

ANNUAL REPORT FOR 2021 - CHIVUNA MISSION RHC.

Chivuna Mission rural Health Centre is located south east of Mazabuka District of Southern Province. It is 68km from Mazabuka General Hospital (our referral Hospital) along Livingstone road off Magoye turnoff. It is 48km from Monze Mission Hospital. It operates as a Zonal center for all the six nearby clinics.

The centre is connected to both hospitals by a gravel network which can rather be bad and impassable at times in the rainy season.

The centre was founded in 1951 by the Jesuit priests and then handed over to the Religious Sisters of Charity, then finally to the Religious Sisters of the Holy Spirit of Monze Diocese who are the managing agency. It is a 32 bed capacity.

It had a catchment population of 9, 382 (CSO), it has a hilly landscape with streams around which flood during rainy season making it difficult for people to access medical help, the only goodness is that they dry up easily.

The people of Chivuna are mostly farmers, the main crops grown being maize and groundnuts. Some also do animal husbandry.

A number are transport providers and minorities are teachers, health workers and agricultural workers.

The centre is surrounded by 3 basic schools, 2 community schools and 1 Secondary school.

Our clinic offer the following services: Outpatient ,In patient, Malaria, TB, Environmental health, Nutrition, Maternal and Child health, Integrated reproductive health , Laboratory, Voluntary Male Medical Circumcision (VMMC), human resource and infrastructure, HIV/AIDS which includes the following (Voluntary Counselling and Testing (VCT) ,Elimination of Mother To Child Transmission (EMTCT) and combined Antiretroviral therapy (cART).

This report covers both clinical and service delivery activities in the year 2021. We had our first case of covid 19 on 2nd February 2021 and a lot of cases were found thereafter. We were overwhelmed with cases at St Joseph's secondary school in the 2nd wave and in the 3rd and 4th wave we had a lot of cases from the local community and the disease spread quickly. It was and it is still difficult to convince patients to keep social distance and to wear a mask whenever they were at our health facility and worse still to wear the mask properly when one decided to wear it.

We were supported with PPEs by the Churches Health association of Zambia (CHAZ). Garstang friends of Chivuna (through the provision of funds to buy PPEs). RSHM sisters supported us with PPEs and purchase of medicines. This help was and is greatly appreciated.

The clinic also bought heaters for the children's ward, prem unit and labour ward, an incubator was also bought through the support of PMS via Monze Diocese. Some food supplements were also bought for the under nourished children through the same support.

Ministry of health through DHO/ CHAZ helped us with capacity building for most health workers in different programs through workshops and onsite orientation. They also provided us with monthly grants, drugs and some equipment.

Having more staff houses has been and is still our cry and God has started opening doors for us. Beit Trust in November 2020 selected our proposal for funding of a 1 by 2 staff house and construction works are still on going. We however need more partners to come on board and help us construct more staff houses as well as more service delivery rooms at the clinic, we only have one designated screening room with the needed equipment against 40 people seen on each day on average, we do not have space for another screening room in the already existing structure hence we have improvised the registry as a screening room. We also need room for chest clinic and many other rooms. The facility also has only 2 clinical officers and 3 midwives against this population, this makes us conclude that both infrastructure and human resource are key at this moment.

We have 3 vehicles which include an ambulance but all the three have a very high maintenance cost hence draining the little resources that the clinic has. The bad terrain also contribute to the damage of the vehicles. We are in dare need of new vehicles and road maintenance.

The clinic recorded one maternal death at the end of the year under review because of some poor health seeking behavior in the year

We recorded more than 200 covid 19 cases during the year with 9 members of staff getting sick. We had about 3000 adults vaccinated against covid 19 and all the 34 members of staff and 49 community based volunteers vaccinated. It was difficult to convince people to get vaccinated because of myths and misconceptions but by the end of year most people were eager to be vaccinated.

Below are some of activities that took place and the numbers are given per quarter:

ACTIVITY	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4	TOTAL
OPD ATTENDANCE	2965	1969	1786	2268	8988
ADMISSIONS	116	159	135	146	556
DEATHS	0	0	0	0	
ANTE NATAL ATTENDANCE BEFORE 14 WEEKS GESTATION AGE	42	52	58	44	196
ALL ANTE NATAL ATTENDANCE(BELOW AND AFTER 14 WEEKS GESTATION AGE)	67	83	95	81	326
DELIVERIES	68	83	100	89	340
MATERNAL DEATHS	0	0	0	1	1
NEONATAL DEATHS	0	0	0	0	0
UNDER FIVE CLINIC ATTENDANCE	2270	2945	2070	2916	10201
MALNOURISHED CHILDREN	23	11	10	30	74
VCT	304	275	212	413	1204
POSITIVES	2	9	7	11	29

PAEDIATRIC STARTED ON cART	0	0	0	7	7
ADULTS STARTED ON cART	7	14	12	5	38
CURRENT ON ART	909	914	905	906	
VMMC	55	11	9	0	75

Below is an outline of the top ten causes of morbidity.

1	MALARIA
2	TRAUMA AND OTHER INJURIES
3	SKIN DISEASES
4	STIs
5	HYPERTENSION
6	NERVOUS SYSTEM DISORDERS
7	COVID
8	NON INFECTIOUS DISEASES
9	THROAT DISEASES
10	RESPITATORY TRACT DISEASES NON PNEUMONIA

MAJOR ACHIEVEMENTS

1. With the support of Beit trust, we started building a 1x2 staff house, because of the hike in the price of building materials, the funding wasn't sufficient hence Garstang has played a pivotal role in adding to the money for materials, we will forever remain indebted to our all-weather friends.
2. We managed to reach our annual target for fully immunized children
3. Reduction in HIV prevalence through test and start program.
4. We managed to purchase heaters, an incubator and food supplements for under nourished children with support from the Diocese of Monze under pontifical Missionary society.
5. Our garden has started producing vegetables and we are able to supplement our kitchen.
6. One member of staff graduated with a degree in Nursing and another one graduated in midwifery while 2 have started their upgrade to registered nursing.
7. We received PPEs to use during this COVID pandemic from DHO and RSHM sisters and Religious sisters as well as from our all-weather friends from Garstang.
8. We have started screening women for cervical cancer and we have the equipment and 2 members of staff were trained in this.
9. One more member of staff was trained in TB modules and 2 more staff were trained in VMMC.
10. The members of staff went for a short break to Siavonga
11. We were one of the three health facilities in the district to receive the covid vaccine
12. We were the best facility doing well with covid contact tracing and reporting.
13. We had a high number of Covid cases with low fatality rate.

CHALLENGES

1. We received low government grants (K1500 per month) against the high cost of items
2. We do not have enough and a variety of drugs.
3. Bad road network hence much damage to our vehicles with high maintenance costs.
4. The delivery room is too small as compared to the number of deliveries conducted.
5. We do not have funding to rehabilitate the roof of the male and female wards as it has been attacked by rust and it has become hazardous, we did notify DHO but we have received no help yet.
6. Non availability of dental services
7. We do not have enough staff houses, despite being supported with two, we need more staff houses.

8. We do not have enough staff as compared to the work at the clinic.
9. We had a lot of malnourished children due to poor feeding practices and lack of food in some households.
10. Number of teenage pregnancies is still on the increase despite the intensified health education in schools and youth friendly space.
11. Male involvement in MCH has gone down despite intensified health education.
12. Few screening rooms and utility rooms at the facility.

FUTURE PLANS

1. Lobby for the construction of more staff houses.
2. Lobby for procurement of new vehicles as the ones we have are old and we are spending more to keep them on the road.
3. Lobby for a rehabilitation of our borehole so that we could have our own water supply system.
4. Lobby for more computers so that the in patient data can be captured in real time
5. Lobby for funds to rehabilitate the roof and ceiling for male and female ward.
6. Lobby for construction of more screening rooms and other rooms at the facility.
7. Lobby for a GeneXpart machine.

CONCLUSION

Despite the many challenges that we faced last year, we managed to do most of the activities and we thank God that he granted us good health and took care of us during the 2nd to the 4th wave of covid 19 as all members of staff recovered from COVID 19. We are also grateful to our collaborators who helped us so much in the smooth running of the institution. Find attached the photos for the clinic and some of the activities that took place during the year 2021.



BOREHOLE TO BE REHABILITATED



THE WARD ROOF NEEDING REHABILITATION



THE CONSTRUCTION OF THE HOUSE





ADVANCED STAGE OF THE CONSTRUCTION



(Left) LEISURE TIME IN SIAVONGA (A SHORT HOLIDAY FOR THE MEMBERS OF STAFF TO APPRECIATE THEM)\

(Right) OUTING TO SIAVONGA. POSSING AT THE KARIBA DAM



(Left) VACCINATION CAMPAIGN, MEMBERS OF STAFF VISITING SCHOOLS



(Right) SOME MEMBERS OF STAFF JOINED THE RELIGIOUS SISTERS OF THE HOLY SPIRIT IN CELEBRATING THEIR GOLDEN JUBILEE IN OCTOBER 2021

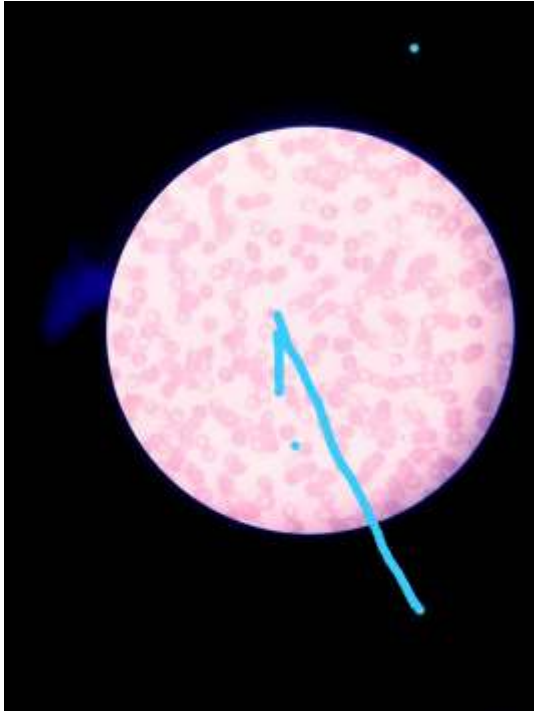
(Left) A MEMBER OF STAFF KEEPING THE CLINIC CLEAN AND ATTRACTIVE



MEMBERS OF STAFF GOING INTO THE VILLAGE ON FOOT TO DO CONTACT TRACING OF THE COVID CASES.



MOTHERS WITH MALNOURISHED CHILDREN RECEIVING HEPs FOR THEIR CHILDREN AFTER HEALTH EDUCATION ON HOW TO FEED THEIR CHILDREN



(Left) DISCOVERING AN UNCOMMON SPECIE OF THE MALARIA PARASITE IN OUR LABORATORY (PLASMODIUM MALARIAE)

(Right) BAD ROAD NETWORK



A MEMBER OF STAFF ATTENDING TO CHILDREN DURING CHILD HEALTH WEEK