



UNIVERSITY OF ABUJA TEACHING HOSPITAL, GWAGWALADA, ABUJA, NIGERIA_U



2021 ANNUAL REPORT



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

2021
ANNUAL
REPORT



UNIVERSITY OF ABUJA TEACHING HOSPITAL GWAGWALADA, ABUJA.

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

MUHAMMADU BUHARI, GCFR



Dr. Osagie Emmanuel Ehanire

Honourable Minister of Health



Dr. Adeleke Olorunnimbe Mamora

Honourable Minister of State for Health



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



Mrs. Modupe K. Adebajo
Director of Administration and Secretary



Hajia Abu S. Fawa
Representative of Public Interest



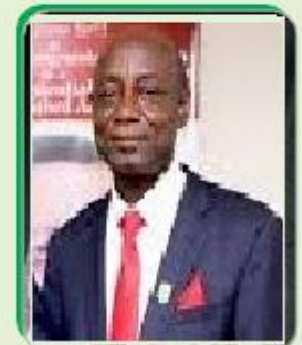
Mrs. Omobola A. Yusuf
Representative of Public Interest



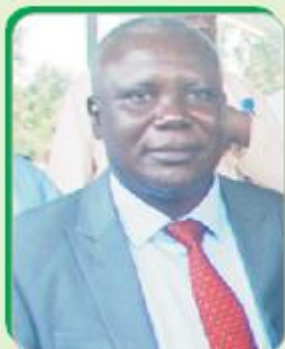
Mr. Chiagozie Ahanonu
Representative of Public Interest



Dr. Sam Sam Jaja
Chairman



Dr. Joseph Amedu mni
Representative of Federal
Ministry of Health



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



Dr. Bob Ukonu
Chairman, Medical Advisory Committee,
University of Abuja Teaching Hospital



Prof. Ekundayo S. Garba
Provost, College of Health Services,
University of Abuja



Prof. Felicia Anumah
Representative of Senate,
University of Abuja



Dr. Abubakar Ahmadu
Representative of Host Community



Dr. Solomon Avidime
Representative of Nigeria
Medical Association



Dr. (Mrs) Olufunke Ajiboye
Representative of Joint Health Sector Unions
and Assembly of Health Care Professionals

MEMBERS OF TOP MANAGEMENT COMMITTEE

UATH 2021 ANNUAL REPORT



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



Dr. Bob Ukonu
Chairman, Medical Advisory Committee



Mrs. Khadijat Modupe Adebajo
Director of Administration



Mr. Nimfa Zwalbong
Head, Finance & Account



Mrs. Nneoma Agulanna
Head, Internal Audit



Dr. Terkaa Atim
*Deputy Chairman, Medical
Advisory Committee, Clinical*



Dr. Kudirat Olateju
*Deputy Chairman, Medical Advisory
Committee, Research and Training*



Engr. Bala Mangut
Head, Works/Engineering



Mrs. Lydia Chukwu
Head of Nursing Services



Pharm. Muhammed Garbā
Head of Pharmacy



Mr. Yusufu Hassan
Secretary to Committee

2021 TABLE OF CONTENTS

• Vision and Mission -----	ii
• Members of the Board-----	iv
• Top Management Committee-----	v
• Table of Contents -----	vi
• Forward-----	vii
• Office of the Chief Medical Director-----	1
• Department of Finance & Accounts -----	2
• Internal Audit Unit-----	4
• Procurement Unit -----	6
• Public Relations/Corporate Affairs Unit -----	8
• Security Services -----	10
• SERVICOM Unit -----	12
• Department of Works and Engineering -----	15
• Directorate of Administration-----	24
• Office of the Chairman, Medical Advisory Committee/Directorate of clinical services	40
• Department of Anaesthesia and Intensive Care -----	41
• Department of Chemical Pathology-----	46
• Department of Community Medicine -----	47
• Department of Dental and Maxillofacial Surgery -----	55
• Department of Nutrition and Dietetics -----	58
• Department of Otorhinolaryngology (ENT) -----	61
• Department of Family Dentistry -----	65
• Department of Family Medicine-----	67
• Department of Haematology and Blood Transfusion-----	69
• Department of Health Information Management -----	72
• Department of Histopathology -----	77
• Infectious Disease Centre (IDC)-----	79
• Department of Internal Medicine -----	81
• Department of Medical Library-----	86
• Department of Medical Social Services-----	88
• Department of Mental Health -----	91
• Department of Microbiology and Parasitology-----	93
• Department of Nursing -----	96
• Department of Obstetrics and Gynaecology-----	98
• Department of Ophthalmology -----	101
• Department of Orthopaedics and Trauma-----	107
• Department of Paediatrics -----	110
• Department of Pharmacy -----	113
• Department of Physiotherapy-----	115
• Department of Radiology-----	117
• Special Treatment Clinic (STC)-----	121
• Department of Surgery -----	123
• National Health Insurance Scheme(NHIS) -----	125
• School of Post Basic Critical Care Nursing-----	127



FOREWORD

It is my pleasure to write the foreword of the 2021 Annual Report. The period under review was memorable in every facet as the hospital continued to grow rapidly despite the COVID-19 global pandemic, for numerous reasons as captured in the achievement sections of the various Units and Departments.

For instance, the First Lady, Dr. (Mrs.) Aisha Buhari was our guest to commission the state-of-the-art **Prof. Felicia Anumah Endocrine & Diabetes Center**, built and fully equipped by her office as an intervention center for the treatment of patients with endocrine disease in collaboration with the office of the Senior Special Assistant to the President on Sustainable Development Goals (SDGs). One of the many benefits of her visit to the hospital was a promise to assist the hospital with a Magnetic Resonance Imaging (MRI) machine which will be the first in our history as a Teaching Hospital. Other critical projects commissioned in the year include; the Research Molecular Laboratory and the 32-bed New Accident & Emergency Unit. The Ophthalmology Out-patient clinic was relocated to the Trauma Center (renamed after the First Lady), just as the constructions of the 64-bed Mental Health Block, Call Duty Block, and the Composite pathology building are ongoing.

Also, in the year under review, I was reappointed for a second tenure as the Chief Medical Director due to a successful first tenure. To God be the glory! We shall attain greater feats together going forward. As part of our efforts to keep our staff highly motivated and maintain our friends, Management graciously identified and recognized the most outstanding corporate entities and staff across Departments and Units during the UATH Merit Award day.

In the course of the Year 2021, the Board of Management approved the Promotion of 289 staff at both Senior and Junior cadres following their success at the promotion examinations. I say a big congratulation to them. Of important note also, were donations received from individuals and Corporate bodies such as MEDICAID Cancer Foundation, Okapi Children Foundation, Mainstream Energy Solution, Untold Story Behind the Story Foundation, Unique 38 RC Ladies, Nigeria Liquefied Natural Gas (NLNG), Nigeria Centre for Disease Control (NCDC), Aisha Children Foundation, AAA Memorial Foundation, and others to assist various categories of indigent patients and the hospital for effective and efficient healthcare delivery.

We would not have attained much without the guidance, counsel, and support of the Board of Management under the leadership of **Dr. Sam Sam Jaja (KSC)**. But despite the interventions, there are still challenges as variously documented by Units and Departments in this report. With more resources and judicious use of funds, we shall overcome some of the difficulties in the coming years.

Finally, I want to thank the team responsible for preparing this report for a job well done and the entire UATH staff for their dedication and support. To God be the glory!
Together, we will keep winning!

Professor Bissallah Ahmed Ekele,
Chief Medical Director/Chief Executive Officer.

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 5 personnel consists of a Senior Administrative Officer, a Confidential Secretary, 1 Program Analyst, 1 Senior Clerical officer and 1 Corps Member.

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
- Procurement
- Security
- SERVICOM
- Works and Engineering



PROF. FELICIA ANUMAH ENDOCRINE & DIABETES CENTER



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 reports to the Chief Medical Director.

The Hospital had a remarkable financial performance in the year 2021, a year that was characterized by a myriad of challenges.

Despite the 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.

On a general note, the Hospital achieved a respectable level of infrastructural development in the following areas:

- Construction of Mental Health Block.
- Construction of Call Duty Block.
- Construction of Composite Lab Block.
- Provision of Electronic Medical Record (EMR) through Health-in-a-Box project.
- Procurement of a new static X-ray Machine.
- Acquisition of three Dental Chairs, etc.

2.0 Staff Strength:

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

▪ Director of Finance & Accounts	-	1
▪ Deputy Director Finance	-	3
▪ Assistant Director Finance	-	3
▪ Chief Accountant	-	9
▪ Assistant Chief Accountant	-	4
▪ Principal Accountant	-	1
▪ Senior Accountant	-	10
▪ Accountant I	-	6
▪ Accountant II	-	7
▪ Chief Executive Officer (Accounts)	-	11
▪ Assistant Chief Executive Officer (Accounts)	-	5
▪ Principal Executive Officer I (Accounts)	-	3
▪ Principal Executive Officer II (Accounts)	-	7
▪ Senior Executive Officer (Accounts)	-	4
▪ Higher Executive Officer (Accounts)	-	2
▪ Executive Officer (Accounts)	-	3
▪ Chief Clerical Officer (Accounts)	-	3

3.0 ACHIEVEMENTS

1. Proper books of accounts were well maintained.
2. Prompt payments of monthly emoluments to staff.
3. Timely preparation and audited financial statements.



4. Timely preparation of Annual Budget Estimates.
5. Prompt release of funds to the relevant units of the hospital.
6. Suppliers are paid.
7. Health-in-a-Box full coverage of e-revenue collection.
8. Migration of staff to IPPIS platform.

4.0 CHALLENGES

1. There is need to create more office space.
2. There is need to update accounting manual.
3. Assets revaluation and fixed assets register need to be computerized.
4. Training of staff in the Department is necessary.
5. All the hard & soft wares in the department especially in Other Charges and Salary Units need replacement.
6. Overhead allocation to the hospital is inadequate.
7. Funding to pay Outsourced Services is still dwindling.
8. Settlement of Diesel suppliers to the hospital is still a challenge.
9. Payment to AEDC is eating deep into the Revolving Fund of the hospital.
10. There is need to procure more Utility Vehicles to the hospital.

5.0 FUTURE PLAN

1. Continuous monitoring and optimum performance of all Revenue Generating Departments or Units.
2. Zero-level revenue leakage.
3. Total computerization by Health-in-a-Box to increase Revenue to the hospital and encourage paperless health care delivery.
4. Ensure that all movable and immovable assets of the hospital are revalued and captured in the Fixed Asset Register.
5. Ensure a well-trained and motivated staff for efficient and prompt service delivery.
6. Negotiate with Budget Office of the Federation need to create a budget line for outsourced services for timely payment.
7. Ensure a systematic renovation of dilapidated hospital structures especially the wards.

Mr. Nimfa Zwalbong
Director of Finance & Accounts

INTERNAL AUDIT

1.0 INTRODUCTION

The Department is headed by a 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 Accountant (Audit) 1
- Chief Confidential Secretary 1
- Assistant Chief Accountant (Audit) 3
- Principal Executive Officer II (Audit) 1
- Senior Executive Officer (Audit) 1
- Higher Executive Officer (Audit) 2

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. Enforce maintaining and 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. The department concentrated to ensure value for money audit as such it was able to recover some funds from over payment of salaries to some staff.
4. Prompt retirement of cash advances by staff.
5. Rejection of short-dated drugs thereby reducing loss of funds through expired drugs.
6. 2021 awards to contractors were properly documented with respect to award letters/LPO and supplies done as per specifications.
7. Ensured corrections of discrepancies in health-in-the-box e.g total on the receipt to agree with the total in the system to avoid loss of funds.
8. Ensured that the relevant books of account were maintained and updated by the finance and other relevant departments.
9. Daily monitoring of revenue generated prompted proper recording and lodgment.
10. Effective pre and post auditing of all payment vouchers.
11. Introduction and effective use of audit progress register.



12. Together with the team of external auditors was able to verify the 2021 stock taking for immediate correction in accordance with the best practices.

5.0 CHALLENGES

1. Need to increase the workforce in the department especially with the current expansion in the hospital.
2. Need to participate in the supervision of the projects being done in the hospital.
3. Health-in-a-box do not update their records as at when due which makes it difficult for audit to assess their complete records e.g stock balance.
4. The staff skills and knowledge are not updated through training/workshop to enhance their performance to meet up with the current auditing practices.
5. It is difficult to carry out reconciliation on Integrated Personnel and Payroll Information System (IPPIS) since it is being handled by the office of the Accountant-general of the federation.
6. Difficulty to reconcile revenue generated by some departments due to poor record keeping.
7. 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.

Mrs. Nneoma A. Agulanna
Director (Audit)



PROCUREMENT UNIT

1.0 INTRODUCTION

The procurement unit is headed by an Assistant Director under direct supervision of the Chief Medical Director. It is staffed with two other experienced staff who have received the requisite basic Bureau of Public Procurement (BPP) training and one other supporting staff with a Program Analyst as the secretary. Two (2) NYSC members also work in the office.

2.0 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.

2.1. 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.

3.0 ACHIEVEMENTS

- i. The unit coordinated due processes for award of contracts for the procurement of capital projects such as construction works, medical equipment as well as office items at the specified period.
- ii. We also carried out routine procurement activities in various department/units of the hospital to enhance productivity/continuity.
- iii. A staff of BPP was invited for training of management/HODs/staff of the hospital on general procurement guidelines.
- iv. The management is appreciated for the slots given to two staff to attend BPP conversion training program in December 2021.

4.0 CHALLENGES

There is need for a secretary and office space to function maximally. Most user departments/units still have difficulties in understanding procurement processes, hence the need for Management to create opportunity to regularly carry out enlightenment on procurement procedures in compliance with BPP Act 2007.

5.0 FUTURE PLANS

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

6.0 CONCLUSION

The unit 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





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 Senior Administrative Officer in acting capacity who reports directly to the office of the Chief Medical Director.

2.0 STAFF STRENGTH

The unit has eleven (11) Staff

• Senior Administrative Officer	1
• Senior Information Officer	1
• Information Officer I	1
• Admin. Officer II	1
• Principal Executive Officer 1	1
• Principal Executive Officer II (information)	1
• Higher Executive Officers	2
• 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.

4.0 ACHIEVEMENTS

1. During the year under review, funds were released by the Management for the procurement of Public Relations jackets for easy identification of staff during major events.
2. Sustained the production and renewal of staff identification cards.
3. The UATH quarterly bulletin was also sustained throughout the year.

5.0 CHALLENGES

1. Inadequate office accommodation.
2. Radio and Television for monitoring news.
3. The need for a projector for presentation.

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. Befitting office complex as image maker to enable staff perform their function effectively.

Ajeka Micheal Atiga
Senior Administrative Officer/Ag. Head of Unit



Dr. Sam Sam Jaja, Board Chairman & Prof. Bissallah A. Ekele CMD, UATH at the commissioning of the Endocrine and Diabetes Center.



SECURITY SERVICES

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.

- Protective security within UATH
- Coordinating the security activities in UATH
- Liaison with other security agencies on matters of security interest to UATH
- Provision of security briefs/reports to the Chief Medical Director.
- Investigation of likely security breaches.
- Security awareness lectures to members of UATH Staff.
- Performing any other legitimate functions as may be directed by the Chief Medical Director or Top Management Committee (TMC).

4.0 ACHIEVEMENTS

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

- Restructuring the security modus operandi (method of operation) by dividing the hospital complex into sectors (1-8) for easy security command and control.
- Intensive professional security training of operatives.
- Conduct of UATH Security survey.
- Co-ordination of the installation of close circuit television (CCTV) in UATH at areas prompt to security breach.
- Creation of enabling environment for synergy between the UATH department of security and other sister security agencies operating within Gwagwalada and environs.
- Recruitment of additional manpower of ten (10) security staff



- g. Creation of new administrative structure to Crown Continental security staff to enhance effective performances:
 - i. Manager administration
 - ii. Manager operations
 - iii. Sector commanders
 - iv. Supervisor investigation
 - v. Supervisor surveillance
 - vi. Supervisor quick response team
- h. Production of UATH Staff Tag and Visitor's Tag for the Admin building.

5.0 CHALLENGES

- a. Inadequate manpower.
- b. Lack of security gadgets for easy communication amongst security staff such as metal detectors for searches of persons, vehicles and luggage's.
- c. Porous UATH perimeter fence
- d. Inadequate CCTV coverage within UATH complex.

6.0 FUTURE PLANS

- a. A wider CCTV coverage to include all car parks, main gate, Trauma Centre, and the new Medical A & E.
- b. Unarmed combat and proactive security training for security staff.
- c. Mobile/Static surveillance training and firefighting drill for the security staff and other departmental/unit staff.
- d. Change of vehicle's gate pass to a more secured one embedded with security features.

Major Usman Aliyu (Rtd)
Chief Security Officer

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 being 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 8 and 2 Youth Crops members that cover a 24-hour shift.

3.0 ACTIVITIES

- The Unit receives complaints of Service failure and promptly respond by ensuring complainants grievances are addressed promptly and satisfactorily.
- Provides a comprehensive and effective training for frontline and other staff on customer relations and other matters, which aids service delivery.
- Conducts client satisfaction surveys after which interactions are made with supervisors and frontline staff in a bid to improve service delivery.
- Observe and reports service failures as well as recommend to Management ways to improve better service delivery.
- Organizes the Annual Staff Awards.

4.0 ACHIEVEMENTS

- The Unit received several written and verbal complaints from clients. These complaints were promptly handled to the satisfaction of the complainants.
- The Staff Award for the year was held on the 16th of December 2021 with dignitaries and staff in attendance. A total of fifty-seven (57) staff and eight (8) Non-Government 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

- Limited opportunity for staff trainings and attendance of conferences organized by Servicom for improvement in knowledge and skills relating to service improvement.

6.0 FUTURE PLANS

1st Quarter, 2022

- Conduct an audit of service delivery in the Theater

2nd Quarter, 2022

- Conduct a client exit interview for ascertaining patient's satisfaction on services rendered and ways of improving services.

3rd Quarter, 2022

- Organize a Seminar/Presentation on the role of attitude of staff and team work at the work place for improved service delivery.

4th Quarter, 2022

- Organize the UATH Yearly Staff Award
- Initiate the Revision of the UATH Service Charter

Dr. Godwin Akaba

Nodal Officer/Head of Unit



Staff of School of Post Basic Critical Care Nursing displaying their Plaque: 2021 BEST DEPARTMENT AWARD

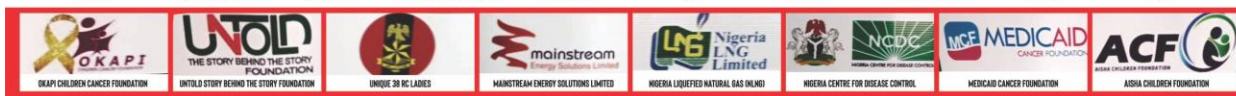


STAFF AWARD FOR THE YEAR 2021

BEST DEPARTMENT OF THE YEAR
POST BASIC CRITICAL CARE NURSING SCHOOL



 PROF. FELICIA ANUMAH BEST STAFF OF THE YEAR	 ELIZABETH CHINEDO UDEMEZIE NISC	 LOVETH ABALAKA COMMUNITY MEDICINE	 DOROTHY MASHOR PROCUREMENT	 WILLIAMS ISHAYA PHARMACY	 ESTHER DANIEL LABORATORY	 SUNDAY O. LAWAL FINANCE AND ACCOUNTS	 YAKUBU MU'AZU PHYSIOTHERAPY	 ABUBAKAR SANI PHYSIOTHERAPY (INTERNS)	
 PERPETUA CHIZOBA UDEN PAEDIATRICS	 ATTAN ABASHI YAKUBU HEALTH INFORMATION	 HADIZA HARUNA ANAESTHESIA	 OLORUNTIMHIN SIJI ICT	 DR. ADETOYIN OPEYEMI COMMUNITY MEDICINE	 MONDAY DARIUS DOGWO ADMINISTRATION	 MUSTAFA ONOKUS SULE PUBLIC RELATIONS	 ESTHER OJELADE CROWN SECURITY	 CHRIS ATABO MONDAY HEALTH INFORMATION	
 DR. ISHOLA IBRAHIM PAEDIATRICS	 GRACE ANI STEPHEN DIETETICS	 DR. AYGABA EBIKWO DENTAL AND MAXILLOFACIAL	 HELEN ONUH EXT	 DR. ATIM TERZUNGWE RADIOLOGY	 BETTY RIZAMA RADIOLOGY	 DR. VICTOR AMEN FAMILY MEDICINE	 GLADYS ISHABOR MEDICINE	 ALIYU JIMOH WORKS & MAINTENANCE	 JOY AIBE O&G
 JOYCE ATEJIOLA SURGERY	 JUBRIL NDAN DENTAL AND MAXILLOFACIAL	 KAUNA MADAKI OPHTHALMOLOGY	 PRINCE ONODUA LABORATORY (INTERNS)	 MARYAM MUSA ADMINISTRATION	 NURAINA TAIWO PHARMACY (INTERNS)		 POPTIP S. GAMBO AUDIT	 DR. SAMBO THOMAS D & G	 CHIDINMA ANIBOZIE LABORATORY
	 DR. RASHEED ALABI OPHTHALMOLOGY	 DR. PETER ONIPE ANAESTHESIA	 DR. HARBIB ZAIYAD INFECTIOUS DISEASE CENTRE	 BEULAH EKWUNIKE ADAEZE INTERNS NURSE	 CHINYERE ANEACHI ICM	 LAMI SHANWA SCIENCE	 DR. PRECIOUS MUKORO NURSE OFFICER	 RAMILA BODAM THEATRE	 DR. ELIZABETH OMOISULE EXT



2021 STAFF AWARDEES



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

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. Ensured 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. The department trains 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 Technologies, 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 unit carried out the following activities in the year 2021.

1. Installation of ceiling operating lamp with camera in Isolation Centre.
2. Installation of operating lamp in Eye theatre.
3. Installation of operating lamp in Theatre 2.
4. Installation of 150ltrs Autoclave in CSSD.
5. Installation of Mobile X-ray Machine in Isolation Centre.
6. Installation of Digitizer in Isolation Centre.
7. Installation of ICU beds in Isolations Centre.
8. Installation of ECG Machine in Isolation Centre.
9. Installation of 7.5Litres Autoclave in Burn unit.
10. Installation of Anaesthetic Machine in Main Theatre

5.3 Future Plans

The Biomedical team wish to see the reporting of fault 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 Chief Technical officer 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 six (6) 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. Relocation of 350KVA Maikano generator from isolation center to lab Substation.
2. Connection of Infectious Disease Center to 375KVA Top Class generator.
3. Installation of solar Lamps at IDC premises and Trauma Centre premises.
4. Rehabilitation of Electrical facilities in Medical Emergency unit.
5. Rehabilitation of electrical facilities in IDC.
6. Connection of the new Oxygen Plant at the trauma center to AEDC supply.
7. Creation of an improved dedicated earthing system and installation of power supply system for newly installed X-ray machine in Radiology department.
8. Installation of 1250A change over Switch at Admin substation.
9. Installation of 43 All - In - One Solar streetlights in the hospital quarters.
10. The unit successfully trained four (4) IT students during the year under review.

6.2 Future Plans

1. Provide centralized water heating in each ward.
2. Installation of 33KV breaker and panel for the hospital.
3. Bulk purchase of electrical consumables.



4. Provide professional electrical tool and equipment.
5. The management should consider training staff from the unit on modern technology in Electrical Engineering.
6. Installation of an isolator before the injection submission to reduce faulty clearing time on the injection substation in the hospital.
7. 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 eleven staff (9 permanent and 2 stipend staff).

7.2 Activities

The unit has recorded some level of achievement in the year 2021 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 stands, etc.
3. Connecting the new IDC centre to 375KVA generator.
4. Relocation of the Maikano 350KVA generator to laboratory department.
5. The 60KVA moved from Isolation Centre to PCR Lab.

7.3 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. The unit to be given a tricycle for easy distribution of diesel to the outlet generators.

8.0 BUILDING UNIT

The section is headed by the Chief Building Officer. The section has staff strength of 10 (Ten) members as follows; two Registered Builders, a town planner, four higher technical officers and two Artisans.

8.1 Activities:

1. Routine maintenance of building structures.
2. Supervision of capital projects (Buildings).
3. Coordination and supervision of all contracts relating to construction of buildings.
4. Building Renovation works.
5. Advise the Management on issues relating to building works.

8.1 Achievements:

1. Supervision of the construction of Endocrine Centre.
2. Supervision of construction of call duty block.
3. Reconstruction of soakaway.
4. Controlled of leakage in various area in the hospital and quarters.
5. Supervision of House Officers quarter for renovation work.
6. Construction of waiting area at the PCR laboratory.
7. Routine maintenance work.
8. Supervision of the construction of the Mental Health Building, Paediatric Oncology Block, Research Molecular Laboratory.
9. Supervision of POPD tile renovation work.
10. Supervision of the Construction of Pathology Laboratory.

8.2 Future Plan

- The staff needed to be trained for more efficiency and better productivity.

9.0 TELECOMMUNICATION UNIT

The communication 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 for the working of communication system in the hospital.

9.1 Activities

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



2. Installation and repair of intercom systems.
3. Carrying out preventive and breakdown maintenance on intercom system.
4. Repair and maintenance of power stabilizers.
5. Maintenance of all side wards and clinical televisions in the wards.
6. Maintenance of nurse call room systems in the wards.
7. 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. New Nurse Call systems in other wards.
3. The unit require a public address system.
4. Extension of intercom to IDC Department.
5. Extension of intercom to Prof. Felicia Anumah's Endocrine and Diabetes Center.

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 four (4) 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; Installation of air conditioners in the wards and offices, replacement of AC/Refrigerators compressors, evaporators and fan motors within the hospital and the staff quarters.

10.4 Future Plans:

Our future plan as a unit in Maintenance Department is 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 (a Technical Officer, a Water Pump Operator, two Plumber, four Craftsman, a Porter, and a Scientist).

11.1 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.

11.2 Achievements:

1. Installation of 2,000 litres overhead tank in in 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.

11.3 Challenges:

1. Lack of alternative source of power supply to pump water from boreholes from 4pm to 7pm, whenever there is power failure from AEDC as generator are powered by 7:00 pm.
2. Blockages in patients" toilet as result of patients using/dumping hard paper, pads and lab bottles in the toilet system which causes blockage.

12.0 QUANTITY SURVEYING UNIT

The unit is headed by a Principal Technical office (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/budgeting 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 ongoing Construction of Call Duty block.
2. Prepared Bills of Quantities/Tenders Documents for the ongoing Construction of Composite Pathology block.
3. Prepared Bills of Quantities/Tenders Documents for the ongoing Construction of Maternity.
4. Prepared Final accounts / Penultimate Valuation for the completed projects within the period under review.
5. Value and prepare interim payment certificate for various rehabilitation works within the period under review.
6. Participate in procurement Technical Evaluation Sub-Committees assignments within the period under review.
7. Prepared cost estimates for maintenance works within the period under review.
8. Supervisory roles on the various construction /renovation/repairs works generally.
9. Participated in general maintenance activities of hospital facilities.

13.0 RECOMMENDATIONS

Works and Engineering department needs additional junior staff especially in electrical, biomedical, refrigerator and air conditioning units.

- 1) Management should endeavour 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) Bulk purchase of electrical, plumbing, biomedical and refrigeration and air conditioning consumables and fittings will go a long way to attending to breakdown promptly.

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 for the development of facilities, structures and equipment.

In the year under review, the hospital has added four (4) building structures in the hospital, they are Call Duty Block (under construction), Composite Pathology Block (under construction), Endocrine Centre(completed), and Oxygen Plants(completed).

Engr. M.B. Mangut
Head of Department



**HANDING OVER OF CALL DUTY BLOCK SITE BY MANAGEMENT LED BY
CMD, PROF. B. A. EKELE TO THE CONTRACTOR, WILLS 2 GOOD SERVICES**



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 to 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. Legal Unit.
7. I.C.T.

The Department also oversees some units like Stores, National Health Insurance Scheme (NHIS) and the Clinical Secretariat.

The 2021 Annual Report of the Department is presented under each Division.

2.0 APPOINTMENT, PROMOTION AND DISCIPLINE/BOARD SECRETARIAT

The Division is headed by an Assistant 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 Chief Administrative Officer, Senior Administrative Officer, Administrative Officer II, Higher Executive Officer and Principal 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 145 interns and house officers were employed.
 - 149 were offered provisional appointments to various Departments.
 - 5 staff were accepted on transfer of service while 3 staff were released on transfer of service to other hospitals.
 - Prepare and processed the 2021 workforce planning which was approved by the Head of Civil Service of the Federation.
- 1. PROMOTION:** In the year 2021 28 junior staff and 261 senior staff were promoted.
 - 2. CONVERSION & UPGRADING:** Sixteen (16) staff who completed various types of training were converted and upgraded, 5 staff had lateral conversion ,24 staff were upgrade in the year 2021.
 - 3. UPGRADING/CONVERSION:** Eighteen (18) staff were upgraded, Six (6) officers were converted and 4 staff had lateral conversion in the year 2020.



2.3 CHALLENGES

1. Office equipment such as table, chairs, photocopier, file cabinet and UPS.

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
○ Assistant Director	1
○ Assistant Chief Admin Officer	1
○ Principal Admin Officer	2
○ Admin Officer II	1
○ Principal Executive Officer	1
○ Principal Confidential Secretary	1
○ Chief Clerical Officer	1
○ Corp Member	1
Total	10

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. Got approval for Training Policy.
2. Other proposals such as Staff Welfare Policy.
3. Organization of workshop for other hospitals to participate as a revenue generation drive are still being awaited.

3.4 Challenges:

1. Inadequate Office Space.
2. Inadequate Office Furniture such as table, chairs, photocopier, file cabinet etc.
3. 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 register our institution with NSITF as that will cover staff insurance policy.
3. To go digital in approving leave and conveyance of Management's decision to minimize the use of consumables.
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.
4. To follow-up our staff who are undergoing school programs

4.0 GENERAL ADMINISTRATION

The division is headed by Chief Administrative Officer – 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 & an Administrative Officer II 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 of Block No. 1 of the intern quarters following damages by rainstorm.
- d) Continuous allocation of staff quarters to Covid – 19 personnel.
- e) Continuous renovation and repairs of broken/blocked or leaking soak away in the quarter.

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 soakaway.
- c) An improved rate of response to routine needs of repairs or maintenance work in the quarters is needed.

4.1.7 Future Plan (Housing/Utility)

- a. Building of more accommodation for interns and house officers.
- b. Befitting secretariat for Housing Unit.
- c. Improvement in utilities in the hospital i.e water, Wifi.
- 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 an Assistant Chief Administrative Officer, assisted by an Administrative officer and a clerical officer. The unit oversees the transport system of the Hospital and report to the head of division, General Administration. he unit also takes charge of the multipurpose hall and other spaces in the hospital.

The effective controls and maintenance in the use of government vehicles is under the supervision of the unit in-charge.

4.2.1 Transport unit:



During the year under review, out of a total of seventeen (17) drivers, one of them retired from service. This brings the current total number to sixteen (16) drivers.

The hospital has twenty (20) vehicles thirteen (13) are serviceable while seven (7) 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.

4.2.4 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 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 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

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 2021 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 meeting 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. Individual 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 staff to cover newly commissioned Diabetes and endocrine unit, Trauma/Oncology clinic, Amenity wards, children oncology etc.
2. Inadequate waste bin and absence of bin lining which make it difficult to segregate waste in the wards and other places.
3. Incessant dumping of waste by the main gate area and outside the gate by motorcyclists and illegal hawking/sales activities.
4. Inappropriate disposal of sharp waste into the waste bins by the doctors and nurses after use.
5. Unnecessary sending of cleaners on errands by the hospital staff while still working, reduces concentration and productivity which renders the job inefficient.
6. Attitude of patient relatives towards cleaners when mopping the ward.
7. Need to fence frontage of the hospital with fence wire to avoid parking of vehicles, motor bicycle and hawking.

4.5.5 Future Plans:

1. To improve staff welfare to achieve maximum efficiency.
2. Organize on-site training and seminar for the cleaners in view of COVID-19 challenges.
3. To make the Hospital environmentally friendly to both staff and patients.
4. To make the Hospital number one in terms of cleanliness/neatness in Nigeria.
5. To continuously improve on our materials/items/equipment use for cleaning and make it available at any given point in time.



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 hospital in the year under review.
2. Maintained a steady standard of operation to meet the Hospital's expectation of us
3. As a result of observance of safety rules, our personnel have not recorded any form of casualty or accident on duty in the last service year.
4. In view of the COVID 19 situation, we ensure strict compliance to COVID 19 protocols and adhere to the non-pharmaceutical preventive measures to stay safe.

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 planes 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 Guesthouse.
5. Annual Christmas Decorations.

4.7.1 Staff strength

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

- Chief Catering officer: 2
- Chief cleaner: 2



- Steward 1

4.7.2 Number of Rooms

- House Officers quarters: 50 = 10 New constructed rooms
- SPBCCN Hostel: 15 rooms
- Interns Quarters: 18 rooms
- CMD guesthouse: 4 rooms

4.7.3 Achievements

- 1) Renovation of the hospital guest house and provision of cushions, beds, curtains.
- 2) Engagement of new steward.
- 3) Reconstruction of 10 additional room to the house officer's block.

4.7.4 Challenges:

- 1) Improve water circulation to upper floor (house officer's quarters).
- 2) New Interns quarters at Robuchi Street need three fans and painting of flat.

4.7.5 Future Plan/Suggestions

1. The CMD guest house needs more rooms and there is enough space which can take 4 rooms comfortable.
2. Appealing for creating of store where our Christmas materials can be kept to avoid damaging.
3. The canteen hall should be added to our scheduled.
4. Our office to be moved to the House Officers' Hostel where key rack would be hanged like a hotel reception and all the keys under our care to avoid frequent loss of keys.
5. The newly 10 rooms should be furnished with beds and refrigerators.

5.0 RECORD, STATISTICS AND PENSION DIVISION

This Division is headed by an Assistant Director, Mr. Caleb Ihuoma and is made up of the following units:

- i. Records and Statistics
- ii. Secret Registry
- iii. Open Registry
- iv. Pension

5.1 Records Unit

The unit had staff strength of six (6) officers:



- Principal Administrative Officer - 1
- Senior Admin Officer - 2
- Administrative Officer II - 1
- Principal Confidential Secretary - 1
- Senior Clerical Officer - 1

5.2 Activities/Functions

- (a) Documentation of new staff.
- (b) Raising of Variation advice.
- (c) Updating of staff Record of Service.
- (d) Handling of staff correspondences like change of names, change of next-of – kin.
- (e) IPPIS Human Resource activities.

5.3 Achievements

In the year 2021, the Hospital recorded the following personnel turn over:

- Transfer of Service - 5
- Locum Appointment - 73
- House Officers - 29
- Interns - 104
- Promotion: Senior staff - 261
- Junior Staff - 28
- Upgrading/Conversion - 49
- Provisional Appointment - 147
- Withdrawal of service - 7
- Resignation of Appointment - 17
- Deceased - 6

5.4 Challenges

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

5.5 Future Plan

- I. Computerization of the unit
- II. Training of Staff

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.

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.

5.2.4 Challenges

The main challenge facing the unit is lack of office space and 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.

5.3.1 Staff Strength

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

- Chief Administrative Officer - 1
- Chief Executive Officer - 1
- Principle Admin Officer - 3
- Senior Administrative Officer - 1
- Senior Executive Officer - 1
- Administrative 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:

- Reduction in cases of missing files.
- Improve method of filing both general and open files safe and accessible with ease.

5.3.4 Challenges

- i. In conducive working environment.
- ii. Inadequate manpower.
- iii. Lack of office equipment.

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 is being managed by 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, ten (10) staff retired from service. They were taken to the National Pension Commission for their enrollment.
2. On a sad note, the Division lost three (3) staff in the year under review.

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 stores 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 - 5
- 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 activities of 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 2021 stock taking/verification.
- 2) We adhere to stores rules and regulations by using the proper and correct store book specify by the Federal Government.
- 3) We had proper control of irregular issues of stores.
- 4) The unit ensured that attractive stores were well protected and managed etc.

6.4 Challenges

- 1) Inadequate staff to man the increase in workload at the unit.
- 2) Insufficient storage space especially in the theatre, laboratory and pharmacy bulk store.
- 3) There was neither training nor workshop for staff to enhance efficiency on the current practice of material management.
- 4) There is need to fix roof leakage at the central store.

7.0 LEGAL UNIT

This unit is headed by a Chief State counsel - Jonathan Muru, (Esq) who oversees the activities of the unit. He serves as Legal Adviser to the Hospital.

7.1 Staff Strength

The Legal Unit comprises of four staff:



- Chief State counsel 1
- Principal State Counsel 1
- State Counsel 1
- Youth Corps member 1

7.2 Activities

- 1) Giving of Legal Counsel/opinion.
- 2) Legal Drafting.
- 3) Brief writing.
- 4) Court attendance and representation.
- 5) Police station attendance and representation.
- 6) Lectures, talks and seminars.

7.3 Achievements

The day-to-day activities of the unit include but not limited to the followings:

- 1) Offering of legal counsel and/or opinions to the management on contentious matters.
- 2) Drafting and preparation of agreements and memoranda of understanding for and on behalf of the hospital.
- 3) Writing of briefs to the hospital external solicitors.
- 4) Attendance of trial conference and preparation of Witnesses for court cases involving the hospital.
- 5) Representation and attendance of court for and on behalf of the hospital in conjunction with the external solicitors.
- 6) Representation of Police stations on behalf of staff and the hospital.
- 7) Performing administrative functions and any other duty that may be assigned to the unit from time to time.

7.4 Cases in Court.

1. PIUS KWADO vs. UATH
Status: on Appeal
2. DR KAWU ABDULKAKIR vs. UATH
Status: on Appeal
3. GTB vs. National Hospital & 2 Others.
Status: on Appeal
4. UATH vs. ISLAMIYAT ABDULFATAI
Status: on Appeal

B. The following cases are at different stages

1. CHRISTY DANIEL vs Dr. OFFIONG & 4 Others: Awaiting hearing at FCT High Court.
2. ALHAJI YAKUBU MAIYAKI vs UATH & 3 Others: Awaiting ruling at the FCT High Court.
3. UBA vs UATH & 1 Other: Slated for out of Court Settlement.

7.5 Challenges/Needs

1. The unit needs reference materials.
2. Utility vehicle for ease of work out of station.

8.0 ICT UNIT

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

8.1 Staff Strength

The unit has a total of Thirteen (13) staff which include

- Senior Programme Analyst 1
- Programme Analyst I, 1
- Programme Analyst II 7
- Higher Data Processing Officers 2
- Technical Officer 1
- Clerical Officer 1

8.2 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.

8.3 Achievements

Within the year in review, the ICT unit with the support of Management was able to achieve the following:

- 1) Networking of clinics and all the twenty-two (22) wards within the Hospital.
- 2) Deployment of e-Health solution to the above-named clinics and wards.
- 3) Continuous Digital enrolment of NHIS Enrollees.
- 4) Switching from manual to automated In-Patient discharge.
- 5) Regular update on the Hospital websites on events and happenings.
- 6) Creation and management of Hospital Zoom account for virtual meetings.

8.4 Challenges

The under listed are some challenges faced by the unit in carrying out its duties effectively.

- 1) Resistance and or knowledge gap from end users.
- 2) Scare/limited office space.
- 3) Inadequate skilled manpower.
- 4) More ICT infrastructure and maintenance.

8.5 Future Plans:

The future plan of the ICT unit with the support of the Management is to facilitate an ICT compliant Hospital both human and structurally while ensuring prompt solutions to ICT problems.



Board Chairman, Dr. Sam Sam Jaja, receiving an award from Northern Youth Council of Nigeria.

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

1.0 INTRODUCTION

Dr. Bob Ukonu is the new Chairman, Medical Advisory Committee/Directorate of clinical Services. The office staff strength is three (3) personnel. A Chief Confidential Secretary, and two 2 Clerical Officers.

2.0 RESPONSIBILITY

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

3.0 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 2021 Annual report.



Dr. Nicholas D Baamlong handover to Dr. Bob A Ukonu as the new Chairman, Medical Advisory Committee (CMAC)



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 seventeen (17) staff in the department

- | | |
|--------------------------|---|
| • Consultants | 4 |
| • Senior Registrars | 5 |
| • Registrars | 6 |
| • 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. Had some staff promoted to new ranks.
2. Two new mechanical ventilators were supplied to the unit.
3. Patients with poor prognosis were successfully transferred and discharged home afterwards.

5.0 CHALLENGES

- Need for more manpower.
- Need for ABG Analyzers.
- Need for more functional suction machine.
- Need to have a stand-by biomedical engineer like hemodialysis unit.

6.0 FUTURE PLANS

We Look forward to addressing the challenges above.



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 seventeen 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 hemodynamic monitoring of patients.
4. Fluid and pain management.
5. General Nursing and medical management.
6. Ensuring adequate documentation and management of patient.
7. 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. Patients with poor prognosis were successfully transferred and discharged home afterwards.

8.4 CHALLENGES

As in anesthesia above.

8.5 FUTURE PLANS

Looking forward in 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.

• Assistant 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 report all through.



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. Their designations are as follows

1. Assistant Director Nursing (ADNS)	5
2. Chief Nursing Officer (CNO)	4
3. Assistant Chief Nursing Officer (ACNO)	1
4. Principal Nursing Officer (PNO)	2
5. Senior Nursing Officer (SNO)	2
6. Nursing Officer I (NO I)	1
7. Nursing Officer II (NO II)	2
8. Porter	2

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.

Dr. (Mrs.) Felicia Dele Asudo
Head of Department



(L-R) Prof. KDT Yawe, Dr. D. A. Itanyi, Prof. B. A. Ekele and First Lady of Kebbi State, Dr Zainab Bagudu during her visit to the hospital to mark Cancer Awareness Day.



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,

Consultant	-	3
Senior registrar	-	1
Corp member	-	2
Total	-	6

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 Scheme): A total of 6 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 offices space for consultants and residents.
3. Shortage of Resident doctors (only one 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
Ag. Head of Department



Research Molecular Laboratory



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 thirty-nine (39) 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 food demonstrations.
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.

2.3 **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. The unit always performs its function by 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 five hundred and forty-one presumptive cases were seen in the clinic in 2021. One hundred and eighty-nine patients were diagnosed positive for tuberculosis and registered for treatment in the clinic.

The clinic recorded a much higher number of patients in 2021 when compared with 2020 as a result of covid-19 pandemic.

Anti-TB Treatment Outcome 2021

YEAR	TOTAL NO OF CASES	NUMBER CURED	NO COMPLETED	DECEASED OR DIED	TRANSFERRED OUT	NUMBER STILL ON TREATMENT
2021	189	46	25	9	30	79

Out of the number registered for treatment i.e 189, 171(95%) are adult, 10(5%) are children while 174(92%) were pulmonary tuberculosis (PTB) and 15(8%) were extra-pulmonary tuberculosis (EPTB)

TB/HIV Clinic Collaboration

The table below summarizes the collaborative activities between TB DOTS clinic and special treatment clinic. All TB patients enrolled in 2021 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.

TB/HIV Activities For 2021

TOTAL NO OF CASES	HIV +VE	HIV -VE	NO ON ART	NO ON CPT
189	19	170	4	15

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.

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 DOBI PHC ACHIEVEMENTS/SOME SERVICES RENDERED IN 2021

1. Antenatal & Delivery services 2021

First Booking/New clients	=	271
Follow up (revisit)	=	530



Deliveries = 30

2. VACCINATION ACTIVITIES (2021)

Vaccine type	Dose type			
	1.Oral Polio	OPV 1	OPV 2	OPV 3
Number vaccinated	480	465	455	5.2%
2.Pentavalent vaccine	Penta 1	Penta 2	Penta 3	
Number vaccinated	480	465	455	5.2%

3. General Out Patient 2021

New Patients = 752
 Follow-up = 789

The Ward Development Committee (WDC), has been revitalized, trained and made functional. They meet regularly and has been of tremendous help in mobilizing the communities to patronize the facility and dissemination of vital messages to the various communities.

3.1 Achievement in NPI unit

Despite the challenges of the pandemic,

- NPI unit continued her in service care for the new born of the ward.
- Continuous administration of the non-routine vaccines.

3.2 Achievements in Environmental Unit

1. Proper incineration of waste materials is being achieved.
2. 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.
3. Planting of royal palm trees around the hospital boundaries is equally been done.
4. Proper incineration of waste materials.
5. Proper evacuation of all waste residues to the outside hospital.
6. We carry out fumigation activities within the hospital and its environment /surroundings.

4.0 CHALLENGES

1. Need for more consultants.
2. Lack of Resident Doctors Common Room/lounge.

3. Small seminar room.
4. Non- availability of departmental library.

4.1 Challenges in DOTS unit

The major challenge facing the clinic is that it needs renovation, the offices are not in good condition.

Challenges at Dobi PHC

1. The theatre is NOT functional, and this leads to gross loss of income and lack of visibility. When the theatre is made functional, some minor procedures and surgeries will be carried out in the facility.
2. We need a generator set for the facility so as to give light to the facility as the power supply is very erratic.
3. All the income generated from the facility is documented under other departments leaving Dobi facility without evidence that it generates income.
 - ANC and delivery charges go to the Obstetrics and Gynecology departments.
 - Laboratory charges go to the laboratory department.
 - Pharmacy income goes to the pharmacy department.
4. There is need for bus and ambulance for the Dobi facility.
5. Out of stock syndrome and very high cost of drugs.
6. We need renovation and, or expansion of the only residential accommodation in the facility.
7. Need for an account code for Dobi facility.
8. Need for more Community health workers.

4.2 Challenge in NPI unit

- Lack of space is a major challenge.
- Shortage of manpower.

5.0 FUTURE PLANS

- To commence the CHO training.
- Regular health promotion and sensitization activities in the hospital.

5.1 Dobi PHC

1. We need a review of the MOU with the Area council and University so as to streamline the running and operations of the centre. We have opportunity to have another MOU with FCT Primary Health Care Board (FCTPHCB). This is more so because the PHCs are now run centrally from the FCTPHCB (PHC Under one roof).
2. We hope to interphase more with the community members with regular outreaches and community based health service and health systems research.
3. We need to do more training/capacity building on the concept and principles of the PHC and community involvement in PHC development and sustainability.

4. We need to do more in advocacy and mobilization of local community resources for investment in the facility.
5. The management of the facility should be stream lined and included in the hospital organogram under the HOD, Department of Community Medicine.
6. There is need for Drug Revolving Fund (DRF) for the facility with its own bank account. This will be stocked with essential and generic drugs affordable to the community and managed in accordance with the standards for the PHC in Nigeria.

5.2 NPI unit

To have a full community health services in the hospital life.

5.3 Environmental unit

1. Plan to carry out biannual fumigation to eradicate reptiles, rodents, mosquitoes and insects.
2. Plan to carry out massive afforestation within the hospital environment.
3. Plan to plant flowers around the strategic area of the hospital. This in turn will beautify the hospital premises etc.
4. Sensitization of all staff against the proper use of firefighting equipment e.g Extinguishers.

Dr. Biyaya Beatrice Nwankwo **Head, Department of Community Medicine**



The Commissioning of Paediatric Oncology Ward by Honorable Minister of Health, Dr. Osagie Ehanire.



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 Dentist	1
Oral & Maxillofacial Surgeon	2 (Including 1 Visiting Professor)
Orthodontist	1
Senior Residents	
Principal Dental Officer	1
House Officers	10
Dental Technologists	3
Dental Technologist Interns	4
Dental Therapists	3
Dental Therapist Interns	8
Dental Surgery Technicians	11
Store Officer	1
Record Officer	1
Clerical 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.		

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 visiting Professor of Oral & Maxillofacial Surgeon was added to the workforce. (Prof V. I Akinmoladun).
2. A senior resident doctor passed Part Two/ Final Fellowship examination of the West Africa College of Surgeon.
3. 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.
4. Commencement of Dental Implant Services.
5. A state of the art dental chair was added to the Oral & Maxillofacial Surgery clinic.
6. 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. Shortage of Manpower:
 - a. Consultants in other specialties of Dentistry Namely Community Dentistry, Oral Medicine, Oral Pathologists, Prosthodontists, Periodontologists are required for adequate training of resident doctors and improved comprehensive oral health service delivery.
 - b. The number of resident doctors is low to cope with the volume of work.
 - c. Inadequate number of Dental Surgery Technicians.
3. Shortage and poor maintenance of equipment because there is no Biomedical Technician specialized in Dental equipment.
4. Non availability of office spaces for new consultants and residents lounge.

7.0 FUTURE PLANS

1. Departmentalization. The existing units; 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 in a tertiary health institution.
3. Employment of more Consultants in the remaining specialties of Dentistry 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. Employment of other cadre of staff such as Dental Surgery Technicians and Dental Therapist for efficiency.
6. Biomedical engineer experienced and exposed to the services and maintenance of Dental equipment should be employed.

Dr. J. O. Ajayi
Head of Department.



A newly well-equipped Restorative Dentistry Clinic with facilities for Dental Implant and Teeth Whitening Services.



DEPARTMENT OF NUTRITION AND DIETETICS

1.0 INTRODUCTION

The department is headed by a Deputy 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;

• Deputy Director	-	1
• Assistant Chief Dietitian	-	1
• Senior Dietitian	-	1
• Senior Assistant Dietitian	-	1
• Senior Scientific Officer (Dietetics)		1
• Dietetic Supervisor	.	1
• Chief Clerical Officer (Dietetics)	-	3
• Senior Clerical Officer (Dietetics)		1
Total staff	-	10

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 **902** 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 **98**.
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 **228**. Grand total = **326** 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 **15** students on industrial training from various higher institutions of learning accordingly.

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.
6. Lack of Dietetics Internship Program: This department is the only department in the clinical departments that is not training interns. If this programme 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.
8. Mobile Food hawkers and vendors that are selling food to the in-patients in the wards. Unless the management rises to this occasion, it will be difficult for the department to make impact in the lives of in-patients.

5.0 ACHIEVEMENTS

- One senior staff was promoted.
- Our department has finally been enlisted as one of the departments to be renovated and more Dietitians / supporting staff / interns to be employed in 2022.
- We all did well despite the challenges posed by the emergence of the novel COVID-19.

6.0 FUTURE PLANS

1. To have a full-fledged nutrition and dietetics department that will be involved in the wholistic 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



Mrs. Adebajo; Prof. B A Ekele, Firstlady of Kebi State, Prof. KDT Yawe, Dr. Bob Ukonu (CMAC) & other Top Management staff on the visit of the First Lady to the hospital.

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, even in the midst of the outbreak of different variants of the COVID-19 pandemic.

2.0 STAFF

STAFF	NUMBER(S)
Professor	1
Consultant ENT Surgeons	4
Senior Registrars	3
Junior Registrars	4
Supernumerary Residents	2
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
Clerical Officer	1

STRENGTH

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

Audiological investigations and speech therapy sessions are carried out daily.

4.0 CLINIC ATTENDANCE

Total number of patients seen in 2021 was **3,442**

The monthly average clinic attendance was 287 patients and the total number of patients seen at the out-patient clinic in 2021 were 3,442.

5.0 ACHIEVEMENTS

1. Full accreditation for both Membership and Fellowship training by the West African College of Surgeons.
2. One of our Senior Registrars passed his Part II Fellowship Exams with the West African College of Surgeons in the year under review. Another Junior Resident also passed his Part I Membership exams with both Colleges and moved to the Cadre of a Senior Registrar.



3. One of the Nurses was promoted to the Post of a Principal Nursing Officer (PNO) and our Audio Therapist was also promoted.
4. We also hosted the West African College of Surgeons Examinations for both Part I and Part II in April and October of the year under review.
5. One of our Doctors and a Nurse was given an Award of service from the Management.
6. To wrap off the year, one of our Residents emerged winner and assumed the office of the ARD-UATH President and also our HOD, Prof. Titus Ibekwe was Awarded Winner Gold Category Authors and Researchers 2021 by The Vice Chancellor of the University of Abuja.
7. The World Hearing Day 2021 was celebrated in grand style with the Theme: Hearing Care for All; Sub theme: Screen. Rehabilitate. Communicate, where awareness/sensitization on the care of the ear was given with free medical care to two schools within Gwagwalada and we wrapped it up with a Symposium on 3rd March, 2021.

6.0 CHALLENGES/FUTURE PLANS

1. Dedicated ward for ENT patients, minor procedure/Treatment room and standard audiology laboratory are current challenges in the department.
2. There is need for the training of more nurses in ENT to cover both the clinic and the proposed ENT wards.
3. We plan to increase our clinic sessions to cover the various subspecialties in the department; such as Rhinology, Otology, Laryngology, Audiology and Paediatric ENT for efficient and better services to the populace.
4. The department wishes to establish a hearing centre for the care of the deaf and that will involve collaboration nationally and internationally for affordable hearing aid provision and cochlear implant surgeries. Rehabilitationist and implant audiologists will be needed.
5. We plan to establish an ENT research/training centre in collaboration with international partners for post fellowship training and community bases research in ENT related diseases, of which the Starkey Hearing Foundation has promised to build this dream for us.

I want to use this medium to sincerely appreciate the management of this great institution for their undying love and support through the year, despite the challenges of Covid-19 pandemic amidst other challenges. We pray that God Almighty will continue to bless and keep you always. We also trust God that the year 2022 will be far better for us all.

Prof. Titus S. Ibekwe
Head of Department



DEPARTMENT OF FAMILY DENTISTRY

1.0 INTRODUCTION

The Department of Family Dentistry operates within the building that also house the Department of Dental & Maxillofacial Surgery.

The most challenging aspect of 2021 was dealing with the impact of Covid-19 as it affected clinical practice and at the same time still maintaining the vision and mission of this great institution. Notwithstanding, we gave our best with the cooperation of management under the leadership of the Chief Medical Director Prof Bissallah Ekele.

2.0 STAFF STRENGTH

Department current staff strength is as follow:

- Consultant – 3
- Registrars - 4

3.0 ACTIVITIES/FUNCTIONS

These are highlighted below:

1. **Clinic:** Family Dentistry oversees both Oral Diagnosis and Preventive Dentistry 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. **Dobi Community out-post:** This was suspended due to external posting of our resident doctors to Obafemi Awolowo University for the completion of clinical training.
3. **Departmental seminars.** Our seminars are held every Tuesday with alternate week dedicated only for the resident training.
4. 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 2021:

1. Sustaining the residency training.
2. Two new dental units were acquired by Management for Family Dentistry department.

TOTAL NUMBER OF PATIENTS = 1,261.

5.0 CHALLENGES

Our challenges include:

1. **SPACE:** We desire that a space be created for the department within the NHIS building as it is done in other places so that we can take advantage of those patients presenting within the GOPD.
2. **Staff:** There is an urgent need to deploy a departmental secretary for administrative purposes.

6.0 FUTURE PLANS:

Our future plan is to operate independently with our own staff, that will serve the needs of our patients in terms of service delivery and best practices.

Dr. Joseph Ademola
Head of Department



Dr. Sam Sam Jaja (KSC) presenting an award of Recognition to the Aisha Children Foundation (ACF) at the 2021 UATH Annual Award Ceremony



DEPARTMENT OF FAMILY MEDICINE

1.0 INTRODUCTION

The department of Family Medicine is located within the NHIS Complex of the hospital. Headed by **Dr. Shedul L. Lakai**, 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	9
Senior Resident Doctors	15
Junior Resident Doctors	5
Nurses	11
Community health extension workers	1
Departmental Secretary	1
Porters	4
Cleaners	9

3.0 ACTIVITIES/FUNCTIONS

1. Patient consultations in Outpatient Clinic (GOPC) every day from 8am -8pm.
2. Running of special clinics including Genetics, Adolescent 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 or discharged home.
4. Wound dressing, suturing of minor lacerations and other minor procedures in the procedure room.
5. Training of resident doctors.
6. Research.

4.0 ACHIEVEMENTS

1. Remarkable improvement in care of patients using "Health-in-the-box" system.
2. Remarkable improvement in the appointment system of running clinics.
3. Academic excellence in residency training program with production of two fellows and five senior registrars at first sitting.

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.
3. Inadequate personal protective equipment for staff.

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. Shedul Lakai
Head of Department



The First Lady of Nigeria, Dr. (Mrs) Aisha Buhari unveiling the Prof. Felicia Anumah Endocrine & Diabetes Center.

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 2
- 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.

4.0 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.

5.0 SUMMARY OF THE CLINICAL AND LABORATORY TURNOVER OF YEAR 2021

Out-Patients Seen At Haematology Clinic In 2021 = 232

In-Patients' Admissions For 2021 = 107

Table 1. TESTS CONDUCTED IN THE HAEMATOLOGY RESEARCH LAB IN 2021

MONTH	BMA & BMB	FBC	PT	PTTK
JANUARY	5	8	0	0
FEBRUARY	0	51	0	0
MARCH	4	41	3	0
APRIL	2	46	0	0
MAY	1	71	0	0
JUNE	8	72	0	0
JULY	6	26	0	0
AUGUST	0	25	0	0
SEPTEMBER	0	20	0	0
OCTOBER	2	35	0	0
NOVEMBER	1	70	0	0
DECEMBER	5	47	0	0
TOTAL	34	512	3	0

Day Care (Research Lab.) 2021 = 65

Haematology Patients In Casualty 2021/Emergency = 51

6.0 ACHIEVEMENTS:

- Although patient turnout was low due to COVID-19 pandemic, doctors in the Department rendered both clinical and laboratory services our patients.

7.0 CHALLENGES:

1. Grossly inadequate manpower in all units of the Department.
2. The partial accreditation for residency training will elapse by June, 2021 and none of the requirements for reaccreditation is provided or made available.
3. No Haematology Day-Care structure.
4. The Department needs dedicated trained nurses in the Blood Donation Center and Haematology Day-Care Ward Lack of essential basic equipment for effective and efficient health care service delivery.

6.0 IMMEDIATE/URGENT NEEDS

1. Haematology Day-Care Ward where Haematological emergencies and patients on Chemotherapy are managed, performing bone marrow aspiration and biopsy procedures (this is imperative for retaining our accreditation and successful accreditation by the National Postgraduate Medical College).
2. The Department needs a Cold Centrifuge for production of blood components as an alternative, and/or the automated haemapheresis machine in view of the occasional challenges in obtaining the consumables for the apheresis machine due to the wide range in economic power of our clients.
3. The Department needs binocular and teaching microscopes for effective and efficient service delivery and training.

Dr. Theresa Ize Otu Head of Department



Management welcoming newly employed Interns



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 73 staff of various ranks distributed as follows

- Assistant Director 3
- Assistant Chief Health Information Management Officer 12
- Principal Health Record Technician 23
- Senior Health Record Technician 16
- Health Record Technician 25
- Health Record Clerk 2

4.0 ACTIVITIES

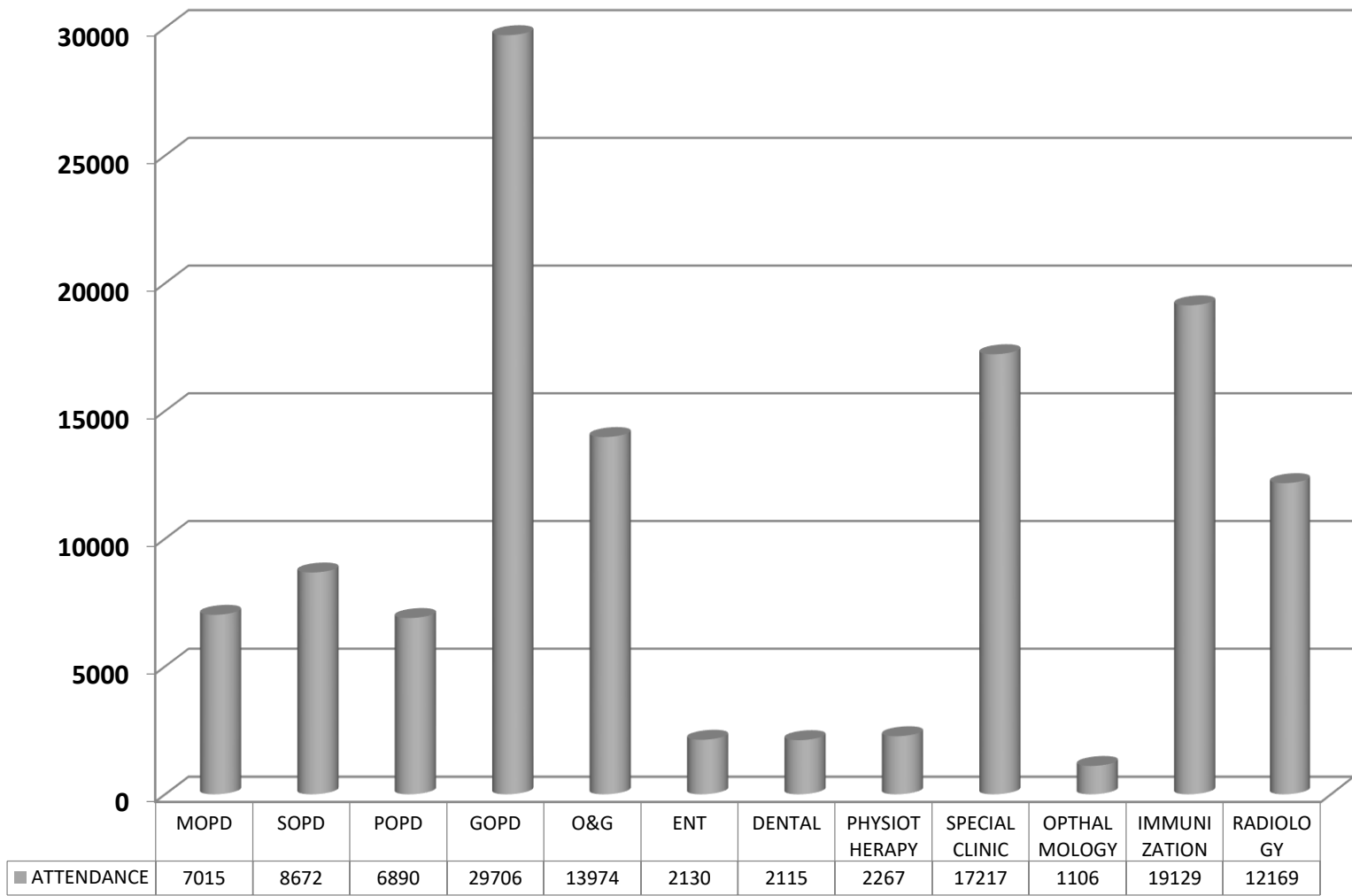
1. Ensuring that patients information is secured and protected
2. Registration of all new patients both in and out-patients
3. Activate patient record visit
4. Monitor patient records movement
5. Book appointment for patents follow-up
6. Admit and discharge/ issue gate pass to discharge patients
7. Analysis 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

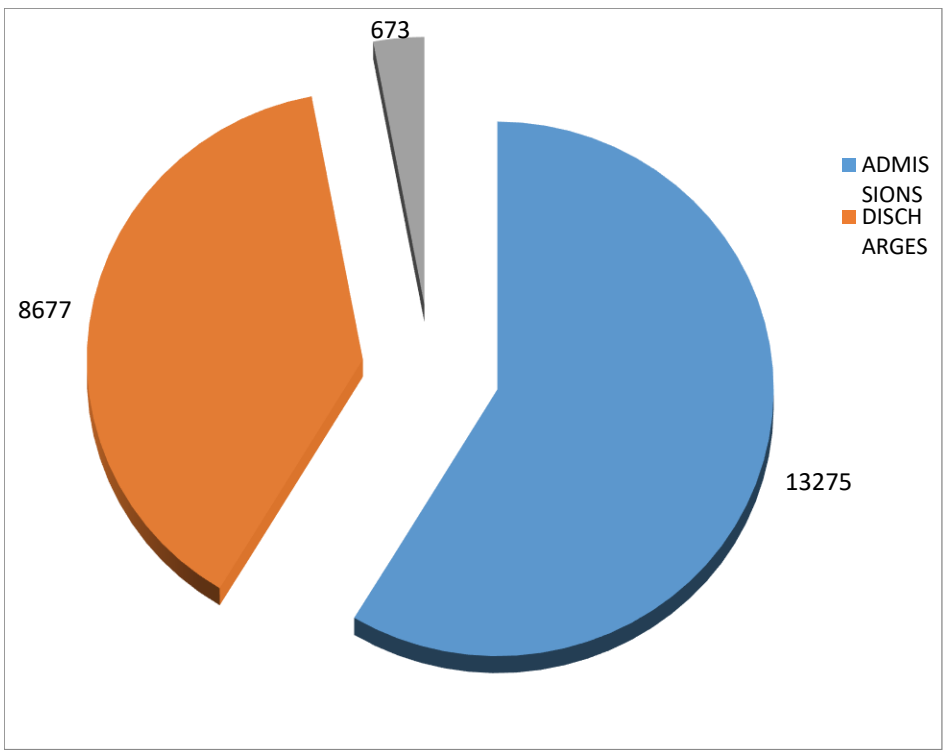
- Total in-patient and out-patient attendance ---- **125144**
- Total admission -----
- Total discharge -----
- Total death -----

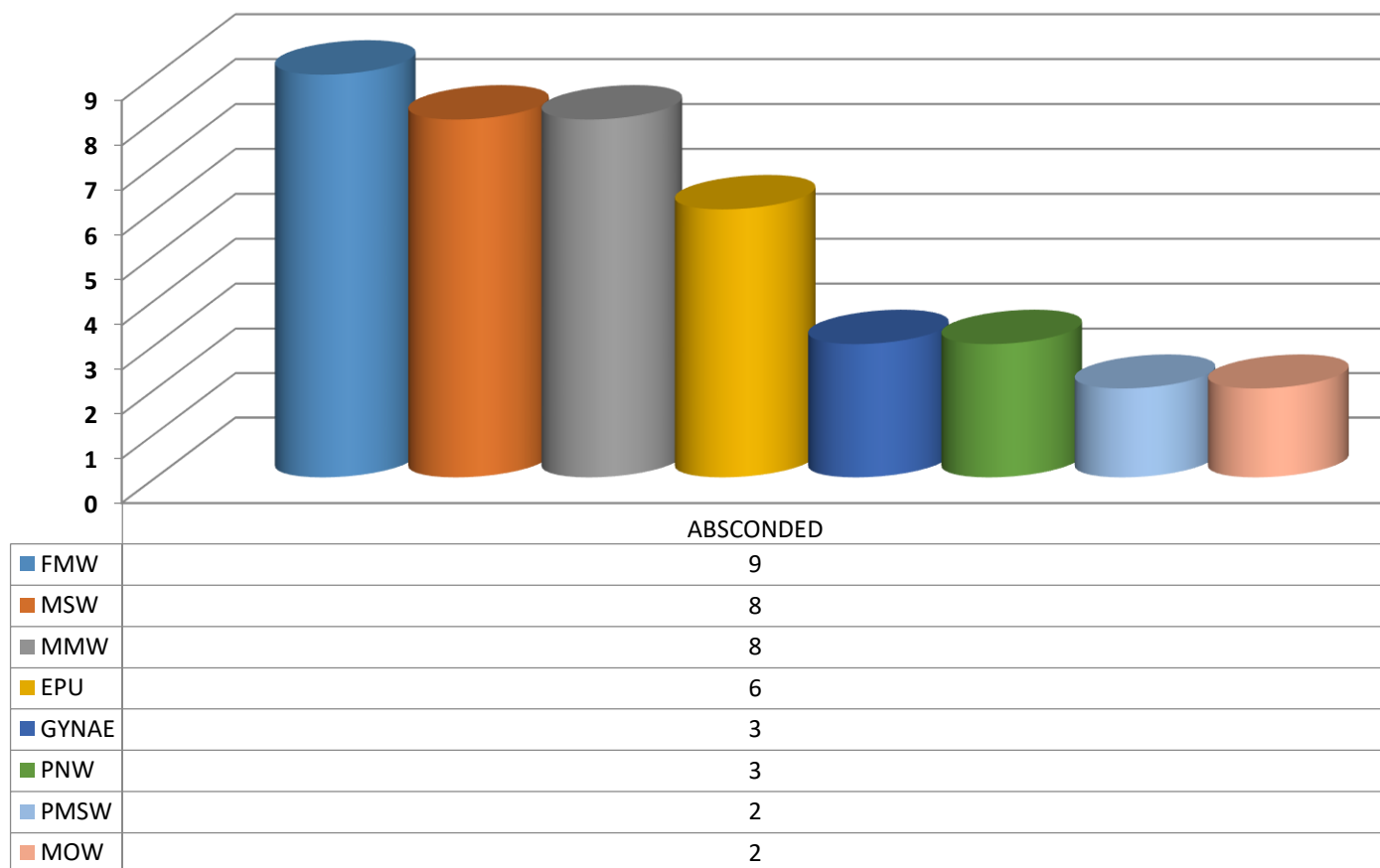


OUT-PATIENT CLINIC ATTENDANCE ACCORDING TO DEPARTMENT 2021



AN EXPLODED PIE CHART FOR IN-PATIENT ANALYSIS 2021





A CLUSTERED CYLINDER SHOWING THE FREQUENCY OF ABSCONDED PATIENTS IN THE WARD FOR THE YEAR 2021

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 man power).
3. Faulty air-conditioners in units such as admission and discharge; library; obstetrics & gynecology should be fixed.
4. Need for a computer to attend to clients in congested clinics like POPC.
5. 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.
- Improve staff strength.

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 for standing by.

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 (21) staff:

1.	Consultants	-	5 (4 are Honorary Consultant)
2.	CMO	-	1
3.	Senior Registrar	-	1
4.	Medical Lab. Scientists	-	5 (1 is a Corps member)
5.	Medical Lab. Technician	-	1
6.	Medical Lab. Assistant	-	Nil
7.	Scientific Officer	-	1
8.	Mortuary Staff	-	6
9.	Departmental Secretary	-	1

3.0 ACTIVITIES IN THE DEPARTMENT

- Processing and diagnosis of tissue specimens (Histology).
- Processing and diagnosis of cytological specimens.
- Carrying out fine Needle Aspiration for cytology.
- Embalmmnt and preservation of bodies.
- Introduction of liquid based cytology.
- Performing of Post Mortem Examination/Autopsy when necessary to ascertain cause of death.

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

For the year 2021, the department has the following Residents on rotation/posting ranging from 2 weeks to 1 month.



Those from UATH

1. Internal Medicine	-	1	}	Total 9
2. O & G Department	-	5		
3. Family Medicine	-	1		
4. Surgery	-	2		

4.0 ACHIEVEMENTS:

1. Purchase of new Microtome, Antigen Retrieval machine and Microscope fitted with screen.
2. Introduction of immunohistochemistry technique, Antigen Retrieval machine has been supplied
3. Building of a composite pathology complex – in progress.

5.0 CHALLENGES

1. Lack of office space though contract has been awarded for the construction of pathology block.
2. Inadequate Laboratory staff especially Secretarial/ Technicians/ Assistants/Attendants cadre.
3. Residency programme yet to be accredited, though the partial accreditation by WACPL for Lab. Medicine has elapsed in November, 2021.
4. Need more microscopes including camera-fitted microscope for microphotography.

5.0 FUTURE PLANS

1. Expansion of the mortuary to accommodate 100 bodies, therefore, new additional 50 bodies chambers are needed.
2. Recruitment of more Technical Staff.
3. Employment of 2 Senior Registrars and 4 Registrars as per West African College of Physicians, WACP (Lab. medicine) partial accreditation approval.
4. Purchase of more Microscopes including one that has a camera for microphotography.
5. Pursuing accreditation for Residency of National Postgraduate Medical College of Nigeria.

NECROPSY

The department lost 2 members of its staff, Ishaka Haruna (Deputy Director, MLS) and Sunday Yohanna (Mortuary Attendant) during the year in review.

Dr. B. A. Abimiku
Head of Department

INFECTIOUS DISEASE CENTRE

1.0 INTRODUCTION

The unit is headed by a Consultant Infectious Disease Physician who reports directly to the Chairman, Medical Advisory Committee (CMAC). The IDC was established by the Federal Ministry of Health using the Nigerian Center for Disease Control (NCDC). The center was commissioned on the 25th of September 2020 by the Honourable minister of Health, Federal Republic of Nigeria Dr. E. Osagie Ehanire but became operational on the 7th of June, 2021.

2.0 STAFF COMPLEMENT

The unit staff strength of 39, comprising as follows:

- Medical Doctors 10
- Nurses - 10
- Pharmacist 1
- Laboratory Scientists 3
- Laboratory assistant 1
- Radiographers 2
- Hygienists 6
- Security officers 4
- Porter 1
- Ambulance driver 1

3.0 ACTIVITIES

The IDC is saddled with the responsibility to manage patients infected with the corona virus.

It is designated as a referral center for the management of moderate to severe cases of coronavirus in the entire Federal Capital Territory (FCT) and neighbouring states. It therefore receives referrals of severe cases of COVID-19 from other hospitals in the FCT.

4.0 ACHIEVEMENTS

1. The IDC admitted and managed a total of 356 patients with moderate to severe COVID-19 case the year under review.
2. Over 300 patients with mild COVID-19 on home management.

5.0 CHALLENGES

1. Inadequate human resources.
2. Structural defects with the plumbing and electrical systems of the building.

6.0 FUTURE PLANS

1. Improvement in service delivery.
2. Capacity building of staff.

Dr. Vivian Kwaghe
Consultant in Charge



CMAC, Dr. Bob Ukonu presenting the Manual to one of the IPC Change Agents, Mr. J. Edibo.

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 2021 constitutes different cadres of doctors as below:

Cadre	No. of Doctors
Consultants	23
Senior Registrars	14
Registrars	7

Subspecialty	No. of Consultants
Nephrology	2
Cardiology	3
Neurology	2
Gastroenterology	3
Endocrinology	3
Dermatology/Infectious Diseases/Clinical Pharmacology	4
Pumonology	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.

• 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

Out Patient Care in the MOPC

Total number of patients seen at MOPD in 2021 - 9,698

In Patient Care in the Medical Wards

Total number of patients admitted into the Medical Ward in 2021 - 1,270

As part of audit of offered care, departmental post-call reviews of admitted cases takes place in the morning on Mondays and Tuesdays.

Morbidity and mortality case reviews of all the units are also done monthly, and this enables participation of all the members of the department where critical analysis of care is offered.

The Department also oversees the Special Treatment Clinic that offers care to HIV positive patients. Patients requiring admission or having complications are admitted for care in the medical wards.

Additional Facility:

The Professor Felicia Anumah Endocrine and Diabetes Center which was commissioned in December 2021, offers improved services for our endocrinology patients. It runs on electronic records and has a Sick Bay where patients that do not require in patient care can be managed before being discharged home or admitted if need be.

Procedures

Procedures offered by specialties in the department of medicine in 2021 are as below:

Procedure	Number done
Haemodialysis	974
Electrocardiography	1,676
Echocardiography	898
Holter ECG	30
Ambulatory blood pressure monitoring	20
Electroencephalogram	244
Gastro Intestinal Endoscopy	231
Skin Biopsy	160
Kidney Biopsy	NIL

• Academic Activities and Training

This involves training of Postgraduate Resident Doctors, and Pre-registration training of House Officers.

1. Weekly Postgraduate presentations on Wednesdays and Thursdays.
2. Monthly Journal Reviews.
3. Monthly grand rounds.
4. Drug presentations by pharmaceutical companies.
5. House officers' seminar presentation every Friday morning.

Postgraduate bedside teachings also take place during ward rounds and clinics, and during call hours.

Mock exams have been conducted for the Postgraduate Resident Doctors, consisting of both written and clinical components.



In 2021, virtual update courses were organized by the West African College of Physicians, as well as the National Postgraduate Medical College of Nigeria, and residents from the department were in attendance, as shown below:

College	Course	Date	No. of Residents
WACP	Part 1	August 2021	5
WACP	Subspecialty & Research methodology	August 2021	2

Residents in the department also took part in exams organized by the West African college of physicians.

Two residents sat for the Part 2 West African College of Physicians Fellowship exam this year while five sat for the membership exam. We recorded 100% pass in both exams.

Several virtual presentations were made by residents supervised by Consultants from the department in different forums.

Research, publications and capacity building:

Towards this, Consultants in the Department of Medicine, as well as residents, have made various contributions in different capacities in Journal article publications.

Awareness and Advocacy

The Department in partnership with some pharmaceutical companies conducted some awareness and advocacy drives for World Kidney Day, World Stroke Day, World Heart day, World Diabetes Day and World hepatitis day, consisting of free screening tests, health talks, radio broadcasts.

4.0 CHALLENGES

- The challenges of the Department are mainly the lack of manpower.
- The lack of manpower has also made it difficult for the Department to release Residents for training in other departments within and outside the hospital.

5.0 FUTURE PLANS

Our future plans include the establishment of the following

1. Sustainable kidney transplantation program.
2. Develop unit specific areas further and make medicine a ground for improved patient care and service.
3. Outstanding research.

Professor E.A. Nwankwo
Head of Department

MEDICAL LIBRARY

1.0 INTRODUCTION

The Library was set up 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 8 staff in the hospital's Nominal Roll

• Director	-	1
• Deputy Director	-	2
• Assistant Director	-	1
• Higher Library Officer	-	1
• Senior Library Officer	-	1
• 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. The Medical Library successfully hosted over 8 accreditation teams in the year under review.
2. The medical library ensured a very conducive environment for studies and pleasurable readings.
3. Three staff of the unit were promoted to Director; Deputy Director & Senior Library Officer respectively.
4. The Management provided the library with fifteen (15) durable plastic reading chairs.
5. Obsolete/worn-out library and office furniture.
6. Preservation of newspapers and journal through binding.

5.0 CHALLENGES

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

6.0 FUTURE PLANS

1. Acquisition of up-to-date materials.
2. Having a functional internet connection.
3. Having a properly furnished library.
4. Having a library complex.
5. Full subscribe to HINARI service can maximize its services

Mrs. Mary Badu
Head of Department



Baby Okoro graduation from SCBU on 1st July, 2021.

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 14, distributed to various units as shown below:

- Head of department Office. 4
- Treatment support specialist (TSS) Unit. 2
- Adult Adherence Unit. 3
- Paediatric Adherence Unit. 3
- Main Operating Theatre. 1
- Administrative Officer 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.

4.0 ACHIEVEMENTS

In the year under review, the department achieved the following.

1. Five senior staff were promoted to CONHESS 11,9 and 8.
2. The department secure a donation of the sum of ₦186,000.00 from the Don Football Club Dei-Dei, Abuja and was deposited into the hospital account.
3. Support was received for some indigent patients in the sum of ₦433,800.00 from Global foundation for hope care and development Abuja on the 20th March, 2021.
4. Donation was received from Forum for assisting the less privilege Abuja in the sum of ₦230,000 for some indigent patients on the 9th May, 2021 the sum was paid into the hospital account.
5. Aisha Children's Foundation and untold Story Behind Story has been a great pillar of support to indigent patients in the year under review.
6. Debt recovery from discharged patient on agreement (₦824,390) eight hundred and twenty-four thousand three hundred and ninety Naira.

5.0 FINANCIAL MOBILIZATION:

The department's financial mobilization efforts yielded results as donations of a total sum of ₦4,845,800 was received from the under listed NGOs/Individuals: -

1. Don Football Club Dei Dei Abuja ₦186,000.
2. Global foundation for Hope and Development Abuja ₦433,800.
3. Plotter's Children Global Foundation Abuja ₦123,000.
4. Forum for Assisting the less privilege plot 225, Arusha crescent Wuse Zone 1 Abuja ₦280,000.
5. Aisha Children Foundation is one million six hundred and eighty-two naira ₦1,682,000.
6. Untold Story Behind the Story (₦1,000,000) one million.
7. Dr. Pius Idoko Ogolekwu ₦50,000.
8. Good Samaritan ₦25,000.
9. Great minds Aven Abuja ₦50,000 cash given to patient was ₦78,000.
10. Muslim Community Suleja ₦315,000.
11. Lady Helen children health foundation suite 9, wing B and floor city plaza area 11 Garki Abuja ₦160,000.
12. Mr. John James ₦40,000.
13. UATH indigent welfare scheme ₦420,000.

GRANTING OF WAIVERS. Through the intervention of the department, waivers to the sum of three hundred and ninety-three Naira (₦393,330) were granted to three (3) indigent patients by the Hospital Management.

6.0 CHALLENGES:

1. The department needs a secretary that will take care of our secretariat job.
2. High rate of unsettled hospitals bills owed by patients sureteed by the hospital staff.
3. Dilapidated building of the department.

7.0 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 domiciled 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 2021.

Mrs. Iyakura Justina S. A.
Head of 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 (14) staff:

Consultant psychiatrists	3
Senior Registrar	1 (on Supernumerary training in OUATHC)
Clinical Psychologists	3
Psychologists	3
Nurse	1
Scientific officer	3

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. Celebration of world Mental health day with community outreach programme.
3. Donation of Public Address System (PAS) to the department by a pharmaceutical company.
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 neighbouring 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. Lack of funding for community mental health programs.

6.0 FUTURE PLANS

1. To develop a strategic roadmap for the transformation of mental health service and research in UATH.
2. Development of community mental health services tagged university of ABUJA Teaching Hospital Community mental health development services (UATH COMMENDS).
3. Development of sub-specializations –forensic psychiatry, child and adolescent psychiatry, old age psychiatry (psychogeriatric), addiction psychiatry, community psychiatry.
4. Commencement and accreditation of postgraduate medical training in psychiatry.
5. Commence regular community mental health awareness outreaches.
6. Start school based mental health services.
7. Start specialized services clinics and in-patient services including outpatient alcohol and substance abuse services(OASIS), child and adolescence mental health services (CAMHS) and old age/memory clinic (Beautiful minds).
8. Private (amenity) consultation /inpatient care for high network patients.

Dr. Tunde Ojo
Head of Department



DEPARTMENT OF MICROBIOLOGY AND PARASITOLOGY

1.0 INTRODUCTION

The Department of Medical Microbiology and Parasitology is one of the pathology-based department 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 laboratarian.

2.0 STAFF STRENGTH

▪ Honorary Consultant	3
▪ Laboratory Scientists	12
▪ Laboratory Technician	4
▪ Laboratory Assistants	4
▪ Laboratory Auxiliary	2
▪ Secretarial Staff	0

3.0 ACADEMIC PROGRAM

- Monday Review of call samples, Departmental meeting, Venereology Clinic.
- Tuesday Update for ongoing research activity in the department, Ward rounds, Venereology Clinic.
- Wednesday Undergraduates students' training, Venereology Clinic.
- Thursday Departmental Seminar, Review of local Antibigram/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 on daily basis at either MOPD or NHIS facility by a Consultant Microbiologist. Department is very active in championing Infection Prevention and Control (IPC) activities in UATH. The UATH IPC Committee which multi-sectoral in composition is currently chaired by a Consultant Microbiologist with several Laboratory Scientists from this department as members.

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. These benches are managed by competent Laboratory Scientist supervising Laboratory Technicians and Assistants.

4.3 Research Laboratory

To the glory of God, a brand-new Molecular Research Laboratory (MBRL) 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. The MBRL is open for collaboration in research and training with all individuals and clinical trials and research groups.

Along with the molecular research laboratory building is the provision of offices and a seminar hall; we cannot thank the current UATH management enough for this.

5.0 CHALLENGES

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

Dr. Jonah Y. Peter
Ag. Head of Department



DEPARTMENT OF NURSING

1.0 Introduction

Department of Nursing provides specialist services to all the existing departments of the Hospital.

2.0 STAFF STRENGTH

There are five hundred and twenty (520) nursing staff. Below is the breakdown of the different cadres.

▪ Director, Nursing	-	1
▪ Deputy Director, Nursing	-	12
▪ Assistant Director, Nursing	-	47
▪ Chief Nursing Officers	-	168
▪ Assistant Chief Nursing Officers	-	28
▪ Principal Nursing Officers	-	40
▪ Senior Nursing Officers	-	79
▪ Nursing Officers I	-	33
▪ Nursing Officers II	-	<u>113</u>
TOTAL	-	<u>520</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

The department of Nursing during the year under review records the following achievements:

- i) Provision of quality nursing care for the patients; and the department is proud to mention that, during the year 2021, the department can safely say they have made tremendous improvement in this regards.
- ii) The department is proud to report that Nurses are making steady progress in the area of academics notably among such is the award of doctorate degree in Nursing, to the Head of Department Dr. Mrs. Ngozi Lydia Chukwu. This is the first in the history of the department.
- iii) Strengthening the Nursing staff by engaging some locum staff during the year under review.

5.0 CHALLENGES

1. COVID-19 pandemic and its resultant devastating effects on the health care delivery still remain a major challenge to the department, It brought about a

sudden shortage of nursing staff as many Nurses contracted the disease, the department was stretch to it's limit.

2. Inadequate consumables such as PPE, N95 face mask and stationaries.
3. Due to the high patients turn over, the CSSD need a new bigger reliable autoclave machine. While the Laundry also need an upgrade of their washing Machines.
4. Lack of cooperation from the patient's relations in the areas of traffic control for effective Covid-19 prevention.
5. Lack of befitting accommodation, computers, printers and stationaries for the continuing nursing education unit.

6.0 FUTURE PLANS

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

5.0 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 to the different departments and unit in the hospital.

Dr. Lydia Chukwu
Deputy Director, Nursing/Head of Department



World Breast Feeding Day outreach program

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:	25 (Fellows 7; Senior Registrars 3)
Registrars:	7
Nursing Staff:	63
Admin. Officer	1
Departmental Secretary	1
Clerical officer	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 the Colposcopy room and a mini theatre for Bilateral Tubal Ligation (BTL).

3.2 Labour Ward:

3.2.2 Activities:

• Total deliveries (Vaginal + C/S)	-	1,734
▪ Vaginal deliveries	-	1,096
▪ Caesarean sections	-	638
▪ Emergency Caesarean sections	-	508
▪ Electives Caesarean sections	-	130
○ Maternal deaths	-	20
○ Stillbirths	-	63
○ Total Live births	-	1,671
○ MMR	-	1,197/100,000 LB
○ SBR	-	36/1,000 Births

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.

3.3.2 Activities

• Total no. of admissions:	748
• Total no. of patients seen in Gynae. Emergency room:	1,564
• Total no. of MVAs performed:	100
• Total no. of Ultrasound scans performed (Obst. and Gynae.):	1,406

3.4 Maternity Ward.

3.4.2 Activities:

- Total no. of patients admitted 898
- Doctors conducted 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 all under the clinics.

3.5.2 Activities:

Antenatal clinic

- Booked cases 2,068.
- Follow-up visits 10,048.

Postnatal visits

1,139.

Gynae clinic

- Total no. of patients seen 3,167.

3.6 Theatre

Major cases (Total) 882
Intermediate/minor (Total) 85

4.0 Routine Weekly Schedule

Our routine schedule which include antenatal, gynaecological and postnatal clinics run five days a week. There are four Teams viz – Blue, Green, Pink and Purple. The various teams have their different days for elective surgeries, while emergency surgeries are handled on a daily basis by the team on call.

A Typical Departmental weekly schedule

DAYS	ANC	GYNAE CLINIC	THEATRE	CONSULTANT WARD ROUND
Monday	Booking Clinic	Pink (A)		
Tuesday	Pink (am)	Blue (pm)	Purple	Green
Wednesday	Purple (am)	Green (pm)	Blue (A)	Pink
Thursday	Blue (am)	Purple (pm)	Pink (B) Green	
Friday	Green (am)	Pink (pm)	Blue (B)	Blue Purple

5.0 Achievements/High Points

1. Residency Training produced 4 Fellows and 6 Senior registrars in the year under review
2. Renovation of gynae. side ward.
3. Acquisition of a new ultrasound scan for the labour ward.
4. Proposed maternity complex to be built by Nigeria LNG.

5. A consultant successfully completed a Post Fellowship sub-specialist training in Infertility and Assisted Reproductive Techniques to start Reproductive Medicine Sub-specialty.

6.0 CHALLENGES

1. Inadequate staff: Resident doctors and house officers.
2. Inadequate offices for consultants.
3. Inadequate bed space in maternity ward due to increased patients turn-out.
4. Absence of High Dependency Unit in the Labour ward.

7.0 FUTURE PLANS/RECOMMENDATIONS

- Employment of more Registrars and House officers.
- Provision of more office space for consultants.
- Provision of High Dependency Unit in the labour ward.
- Provision of facilities for Assisted Reproductive Technique services.
- Provision of a separate endoscopic tower dedicated to O & G.
- More collaborative studies and winning research grants.

DR. Teddy E. Agida
Head of Department



DR. RICHARD OFFIONG SEND FORTH PARTY



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. In the year under review the department was moved to the trauma center in April 2021 at the Ophthalmology wing that was commissioned by the Board Chairman Dr. Sam Sam Jaja on the 29th of June 2021. 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 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 2021 was not without its challenges. Incessant strike actions embarked upon by Resident Doctors and the impact of COVID -19 in the hospital significantly affected work in the department. Despite these challenges, the department witnessed improved and efficient service delivery.

The reports from these units are attached however, the major highlights from the Ophthalmology department in 2021 is being presented.

2.0 STAFF STRENGTH

• Consultants	-	6
• Senior Registrars	-	6
• Registrars	-	2
• Optometrists	-	12
• Ophthalmic Nurses	-	5
• Opticians	-	3
• Record Officers	-	2
• Departmental Secretary	-	1
• Health Information Officer	-	1
• Porters	-	7
• Cleaners	-	7



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) *Oculoplasty* (Monday).
 - b) *Neuroophthalmology* (Tuesday).
 - c) *Glaucoma* (Tuesday); this clinic commenced on 19th June 2018 and manned then by the sabbatical staff).
 - d) *Medical Retina* (Wednesday).
 - e) *Paediatric Ophthalmology and strabismus* (Wednesday).
 - f) *Anterior segment and Cornea* (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, 6,866 were seen.
2. The sum of N5,217,900 was generated as revenue.

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). 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.

4.1 Staff Strength

Staff in theatre Unit = 5 Certified Ophthalmic nurses
Revenue generated by Eye theatre in 2021 = N7,554,500=00

4.2 Eye Sugeries

In the year under review, two hundred and fifty-four different eye surgeries were performed in 2021 compared with 500 (2019) and 254 (2020). Cataract extraction, pterygium excision, trabeculectomy, and oculo-adnexal repairs were the most common surgeries in 2020.

Eye surgeries in eye theatre in 2021 = 264

4.3. Eye Ward

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

Revenue generated by Eye Ward Unit in 2021 = N1, 015,634=00

Patients admitted into the Eye Ward in 2021 = 286

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 five teams (A-E) so far. Table 12 shows 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	0008 – 1600 hrs, Team B, Team E	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	0008 – 1600 hrs, Team C	
Refraction	0008 – 1600 hours Daily				
Seminar					0008- 0009 hrs
Grand round			0008-0009 hrs Fortnightly (All physicians)		
Journal review		0008 - 0009 hrs Fortnightly (All physicians)			
Morbidity & Mortality review					1 st 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 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 2021 is available.				

6.0 TRAINING, ACCREDITATION AND RESEARCH

The department currently has 2 registrars, 6 resident doctors passes part 1 fellowship and or Membership of the National Postgraduate Medical College or West African College of Surgeons respectively, and 3 senior registrars passed the part 2 Fellowship examinations.

The department conducts weekly seminar, fortnightly grand rounds and journal reviews as well as monthly morbidity and mortality review (Table 12). 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. The major research activities include trainees' dissertation and individual personnel research works. There is ongoing Keep Sight Initiative (KSI), a partnership UATH Ophthalmology-Sightsavers project with glaucoma management 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 d as required/ necessary. The Department had low key Eye Care Services during yearly Glaucoma Week and World Sight Day. Abuja OSN quarterly Continuing Medical Education (CME) was suspended because of COVID-19 pandemic.

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 subserves 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 four hundred and ninety-five ophthalmic cases were seen in KGH in 2021 compared to Six hundred and ninety-five ophthalmic cases seen in 2020. While only 2 surgeries were done in 2021 compared to 109.

Patients seen at Kwali Outpatient Clinic 2021 = 495

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 October 2020, the enrollees have been assessing glaucoma treatment at Department of Ophthalmology, UATH, at no cost to the patients and this will last throughout the project period. The project pays for registration, consultations, two central visual field, antiglaucoma medication and glaucoma trabeculectomy surgery. The project donated a fundal camera and iCare tonometer to Department of Ophthalmology.
2. The Department is also partnering with Surgical Eye Expedition International. Since (SEE International) to conduct free and subsidized cataract surgery at Kwali General Hospital. they have so far donated 550 intraocular lenses, 275 crescent knives, 275 keratome blades, 275 viscoelastic substances and 2 cataract sets.

3. The department also partnered with Dev-polls consulting Ltd to provide 20 free cataract surgeries to indigent members of the community which has been successfully delivered.
4. The Department of Ophthalmology, UATH which is now a centre for WACS, Faculty of Ophthalmology membership and Fellowship Examinations has so far successfully hosted three membership and two Fellowship examinations.
5. The department also received a donation of one Air conditioning unit from Natures Fields Pharmaceutical company.
6. Dr. Fatima Kyari, A consultant in the department partitioned the clinic space in the trauma center into 5 rooms and provided five Air conditioning Units.
7. ACNO Kauna Madaki had 6 weeks' microsurgery theatre IOL training (July – August).

Other news

Dr. Ayeni E.A took two years leave of absence from the department.

The department lost one of its most dedicated nursing staff, Mr. Suleiman Ibrahim on the 25th August 2021.

10.0 CHALLENGES

1. Inadequate and old equipment to provide specialist eye care services.
2. Inadequate manpower.
3. Inadequate space for consultations at the clinic.

11.0 FUTURE PLANS

1. To have purposely built and well-equipped eye building with adequate space for outpatient clinics, equipment room, optical workshop, optometry unit, eye theatre, eye ward, offices, library, wet laboratory, seminar room, call rooms, canteen and conveniences.
2. To get more support for eye care outreaches in Abuja especially rural eyecare service at Kwali General Hospital.
3. To recruit more well motivated young eye care professionals who are passionate to deliver quality eye care service.
4. More importantly as we prepare for another accreditation exercise by both the National Postgraduate Medical College (NPMC) and West African College of Surgeons (WACS), the management needs to complete the partitioning and furnishing of the Ophthalmology wing of the trauma center to ensure seamless provision of eye care services and facilitate a hitch free accreditation exercise.

12.0 CONCLUSION

Despite the continued impact of COVID-19 pandemic in 2021, the Department of Ophthalmology 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. In the year 2021, six (6) resident doctors passed the part 1 and three (3) passed the part 2 examinations of the West African College of Surgeons and National

Postgraduate Medical College. The rural eye care services at Kwali General Hospital since 2018 is improving.

There is ongoing UATH Ophthalmology-Sightsavers partnership Keep Sight Initiative Project with potential to reduce the burden of glaucoma blindness and equipment donation to UATH Ophthalmology. There were equipment and financial supports to Ophthalmology from our partners. The WACS, Faculty of Ophthalmology membership and Fellowship examination were conducted in April and October 2021. The Ophthalmology department is meeting its mandate amidst limited resources and is poised to do more with improved resources.

Dr. Rilwan Chiroma Muhammad
Head, Department of Ophthalmology



Front view of old Casualty (Surgical A&E)

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	7
• Principal medical officer (With MSc Orthopaedic Surgery)	1
• Senior residents	4
• Junior residents	4
• Cast technicians	8
• Prosthetist and Orthotist	1
• Secretarial staff	2

Prof. Nwadiaro H. passed on in the year under review.

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.

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

Team C: Dr. Songden; Dr Ejembi P. A.

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

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

Statistics 2021 = 185 Major and Minor 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 and bad lead aprons.
4. Lack of space equipment in the prosthetic and orthotics room.

7.0 RECOMMENDATIONS

1. Procurement of Orththroscopes for sports medicine unit.
2. Procurement of lead aprons, fracture table, orthopedic sets
3. Equipping the prosthetics and Orthotics Room.

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. Oguche E. O.
Head, Department of Orthopaedics



DEPARTMENT OF PAEDIATRICS

1.0 INTRODUCTION

The year 2021 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 2019

Consultants	-	14
Senior Registrars	-	11
Registrars	-	11
Medical Officer	-	2
Nurses	-	75
SCBU	-	22
PMSW	-	21
EPU	-	19
POPD	-	6
PSTC	-	3
Support Staff (CHEW, counselor, cleaners & potters)-		62
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	10.00a.m	-	1.00p.m.
✓ Pulmonology	Mondays	1.00p.m	-	4.00p.m.
✓ Haematology	Tuesdays	10.00a.m	-	2.00p.m.
✓ Haematology (Adolescent)	Thursday	1.00p.m	-	4.00p.m.
✓ Nephrology	Wednesday	10.00a.m	-	2.00p.m.
✓ Neonatology	Wednesday	10.00a.m	-	2.00p.m.
✓ Neurology/Developmental Paediatrics	Thursday	10.00a.m	-	2.00p.m.
✓ Infectious Disease	Friday	10.00 a.m	-	2.00p.m.
✓ Endocrinology	Friday	10.00a.m	-	
2.00p.m.				
✓ Gastroenterology/Nutrition	Wednesday	1.00 p.m	-	4.00p.m

- **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	-	1,313
• Paediatric Medical Ward	-	401
• Special Care Baby Unit	-	551
• Paediatric Oncology	-	74

Academic Activities

Modified as the Covid-19 Pandemic allows mostly by hybrid.

- **Mondays:** Weekend admission review.
- **Wednesday:** Seminar presentation, Bed side teaching.
- **Thursday:** Morbidity & Mortality review, Ground rounds.
- **Friday:** Nelson club, Unit presentation.

Achievements

1. The department has weathered through the economic and security challenges of the year striving to maintain clinical and training services.
2. Equipping and take-off of the Paediatric Oncology Ward.
3. Provision of 4 new incubators and 1 ventilator.
4. Adequate cooling of patient waiting area in the POPD through donation of 3hp standing air conditioner through donations by a Pharmaceutical company and a 2hp wall AC by CESTRA.
5. 1 glass weigh machine purchased for Paediatric Medical Ward.
6. Replacement of old tiles in the POPD by management.
7. 3 C-PAP machines for SCBU by Management.
8. Supply of 20 pieces of bed sheet and pillows to Emergency Paediatric Unit.
9. Promotion of medical and nursing staff.

4.0 CHALLENGES

1. We require new block for PMW and preferably a Paediatric complex.
2. Complete renovation of POPD.
3. Provision of waiting area in POPD in view of the COVID-19 pandemic.
4. Renovation of the existing PMW.
5. Provision of more working equipment.
6. Most of the Air conditioners are bad, a cooling system is urgently needed in EPU, PMW, in view of the high ambient temperature.
7. Sustaining outpatient services after working hours and during weekend with Nurses.

Dr. Richard Onalo
Head of Department



At the Pediatric Oncology Ward commissioning by the Minister of Health.

DEPARTMENT OF PHARMACY

1.0 INTRODUCTION

The Department is headed by a Deputy 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 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

The Department had the following number of staff in 2021:

- Deputy Directors 6
- Assistant Directors 7
- Chief Pharmacists 9
- Principal Pharmacists 7
- Senior Pharmacists 1
- Pharm. Officers 1 3
- Pharm. Technicians 1
- Intern Pharmacists 24

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 five (5) 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.



5. ACHIEVEMENTS

1. Despite shortage of man power, 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 compare 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. Expansion of the pharmacy bulk store.
8. 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.
9. Prompt payment of our suppliers.

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. Lack of manpower.
4. Inadequate equipment and space for the Production and Quality Assurance services.

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.

Pharm. Muhammad Garba
Head of Department



DEPARTMENT OF PHYSIOTHERAPY

1.0 INTRODUCTION

The challenges of year 2020 continued unabated in the year under review. The effects of the COVID-19 pandemic really changed several working conditions and the method of tending to patients.

In the midst of the aforementioned, there was 2 months Industrial Actions by the National Association of Resident Doctors (NARD) that further worsened the already bad situation.

2.0 STAFF STRENGTH

- Permanent staff (Physiotherapists). 11
- Occupational Therapist 1
- Physiotherapist Assistant 1
- Biomedical Technician 2
- Health Record Officer 1
- Intern Physiotherapists 12
- Outsourced Staff. 4

3.0 ACTIVITIES

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

4.0 ACHIEVEMENTS

- In the year under review the department was Re-accredited by Medical Rehabilitation and Therapists Board of Nigeria.
- There is the addition of 2 new locum staff Physiotherapists to the department.
- Incorporation of the department in the Health-in-the-Box (paperless) policy by the hospital Management.
- 4 staff were promoted in the year under review.
- 3 staff were released to attend Annual Conference/Scientific seminar.
- 1 Physiotherapist and 1 Intern benefited from the annual Award
- Total number of patients: Over 7,000.



4.1 Renovations/Repair/Reconstruction:

- Plumbing works on drainage system
- Leaking roof and damaged ceiling Boards
- Some furniture.

4.2 Procurement/Imprest

- Installation of Modern Curtains in the treatment areas, the common room and some offices.
- Signage and directional signs to the department.
- Pediatric Treadmill with suspension frame.
- Battery and Power Pack for Repair of Tilt Table.
- Consumables and other items to work with.
- Donation of one fairly used wheelchair.

5.0 CHALLENGES

- Long appointments due to shortage of manpower.
- Fewer numbers of wheelchair and depreciation of the two currently being used.
- Inadequate Physiotherapy Equipment.
- Lack of office space and office equipment

6.0 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.

Mr. Solomon Babadiya
Head of Department

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 STRENGTH

• Consultant Radiologists	-	8
• Resident Doctors	-	11
• Imaging Scientists (Radiographers)	-	8
• X- Ray Technician	-	2
• Scientific officer	-	1
• Dark room Assistants	-	1
• Intern Radiographers	-	9
• Nurses	-	3
• Corps Members	-	2
• 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. Three (3) of such students from various Universities across the country were trained in the year under review.
4. Training of Intern Radiographers Nine (9) 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: 9,989

From the statistics, the Department records low turnover compared to the previous year. This was due to Covid-19 pandemic, breakdown of x-ray machines, faulty ultrasound probes and Resident Doctors strike.

7.0 ACHIEVEMENTS

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

1. More equipment
2. More personnel
3. 3 Radiographers and 1 X-ray technician were promoted.
4. 3 Resident Doctors successfully passed their part 1 WACS in the year under review.

Award/Honours:

Dr. Habiba Momodu a Consultant in the department received an award as the best Part II candidate in Clinical Radiology during the October 2020 Examination of West African College of Surgeons.

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:

- Two Consultant Radiologists were employed.
- Two additional Radiographers were employed.
- Two resident doctors were employed
- Annual recruitment of 9 Interns Radiographers.
- Two Youth Corps member were posted to the Department to complement the secretarial work.
- Radiology Revolving Fund Committee was constituted and inaugurated.

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, ultrasound and CT studies.

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. Non –Computerization of our records.
4. Lack of picture archiving of communications system in Radiology Department.
5. Dosimetry monitoring of staff.

9.0 FUTURE PLANS/RECOMMENDATIONS

1. Procurement of MRI machine.
2. Repairs of the faulty static X-ray machines.
3. Procurement of Fluoroscopy machine.
4. Procurement of an additional digitizer as a backup for the existing one.
5. Employment of more Resident Doctors and Radiographers.
6. Additional one computer set and printer for secretarial work.
7. Restore dosimetry monitoring of staff.

10.0 CONCLUSION

The Department sincerely appreciates the support of the Management in the maintenance of equipment, training and retraining of staffers, provision of basic tools for effective performance and renovation of the Department.

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



The New Static Ge X-Ray Machine

SPECIAL TREATMENT CLINIC (STC)

1.0 INTRODUCTION

The Clinic was established by Institute of Human Virology Nigeria (IHVN) in collaboration with government of Nigeria (GON) in March 2005. Since then the clinic has been providing HIV care to people living with HIV/AIDS (PLWHA).

The Clinic which is the largest HIV facility in FCT, has 18,257 patients ever enrolled, with 5,653 as currently active patients receiving HIV care.

2.0 STAFF STRENGTH

The Clinic has 8 different Thematic Units which has 57 staff providing care, support and documentation. There are 4 categories of staff:

▪ UATH Staff	29
▪ IHVN Supports	18
▪ Volunteers	10

3.0 THEMATIC UNIT

a) PMTCT	4
b) HTS	5
c) M&E	4
d) Pharmacy	3
e) HBC	4
f) Linkage	2
g) Lab	3
h) Nurse	9
i) Adherence	4
j) Admin/ Account	3
k) Field workers	6

4.0 ACTIVITIES

The STC runs outpatient Clinic from Mondays to Fridays where services in HIV continuum of care are being rendered.

The activities in the Clinic include:

1. Providing refill for both old and new patients.
2. Switch meetings/Clinical meetings.
3. Tracking of patients to return to Clinic (Retention in Care).
4. Case finding among key population.
5. Adolescent HIV care services.
6. Community ART refill.
7. TB case finding and referral to DOT Clinic.
8. Pediatric HIV care.
9. CD4 and Viral Load Testing.



5.0 ACHIEVEMENTS

1. We have provided HIV services for over 5, 000 patients in the FCT and its neighboring states.
2. Prevented 51 out of 51 exposed infants from getting HIV through our PMTCT (Prevention of Mother to Child Transmission) program
3. We were able to identify 59 TB cases and refer them to DOT Clinic for further investigation and management.
4. Out of the 5650 active patients, we were able to do routine Viral Load for 98% (5537)
5. We were able to meet up with the 3rd SDG goals. We had 97% (5370) of our patients that are virally suppressed.

6.0 CHALLENGES

1. Erratic supply of CD4 test kits at the Clinic.
2. Inadequate computers for work.
3. Lack of internet facility in the Clinic.
4. Structural defect in STC building i.e. leaking roof.
5. Lack of adequate manpower.

6.0 FUTURE PLANS

1. We intend to improve service delivery to patients.
2. Capacity building for Staff.
3. Extend HIV screening to all outpatient Departments.

Dr. Vivian Kwaghe
Consultant Infectious Disease

DEPARTMENT OF SURGERY

1.0 INTRODUCTION

The year, 2021 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 outpatient, inpatient and operative services recorded upsurge of the number of patients. Under listed are some of the achievements and challenges during the year review.

3.0 STAFF STRENGTH

1.	Consultants: Total	20
	- Honorary,	10
	- Hospital,	10
2.	Residents	36
	- Senior Registrars	31
	- Hospital	21
	- Supranumerary	10
	- Registrars	5
	- Hospital	4
	Supranumerary	1
3.	Nurses	55
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:

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

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

4.0 ACHIEVEMENTS

Modest achievements were recorded during the year under review;

1. Successful conduct of the Part1 membership and Part 11 Fellowship examinations of the West African College of Surgeons in April 2021 and October 2021.
2. Organized and executed West African College of Surgeons revision course Mock examinations.
3. Organized the first ever Basic Surgical Skill Course in this institution and was adjudged one of the best.
4. Full accreditations by the National Postgraduate Medical College, Plastic and General Surgery with full membership accreditations but Neurosurgery accreditation by the West African College of Surgeons was defer to a later date.
5. Academically, the department produced three fellows and 5 passes at the membership examination of 2021 examinations.
6. The department was still able to have its departmental academic programs consistently throughout the year via virtual zoom meetings.
7. The side laboratory in FSW is now well equipped and functional.
8. Provision of imprest has improved compared to the previous year and this has facilitated work in the departmental office.

5.0 CHALLENGES

1. Two Consultant urologists left for greener pastures which might affect service delivery and training.
2. We have an inverted pyramid situation in our residency program, presently having on 4 registrars in the whole department.
3. Inadequate house officers in the department.
4. Some consultants still lack office accommodation.
5. Obsolete furniture in seminar room.
6. Lack of photocopy machine for easy flow of work.

6.0 FUTURE PLANS

1. To have the present accident and emergency space to be converted into a Daycare surgery arena after the takeoff of the new trauma centre.
2. To have an expanded clinic spaces for out-patient care.
3. Provision of photocopying machine for the departmental use.
4. Provision of good operating lamps for suites 1, and 3 in the theatre.
5. To have a procedure room in the SOPD for minor procedures under local anaesthesia.

Prof. J.Y. Chinda
Professor and Head of Surgery

NATIONAL HEALTH INSURANCE SCHEME (NHIS) UNIT

1.0 PREAMBLE

The NHIS Unit coordinates the activities of the Health Insurance Scheme in the Hospital. The unit attends to over thirty-four thousand one hundred and one (34,101) enrollees drawn from the National and Federal Capital Territory (FCT) Health Insurance Scheme in addition to other enrollee under retainership with the hospital. The activities of the unit are as enshrined in the NHIS operational guideline and cut across Primary, Secondary and Tertiary levels of care.

2.0 STAFF STRENGTH

1.	Family Medicine	-	28
2.	Nursing	-	14(including 1 CHEW)
3.	Pharmacy	-	6 (including 3 Interns)
4.	Administration	-	15
5.	Health Information	-	3
6.	Account	-	11

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

- 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.

3. Administrative Section

- Confirmation of enrollees on the current NHIS 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 NHIS office for the updated list of enrollees.



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 NHIS 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.
2. There is however a decrease in the number of enrollees from 37,041 in 2020 to 30,000 in 2021. This may not be unconnected to the impact of Covid-19 pandemic.
3. The introduction of the Electronic "Health Record/Health in the box" is a major achievement in 2020, courtesy the hospital management. This has led to improved services delivery to our clients.

4.0 CHALLENGES

1. Inadequate manpower in the Unit.
2. Inadequate funds to meet the growing needs of the Unit.
3. Inadequate office of equipment e.g laptops and other electronic systems.
4. Overstretching of facilities in the NHIS Complex as a result of increase clinical activities at the authorization code room and pay point.
5. Lack of dedicated vehicle for NHIS needed for distribution of bills and other logistics.

5.0 FUTURE PLANS

The deployment of "Health in the box" by the Management is highly commendable. This had led to improved service delivery. However, there is need for deployment of more staff in some Sections.

Dr. Joel Abu
Co-ordinator, NHIS.



SCHOOL OF POST BASIC CRITICAL CARE NURSING

1.0 INTRODUCTION

The year 2021 started on a good note with the resumption of our students from their Christmas and New year holiday. Their lectures started in earnest with commitment and vigor from both the internal and guest lecturers.

2.0 STAFF STRENGTH

The school started the year with a total of 9 academic staff and 2 administrative staff, though one of the staff was on leave of absence for Educational reason. He resumed back to work on the 31st of May, 2021 after the completion of his MSc Program.

Support Staff: The school have one gardener and 3 cleaners. One of the cleaners resigned her appointment within the year and the school was left with two cleaners.

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 100 percent pass.
- 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:

- The school was named and awarded as the overall best school in the 2020 NMCN final qualifying examinations for all the critical care nursing schools in Nigeria, at the annual conference of the Forum of Heads of Nursing Institutions in Nigeria (FOHNIN).



- One of our students Ms. Eze Assumpta Chika, won the overall best student's award at the final NMCN qualifying examinations for all the critical care nursing schools in Nigeria. This is a great feat for the school.
- The School won the Best Department Award at the 2021 annual award ceremony.
- All 31 students presented by the school for the NMCN final qualifying examination passed their examination. There by raising the school ranking to 100 percent success in the examination.
- The School Coordinator Mrs Joy Egbunu commenced her PhD. Also, one of the school staff Mr. Stephen Onimisi Kumode bagged his Master's degree in Public Health from the United Kingdom.

5.0 CHALLENGES

- Break down of the hospital coaster bus while conveying students to and fro National Hospital for their clinical posting.

6.0 FUTURE PLANS

- The school has a need of assimilation or affiliation with the University as proposed by the Nursing & Midwifery council.
- Need to increase admission quota from 30 to 50 students.
- Need for additional hostel building in lieu of the proposed increase in admission quota of students.
- Introduction of self-sponsored refresher course for registered and non-registered critical care nurses in the country.

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



Students of Set 24 Post Basic Critical Care Nursing in a group photograph with UATH Management.

