## <u>DRAFT. 26.10.04</u> Secondary Health Care facilities in Darfur

Hospital is mentioned in order of priority for intervention

State	Hospital	<b>Current Situation</b>	IDP,s No.	Access	WHO actions and/or plans	
North Darfur	El Fashir General Hospital	EMERGENCY: free care for IDPs and poor resident ,surgical ward, operative theaters  WHO:coordinate the medical supplies,and monitoring for free access.  Training: for nursing staff.  Pumping out septic tanks  Provide the reagents and basic equibment for the laboratory and Blood Bank  Focal point in the hospital for monitoring and follow up.	-Rehabilitation of Lab and Blood BankPediatric ward.( German red Cross propsed a MOU to support it)	mashtal camp: 40.000 abo shok camp: 24.989	GO	Reactivate lab.& Blood bank -Equipment for blood Bank costs 4000\$training for laboratory technician.
	Kabkabia	-MSF.B: Full Support -WHO: support a national surgeon till end of 2004	The support till mid December 2004	85.639	GO	Discuss issue of user-fees with SMOH and MSF-B after mid december
	Kutum	ICRC: Full Support Goal: feeding center WHO: support a national Surgeon	Rehabilitation started On the 20 <sup>th</sup> .june,functioning,and serve as referral for northern area of El Fashir	72.417	GO	Free access ,under supervision of ICRC, And WHO Focal point.
	Malliet	SMoH, one Doctor hospital Saudi Red Crescent support the OPD,Laboratory,	Radiology technician,	10.000	GO	Discuss with SRC to support the local radiology technician
	el Tawysha	SMoH, one Doctor hospital	Assessment mission	38.000	NOGO	Conduct assessment
	El Aid	SMoH, one Doctor hospital	Assessment mission		GO	Conduct assessment
	Om Kadada	SMoH, one Doctor hospital	Assessment mission		GO	Conduct assessment
	Saraf omra	MSF-B:PHC, 20 beds for in-patient, minor O.T		29.689	GO	

South	Nyala	- WHO: rehabilitate OPD through	-building a unite for latrines and showers	Nyala:	GO	Continue
Darfur	General	Johannette implementation partner -Support incentives, running coast ,drug supply till end of 2004. Training for nursing staff and medical team on 2 <sup>nd</sup> half of NovemberFocal point for monitoring in the hospital for free access to quality service -reference laboratory service is under instillation . Food distribution with collaboration	for the co. patient.	40.000. Kalma: 26.645		monitoring for the free access, - agreement with IRC to build the latrines unite
		with WFP				
	Kass Rural	-WHO;- rehabilitation of 2 pediatrics ward, OPD, Kitchen done -rehabilitation of the O.T, surgical ward is on goingbuilding new latrines and rehabilitation of water supply is ongoing in collaboration with IRC johannette will rehabilitate the obstetric warddrug supply incentives, running coast starting from July till end of 2004WHO support one national surgery specialist, as a technical support and work as a focal point for the hospital	-Rehabilitation, -Consumables, -national surgeon	36.100	GO	Rehabilitation, - consumables - national surgeon Provide budget support and waive user-fees Prepare for hand- over in 3 months
	El Deain	WHO: support one national surgery concultant.work as a technical support and focal point for the hospital supply of drugs and consumables till the end of 2004.	Weaving user fees	14.481	GO	Repeat assessment and outline plan of work
	Buram Hosp.	One Doctor Hospital	Surgery, Pediatric, obst. service	50 000	GO	Repeat assessmen and outline plan o work

Rahad El barady	One doctor Hospital	Surgery, Pediatric, obst. service		GO	Repeat assessment and outline plan of
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## SECONDARY HEALTH CARE FACILITES IN WEST DARFUR

HOSPITAL	CURRENT SITUATION	Gaps	IDPs	WHO PLAN
1. EL GENEINA State Hospital (Referral Hospital) (120 beds)	<ul> <li>WHO rehabilitating and re equipping the laboratory and blood bank.</li> <li>WHO is also rehabilitating the Gynecology and Women's surgical wards of the hospital.</li> <li>MSF-F: Rehabilitating</li> <li>Operation Theater, medical team, Pediatric ward –17 beds, therapeutic feeding center,</li> </ul>	Gaps More Medical Specialists are needed.	92,267	-WHO lab. And blood Bank rehabilitation done, but waiting for the equipments and Reagents? -WHO rehabilitated and reequipped Gynecology, Medical and Surgical wards for Women
	and supplementary feeding center. Also has built the Incinator, and provided a Generator.  • One surgeon (APW WHO Contract), 3 Obstetric doctors and 15 Sudanese medical doctors  • MSF-Ch is rehabilitating men's Medical ward.  • Mercy Malaysia has provided 1 Internist 1 general Physician, and a nurse to the hospital. It will be involved in hospital administration and training of the nurses. Will take in charge the nutrition (food) for the inpatients. Merlin will be involved in Reproductive health El Geneina hospital and Rehabilitation of the obstetric ward.  • ICRC is installed the newly built water pump in the hospital  MSF-F  • Is building a new TFC near the OPD and			- Consumables to be delivered by WHO starting OctoberExpanding the access to referral health care in West Darfur through budget and in kind support study, including user fees waiver has been submitted -Collecting weekly both OPD and IPD data for the epidemiological reporting -1 Italian Trauma Kit -3 NEHK -WHO has paid \$1500 for the Electrical wiring of the hospital -WHO donated a generator to the hospital on October 27, 2004-Discussing with SMOH, MSF-F, MSF-CH and ICRC on user fees waiver proposalWHO Provided these items: 1. CUPBOARDS 6 2. CHAIRS 12 3. Desks 3 4. Dressing Tables 3 5. Mattresses 36 6. Legs for Trolley 48 7. Small Trolley 9 8. Infusion Stand 18 9. Ceiling fans 5
	will move its TFC in the hospital to the new site soon.			10. Beds 36

2. ZALLINGI Rural Hospital (100 beds)	<ul> <li>ICRC has finished the physical rehabilitation</li> <li>ICRC has provided a surgical team, including the surgeon and the hospital is functioning</li> <li>There are 2 Sudanese Physicians and 3 midwifes</li> <li>MSF-F is running a feeding center in the hospital.</li> </ul>	More Medical Specialist are needed	57,634	- Assessment and follow up And provide: -1 Italian Trauma Kit -1 NEHK -Discussing with SMOH, ICRC, and MSF-F on user fees wavier proposal
3. GARSILLA Rural Hospital (40-60 beds)	<ul> <li>MSF-H: Rehabilitated the Hospital and signed MOU with SMOH to run the hospital.</li> <li>It is providing 1 international Surgeon and 2         Sudanese Medical doctors.</li> <li>Hospital is run by SMOH, There are 22 Nurses, 3 midwives, 1 lab technician, 1 sister.</li> </ul>	Medical Specialist are needed	City: 120,00 0 IDPs camps 31,788	WHO will facilitate the signature of MOU -1 Italian Trauma Kit, -1 NEHK -Planning to discuss with SMOH and MSF-H on user fees wavier proposal for the Hospital.
4. KULBUS Rural Hospital	Saudi Red Crescent is rehabilitating this Hospital and has promised to supply medical equipments and furniture.	Not functional	8,524	-WHO is negotiating with ICRC and MSF-F to take over this hospital, and will facilitate MOU with SMOH
5.1. FUR BARANGA Rural Hospital (15 beds only?) 5.2. Habilla Health center (40 beds)	<ul> <li>MSF-CH has opened an IPD with 10 beds</li> <li>SC-US is utilizing 4 rooms with 15 beds as a health center</li> <li>MSF-CH has started working as of July in Habila (40 beds, 1 doctor, 1 nurse) awaiting the opening of Fur Baranga rural hospital</li> </ul>	About 700 IDPs are settled in the hospitalOnly 1 Medical doctor in this remote locality	26, 124 54,000	-WHO to follow up and send a cholera kit (Habila), and for Fur Baranga rural hospital: -30 beds and their mattresses -1 Italian Trauma Kit, 1 NEHK -2 tents for TFC in Habilla -WHO completed Assessment of FB hospital on August 8-10, 04Negotiating with MSF-CH to work in Fur Baranga Hospital
6. GULU Rural Hospital (80 beds)	<ul> <li>SMOH to sign MOU with MSF</li> <li>Spain on August 2, 2004. MSF- Spain will be fully responsible for the Gulu Hospital.</li> <li>Will be fully functional immediately.</li> <li>1 Sudanese medical doctor, 4</li> <li>International medical doctors</li> <li>(gynecologist, Pediatrician, and Internal Medicine), and a Medical Coordinator</li> </ul>	Surgeons are needed	32, 544	-WHO has actively facilitated the signing of the MOU between the Parties on August 2, 2004, and is closely following up the implementation phaseWHO ready to provide -1 NEHK & 1 Cholera kit -MSF-Spain to report to WHO and SMOH and WHO initially on biweekly basis and later on once a week.
7. MORNI Field Hospital? 78 Km	<ul> <li>Built and run by MSF-F. The Hospital is functioning.</li> </ul>	-Surgical	67,968	WHO has provided: - 1 NEHK

from El Geneina	<ul> <li>3 Sudanese medical doctor, 3</li> </ul>	team and	- 1 Cholera Kit (D and F)
(SMOH defines it	International Medical doctors	more Medical	- 1 Trauma Kit B
as a Health		specialists	- Tents.
center)		are needed	
(100 beds)			