

**KETA MUNICIPAL HEALTH DIRECTORATE**



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**Your Health • Our Concern**

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**4th QUARTER REPORT**

**JANUARY 2023**

## CHAPTER ONE

### INTRODUCTION

The Municipal Health Directorate operates within the local government as one of the decentralized departments with a mandate to deliver quality health care services to the population within the municipality and beyond. The operational population of **Keta municipal** as projected from the 2010 census, based on an annual growth rate of 1.9%, is as follows:

**Keta Municipal - 80,528 (source National Demographic survey)**

**Children < 1 year - 3,741**

**Women in reproductive age - 22,447.**

The health service operates within 2 sub-municipalities namely; Anyako and Keta.

Health services are provided by 2 hospitals (1 CHAG), 5 health Centers, 3 clinics (2 private and 1 CHAG ), 4 CHPS compound and a Maternity home. Physician Assistants heads the sub districts and they work with teams of clinical and preventive health workers to provide a wide range of services to community members. The municipality has two main hospitals which serve as referral centers for other health centers and CHPs compounds. At the community level, there are about 62 maternal and child health outreach points, 22 trained traditional birth attendants and 19 inactive Community Based Surveillance volunteers (CBSVs). The 2 hospitals have a total bed capacity of 200 (KMH-110. SHH-90). The total staff strength is over 700 with 9 Doctors and 15 Physician Assistants. Nurses/Midwives constitute about 50% of the staff population with a little over 15% being para medicals and about 150 casual workers. Within this quarter, the municipality received 7 newly posted staff mainly nursing category to complement the current staffing situation.

## **MISSION**

“To provide quality health service responsive to the needs of all persons living in Keta and beyond by implementing approved health sector policies, increase access to health service and manage prudently resources available for health service provision”.

## **VISION**

People living in Keta municipal are healthier, wealthier and happier through the provision of the highest quality of health services through stakeholder collaboration

## **CORE FUNCTIONS OF GHANA HEALTH**

### **SERVICE/MUNICIPAL HEALTH DIRECTORATE**

All the activities carried by the Municipal Health Services are structured to achieve the four (4) main strategic objectives of the Ghana Health Services which are:

- 1. Ensure sustainable, Affordable, Equitable, and easily accessible Health services (Universal Health Coverage.**
- 2. Reduce Morbidity and Mortality, Intensify Prevention and Control of Non-Communicable Diseases**
- 3. Enhance Efficiency and Governance and Management**
- 4. Intensify Prevention and Control of Communicable Diseases and ensure the reduction of New HIV/AIDS and other STIS, especially among the Vulnerable Group)**

At the district level, curative services are provided by the municipal hospital and Sacred Heart hospital, a faith based at Abor. Public health services are provided by the Municipal Health Management Team and the Public Health units of the two (2) hospitals. The Municipal Health Directorate (MHD) provides supervision and management support to the lower level facilities at the sub-districts level. At the sub-district level both preventive and curative services are provided by the health centers, CHPS zones as well as outreach services to the communities within their catchment areas. Basic preventive and curative services for minor ailments are being addressed at the community and household level with the introduction of the Community-based Health Planning and Services (CHPS).

Among the key functions of the department includes:

- ❖ Ensure access to quality affordable health services at all levels
- ❖ Implement approved policies, standards and operational guidelines determined set by the ministry.
- ❖ Promote healthy lifestyles and living
- ❖ Establish effective mechanisms for disease surveillance, prevention and control
- ❖ Provide relevant in-service training to enhance the skills of staff
- ❖ Manage assets and properties of the services
- ❖ Perform any other function that is relevant to the promotion, protection and restoration of health.
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- ❖ Manage assets and properties of the services
- ❖ Perform any other function that is relevant to the promotion, protection and restoration of health.
- ❖ Collaborate with local and traditional authorities to promotes health
- ❖ Collaborate with decentralized departments to manage all Public Health Emergencies

**KEY ACTIVITIES CARRIED OUT THE 4<sup>th</sup> QUARTER ON 2022  
ACTION PLAN**

<b>ACTIVITY PLANNED</b>	<b>ACTIVITY CARRIED OUT</b>	<b>LEVEL OF IMPEMENTATION</b>	<b>REMARKS</b>
Organize 1 supportive supervision of CHMC meetings and community Durbars	1 rounds of supervision carried out to 8 CHMC meetings and 2 durbars supported and supervised	100% of planned activity carried out	CHMCs were taken through the health issues affecting the communities. (community specific) And ways to address these issues were reached. (COVID -19 hesitancy, high TB rate high teenage pregnancy, Diabetes etc.)

<p>Processing and submission of salaries for new entrant and promoted staffs to Regional Health Directorate (IPPD unit)</p>	<p>New entrants and staffs promoted letters were processed and submitted to region. A total of 53 staff promoted and salaries processed</p>	<p>100% of the salaries for new entrant and promoted staff was processed and sent to Regional Health Directorate (IPPD Unit)</p>	<p>About 100% of the new entrants and staffs promoted had feedback on their current status in the service</p>
<p>Organize review meeting on TB control activities</p>	<p>Review meeting carried out in all health centers and the two hospital room to review activities on TB Control and strategies to increase TB case detection a total 20 staff and 8 CV were present</p>	<p>100% achieved</p>	<p>TB coordinators from national, district met with the hospitals and Health centers TB coordinator and community volunteers (C V) to review their activity for the quarter and way forward.</p>
<p>Organize advocacy programme on COVID 19 vaccination services using radio and community durbars</p>	<p>12 Radio programs and 7 community durbars were organized on maternal, neonatal and child health programs</p>	<p>100% of planned radio discussions carried out</p>	

Organize weekly nutrition clinics for PLWHIV and diabetic patients at the KMH	Weekly nutrition clinics carried out as planned	All PLWHIV and diabetic patients who needed counseling were provided per protocol	Patients who needed special care were given nutritional supplement (FBF) provided by GHS
Carry out Monthly salary Validation for staff	3 Monthly validation of salary was carried out for all staffs in the 12 health facilities within the Municipality. The total number of people validated were 115	Planned activity carried out	All staff were validated
To Participate in the 4th quarters regional financial validation exercise	Quarterly financial validation exercise not carried out	100% the activity planed was conducted	
Monthly Processing and submission of NHIS claims to NHIA	3 months NHIS claims processed and submitted to NHIA	100% Achieved.	Claims were submitted within the stipulated time
Held procurement meeting, Municipal Health Management	Planned meeting carried out in this quarter a total of 7	100% Achieved	Procurement meeting was organized to plan for the 4 quarters

Meetings as required	people attended the meeting		procurement as well as the year. All sub district leaders procurement officer and core members were part of this meeting
Carryout quarterly integrated supportive supervision to all health facilities within the municipality	1 round of Integrated supportive supervision was organized	0% achieved	This activity was not carried out due to other compelling activities like Polio NID, COVID-19 vaccination exercise.
Timely management of logistics at all levels to avoid stock outs of commodities	Logistics were distributed though the Last Mile Distribution from Regional Medical Stores and open market as well as donors	75% Achieved	Requisitions were processed timely and medicines and non-medicines delivered by Regional Medical Stores through the Last Mile Distribution. However few essential medicines were not available
Carry out 3 monthly data validation and verification exercise	3 data validation and verification exercises carried out as planned both at the facility and	100% Achieved	Data validation exercises were carried out to ensure that high quality data is



	district levels before entry into the District Health Information Management System (DHIMS)		produced for analysis and decision making
Investigate all reported suspected cases of epidemic prone diseases, including AFP, YF, NNT, Measles, COVID19 and provide feedback as per IDSR guidelines	cases of Suspected Measles and yellow fever were investigated and all were negative	Targets set achieved	A total of 4 suspected case of measles and a yellow fever suspected case had their samples taken and sent to Accra (nugochi) for investigations and all of them were negative
Organize 1 Public Health Emergency Management Committee Meeting	The PHEMC meeting was not held.	0% achieved	PHEMC meeting was not held during this first quarter due to equally competing programs.

### **SOURCE OF FUNDING OF ACTIVITIES**

Earmarked program funds example Funds for TB Control activities, COVID -19 vaccination and Malaria, control activities

Internally generated funded programs like health promotion programs (Radio programs) and Child welfare clinics which is co-funded.

### **OTHER ACTIVITIES CARRIED OUT**

## **COVID – 19 STAKEHOLDERS ENGAGEMENT**

### **GHANA PSYCHIC AND TRADITIONAL HEALERS (GPTHA)LEADERS MEETING**

As part of the strategies to reduce COVID 19 Hesitancy and increase the uptake of the vaccine stakeholders from various shrine and traditional psychic and healer association were invited to discuss ways to improve the uptake of the vaccine among their members this activity was made possible through funds from Breakthrough ACTION(NGO). A total of 36 people attended the meeting.

### **COVID 19 VACCINATION EXERCISE**

COVID 19 is still within the municipality and a public health issues for the GHS as well Us NGOs hence to increase the coverage of COVID 19 vaccination within the municipality a total of four vaccination exercise was conducted within the fourth quarter which was funded by Volta regional Health Directorate and Jhpiego. After the four exercise a total of 9,949 people were vaccinated within the entire municipality.

### **NUTRITION SURVEILLANCE**

As part of MOFA and Volta Regional Health Directorate (Nutrition Unit) four yearly MOFA Nutrition Food Security Survey (MNFS) there is a nationwide nutrition survey and the aim of this survey is to assess the nutritional state of the nation's children under five hence nutrition officers were selected from all over the regions for this activity of which Keta Municipal is not an exception. The objective of the exercise is to assess children 0-59 months in connection with breastfeeding and feeding practices of mothers to their children. The survey was carried out in 25 communities within the municipality. The following communities were part of the survey 5 communities in Keta, 3 communities in Afiadenyigba 4 communities in Abor 2 communities

in Atiavi, a community in Asadame, 2 communities in Tsiamé, a community in Anyako, Hatorgodo and Abolove respectively, and 3 communities in Abor. A total of 158 children 0-59 anthropometric data were captured, feeding status and 24 hour dietary information were captured.

### **BABY FRIENDLY HOSPITAL INITIATIVE (BFHI) MONITORING**

This is an initiative that seeks to promote exclusive breastfeeding of babies to 6 months and continues breastfeeding of children up to two years by caregivers. This will be achieved through the knowledge the staff has on the policy and code of compliance of breastfeeding and the skills to deliver breastfeeding policies spelt out in the policy guide. With this activity 6 facilities in the municipality were selected. 2 hospitals (Keta Municipal and Abor Sacred Heart) two health centers (Kedzi and Anyako) and a CHPs compound (Aborlove) in the two sub-municipals all cadre of staff at the Maternity and mothers who delivered at the hospital were interviewed.

### **HEALTH SCREENING**

The health of people rely on how informed they are about their health status and as part of the world Diabetes day celebration. There was a health screening of staff and the communities within Keta Municipality during the annual Hogbetsotso festival. This activity was made possible by the kind support from the Lions Club. A total of 331 persons age between 14 to 77 years weight, height and BMI were checked and a total of 189 people age 14 to 77 years BP and sugar level were checked out of which 114 were health staff.

## GHS SECTOR WIDE INDICATORS FOR DISTRICT

<b>OBJECTIVE 1: ENSURE SUSTAINABLE, AFFORDABLE, EQUITABLE, EASILY ACCESSIBLE HEALTH CARE SERVICES (UNIVERSAL HEALTH COVERAGE)</b>			
<b>INDICATOR</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
Family planning Acceptor Rate	23.8%	20.2%	31.50%
Total estimated protection by contraceptive methods supplied (CYP)	661.7	928.5	940.6
Proportion of deliveries attended by trained health workers (SKILLED DELIVERY)	99.4%	118.1%	108.30%
Proportion of newborns receiving postnatal care (PNC) within 48 hours from birth	97.5%	99.1%	81.60%
Proportion of mothers who made at least four (4) ANC visits	67.7%	75.9%	76.1%
Out Patient Department Attendance	30,843	35,895	35,995
Proportion of OPD patients who are insured	83%	85.7%	87.30%
Proportion of functional Community Based Health Planning and Services	38	100	100
<b>OBJECTIVE 2: REDUCE MORBIDITY AND MORTALITY, INTENSITY PREVENTION AND CONTROL OF NON-COMMUNICABLE DISEASES</b>			
Prevalence of Anaemia In Pregnancy at 36weeks	46.7%	43.3%	47.70%
Teenage Pregnancy	13.4%	15.7%	12.60%
Children Under Five (5) Years who are Underweight	0.18%	3.8%	0.48%
Institutional Maternal Mortality Ratio Per 100,000	0	0	219.8
Percentage of Maternal Death Audited	0	0	0
Institutional Neonatal Mortality Rate Per 1000	0	0	5.5
Still Birth Rate	8.9	13.5%	7.6
<b>OBJECTIVE 3: ENHANCE EFFICIENCY IN GOVERNANCE MANAGEMENT</b>			
<b>INDICATOR</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>

Proportion of planned integrated district supervisory visits undertaken	100%	100%	100%
Percentage planned data validation meetings held	100%	100%	100%
Proportion of health facilities (public and private) providing data into dhims2	100%	100%	100%
Completeness of reporting by health facilities	100%	100%	100%
Proportion of NHIS claims submitted on time	50%	100%	100%
Proportion of BMC with functional audit committees	100%	100%	100%
<b>OBJECTIVE 4: Intensify Prevention and Control of Communicable Diseases and ensure the reduction of New HIV/AIDS and other STIS, especially among the Vulnerable Group)</b>			
	2020	2021	2022
Penta 3 Coverage	92.8	91.4%	80.1%
Measles-Rubella 2 Coverage	66.4%	68.2%	70.10%
BCG Coverage	136.8%	135%	112.50%
Malaria Case fatality Rate	0.22%	1.0%	
<b>Surveillance</b>			
AFP	0	0	0
Measles	2	1	3
Yellow Fever	0	0	0
meningitis	0	0	0
AEFI	0	0	0
MDR TB	0	0	0
Cholera	0	0	0
ILI	0	0	0
Rabies	0	0	0
Neonatal tetanus	0	0	0
Schistosomiasis	0	0	0
Tuberculosis	0	0	0
Guinea worm	0	0	0
Monkey pox	0	0	0

## **KEY ISSUES ADDRESSED**

In Spite of the numerous challenges in 2021, and also during the beginning of this year the MHD was able to make a remarkable progress in some areas of reproductive health, prevention of communicable and non-communicable diseases, maternal and child health services and consistent progress in quality of data that is entered into an electronic database for the GHS (DHIMS 2). But most especially the directorate sustained the gains in Governance indicators this quarter.

Medicines and non-medicines that were supplied from the Regional medical stores constituted about 80% of the requirements of the health facilities but the MHD and the Municipal hospital managed to get drugs from the open market to supplement even though there is high indebtedness to them.

## **ISSUES YET TO BE ADDRESSED**

1. Inadequate critical staff such as Doctors, laboratory scientist, pharmacist, dispensary assistants even though some intern doctors are providing services which was not available in previous year.
2. High incidence of teenage pregnancy, anaemia in pregnancy, and low family planning acceptor rate even though there is an appreciation compared to previous quarters.

## **RECOMMENDATIONS**

1. Efforts should be made by the MA to support the municipal hospital to set up a physiotherapy unit
2. The MDHS should increase lobbying at the RHD to attract more critical staff into the municipality and M A should aid in providing accommodation for the staffs who are willing to stay on after their internship as a way of motivation.

3. The Municipal Assembly should provide support to the MHD other departments to roll out a plan to deal with teenage pregnancy in the municipality. The plan that was developed with the Agric department on improving nutrition outcomes in the municipality should be reviewed and funding sourced to implement them to reduce the anaemia rate in the municipality
4. Conduct regular monitoring and supportive supervision to sub-districts.
5. The municipal Assembly should aid in constructing road to motor able areas so enhance prompt health care service delivery.
6. Also RHD and MA should support over-bank areas with canoe or boat to aid in service delivery.

## **CONCLUSION**

The municipal health service has a mandate to save lives and it will do all it can to achieve this mandate. However, health does not operate in a vacuum and so all stakeholders should come together to address issues like teenage pregnancy, anemia in pregnancy and COVID 19 hesitancy.

## ACTIVITY PICTURES



**MEETING WITH GPTHA ON COVID 19 VACCINATION HESITANCY AT KMA CONFERENCE ROOM**



**TRAINING ON COVID 19 VACCINATION STRATEGIES TO REDUCE HESITANCY ATMHD CONFERENCE HALL**





**VACCINATOR TRYING TO REACH EVERY PERSON AT LAWOSHIME AND IT ENVIRONS AMIDST THE DIFFICULTIES**



**COVID -19 VACCINATION AT VODZA COMMUNITY**



**A CROSS-SECTION OF A NUTRITION OFFICER ASSESSING FEEDING PRACTICES OF MOTHER**



**A CROSS SECTION OF NUTRITION OFFICER TAKEN ANTHROPOCENTRIC MEASUREMENT**



**TB REVIEW MEETING AT AFIADENYIGBA AND ATIABI HEALTH CENTER WITH TB COORDINATOR AND MHD STAFF**



**HEALTH SCREENING AT AFIADENYIGBA**



**A CROSS SECTION OF DELEGATES OF LION CLUB WITH AND STAKEHOLDERS WITHIN THE MUNICIPALITY**



**ACROSS SECTION OF HEALTH SCREENING SESSION AT KMA FORECOURT**