE	 SAFIYA ADAMU RADIOLOGY/TECHNICIAN	 ONAH CHINENYE PRISCILLA LAB SCIENTIST	 BEM LIM BEN LAB TECHNICIAN	 OHAGWAM CLINTON LAB INTERN	 YAMSAT AARON PHYSIOTHERAPY	 UYAEBO CHEKWUBE PHYSIOTHERAPY INTERN	 MOHAMMED ZAKARI DENTAL TECHNOLOGIST
 ZAINAB A. GALADIMA PHARMACIST	 RUKKAYA SANI PHARMACY INTERN	 LYDIA SAMBE HEALTH INFORMATION	 OKUSUN NKECHI PATIENCE ADMINISTRATION	 YAHAYA AUDU ADMINISTRATION	 AMINU F. RUTH FINANCE AND ACCOUNTS	 YAKUBU A. EDICHA PROCUREMENT	 OGBU CHIDERA DIETETICS	 AKINWALE ISAAC WORKS AND MAINTENANCE
 IFEOMA CHIJOKE AUDIT	 SHUIBU GIDADO GIREI ICT	 JOY KAURA PUBLIC RELATIONS	 GLADYS ISHABOR AMENITY	 NIMMWEL FELIX CROWN SECURITY	 AHMED DAUDA ICON	 RACHEL YAHAYA OCHIA	 AISHA UMAR DARAZO NYS MEMBER	 MR. NATHAN ELIAS CMD'S SPECIAL RECOGNITION

WINNERS OF THE 2023 STAFF AND CORPORATE MERIT AWARDS.

WINNERS OF THE 2023 STAFF MERIT AWARDS

SN	NAME	DEPARTMENT
PHYSICIANS		
1	DR. IGBITI OMOKHGBELE JUSTICE	MEDICINE
2	DR. UDOH ARIT	SURGERY
3	DR. SAMBO TSITERMAN	O & G
4	DR. AGWNDU LINUS NKOSI	OPHTHALMOLOGY
5	DR. WILLSON EHI AMUTA	FAMILY MEDICINE
6	DR. NNENA OJI	COMMUNITY MEDICINE
7	DR. AMARACHI IBE	ANAESTHESIA
8	DR. AKWU NOAH	ENT
9	DR. WILLIAM JONAH	DENTAL MAXILLOFACIAL
10	DR. TSAV MENSAH SETH	RADIOLOGY
11	DR. SHOLA IBRAHIM	PAEDIATRICS
12	DR. BELLO JOSEPH	PATHOLOGY
13	DR. KUMBET MOSES	MENTAL HEALTH
14	DR. AFAMEFUNYA ONYEGULU	BEST HOUSE OFFICER
NURSES		
15	OGBAJI ESTHER	MEDICINE
16	PIUS SAMSON	SURGERY
17	OGBOLE SALOME	FAMILY MEDICINE
18	ADAMU SALOME	ANAESTHESIA
19	UMAR HAFSAT	ENT
20	ALFRED JANET	THEATRE (PERIOPERATIVE)
21	NYITSE BENEDICTA	OPHTHALMOLOGY
22	OGENE ONOLU	PAEDIATRICS
23	OYEDIRAN VICTORIA	O&G
24	NIMLAN RUTH	ICU
25	SAMBO NAOMI	QUALITY IMPROVEMENT UNIT
26	SARATU HASSAN	ORTHOPEADICS & TRAUMA
27	EMMANUEL MAMUDU	NURSING, BURNS/PLASTIC
28	ABALIKE AMINA MERCY	ENDOCRINE CENTER
29	GLADYS ISHABOR	AMENITY
30	ATTAWA IBRAHIM BLAKWALA	BEST INTERN NURSE
OTHER DEPARTMENTS		
31	SAFIYA ADAMU	IMAGING SCIENCE RADIOGRAPHY
32	ONAH CHINENYE PRISCILLA	LAB. SCIENCE
33	BEM LIM BEN	LAB. TECHNICIAN
34	OHAGWAM CLINTON	BEST LAB. INTERN
35	YAMSAT AARON	PHYSIOTHERAPY
36	UYAEBO CHEKWUBE	BEST PHYSIOTHERAPY INTERN
37	MOHAMMED ZAKARI	DENTAL TECHNOLOGY
38	ZAINAB A. GALADIMA	PHARMACY
39	RUKKAYA SANI	BEST PHARMACY INTERN
40	LYDIA SAMBE	HEALTH INFORMATION
41	OKOSUN NKECHI PATIENCE	ADMINISTRATION
42	YAHAYA AUDU	ADMINISTRATION
43	OMINU R. RUTH	FINANCE AND ACCOUNTS
44	YAKUBU A. EDICHA	PROCUREMENT
45	OGBU CHIDERA	DIETETICS
46	AKINWALE ISAAC	WORKS AND ENGINEERING
47	IFEOMA CHIJOKE	AUDIT
48	SHAIBU GIDADO GIREI	ICT
49	JOY KAURA	PUBLIC RELATIONS UNIT
50	NIMMYEL FELIX	CROWN SECURITY
51	AHMED DAUDA	ICON
52	RACHEL YAHAYA	OCHIJA
53	AISHA UMAR DARAZO	NYSC MEMBER
54	MR. NATHAN ELIAS	CMD'S SPECIAL RECOGNITION
55	ENGR. BALA MANGUT	BEST STAFF OF THE YEAR 2023

Corporate Award Winner: Medecins San Frontieres (MSF) 'Doctors Without Borders'

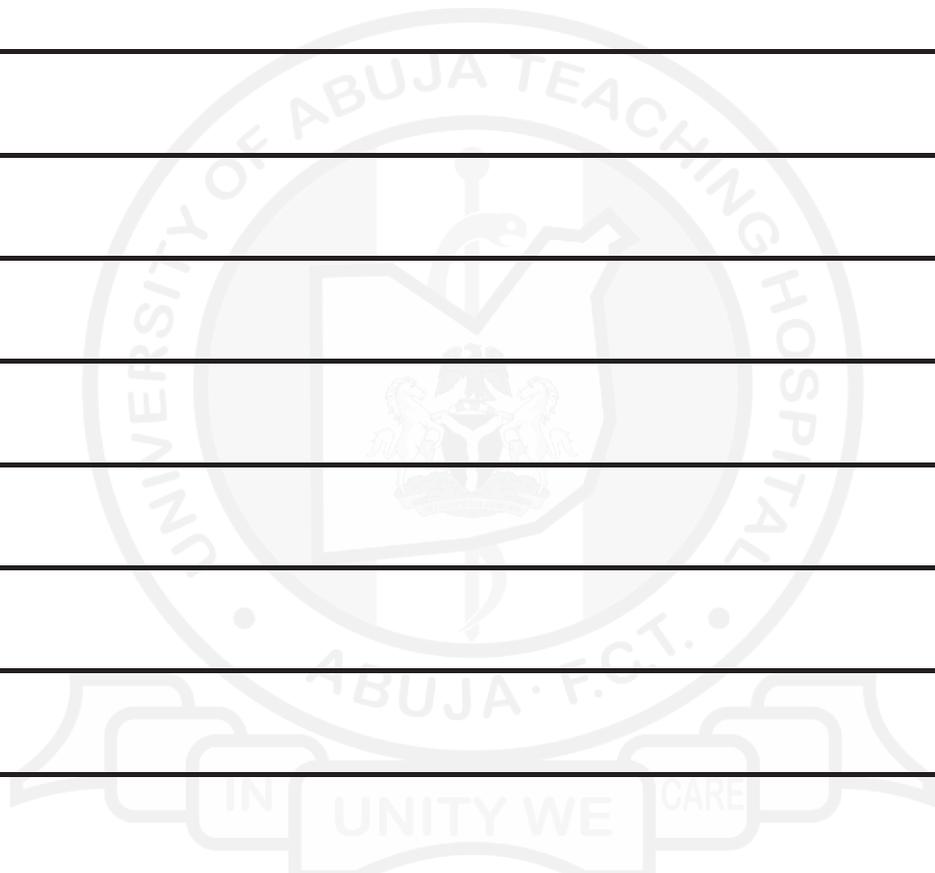
**COORDINATING MINISTER OF HEALTH & SOCIAL WELFARE
WITH CMDS AND MDS AT THE 2023 ANNUAL GENERAL MEETING
HOSTED BY UATH, GWAGWALADA.**



TWO UATH RESIDENT DOCTORS (DR AMINA BUBA AND DR ABIOLA ADEJUMO) WON WACS PRIZES IN 2023.



NOTES





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