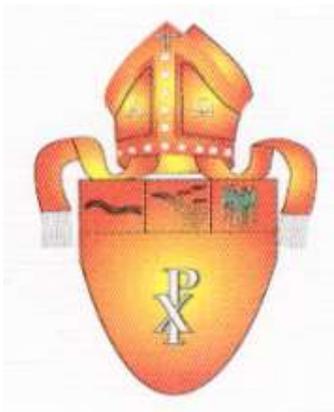




Proprietor, Rt Rev Brighton Vitta Malasa inspected Chilipa multipurpose OPD while under construction, in company of the Board members and St Luke's management Team.



**ST LUKES HOSPITAL AND HEALTH CENTRES ANNUAL REPORT
FOR THE PERIOD JULY 2020 TO JUNE 2021.**

TABLE OF CONTENT

Acknowledgement.....	2
Abbreviations.....	3
Executive summary.....	4
Introduction.....	6
Mission, Core Values and Vision.....	7
Chief Hospital Administrator’s Report.....	8
Medical Report.....	14
Primary Health Care Report.....	23
Hospital Operations.....	42
Chaplaincy Report.....	52
Financial report.....	53
Conclusion.....	62
Biography.....	63

ACKNOWLEDGEMENTS

In the reporting financial year ,July 2020 to June 2021, as directed by the strategic plan (SHHSP I), St Luke’s Hospital and eight health centers strategic plan which aims at Expanding, Modernizing and sustaining St Lukes hospital and health centers , besides making a contribution to the Malawi Ministry of health vision of “Health for all” through the implementation of the Essential Health Package(EHP) with the aim of contributing to the national health strategic plan (HSSP 11(2017-2022) guided by the National Health Policy, 2018; in the course of accomplishing the National health coverage a number of activities has happened. Health care service provision is a cost, St Luke’s Hospital , being a non-profit making institution utilizes donations, philanthropy and partnerships to help in meeting the cost for health care provision. The Hospital is glad to receive the precious and generous donations from various local and international stakeholders . Locally, the Hospital and health centers appreciate the support it gets from the Government of Malawi, The Ministry of Health, Ministry of Local Government and Various District assemblies.

Furthermore, Our umbrella organization Christian Health Association of Malawi (CHAM), Press Trust, Norwegian Church Aid, Old Mutual trust, UNICEF, EMMANUEL International, ONSE , Partners in health(PIH) for the unique SLA in Neno district and other local partners too numerous to mention. Internationally, the hospital continues to enjoy tremendous support from various stakeholders namely ; Malawi Association of Christian Support(MACS) , Capricorn Africa Trust, St Luke’s foundation Netherlands, Beit Trust(Uk), Hospice of North west Ohio(USA) , Global partners in care, Anglican Aid abroad(Australia), University of Amsterdam, United society, Sonnyvank foundation, Abbots Langley and Watford Malawi Group and Many others. In addition to this , the hospital appreciate the support it receives from the communities that surround our facilities, through various Hospital /Health centres Management committees(HCMC) all chiefs and Just to mention one; Senior Chief Malemia, adding to this, is the support received from the Board of Governors chaired by Mr. Phillip Mponda Banda, their policy guidance allows the hospital to take appropriate policy directions. Finally, The support the hospital received from the Bishop, Rt. Reverend Brighton Vitta Malasa, for creating conducive environment for the hospital and health centres to operate on, this is greatly appreciated.

To all those mentioned above and those not even mentioned, your support is greatly appreciated and it remains essential as the hospital is serving the people in need to improve their health and hence the social economic development of the country. May God Bless you all.

Regards,



WINASI DAVID BOMA

CHIEF HOSPITAL ADMINISTRATOR

ABBREVIATIONS /ACCRONAMES

ADUS	Anglican Diocese of Upper Shire	MSB	Macerated Stillbirth
AIDS	Acquired Immuno-Deficiency Syndrome	NCA	Norwegian Church Aid
ANC	Antenatal Care	NGO	Non-Governmental Organization
ART	Anti-retroviral therapy	NND	Neonatal Death
ARTI	Acute respiratory tract infection	NRU	Nutrition Rehabilitation Unit
ARV	Anti-retroviral	OPD	Out-Patient Department
BBA	Born Before Arrival	PACAM	Palliative Care Association of Malawi
CHA	Chief Hospital Administrator	PEPFAR	President's emergency fund for Aids relief
CHAM	Christian Health Association of Malawi	PITC	Patient Initiative Opt out Testing and Counseling
CO	Clinical Officer	PCU	Palliative Care Unit
CS	Caesarean Section	PHC	Primary Health Care
DHO	District Health Officer	PLWHA	People Living with HIV and AIDS
EID	Early Infant Diagnosis	PMTCT	Prevention of Mother to Child Transmission (of HIV)
EPTB	Extra Pulmonary Tuberculosis	PNO	Principal Nursing Officer
FSB	Fresh Stillbirth	PPH	Postpartum hemorrhage
HC	Health Centre	PTB	Pulmonary Tuberculosis
HCMC	Health Centre Management Committee	RTA	Road traffic accident
HIV	Human Immunodeficiency Virus	SAO	Senior Administrative Officer
HMIS	Health Management Information System	SLA	Service Level Agreement
HSA	Health Surveillance Assistant	SMO	Senior Medical Officer
HTC	HIV Testing and Counseling	STI	Sexually Transmitted Infection
KS	Kaposi Sarcoma	VE	Vacuum Extraction
LBW	Low birth weight	YFHS	Youth Friendly Health Services
MA	Medical Assistant	WHO	World Health Organization
MACS	Malawi Association for Christian Support (United Kingdom)		
MCH	Mother and Child Health		
MK	Malawian kwacha		
MO	Medical Officer		
MoH	Ministry of Health		

EXECUTIVE SUMMARY

Despite the continued challenges caused by Covid -19, which has brought numerous challenges to the health care delivery system for example; unbudgeted expenditures, increased demand for resources both human and material resources, and risk of diversion from strategic plan. The hospital and all health center's continued to provide the essential health services within our catchment areas and beyond.

The financial year July 2020 to June 2021 was marked by a number of milestones as the hospital strives to accomplish its strategic plan some of which are the Construction of the Multipurpose Outpatient department at Chilipa health centers in Zomba which shall ensure the availability of quality services, the opening of the modern operating theatre at St. Luke's hospital with two operating rooms which shall ensure the provision of modern and quality surgical services to the people of Zomba and beyond , additionally the following were done in the reporting period, upgrading of the water system at Mposa health Centre, Procurement of the motorcycle for our public health unit, upgrading of our palliative care unit into modern infrastructure, procurement of various medical equipment like suction Machines, oxygen concentrators, Anesthetic machine to ensure the incorporation of modern medical technology into our facilities . However, Apart from Covid 19 , strong winds and heavy rains damaged our two facilities in Mangochi namely Nkope and Lulanga facilities, but the facilities were renovated and are operating normally by our maintenance unit.

While recognizing that staff remains a source of competitive advantage and are the asset of the organization, the hospital continued to train a number of staff in various colleges and universities in Malawi. These staff are bonded once they graduate and are part of the essential strategic team that aim to develop the hospital in line with the St. Luke's hospital and health centres strategic plan(SHHSP 1) , also, a number of

staff went for short term trainings to strengthen capacity and as a motivation, some got promoted.

In an effort to specialize and expand, the hospital recruited an eye technician and management envision to grow the unit as it focuses to also grow the dental, and radiology Unit. To ensure adherence to good governance and stewardship, the hospital continues to be audited by its external auditors Bradley and Teely of Blantyre, this ensures that Hospital management is able to adhere to protocols and policies as well as manage risk that may divert it from accomplishing the organizational goal.

Management remained vigilant in the distribution of Drugs and supplies to all its facilities though the challenge in this area was the fluctuating prices in the market as Private drug suppliers kept on changing the drug prices now and then. It is good to note though that St Luke's foundation, Netherlands routine support towards drug and supplies continued to play a significant role in this area as it cushioned the challenges. Financially, the hospital remained in a stable state with growing assets from 1.7 billion Malawi kwacha in 2020 to 1.9 billion Malawi kwacha in 2021, this signifies a good growing concern. But the challenge in this area was cashflow, as cash was not available sometimes due to delayed payments by our debtors mostly the Ministry of Health through a partnership called service level agreement where the hospital offers services to patients for free at the Point of service and their after invoices the government through CHAM. This delay created a financial quagmire and sometimes affected quality.

Overall, the hospital and health centers delivered quality health services to the communities and endeavors to do so in the new financial year.

INTRODUCTION

Malawi is a small (118,484Km²), narrow, landlocked country that shares boundaries with Zambia in the west, Mozambique in the east, south and southwest and Tanzania in the North. The country had an estimated population of 17.4 million people in 2017 with an average annual growth rate of 2.7%, giving an estimated population of 20.4 million people by 2022. An estimated 84% of the population lives in the rural areas as compared to 16% in urban centers. Malawi is predicted to experience an average annual urban population growth rate of 4.2% from 2013 to 2030, which will result in an increase in urbanization. Malawi has a young population with 64% of the total population under the age of 15, 18% under the age of 5 and only 3% above 65 years. Life expectancy at birth was estimated at 63.9 for both sexes in 2017. Health infrastructure and Health care in Malawi is delivered by government institutions (62%), CHAM facilities (37%) and the private sector. The health system is based on three/four levels of health care with a system of referrals.

St Luke's mission hospital and her eight health centers which are both primary and secondary level institutions are a member of CHAM facilities owned by the Anglican Diocese of Upper Shire and serves as a District Hospital for Zomba. It has 165 beds, an out-patient and in-patient department, theatre, pediatrics unit, maternity unit, radiology unit, laboratory, pharmacy, numerous clinics, HIV/AIDS and primary health care services. St Luke's hospital has a total catchment population of 89,435. It is also a referral site for patients from Mposa and Gawanani Health Centre. The following are the eight health centres' and their catchment populations; Lulanga(42,843) in Mangochi, Nkope(30,000) in Mangochi, Mponda's (20,776) in Mangochi, Matope(19,808) in Neno, Chilipa(19,626) in Zomba, Gawanani(13,029) in Machinga, Nkasala in Zomba(20,840), Mposa in Machinga(23,754).

ST LUKE'S HEALTH DEPARTMENT MISSION STATEMENT, CORE VALUES
AND VISION

MISSION STATEMENT

We exist to promote the physical and spiritual wellbeing of all people in our catchment area and beyond without discrimination, through preventative and curative health services that are accessible and of high quality.

CORE VALUES

In line with the healing ministry of Jesus Christ we exist to show love by;

- i. Teamwork
- ii. Good governance and stewardship
- iii. Customer care
- iv. Effective communication
- v. Strategic management of human resources
- vi. Order and discipline
- vii. Self-sustainability

VISION

To create communities of healthy people where no one dies from preventable and curable disease

1. CHIEF HOSPITAL ADMINISTRATORS REPORT

OVERALL MANAGEMENT/ ADMINISTRATIVE REPORT

1.1.1. Introduction.



This is an overall report covering all strategic issues and risk management efforts to ensure accomplishment of the St Luke's Hospital and Health centers strategic plan 2018 to 2022, there by contributing to the Malawi ministry of health, Health sector strategic plan II. This report will provide an overview of the performance of St Luke's hospital and all health centers namely; Nkasala and Chilipa in Zomba, Mposa and Gawanani in Machinga, Matope in Neno, Lulanga, Nkope and Mpondas in Mangochi for a period ranging from July 2020 to June 2021. The major challenge in the period under review has been covid-19 and instability of the Malawi kwacha which has seen the rising cost of producing health care because healthcare is a cost.

Official opening of Lulanga Maternity Wing

1.1.2. Major activities done ;(In line with the strategic plan)

- ✓ Construction of multipurpose OPD at Chilipa health Centre.
- ✓ Procurement of an administration vehicle.
- ✓ Procurement of assorted equipment for the new operating theatre.
- ✓ Procurement a motor bike for the PHC unit.
- ✓ Construction of new water system at Mposa health centre.
- ✓ Construction of placenta pit, incinerator and toilets at Nkope health centre.

- ✓ Procurement of assorted Hospital equipment like oxygen concentrators for distribution into various units.
- ✓ Solar back-up system for various units and staff houses.

1.1.3. Planned activities for the new year are as follows;

- Construction of a maternity wing at Mponda's Health centre.
- Construction of a maternity wing at St Luke's Hospital.
- Modernizing and expanding dental units and radiology units.
- Digitalizing of the hospital's pharmacy and the general records management including the installation of CCTV cameras.
- Expanding and modernizing our ophthalmology unit.
- Procurement of an ambulance for Nkope health centre.
- Introduction of outreach clinics at Lulunga health centers.

1.1.4. Plans To Ensure Accomplishment Of The Budget

- ✓ Introduction of an electronic system in pharmacy which will minimize drug privileges and losses including theft.
- ✓ Intensified supervision both at the main hospital and health centers.
- ✓ Any allowances increases have been put on hold due to tough economic environment.
- ✓ A slight price adjustment.
- ✓ Focused and purposeful Performance management and appraisals in-order to align staff to the organization goals and plans.
- ✓ Intensified quality and customer care activities like introduction of exit interviews.



1.1.5. Human capital(performance)

- ✓ A number of Technical and Non Technical staff continue to do their trainings in respective universities and colleges though their trainings were affected by covid-19.
- ✓ Some members of staff received promotions from CHAM.
- ✓ More staff were engaged by DHOs and other partners for short term trainings and skills development.

1.1.6. Some of the major Key Performance Indicators (In relation to the strategic plan)

- ✓ Expanding and modernizing of the palliative care unit.
- ✓ Trainings and procurement of motorcycle for the TB projects.
- ✓ Construction of multipurpose OPD at Chilipa health Centre.
- ✓ Procurement of an administration vehicle.
- ✓ Procurement of assorted equipment for the new operating theatre.
- ✓ Procurement a motor bike for the PHC unit.
- ✓ Construction of new water system at Mposa health centre.
- ✓ Construction of placenta pit, incinerator and toilets at Nkope health centre.
- ✓ Procurement of assorted Hospital equipment like oxygen concentrators for distribution into various units.
- ✓ Solar back up system for various units and staff houses.

1.1.7. Furthermore, the following has been accomplished;

- ✓ Implementation of quality improvement and service delivery improvements supported by Nest 360 and Action medeor at St Luke's hospital and Life net at Nkope, and Mpondas.
- ✓ OPD attendance has remained almost the same despite covid-19 and utilization of the OPD services has increased by 16% .
- ✓ Total number of Live birth increased by 6.5% which signifies service utilization.
- ✓ Increase in OPD attendance in almost all health centres which signifies good service utilization especially for the SLA under-five for example 35% and Nkasala 164%.

As of May 2021 the following were the financial key performance indicators:

- ✓ Total assets of **Mk 1,830,329,436.02** which signifies an increase in assets compared to Mk1.7 billion in December 2020.
- ✓ Surplus of **Mk45,502,871**

$$\checkmark \text{ Current ratio} = \frac{\text{current Asset}}{\text{Current liabilities}} = \frac{\text{MK362,201,782.48}}{\text{Mk215,146,037.71}} = 1.7$$

This is a good sign as it demonstrates the organization ability to pay its creditors 1.7 times.

$$\text{ROCE (\%)} = \frac{\text{Operating profit(surplus)}}{\text{Capital employed (Total Assets – current liabilities)}} \times 100$$

$$= \frac{\text{Mk 79584918} \times 100}{\text{Mk1, 911,146,597.84 -215,146,037.71}} = 4.78\%$$

A return on capital employed (profitability ratio of 4.9%) This shows that the hospital is getting a fair return of 4.9% over its investments made. This also shows that the hospital is operating well by not generating an excessive profit because it is a non-profit making.

Net working capital = Current assets - Current Liabilities

$$\text{MKMK362,201,782.48} - \text{Mk215,146,037.71} = \text{Mk147,055,744.77}$$

This does not signify cash at hand clearly gives a clue that a total amount of Mk147,055,744.77 is available for investments and will be transferred into the new financial year.

1.1.8. Quality Care

- ✓ Management adopted a quality care philosophy to ensure that quality is the order of the day.
- ✓ In the year trainings of quality care and 5s were conducted in all the facilities.
- ✓ Introduction of Quality assessment tools to supervise departments and asses compliance to quality.
- ✓ Intensified health Centre supervision to ensure compliance to standards.
- ✓ Continued clinical audits in order to improve health service delivery.

1.1.9. Risk and Compliance Update

- ✓ Continued supervision by MOH and various departments to ensure compliance to standards.
- ✓ Working hand in hand with regulatory bodies like medical council and others.
- ✓ Clinical and non-clinical audits like financial audits.

1.1.10. Matters for noting

- ✓ The hospital procured a minibus for its operations.
- ✓ Lulunga health centers had its official opening ceremony on 1st June 2021 after one year of its use, this was facilitated by the donors NCA-DCA and invitations were restricted due to COVID-19.
- ✓ Management has budgeted for the recruitment of a pharmacist specifically for its private business.(pharmacy)
- ✓ The Lulunga old OPD roof is now repaired since the road is now passable.

1.1.11. COVID- 19

Remains a global crisis and has caused chaos in the health sector with its impact seen in both the social and economic life.

COVID-19

- . Caused increased demand in resources.
- . Excessive and unbudgeted expenditures.
- . Demand for more health care workers.
- . Social isolation .
- . Has affected health care seeking behaviors with more people shunning services.
- . Delayed movements of goods and services across countries including hospital supplies.

COPING

St Luke's hospital and health centers are equally affected in that covid-19 is one of the factors that may derail the comprehensive accomplishment of the strategic plan. To cope the following is being implemented.

- ✓ Efficiency for example re-working on staff schedules to ensure adequate utilization of staff.
- ✓ Digitalization and specialization of health care by shifting towards specialized activities.
- ✓ Maximization of resource.

- ✓ Partnerships, the hospital has had support from various partners like St Luke's foundation, Netherlands, CHAM, MOH and District councils, Malawi association of Christian support(MACS) and Anglican council in Malawi amongst others.

Challenges

- ✓ COVID -19 remained a bigger challenge in the year under review.
- ✓ SLA payments sometimes delays and this affects the operation.
- ✓ Inflation and fluctuation of prices on the market has affected the procurement of resources.

Final Remark

Because of its partnership with the government through its memorandum of understanding signed between MOH and CHAM, St Luke's hospital and its healthcenters continues to contribute to the achievement of the health sectors strategic plan II through the delivery of the EHP and other additional packages delivered by the hospital.

2. MEDICAL REPORT

2.1. Nursing

2.1.0. Introduction

Nursing is the backbone of health service delivery due to the significant role they play. At St. Luke's Hospital and all its eight health centers, there are 71 Nurse/Midwives and 45 clinical team. Nursing/Midwifery team forms the largest discipline representing 61% of the total Technical staff.

They provide preventive, curative, rehabilitative and supportive roles in every section of health care system.

This report provides the performance of the department in the period 2020 – 2021. It highlights some of the areas in which it has provided its personal, interpersonal and multidisciplinary functions so that all its clients within and outside its catchment area receives optimum care 24hours per day. It also shades more light on the achievements, areas that need improvement and some recommendations for each area of service delivery in order to further improve the performance.

The areas cited in this report are: Continuous professional Development, cervical cancer screening, TB nutrition support, palliative care, Infection prevention and control, Quality improvement and palliative care.

Continuous Professional Development

Continuous professional development is one of the lubricants for the smooth running of every organization at departmental level, since this process gives each member an opportunity to know him or herself holistically by the use of the Johari window (An efficient way of giving and receiving feedback) whose aim is to help people understand their emotional and physical relationship with self and other people. This approach helps in exposing the knowledge gaps that members in an organization have.

In nursing department, the pace at which CPD is being done has accelerated the numbers of nurses who acquired blue stamps which signifies that the requirement prescribed by the regulator nurses and midwives council has been reached and has increased from 0 to 24, that number only represent those that finished by the time renewals were being done but every nurse at St. Luke's Hospital continues to take part in the continuous development process. Furthermore, other nurses are doing external CPDs in different colleges.

	CPD REQUIREMENTS FULFILLED	NOT FULFILLED
2020(JULY-NOV)	0	70
2021(JULY-NOV)	24	46

The areas that need improvement are; knowledge gap on how to use the CPD log book and this will be curbed by orienting nursing staff on how to utilize the guide book; and interrupted meetings due to Covid-19 pandemic which we need to re-plan to have fewer gatherings but frequent meeting.

2.1.1. Cervical Cancer screening

Nursing department has advanced its effort in cervical cancer screening targeting women who are coming for family planning services, this is giving opportunity to women in our catchment area to primarily prevent cervical cancer since it is giving health workers a chance for early detection and treatment, with the introduction of HPV DNA self-testing with aid from PEER project which is the effort by a consortium of College of Medicine, UNC, university of North Carolina and others. This has produced a positive outcome in terms of boosting up the number of women coming for this service since the samples are collected by women themselves and health talks which are being conducted on a daily basis at the family planning unit, capacity building in cervical cancer among health workers here also played a role in equipping the nurses with skills on how to treat by thermal coagulation hence exposing women to early treatment before they reach a point that warrants hysterectomy, chemotherapy and palliative. Currently under this program we have managed to screen 816 women which are representing 20.2 % of women within reproductive age.

2.1.2. Tuberculosis (TB) Nutrition support

The association between TB and malnutrition is bi-directional. TB leads the patient to malnutrition and malnutrition increases the risk of developing active TB by 6 to 10 times. If one is already infected, the healing process is slower. Under nutrition weakens the immune system, which worsens the effects of infection which then increases the likelihood of under nutrition. In instances of poverty and food insecurity, this synergistic relationship between under nutrition and TB often leads to poor outcome of treatment.



Nursing department is in the forefront of ensuring that TB patients in the program of St. Luke’s hospital register are supported by provision of food supplements like corn soya blend, milk and eggs as sources of proteins and vitamins as

most of these patients come from the rural catchment area with shortage of food sources. Patients with active TB require approximately 40 kcal/kg of ideal desirable target body weight and this body weight should correspond to the desirable BMI of 21kg/ meter square.

In the period 2019-2020, St. Luke's registered 145 TB cases while in 2020-2021, there were 124 patients on nutrition supplementation. Some of these cases were diagnosed from other hospitals and opted to be referred in St. Luke's hospital in order to benefit from nutritious food. All of them had a monthly supply of either corn soya blend, milk, eggs and cooking oil (Severe malnutrition), corn soya blend, cooking oil and eggs (Moderate malnutrition) or corn soya blend and eggs (Patients with TB but no malnutrition).

2.1.3. Infection Prevention and control

Nurses are high- impact leaders in controlling infection in the hospital as well as their community emulating from Florence Nightingale's environmental theory which is based on the principle that creating sanitary conditions for clients assists in their recovery. The prevention and control of infections is essential to the provision of high- quality and safe health care services as the burden of health – care – associated infections is reduced thereby reducing prolonged hospital stay, increased resistance of microorganism to antimicrobials and increased financial burdens for patients and their families.

It is in this vain that St. Luke's nursing department puts the control of infections to be a top priority.



A photo taken during general cleaning at female ward

This year in October, St. Luke's management financially and materially supported the team driving Infection prevention and control in the hospital by inviting External assessors from the renowned Salima District Infection prevention and control Team to come at the facility and conduct internal assessment as a baseline of reference for improvement. The following were the scores: Kangaroo mother care =47%, Postnatal care =47%, General Facility (GF) = 60%, Labour Ward = 81%. The assessment concentrated on the ten thematic areas which included; Availability of IPC program at the facility, hand washing facilities, availability and use of PPE's, waste disposal, staff training, sterilization, cleaning of the patient environment, sanitation and hygiene in the health facility.

To attain recognition of excellence, each area of assessment should score 80% -100% which the facility is aiming at currently.

However, the IPC has some grey areas such as knowledge deficit on current National IP guidelines which the committee planned to conduct orientations in next financial year.

2.1.4. Quality improvement

This program started in December 2019. During this period, QI structures were put in place, such as Quality improvement supervision Team (QIST), Work Improvement Teams (WITs), Office of the ombudsman (both community and facility ombudsmen) and Customer Care Team.

Its work plan was developed in January 2020. The plan included the monthly QIST meeting, supervision of WITs by QIST, opening of suggestion boxes, formulation of demand creation team, 5s, fortnightly WIT meetings and Junior staff trainings.

The Team has managed among other activities; to make and put suggestion boxes in strategic places and open them for decision making for all wards and health centre, conduct staff orientation meetings at both facility and Health Centre level and also developed St. Luke's calendar as part of demand creation.

However, the program has met some challenges in terms of conducting coaching sessions due to the coming in of Covid-19 pandemic. The team is working towards restructuring its plans so that it continues to be vibrant despite the presence of the pandemic. This will include: putting QI as part of CPD program in order to ensure total participation, train WIT leaders and QIST members on how to conduct a project and conduct QI projects in all St. Luke's facilities.

2.1.5. Palliative care

Palliative care is specialized medical care given to people living with a serious illness such as cancer or heart failure and these patients may receive medical and nursing care to improve quality of life and prolong the progress of the illness.

In line with the government of Malawi, St. Luke's hospital recognizes the importance of palliative care services for patients with both non communicable Diseases and illnesses like HIV/AIDS especially

for those experiencing Antiretroviral Therapy (ARVs) side effects, poor adherence and those with HIV related malignancy, orphans and vulnerable children, the elderly and other vulnerable groups.



The facility has committed itself to renovate and furnish a self contained infrastructure with a fridge for drug storage, examination coach, fan and file cabinet in the room to be a palliative care clinic so that those clients coming to seek prevention and treatment of pain and other physical, psychosocial and spiritual problems have good space.



From July 2019 – June, 2020 , the palliative care clinic registered 361 clients and July 2020 – June 2021, there were 257 clients registered in the program. Currently there are 25 clients in the program. Most of the clients were discharged, others discharge themselves and a few died. A determined group of nurses, clinicians, the chaplain and other support staff continue to provide home visits.

In 2020, St. Luke’s hospital provided space for the garden where demonstrations of how to grow various vegetables are done to help clients sustain their nutritional status. There has been continuous supply of drugs and other medical supplies and transportation for home visits despite the disturbing impact of Covid-19.

The palliative clinic registered a success story of a cervical cancer woman who received successful counsel, underwent coailization and got healed. She had lost her 1st marriage and remarried after being healed.

However, some clients do not have protein supplements to balance their diet, there is shortage of trained staff in treatment of a new skin cancer drug (Paclitaxil) and drug stock outs of palliative drugs which the palliative team needs to lobby to ensure smooth running of the program.

Finally, nursing department will continue to strive to provide health care and basic human needs guided by Nursing theories including Nightingale's that gives language and structure to optimum provision of healthcare in the country.

2.2.Clinical

2.2.1. Clinical Report

New Theatre Building



During St Luke's Day November 2020 the New Operation Theatre officially opened. The hospital has two Operation Theatre Rooms. This means we can expend our elective surgeries and in the same time do emergency procedures. This was done with the help of Malawi Association for Christian Support (MACS).



2.2.2. Covid-19

The year 2020/2021 is marked by COVID-19. The pandemic has touched the entire world. The virus has definitely affected the healthcare system in Malawi. St Luke's Hospital has experienced a lot of COVID-19 patients, some severely ill. We have a special isolation side (two rooms with a total of 4 beds) where very sick patients can wait and be treated before they are referred to a COVID-center. With the support of St Luke's Foundation a large tent is procured to do triaging. St Luke's Foundation has also helped with the procurement of PPE's for example face masks, gloves, gowns, face shields. This has really helped the hospital and their staff to safely help the patients.

Our lab is capable of testing COVID-19 rapid test and PCR. Global Fund has donated an ambulance for the COVID-19 care for St Luke's Hospital. This helps in referring very sick patients to the COVID-center in Zomba.

The hospital has also received several oxygen concentrators from various partners (Ministry of Health, St Luke's Foundation).



2.2.3. Ophtalmology Department

St Luke's Hospital is aiming to specialize where possible and since February 2021 the hospital has an Eye Specialist. This will improve our quality care. The hospital is planning to procure glasses in cooperation with Vision Spring in order to get good quality glasses for a reasonable price.

2.24. Nursery/Newborn Essential Solutions and Technologies (NEST 360)



Through partnership with NEST 360 our Nursery Ward is equipped with two PumaniBubbleCPAP, an oxygen contrator, a resuscitaire, an oxygen splitter and phototherapy-light. Before the hospital could use these equipments we had a user training



course of two days at our hospital for all the nurses working in either labour ward, nursery



or postnatal ward. The maintenance department also received training. As a result of this training,

the equipment will be handled better and have a longer life. We expect to have a major change in our neonatal outcomes with the addition of this equipment. Every quarter we receive supervision from a team of professionals from NEST to see the progression in Nursery.



2.2.5. Laboratory/Action Mediore

In collaboration with Action Mediore the hospital has received a semi-automated biochemistry analyzer with reagents and a 3-part hematology analyzer including reagents for our laboratory department. The equipment was donated together with a user-trainer for our laboratory and maintenance staff.

PLANNED PROJECTS (2021/2022)

2.2.6. Dental department

Our dental department is one of the busiest departments of the hospital with more than 4500 patients every year. The hospital strives to get better equipment for our dental department

including a dental X-ray and equipment for outreach programs for the hard to reach areas.



The Dental room 1



The Dental room 2

2.2.7. Radiology Department

With the world becoming more digital every day St Luke's Hospital doesn't want to stay behind. Currently the radiology department is out dated and using a lot of chemicals to develop pictures. This project will take several phases. The first phase will start in September 2021. The old theatre building will be renovated and turned into the new Radiology Department, with a large room for the X-Ray Machine, reception, waiting area and ultrasound scanning room. All the adjustments on the building will be according to the safety requirements of the Medical Council.

In the next phases the hospital will purchase a digital X-ray Machine with help of donors and Ministry of Health.

2.2.8. Training laboratory staff health centers

Refresher training for all laboratory health center staff will be given for 2-3 days at St Luke's Hospital in order to keep our health centers up-to-date to all the current standards and protocols.

2.2.9. Emergency Triage Assessment and Treatment (ETAT)-training

To strengthen our OPD triaging and pediatric care the hospital has planned to give a 2 day training for nurses, medical assistants and clinical officers of St Luke's. This is a well-known WHO-training, and pivotal for triaging and emergency treatment in the hospital.

3. PRIMARY HEALTH CARE



Chief Hospital Administrator, Mr. Winasi Boma (sited on a chair, centre) posing for a group photo after handing over footballs and sports attire to Community based organizations and Youth Clubs Leaders at St Luke's Hospital.

Introduction

St Luke's Hospital Primary Health Care Department continues to offer essential health care that is based on scientifically sound and socially acceptable methods and technology, which make universal health care accessible to all individuals and families at St Luke's Hospital and its health centres' catchment area and beyond. St Luke's Hospital Primary Health Care Department continues to support PHC activities at St Luke's Hospital and its various health centres namely Nkope, Lulanga, Mponda's which are situated along the lake shore as well as Matope, Chilipa, Nkasala, Gawanani and Mposa health centres which are situated in the Shire highlands.

This report therefore comes to give an overview on how the Primary Health care department has performed the past financial year under review.

3.1. Health Centres Under St Luke's Hospital

St Luke's Hospital PHC department supports PHC activities at St Luke's Hospital and its eight health centres situated along the Lake shore and in shire highlands. Table 3.1 shows a summary of these health centres and the number of HSAs per each facility

Table 3.1: St Luke's Hospital and its Health Centres Statistics

Name of Health Centre	Number of HSAs	Estimated Catchment Population
Lulanga	12	42,834
Nkope	17	30,893
Mponda's	24	20,776
Matope	10	19,808
Chilipa	19	19626
Gawanani	08	13,029
Nkasala	19	20,840
Mposa	18	34, 812
St Luke's Hospital	21	89,435

Achievements

- Recruitment of HSAs in all health Centers.
- Maternal and child health clinics in all the health facilities done routinely.
- Routine family planning services in all the health facilities.
- Routine nutrition activities in all the health facilities.
- Routine TB prevention activities in all the health facilities.
- Operational grounds department at each and every health facility.
- Inspection of market places, food handling premises in communities, water sources done.
- Covid-19 vaccinations done in all facilities

Challenges

- Low uptake of first dose of Covid-19 vaccines in all facilities
- Inadequate community outreaches activities in Lulanga and Chilipa because most areas are hard to reach.

- Training needs to health Centre staff and village care workers on TB, Nutrition, HIV expansion, maternal and child health, Home based care, youth friendly health services, etc.
- In Most Health centre's, people travel long distances to access health services for example Lulanga health Centre
- Inadequate permanent structures for under five, Antenatal outreach in all health Centres

Recommendations

- To continue sensitization on the importance and need for Covid-19 vaccine
- To support in conducting community activities on TB prevention, home based care, youth friendly services, HIV expansion, school health, family planning, maternal and child health, nutrition, IEC activities, etc.
- To support Health Centre staff with trainings on TB, Nutrition, HIV expansion, Maternal and child Health, Home Based care, youth friendly health services and teen girls support groups with support from well wishers.
- To establish 3 outreach clinics under Lulanga health Centre as per Strategic plan in order to increase access to health services to all surrounding communities.
- To lobby for a Land Cruiser vehicle for Primary Health Care department to ease transport challenges for community outreach activities and support all Public health activities in all facilities.
- To lobby for public address system for Primary Health Care department to be used for community sensitization and awareness of public health cases so as to ease hiring costs.
- Lobby for construction of at least one permanent shelter for outreach clinics per health Centres' catchment area.

Description of Programs

3.2. Maternal and Child Health Department

MCH Department provides different services such as Antenatal care, PMTCT, Family Planning and under five clinics. Nurses, Public Health and support staff work hand in hand to support MCH activities.

St Luke's Hospital has six Antenatal, Family planning and under-five outreach clinics namely; Minama, Chitenjere, Chiyaso, Malemia II and Nsauka in Zomba and Nkalawire in Machinga.

Strengths

- Health education done on the importance of starting ANC early in the first trimester and hospital delivery.

- Male involvement messages given during health talks at facility and community level.
- ANC outreach clinics established in six sites

Challenges

- Increased pregnancies among young girls.
- Pregnant mothers often start ANC in second trimester.
- Covid-19 affected ANC activities at facility and community level.
- Need for permanent structures for Antenatal services

Recommendations

- To intensify community sensitization on importance of outreach clinics.
- Orientation of influential people in the community to support sensitizing the community on dangers of babies born on transit or at home, early pregnancies, importance of starting ANC early, etc.
- To continue with ongoing health talks in schools, health posts and communities on the dangers of early pregnancy in girls
- To recruit and train teen girls support groups to help sensitize young girls on dangers of early pregnancy and importance of education with support from well wishers.
- Lobby for construction of permanent shelters for Antenatal services

3.3. Family Planning Services

Strengths

- ❖ Depo provera is the most preferred method by most women
- ❖ Availability of contraceptives made it easy to assist all clients who preferred the methods.
- ❖ School girls came to access the family planning methods.
- ❖ Sensitization continues on family planning

Challenges

- ❖ There are no community volunteers on family planning services to support in community sensitization.
- ❖ Only two people were trained on inserting IUCD.

Recommendations

- ❖ To continue health talks in schools and Youth Clubs on family planning methods.
- ❖ To provide ongoing health education and community sensitization on the importance of family planning.
- ❖ To continue providing motivational talks to clients on the importance of long term methods of family planning.

- ❖ To identify and orient community based volunteers within the catchment areas to support in sensitizing and motivating people on family planning services.
- ❖ To lobby for training of staff on IUCD insertion and removal for them to provide the service to clients who prefer the method.
- ❖ To consider providing long term family planning methods during outreach clinics.
- ❖ Male sensitization on importance of reproductive health services

3.4. Expanded Program on Immunization

EPI is a WHO program aimed at providing vaccination to all under one child and pregnant mothers. The main goal of EPI is to reduce mortality and morbidity rates due to vaccine preventable diseases. The objective or target of EPI is to ensure full immunization of children less than one year of age at 90% coverage nationally with at least 80% coverage in every district or equivalent administrative unit.

Strengths

- ❖ Daily under five clinics at facility level
- ❖ Routine outreach clinics are conducted

Challenges

- ❖ Unavailability of permanent structures for EPI services at Chitenjere, Nsauka, Minama, Malemia 2, and Ulongwe where outreach clinics are conducted

Recommendations

- ❖ To continue health education on importance of immunizations
- ❖ To lobby for construction of permanent structures at Chitenjere, Nsauka, Minama, Malemia 2, and Ulongwe for EPI, Antenatal services, Family planning and Nursery school/CBCCs

3.5. Nutrition

Children who are managed are those from two months equal to or less than 15 years old. NRU is the combination of three programs namely NRU, OTP and SFP.

Strengths

- ❖ Support on nutrition in Nurseries/Community Based Care Centres and Community based Organizations, Home based care patients.
- ❖ Routine nutrition assessment done at facility and community level

- ❖ Orientations on nutrition for village care workers and community health care workers done with support from Anglican Aid Abroad Partners
- ❖ Cooking demonstrations done at facility and community
- ❖ Team work and well organized staff on conducting Nutrition and under five clinics.
- ❖ Follow up of patients done
- ❖ Demonstrations on how to make Likuni flour done in communities

Challenges

- ❖ Supplementary feeding program has stopped due to stock out of rations like Likuni flour and cooking oil
- ❖ There is need for orientation on inpatient care for Home Craft Workers
- ❖ Need to support community home gardens with starter pack seeds like soya, maize, Ground nuts for preparation of Likuni flour at community level

Recommendations

- ❖ Lobby for training on the inpatient care for home craft workers and other necessary staff members.
- ❖ To intensify cooking demonstrations and support with cooking materials for it to be effective.
- ❖ To promote community home gardens and support with starter pack seeds like soya, maize, Ground nuts for preparation of Likuni flour at community level to prevent malnutrition and support children on supplementary feeding program in the community.
- ❖ To intensify follow up of malnourished children and provide health Education to promote recovery and prevent relapse and treatment failure.



Cooking done by one of the participants during cooking demonstration after home craft worker demonstrated to them at Chilipa Health centre.

3.6.Home based Care Program

This program aims at assisting those patients/clients who have chronic illnesses in their respective communities. Here at St Luke's Hospital, the program is being run through the community based organizations within our catchment area. There are fourteen CBOs and each has home based care volunteers.

3.6.1.Outcomes / Results for St Luke's hospital

Table 3.6.1. shows a summary of home based care statistics for the financial year under review.

Table 3.6.1: Home based care Statistics

No	Name of CBO	Number of Volunteers	Number of Clients/Patients
1	Makobo	12	52
2	Chiyaso	06	32
3	Hidaya	06	17
4	DAO	08	38
5	Limbikani	07	12
6	Mgwirizano	08	29
7	Tikambirane	08	09
8	AIYDO	15	39
9	Mphalapala	15	18
10	Bwenzi	05	05
11	Tigwirizane	06	12
12	Tiyanjane	02	04
13	Machinjiri	09	14
14	Talandira	02	03
	TOTAL	103	284

Strength

- There is Good collaboration with volunteers.
- New Volunteers shows interest
- Orientation of Home based care volunteers done with support from Anglican aid abroad.
- Home visits done
- Increased number of CBOs doing home based care

Challenges

- Inadequate supplies and materials e.g pain killers
- Need for training for other volunteers
- Transport challenges for volunteers during home visits
- Need for nutritional support for home based care patients

Recommendations

- To lobby for support of supplies and materials from other well-wishers.
- To intensify in home visits and active supportive supervision for volunteers in their communities.
- To Lobby training for other volunteers
- To lobby for purchase of bicycles volunteers
- To lobby for nutritional support for patients from well wishers

3.7.Tuberculosis Prevention Program

3.7.1: Objective

The objective of TB control is to improve TB case Management and reporting and to increase accessibility of TB services

Strengths

- ✚ TB training for volunteers done with support from Anglican Aid Abroad
- ✚ Transport support of Bicycles to sputum collection points from Anglican Aid Abroad
- ✚ Well established community sputum collection points
- ✚ More TB presumptive being tested for HIV and TB.
- ✚ Well established facility screening system
- ✚ Availability of gene expert machine.

Challenges

- ✚ Inadequate cough booth (sputum collection area for the out patients presumed to have TB).

- ✚ Covid-19 outbreak has interrupted normal screening procedure
- ✚ Reduced number of home visits due to Covid-19 restrictions.
- ✚ Some health Centre's has no TB Microscopes for screening
- ✚ Old X-ray machine to help diagnose TB patients

Recommendations

- ✚ Digitalization of the radiology department to enhance diagnosis of TB patients.
- ✚ To lobby for additional cough booths from partners.
- ✚ To intensify in systematic TB screening.
- ✚ To enhance triaging of all chronic coughers at the OPD.
- ✚ To intensify follow-up visits to all TB patients.
- ✚ To conduct Community awareness and sensitization through – Health talks & Mass campaigns.

3.8. Grounds Department

The grounds department continues to perform its duties in making sure that all grounds around the hospital are in good conditions. Land is always kept clean all times by sweeping or slashing, planting and taking care of flowers, watering of flowers and shrubs etc.

Strengths

- Well motivated staff
- Land scalping, planting of flowers and grass around the guardians' toilets and bathrooms
- Team work among ground workers.

Challenges

- Inadequate materials and equipment's such as hoes, rakes, wheelbarrows, etc.

Recommendations

- To purchase additional working materials and other equipment's for the department.

3.9. Community Health Promotion Activities

Health promotion programs aims to engage and empower individuals and communities to choose healthy behaviors and make changes that reduce the risks of developing chronic diseases and other morbidities. Community participation is the basis of successful health promotion.

Achievements

- ❖ Inspection of food premises, water sources and schools

- ❖ Recruitment of 25 tailoring students with support from St Luke's Watford church
- ❖ Goat farming project as income generating activity.
- ❖ Conducted routine health education
- ❖ Information Education and Counseling given to community and OPD on different prevailing health conditions including COVID 19.

Challenges

- ❖ Covid-19 affected implementation of planned activities
- ❖ Inadequate IEC materials.
- ❖ Inadequate sedimentation tank for the ADUS water system

Recommendations

- ❖ To intensify supportive supervision of all CBOs
- ❖ To lobby for purchase of Public Address System for easy mobile van sensitizations from well wishers
- ❖ To orient community ombudsman at St Luke's and health centres.
- ❖ To intensify in IGAs at PHC chicken project, vegetable garden, tailoring, maize garden etc
- ❖ To intensify in routine inspection of water sources at both ADUS and WUA.
- ❖ To lobby for a big sized sedimentation tank for ADUS water system
- ❖ To continue health education on disease prevention.
- ❖ To conduct community scorecard at Malemia 2 and T/A Nkula.

3.10. St Luke's Hospital sewer ponds

The sewage ponds lie on the borders of Zomba and Machinga in the village of Chipire, T/A Malemia Zomba and at a distance of 400 meters from the hospital.

Achievements

- Routine inspection
- Cleaning and treatment done
- Maintenances done as soon as breakages and blockages are noticed
- Removal of glass at the surroundings
- Community sensitization and education on the need for caring for the ponds and to avoid throwing wastes into the ponds

Challenges

- The absence of the fence at the sewer ponds causes a lot of problems administratively and Health problems to the community like:

1. Difficult to maintaining the sanitation and hygiene for the surroundings and the ponds
2. Children within the communities are always found at the pods trying to pick some of disposed items that people from surrounding areas throw into the ponds like Diapers, plastic bags and other food remains from the wastes.
3. Dead animals like dogs, cats are thrown into the ponds which makes the ponds polluted and hazardous to the communities.
4. Some members from nearby communities are fond of drawing the contaminated water in the pods.
5. Some people close to the sewage ponds [nearby communities] are found using the dam as their toilet.
6. Maintenance costs of ponds breakages and blockages become huge every year thereby straining the already strained hospital resources

Way forward

- To continue health education to the surrounding community on the need of taking care of the sewage area and ponds and dangers for using the water from the ponds
- To continue inspection of the place
- To continue cleaning and treatment
- To encourage the community to report any breakages and blockages in order to correct the problem as soon as possible
- To lobby from well wishers to support by constructing a fence around the sewage area.

3.11. School health, Sanitation and Hygiene Promotion

There are 12 schools and 24 CBCCs supported by St Luke's hospital. School health activities were done in all CBCCs and in 12 schools

Achievements

- Good relationship with school administrators and management
- School screening and testing of COVID-19
- Screening of students for different health problems

Challenges

- Inadequate resources for school health activities.
- Closure of schools due to Covid-19 affected school health program

Recommendations

- To conduct periodic quarterly school health programs (screening and treatment of minor ailments, inspection, etc)
- To lobby for resources for school health activities from well wishers
- Orientation of teachers on school health, sanitation and hygiene promotion



Public Health Internees providing health education at Nsambainsa Primary School

3.12. Youth Friendly Health Services

3.12.1. Objectives

- To impart the youths, health workers, caretakers and community at large with knowledge on sexual, reproductive health and rights.
- To promote youth's accessibility to sexual and reproductive health services

Achievements

- Youth friendly health services done in youth clubs
- Orientation of youth's leaders done
- Active youth clubs in all 14 CBOs
- Good collaboration with youth in all CBOs

Challenges

- Increased pregnancies among girls during closure of schools due to Covid-19
- Inadequate Knowledge on youth friendly health services on providers, Youths, caretakers and community.
- There is need for recreation materials and youth centre.

Recommendations

- Community sensitization through Health talks & Mass campaigns on youth friendly health services
- To lobby for training of health care workers and peer.
- To lobby for recreation materials and youth centre.
- To lobby for establishment of one stop centre.

3.13. Community based Organization Youth clubs

Below is the List of Youth Clubs and number of youth members

NUMBER	NAME OF THE YOUTH CLUB	NUMBER OF MEMBERS
1	MIKUNDI	80
2	SHUKURANI	50
3	TAKONDWA	63
4	TIWASAMALE	47
5	HIDAYA	93

6	CHIYASO	90
7	MAKOBO	100
8	LIMBIKANI	51
9	TIKAMBIRANE	43
10	MGWIRIZANO	50
11	TALANDIRA (MISEWE)	34
12	AIDO	89
13	MPHALAPALA	46
14	BWENZI	37
15	DAO	40
16	TIGWIRIZANE	40
17	TIKAMBIRANE	25
18	TIYANJANE	20
19	MACHINJIRI	50
TOTAL		1,048

3.14. St Luke's Tailoring School



Tailoring school students after completing their training posing with their teacher (Left on the centre in front) and the EHO next to the teacher

3.14.1 Background

St Luke's tailoring School started operating on 28th August, 2018 and was officially opened by the Chief Hospital Administrator Mr. Winas Boma. The school is supported by St Luke's Hospital through its Primary health care Department with financial support from St Luke's Waterford Church who paid for Tailoring school teachers and support with Sewing Machines and other Sewing materials. Target population is youth who are needy and orphan from St Luke's catchment area. The aim is to support the youth who are needy and orphans by equipping them with knowledge and tailoring skills so that they can be able to support themselves and their families. The students undergoes a six months training and practical. Since it started the first intake was in August, 2018 and the second intake was in May, 2021.

3.14.2. St Luke's Tailoring School May 2021 Intake

May 2021 intake was the second intake that was completed in October 2021 and it started with 26 tailoring students while 22 students completed the training 4 Male and 18 Female. The students were selected from youth clubs under Community Based Organisations that are under St Luke's Catchment area. Interviews were conducted where 35 youths from different Community Based Organisations were interviewed and 26 youths

were successful. There were two teachers, one Male and one female who are hardworking, well experienced and talented. Graduation Ceremony for the student was on the 22nd, October 2021.

Achievements

- Supported with salary for Tailoring school teacher and practical materials by St Luke's Waterford Church
- Continuous support from St Luke's Management
- Hard working and goal oriented students
- 22 Students completed the training this intake as compared to 12 the previous intake.
- Hard working, experienced and well skilled Teachers
- Colourful graduation ceremony
- Increased demand of youth who need the service

Challenges

- Inadequate practical sewing materials and sewing machines
- Inadequate space for tailoring students due to increased demand of the service by the youth
- Need for sustainability plan for tailoring students

Way forward

- Request well wishers to support in purchase of practical sewing materials and extra sewing machines
- Lobby for extension of Tailoring student's Learning shelter
- To have a sustainability plan for tailoring students
- Expand the tailoring school by enrolling more youth like over 30 starting January 2022



Bishop: The Right Rev'd Brighton Vitta Malasa (centre) giving certificates to the graduating tailoring school students during 2021 St Luke's Day Celebration

3.15. Disaster Management and Disease Surveillance

3.15.1 Objective

To ensure appropriate disaster and disease prevention, preparedness, response and recovery at local, institution and district level

Achievements

- Team work among team members
- Enhancement and adherence of COVID-19 prevention measures
- Availability of PPE's.
- Good collaboration with DHO's.
- Good support from partners.
- Good support from management.

Challenge

- Need for constant supply of IP materials and PPE which are very expensive.

Recommendations

- To strengthen response teams in health centers.
- Community sensitization through Health talks & Mass campaigns.
- Training of all staff members especially the rapid response team.
- Continue intensification of disease surveillance.

3.16. HIV Testing Service

3.16.1 Objective

To increase coverage of HIV testing to all eligible groups

Achievements

- Continued health education on HIV testing
- Introduction of new HIV self-testing kit Oral Quick
- Good support from management and supporting partners
- Purchase of motor bike to support HIV expansion by Anglican Aid Abroad partners

Challenge

- Covid-19 has derailed HIV/AIDS youth activities

Recommendations

- To continue community sensitization through – Health talks & Mass campaigns
- To lobby for training of more HTS providers
- To intensify in supervision of programs.
- Scale up HIV testing services in outreach clinics, CBOs and youth clubs

3.17. ART Services

3.17.1 Objectives

- ✚ To increase capacity building in ART management
- ✚ Making infrastructure a disability friendly
- ✚ Increasing access to ART

Achievements

- ✚ Routine ART Services

- ✚ Continued health education on ART
- ✚ Availability of motor bike to support follow up of ART defaulters

Challenge

- ✚ Inadequate Knowledge in ART management on some health workers as well as communities.

Recommendations

- ✚ To conduct community sensitization through Health talks & Mass campaigns
- ✚ To lobby for training of health workers on ART
- ✚ To conduct quarterly supervision of support groups

3.18. Palliative Care

St Luke's Palliative/Hospice is registered with the Palliative Care Association of Malawi (PACAM). Our services are delivered free to those with life limiting illnesses. Patients are seen at St Luke's Hospital premises and their own homes within catchment area.

The integrated service offers support and care for patients facing an incurable life limiting condition in particular for:

- ❖ Management and monitoring of persistence symptoms including pain control.
- ❖ Management of emotional/psychological/spiritual issues.
- ❖ Management of family/social issues and end of life care.

Achievements

- Refurbishment of Palliative care centre with support from Hospice of North West OHIO
- Increase in number of clients enrolled for palliative care.
- Utilization of infection control measures when visiting clients with various co morbidities to prevent cross infection.
- Provision of nutrition supplements, soap, blankets) etc.
- Vulnerable children supported with their needs
- Follow up patients in their homes.
- Availability of the essential drugs.
- Well trained and hardworking providers.
- Client from outside the facilities catchment area opt to patronize the hospital services.
- Good team work.
- Provision of spiritual support through office of Chaplain.
- Good support from St Luke's management team, DHO, PACAM, Global partners in care, International partners.

Challenges

- No palliative care services in some health centres.
- Inadequate trained providers.

Way Forward

- To conduct community sensitization through – Health talks & community campaigns.
- Re-plan home Based care activities that will suit health care delivery within the Covid-19 era.
- To continue with home visits for patient follow up and bereavement support
- To continue supporting vulnerable children

- To follow up income generating activities to support the program,i.e. construction of a hostel.
- To introduce outreach clinics in health centres.
- To lobby for purchase of bicycles for volunteers.
- Train more staff and community volunteers in Palliative care.
- Publicize health seeking behavior in social organizations.

4. HOSPITAL OPERATIONS

4.0 Introduction

During the period under review, there were a lot of activities which took place at the Hospital. Thus, all departments which are directly involved in supporting these activities of the Hospital within this period are analyzed as follows;

4.1. Human Resource

Introduction

Human Resource is responsible for management of best practices to ensure effectiveness and efficiency of service delivery in order for organizations to realize its strategic objectives.

Organizational strategic goals can be achieved through competent employees who adhere to policies, rules and regulations that related to them in terms of commitment to duty and behaviour in the workplace.

The report highlights human resources issues in all nine health facilities and these are St. Luke's Hospital, Gawanani Health Centre, Mposa Health Centre, Matope Health Centre, Lulanga Health Centre, Nkope Health Centre, Mpondasi Health Centre, Nkasala Health Centre and Chilipa Health Centre.

Human Resource report will focus on the issues that have transpired between the duration of July, 2020 to June 2021

4.1.1. Staffing Levels for July 2020 to June 2021

NO	NAME OF FACILITY	NUMBER OF ESTABLISHED POST	NUMBER OF FILLED POSTS (July2020- June2021)	NUMBER OF VACANT POSTS
1	St. Luke's	225	207	7
2	Lulanga	38	35	3
3	Nkope	38	42	+2
4	Mpondasi	38	40	+2
5	Nkasala	38	25	11
6	Gawanani	38	25	13
7	Chilipa	38	28	10

8	Matope	38	30	8
9	Mposa	38	24	14
	Total	529	456	62

Staffing Levels between July 2020 to June 2021

4.1.2. Technical Personnel

FACILITY	MEDICAL OFFICERS	CLINICIANS	MAs	NURSING OFFICERS	NMT	CMA	SUPPORT TO SERVICES DELIVERY	HSA's
ST LUKE'S	2	15	3	6	48		10	
NKOPE	-	-	2	-	3	2		17
MATOPE	-	-	1	-	3	1		10
MPOSA	-	-	2	-	4			18
MPONDASI	-	-	2	-	3	2		23
NKASALA	-	-	2	-	3	1		18
CHILIPA	-	-	2	-	5		1	13
GAWANANI	-	-	2	-	3	1		
LULANGA	-	-	2	-	5			12
Total	2	15	18	6	77	7	11	

4.1.3. Temporary Staff

In order to mitigate the shortage of employees in some positions, management decided recruiting 13 temporary employees as stipulated below:

NO	POSTS	NUMBERS
1	Senior Dental Therapist	1
2	Nursing Officer	1

3	Eye Technician	1
3	Nurse Midwife Technician	3
4	Community Midwife Assistant	1
5	Hospital Attendants	2
6	Electrician	1
7	Artisan/Bricklayer	1
9	Security Guard	2
	Total	13

4.1.4. PEPFAR Employees

FACILITY	CLINICIANS	MEDICAL ASSISTANTS	NURSE MIDWIFE TECHNICIAN	TOTAL
ST LUKE'S	1	1	3	5
NKOPE	-	1	1	2
MATOPE	-	-	-	0
MPOSA	-	-	1	1
MPONDASI	-	-	-	0
NKASALA	-	0	0	0
CHILIPA	-	-	-	-
GAWANANI	-	1	1	2
LULANGA	-	1	2	3
Total	1	4	8	13

St. Luke's is privileged by 13 additional staff employed by PEPFAR who has been deployed to our health facilities. The deployment list and their cadres are as follows:

4.1.5. Newly Appointed Employees

The Hospital recruited 11 employees during July 2020 to June 2021

- ✚ 2 Medical Doctor's
- ✚ 2 Medical Assistants
- ✚ 6 Nurse Midwife Technician,
- ✚ 1 Hospital Attendant

✚ 1 Security Guard

4.1.6. Attrition Rate

St. Luke’s hospital and its health facilities experienced 12 attritions in various departments as illustrated underneath:

DEPARTMENT	POSITIONS (July 2020 –June 2021)	NUMBER	ATTRITION
NURSING	Nurse Midwife Technicians	6	Resigned
CLINICAL	Clinician	1	Resigned
	Clinical Technician	2	Resigned
	Laboratory Assistant	2	Dismissal/Resigned
	Medical Assistant	1	Resigned
Total		12	

4.1.7. Retention Strategies



various awards were given to staff in recognition of their exceptional performance and team work on St Luke’s Day

St. Luke’s hospital has developed these factors as retention strategies:

- Promotions of staff
- Increased number of staff sponsored in pursuing various offered training opportunities
- Rewarding and recognition of exceptional and high performers

4.1.8. PROMOTIONS

In the fiscal year under review St. Luke’s hospital has promoted 38 employees to various positions as shown underneath:

DEPARTMENT	POSITIONS	NUMBER
NURSING	Senior Home craft worker	2
	Senior Head Hospital Attendant	8
	Home craft worker	1
CLINICAL	Clinical Superintendent	1
	Senior Clinical Technician	1
FINANCE AND ADMINISTRATION	Senior Assistant Accountant	1
	Senior Accounts Assistant	1
	Senior Clerical Officer	13
	Driver	2
	Mortuary Attendant	1
	Senior Laundry Attendant	1
	Head Security Guards	2
	Capitao	1
	Total	35

4.1.9. Training Opportunities

St. Luke’s Hospital is sponsoring officers who are studying in various courses in different training institutions. Attached is the list of officer’s:-

LIST OF OFFICERS SPONSORED TO PURSUE COURSE

NO.	OFFICER'S NAME	COURSE TITLE	INSTUTION	DURATION	MODE OF STUDY
1	Patricia Kaunda	Bachelor of Science in Nursing and Midwifery	Mzuzu University	4	Full time
2	Molly Sankhulani Banda	Diploma in Nursing and Midwifery	Malawi College of Health Science	3	Full time
3	Judith Chiomole	Diploma in Nursing and Midwifery	St.Luke's College of Nursing	3	Full time
4	Felix Chibwana	Bachelor of Accounting	Exploits University	2	Weekend
5	Isaac Boma	Bachelor of Applied Accounting-Audit and Information Systems	Malawi College of Accountancy	2	Weekend
6	SheillaManyeka	Bachelor of Science in Nursing and Midwifery	Kamuzu College of Nursing	4	Weekend
7	Andrew Nyirenda	Bachelor of Science in Peadiatric and Child health	College of Medicine	4	Full Time
8	William Mlauli	Diploma in Dental Therapy	Malawi College of Health Science	3	Full Time
9	David Chapweteka	Diploma in Radiology	Malawi College of Health Science	3	Full Time
10	Rachel Chibaya	Certificate in Pharmacy	St. Joseph College	2	Full Time

Two Officers have graduated in their specialization. And the list is illustrated below;



- i. Gift Kasiyafumbi has graduated with **Bsc in Laboratory Technologist at Mzuzu University**
- ii. Benard Mlenga has graduated with **Bsc. of Adult Health at Kamuzu College of Nursing.**

4.1.10. Staff Accommodation

Members of staff acknowledge the rental charges that they are paying to all institutional houses. Most staff houses in all health facilities are in dilapidated state and need urgent renovations

ACHIEVEMENTS

- + DHOs' have increased number of HSAs' in all health facilities.
- + 35 employees promoted
- + 10 employees are sponsored in various training institutions
- + Reduced staff turnover rate from 16 to 6 employees
- + Orientation of Health centre in charges in pensions act and training policy
- + Staff turnover has decreased to 2.6%.
- + All health centres have at least two Medical Assistants
- + Deployment of 2 Nurse Midwife Technician under G 2 G project funded by USA government through Zomba DHO.
- + Timely payment of salaries and allowances

CHALLENGES

- + Inadequate of staff houses to accommodate entitled staff.
- + Scarcity of rental houses especially in some of our health facilities for instance Lulanga.
- + Stagnation of staffing levels due to absorption of PEPFAR employees into CHAM mainstream.
- + Delayed payment of pension benefits
- + Delayed replacement procedures.
- + Shortage of some technical support personnel in the labour market (eg Dental Therapists, Pharmacy Technicians and Radiographers).
- + Covid-19 has affected and prolonged training calendars.

RECOMMENDATIONS

- + Government should train more technical support personnel.
- + Lobby of construction of more staff houses.
- + Orientation of supervisors on how to conduct performance appraisals.
- + Intensify Performance appraisal system in all health facilities
- + To orient employees on various:
 - (1) Performance appraisal system
 - (2) Terms and conditions of service for St. Luke's Hospital
 - (3) Labour relations act
 - (4) Employment act
 - (5) Training policy

4.2. Maintenance Department

Maintenance department is one of the support departments of St Luke's Hospital. It is responsible for the maintenance of hospital buildings and repair of hospital equipment. The department is also mandated to supervise projects of the hospital, major and minor, locally or internationally funded.



Members ready for the installation of new water system at Mposa health centre

During the period under review, there were a lot of activities which took place and these included; maintenance of hospital buildings and repair of hospital equipment. Below are some of the maintenances and projects which took place both at St Luke's Hospital and in its Health Centers;

4.2.1. ST LUKE'S HOSPITAL AND STAFF HOUSES

- Maintenance of isolation ward to a COVID ward.
- Upgrading of water system at OPD, where new pipes were fixed replacing the old ones.
- Construction of a Children Play Ground, the project was sponsored by Donors.
- Replacement of hardwood door with a steel sliding door at the Mortuary.
- Turned one Isolation room into a Palliative Care Office.
- Made shelves, wardrobes, tables, benches and Office desks for the Operating Theatre.
- Maintained houses number 09 and 45b.
- Plumbing works were done to houses number 26, 23 and 35.

4.2.2. HEALTH CENTERS

- Construction of Guardian shelter at Nkasala Health center (a Joint project between St Luke's Hospital and Hospital Advisory Committee of Nkasala Health Center)
- Construction of new Maternity pit latrine, bathroom and placenta pit at Mposa Health Center.
- Maintained the water source at the dam intake for Mposa Health Center
- Drilled borehole and water pump installed at Mposa Health Center (Donor funded).
- Construction of Placenta pit and a Toilet at Nkope Health Center (Joined project between the Member of Parliament and St Luke's Hospital).
- New Solar was installed for back up at Nkope Health Center Maternity ward (Donor funded).
- Installed new water pump at Chilipa Health Center.
- New Solar was installed at Chilipa Health Center in the Maternity ward (Donor funded).
- Construction of brick wall fence at Mpondasi Health Center for the incinerator.

- New water tank, fittings and hardwood timbers for the pillar tower base were fixed at Matope Health Center.
- New borehole was drilled and new water pump and a water tank was installed at Matope Health Center.
- Maintained a Nurse House at Matope Health Center.
- Installed new water pump at Gawanani Health Center.
- Installed new Solar system for backup in Maternity ward at Gawanani Health Center (Donor funded).
- Renovated roof of OPD which was brown off by heavy winds at Lulanga Health Center.
- Installation of new solar system for backup in Environmental, ART, Old Maternity ward and four staff houses at Lulanga Health Center (Donor funded).
- Supervision of the construction of a multipurpose OPD at Chilipa Health Center.

Strengths

- Good Team spirit and works as a unit.
- Procurement of working kit motivated the Team (Donor funded).
- The Team was able to maintain most of the Hospital equipment during the period under review.
- During the period, a lot of maintenances were done at St Luke's Hospital and in its Health Centers.

Challenges

- Old infrastructure that needs frequent and extensive maintenance which is very expensive.
- Presence of unskilled personnel in the department.
- Incomplete corridor cover, connecting the wards to the Mortuary, almost a distance of 100 meters.

4.3. TRANSPORT DEPARTMENT

A department that operates 24 hours a day and seven days a week, making sure that there are no interruptions in terms of transportation at St Luke's and in its Health Centers. St Luke's as a Hospital had a total of eight drivers in the year under review, five were stationed at the main Hospital while three in its three health Centers i.e. Nkope, Chilipa and Lulanga respectively.

4.4. HOSPITAL MANAGEMENT INFORMATION SYSTEM DEPARTMENT

The HMIS department is mandated with collection, entry and interpretation of Data from all the hospital departments. After data has been collected, it is presented to Hospital Management and various stake holders to help in decision making.

During the period under review, there were achievements and challenges as below;

Achievements

- Good team working spirit amongst members of the department.

- The department reports to the ministry of health in time, and as a facility, St Luke's scored 100% in the completeness of the data it sends.

Challenges

- Only one quarter was reviewed in the year under review, this was due to COVID 19 restrictions which were in force year round.
- Some staff in the department had just joined and had not yet been oriented on Data Management, so this brought some challenges as far as data management and reporting was concerned.

5. CHAPLAINCY REPORT

1. Introduction

Chaplaincy department is one of the important departments at the hospital. This report provides an overview of the progress in performance in the period of June 2020 to May 2021.

In chaplaincy, we always believe the holistic care because apart from diseases there are worries, fears, emotional stress which needs spiritual guidance.

5.2. Daily Program

Annually produced daily programs are as follows;

- (a) Mondays, Tuesdays and Fridays for morning prayers
- (b) Wednesdays for hymns and choruses
- (c) Thursdays for Holy masses to members of staff, patients and guardians.

Chaplaincy always offers pastoral guidance to patients, palliative care clients, guardians and staff. Wards visitation praying and pastoral care to patients, guardians and staff. Door to door visitations accompanied by palliative care team to care for clients in their houses.

Apart from daily program we also produce monthly rosters for preaching.

5.3. Welfare

Through chaplaincy appeal fund we managed to assist some patients with some items like soap, sugar and cash.

5.4. Communication

For the first time chaplaincy has official cell phone for communication and Airtel money (0994018557) By May 31st there was k92, 950 in the chaplaincy appeal fund and offerings at Chisomo.

Strength

- Bought chaplaincy official cellphone.
- Improvement on morning prayers attendance.
- Morning prayers amidst covid19 pandemic and cold season.
- Ongoing chaplaincy appeal fund with receipt book.

Challenge

- Covid19 pandemic is the big challenge.
- Contributions to chaplaincy appeal fund.
- Inadequate pastoral guidance room.
- Slot of people (patients) need support from chaplaincy.
- Inadequate prayer and hymn books more especially to health centers.

Way forward

- Hospital management to provide adequate space for pastoral guidance.
- Chaplaincy committee to produce more prayer and hymn books.

3. FINANCIAL STATEMENT

4. INTRODUCTION

Finance is the heart-beat of any organization. For any institution to function properly, it is inevitable that its finances must be managed prudently besides its cash-flow being in a health state. The hospital undertook several activities to ensure that its finances are well managed, amongst which are:

5.1. 1 – AUDIT

The principles of good stewardship demand that one treats the institution and all its assets and liabilities with all due care and diligence. However, to enhance trust of the owners of the institution and to ensure compliance with set standards of accounting, it is imperative that an independent person/firm (Auditor) independently verifies the Financial Statements of an entity and give an assurance as to the truthfulness and fairness of the said statements.

To this effect, the Hospital engaged within the year under review, the services of Bradley and Teely to review our accounts and give their opinion on same. The opinion was generally positive. It was noted that the hospital had improved in a lot of areas especially book keeping and reporting standards.

CHALLENGES

It was noted that a lot of our assets have not been valued by a professional valuer for ascertainment of the values. This is a big setback on the part of the hospital as having all its assets valued by a professional would cost a lot of money.

WAY FORWARD

The hospital is in the process of looking for a cheaper professional valuer to carry out the exercise. If the price is still such that the hospital cannot afford to pay at once then we may have to carry out a phased one where we value a specific class of assets in year and then value another class of assets the following year until all the assets are valued or value a unit of the hospital or a health centre in a year and then another the following year until all the units are valued.

5.2. 2 – INFORMATION AND TECHNOLOGY, ACCOUNTING SYSTEM

In a bid to ensure accuracy and efficiency the hospital uses QuickBooks accounting package. This assists with accurate and easy reporting as information is at the tip of a finger. To enhance same, we procured an improved package from the QuickBooks 2016 to QuickBooks 2019.

To ensure that information is generally accessible and consistent, we procured a dedicated server for the hospital so that the hospital's information system is centralised and accessible from several different areas of the hospital. This server is accessible by a Local Area Network (LAN).

5.3. VISION

In the next year or so, we intend to fully computerise our services where all services will be on computers. As a start we intend to start this with the digitalising of our pharmacy and general stores services this financial year followed by the cashiers and then the wards and other service points later. This will assist the hospital to serve a lot of funds as we will be able to pay close attention to stock levels of our various inventory. We will also reduce on the purchase of some consumables such as number of paper and tonner as some of the items that we are printing will no longer be required to be printed as this will be available electronically. We will also totally deal away with cost of consumables like X-ray films and envelops as the images will be made available for scrutiny electronically through-out the hospital.

CHALLENGES

The cost of implementing the project is high especially the cost of purchasing computers for the whole hospital. The other challenge is to get all staff concerned to embrace the technology and to train them to competently use the technology.

WAY FORWARD

To deal with the high cost of implementing the project, the hospital will start with some units while others will be considered later. The challenge of members embracing technology will be tackled by a special training to be conducted by the suppliers of the Hospital Management System.

5.4. NOTES TO THE FINANCIAL STATEMENT

5.4.1 – Overall, Hospital Fees Income this year at K227,706,236 compares favourably with last year's K221,451,841 to give us a variance of K11,254,395. However, Chilipa, Nkasala, Lulanga, Nkope and Mpondasi Health Centres have compared negatively though. This is due to the fact that the under-five population for the said health facilities joined the government Service Level Agreement and the respective income that was previously obtainable for the same has now transferred to the SLA vote.

5.4.2- The Service Level Agreement vote has performed better than last year by K35,256,068 from last year's K158,958,063 to K194,214,131 this year. This is due to the inclusion of the under-five population as per note 1.

5.4.3-Salary Grants from CHAM has risen from K158,958,063 last year to K194,214,131 this year. This gives us a rise of K35,256,068. This has been occasioned by the government annual salary increment that is effected in July every year and also the notches salary increment that takes place in December every year.

5.4.4-Other Employment Costs rose by K28,125,358 to K102,142,150 from K74,016,793. This is related to Note 3 as some elements of the vote relate directly to Basic Pay. This in turn means that every time the basic pay changes, it effectively also affects other staff costs.

5.4.5-Supplies and Services rose to K190,267,073 from K146,906,037 to give us a difference of K43,361,036. This is mainly due to the emergency of the Delta COVID-19 variant. Management focused on making sure that all relevant supplies necessary for the management of COVID-19 are always readily available. This implied that we purchased more supplies than we normally do. This topped with the fact that prices of supplies rose on the market as a result of logistical challenges with regards to transportation problems worldwide.

5.4.6-Maintenance of Buildings this year has costed K9,893,045 compared to last year's K19,652,076 down by K9,759,032. This has been the case because management was focused on the management of the COVID-19 pandemic and as result fewer resources were channelled towards the maintenance of buildings as compared to last year.

5.4..B. STATEMENT OF COMPRIHENSIVE INCOME AND EXPENDITURE JULY 2020 TO JUNE 2021

ST LUKES HOSPITAL& HEALTH CENTRES						
STATEMENT OF COMPRIHENSIVE INCOME & EXPENDITURE						
			JUL '20 - JUN '21	JUL '19 - JUN '20	DIFFERENCE	
INCOME			MWK	MWK	MWK	
	HOSPITAL FEES INCOME					
		St Lukes Hospital	108,215,826	101,446,012	6,769,814	
		Matope Health Centre	12,000,000	12,045,000	- 45,000	
		Chilipa Health Centre	5,255,550	7,953,430	- 2,697,880	
		Nkasala Health Centre	4,152,090	5,948,550	- 1,796,460	
		Gawanani Health Centre	6,565,950	5,406,675	1,159,275	
		Mposa Health Centre	9,786,890	8,457,030	1,329,860	
		Lulanga Health Centre	5,057,550	10,146,650	- 5,089,100	
		Nkope Health Centre	5,799,550	8,677,100	- 2,877,550	
		Mpondasi Health Centre	5,195,150	7,445,500	- 2,250,350	
		Bishop Malasa Pvt Wing	65,677,680	48,925,894	16,751,786	
		TOTAL HOSPITAL FEES INCOME	227,706,236	216,451,841	11,254,395	1
		SERVICE LEVEL AGREEMENTS				

		St Lukes Hosp - Zomba	20,147,142	20,731,828	- 584,686	
		St Lukes Hosp - Machinga	50,773,936	46,114,614	4,659,322	
		Nkasala health Centre	16,786,677	9,703,822	7,082,855	
		Gawanani Health Centre	7,226,766	9,343,962	- 2,117,196	
		Matope Health Centre	5,856,841	7,284,005	- 1,427,164	
		Mposa Health Centre	14,339,730	14,408,563	- 68,834	
		Lulanga Health Centre	33,180,672	25,359,081	7,821,592	
		Nkope Health Centre	12,433,311	9,813,265	2,620,046	
		Chilipa Health Centre	16,037,296	9,378,733	6,658,562	
		Mpondasi Health Centre	9,784,100	3,372,689	6,411,411	
		Epimal Project	7,647,660	3,447,500	4,200,160	
		TOTAL SERVICE LEVEL AGREEMENTS	194,214,131	158,958,063	35,256,068	2
		OTHER INCOME				
		Salary Grants from CHAM	824,886,452	646,459,308	178,427,144	3
		Other Sundry Income	10,463,596	10,366,475	97,121	
		Foreign Grants	107,153,227	159,848,854	- 52,695,626	
		Income Generating Activities	4,146,188	4,112,300	33,888	
		Donations In Kind	39,162,525	32,568,284	6,594,241	
		Other Local Donations	1,302,275	1,711,905	- 409,630	
		TOTAL OTHER INCOME	987,114,262	855,067,125	132,047,137	

	TOTAL INCOME FOR PERIOD		1,409,034,629	1,230,477,029	178,557,600	
	EXPENSES					
	Employment Costs		890,825,330	688,849,976	- 201,975,354	3
	Other Employment costs		102,142,150	74,016,793	- 28,125,358	4
	Supplies and Services		190,267,073	146,906,037	- 43,361,036	5
	Intergrated Supervision		7,572,475	7,102,463	- 470,012	
	Health Outreach & Home Based Care		6,868,810	8,141,400	1,272,590	
	Hospital Operations		58,271,868	67,902,548	9,630,680	
	Governance Costs		26,564,398	15,201,568	- 11,362,830	
	Transport Costs		35,403,498	37,368,894	1,965,396	
	Maintenance & Repairs		7,729,042	11,180,595	3,451,554	
	Maintenance of Buildings		9,893,045	19,652,076	9,759,032	6
	Energy Costs		15,236,465	14,847,074	- 389,391	
	Water		3,004,460	3,374,343	369,883	
	Income Generating Activities		5,242,802	2,131,880	- 3,110,922	
	TOTAL EXPENSES		1,359,021,415	1,096,675,647	- 262,345,768	
	ORDINARY EXCESS/DEFICIT		50,013,214	133,801,382	- 83,788,168	
	OTHER COMPREHENSIVE INCOME AND EXPENDITURE					
	EXPENDITURE					
	St Luke's Foundation - Chilipa OPD		-	90,863,651	90,863,651	
	Bad Debts Written Off		4,510,343	-	- 4,510,343	

	TOTAL OTHER COMPREHENSIVE INCOME & EXPENDITURE		4,510,343	90,863,651	86,353,308	
	PERIOD EXCESS/DEFICIT		45,502,871	42,937,731	- 170,141,476	

5.5. BALANCE SHEET AS AT 30TH JUNE 2021

STATEMENT OF FINANCIAL POSITION		
ASSETS	MWK	
NON CURRENT ASSETS		
PROPERTY, PLANT & EQUIPMENT		1,549,871,815.36
TOTAL NON CURRENT ASSETS		1,549,871,815.36
CURRENT ASSETS		
WITHOLDING TAX RECEIVABLE		370,127.28
TRADE ACCOUNTS RECEIVABLES		255,057,639.90
ACCOUNTS RECEIVABLE FROM RELATED PARTIES		6,089,949.30
CASH AT BANK & ON HAND		18,939,904.18
TOTAL CURRENT ASSETS		280,457,620.66
TOTAL ASSETS		1,830,329,436.02
LIABILITIES		
CURRENT LIABILITIES		
ACCOUNTS PAYABLES		51,680,654.01
ACCOUNTS PAYABLE TO RELATED PARTIES		1,427,622.50
BANK OVERDRAFT		99,979,038.21
WITHOLDING TAX PAYABLE		3,047,762.35
TOTAL CURRENT LIABILITIES		156,135,077.07
CAPITAL & RESERVES		
MEMBERS EQUITY		43,989,270.99
SHARE CAPITAL		1,581,810,261.67
SUSPENSE ACCOUNT		2,891,955.30
EXCESS FOR THE YEAR		45,502,870.99
TOTAL SHAREHOLDERS FUNDS		1,674,194,358.95
TOTAL LIABILITIES		1,830,329,436.02

NOTE TO THE BALANCE SHEET

The Bank overdraft is composed of among others items, the regular with the bank of MK8,000,000; outstanding cheques not yet presented to the bank for payment from the government through CHAM, a payment which had not yet been paid to our Salaries account as the time of the report but whose expense had already been recognized in our books since we are using the accrual system of accounting which recognizes a transaction when it takes place (falls due) and not when cash is paid or received for same. However the actual bank account balance was within our operating range as authorized and approved by the bank.

5.6. STATEMENT OF CASHFLOW AS AT 30TH JUNE 2021

ST LUKE'S HOSPITAL		
STATEMENT OF CASHFLOWS - JULY 2020 TO JUNE 2021		
	MWK	
EXCESS/DEFICIT FOR THE YEAR	45,502,871	
NET CASH FROM OPERATING ACTIVITIES	51,023,601	
NET CASH FROM INVESTING ACTIVITIES	- 65,219,973	
NET CASH FROM FINANCING ACTIVITIES	3,575,287	
CASH AT BEGINNING OF PERIOD	- 7,041,804,904	
NET CASH INCREASE /DECREASE FOR PERIOD	- 10,621,085	
NET CASH AT PERIOD END	- 81,039,134	

CONCLUSION

The hospital and her health centre's continued to deliver quality and essential health services to the catchment population and beyond in line with its strategic plan St Luke's Hospital and Health-centres Strategic Plan (SHHSP 1) contributing to the Malawi Ministry of Health Vision of Health for all and the global agenda Sustainable development goal 2030.

BIOGRAPHY

Government of the republic of Malawi(2017), Health Sector Strategic plan ii, 2017-2022.Towards universal Health coverage.

National Health Policy (2018),Government of the republic of Malawi, Ministry of Health, Towards Universal Health coverage.

St Luke's Hospital and Health Centre strategic plan (2018), Expanding, Sustaining and modernizing St Luke's Hospitaland Health centers' (2018-2022), St Luke's Hospital, Zomba.