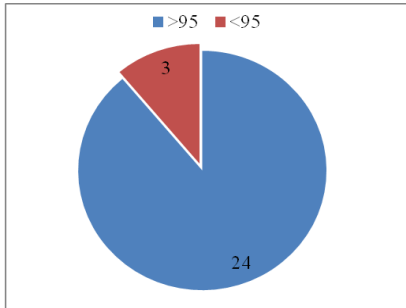


3rd Quarter Report 2019

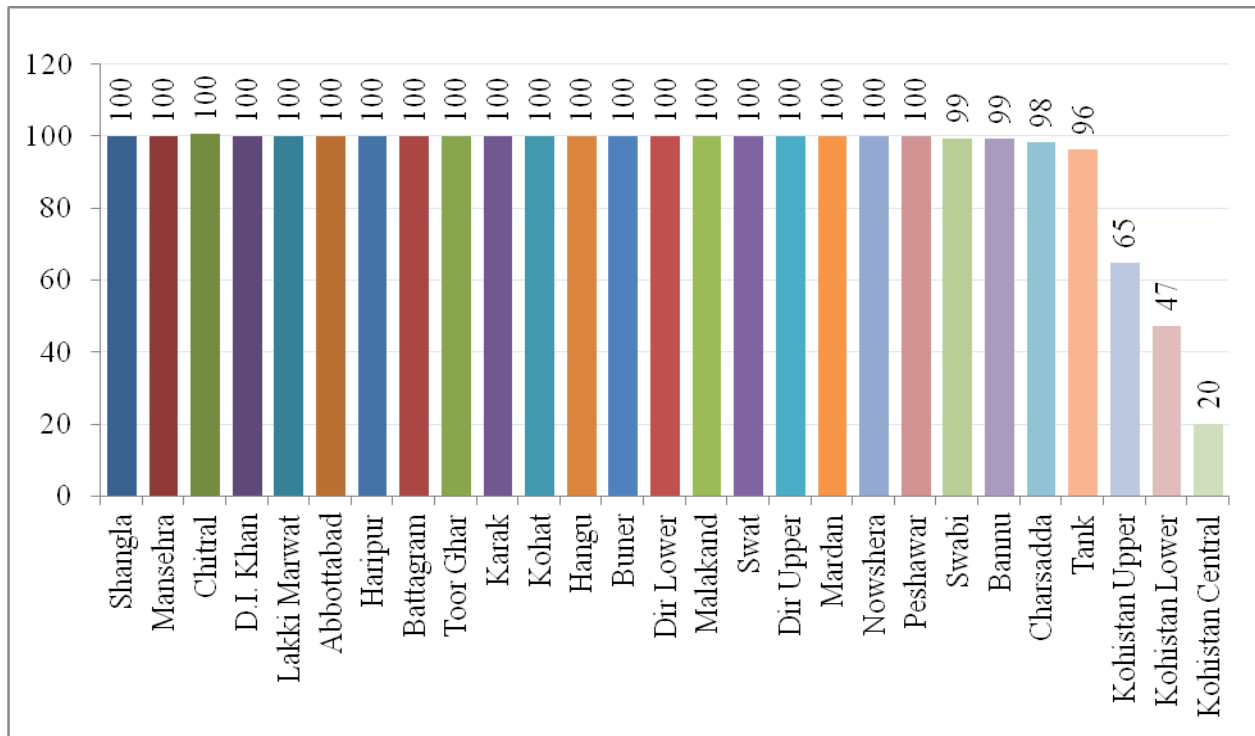
1. REPORTING COMPLIANCE



This indicator represents the percentage of public health facilities that have submitted monthly reports.

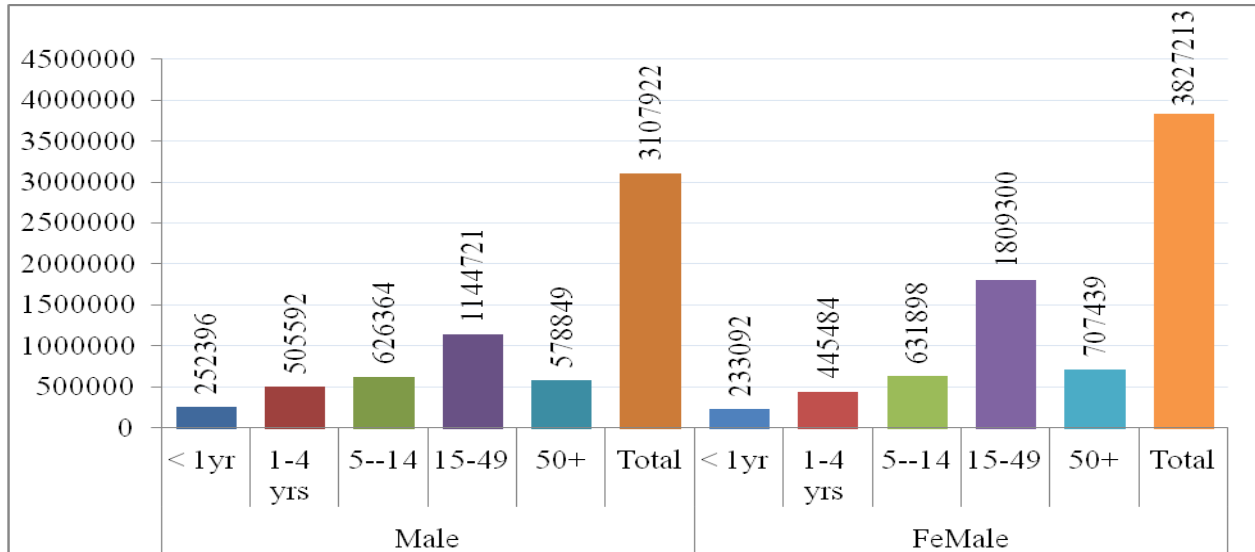
District Wise Percentage of Reporting Compliance.

Graph shows district-wise reporting compliance of all the districts of Khyber Pakhtunkhwa. Twenty four (24) districts (Shangla to Tank) among 27 districts achieved the target i-e reporting more than 95% facilities. Districts Kohistan Upper, Kohistan Lower and Kohistan Central reported 65%, 47% and 20% remained below the target in 3rd quarter 2019.



2. General OPD Attendance (Primary Health Care Facilities & Secondary Health Care Facilities)

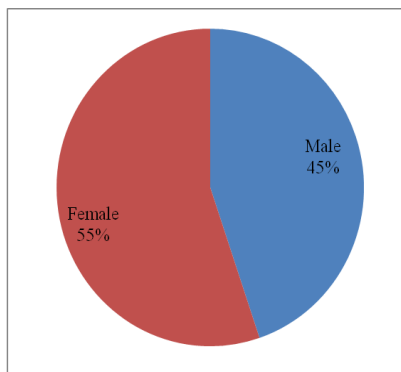
This is one of the key indicators to assess performance on the provision of health services in Province Khyber Pakhtunkhwa. It refers to the number of people attending and receiving services at health facilities during illness.



Graph shows the General OPD in primary and secondary care health facilities with gender wise breakup of male and female patients of the province.

Age wise breakup of patients visiting the OPDs is consistent in 3rd quarter 2019, the figures shows that in the case of male OPD attendance of age group from <1 to 14 years is **(1,384,352)**, which is **44.54%** of the total of male OPD **(3,107,922)**.

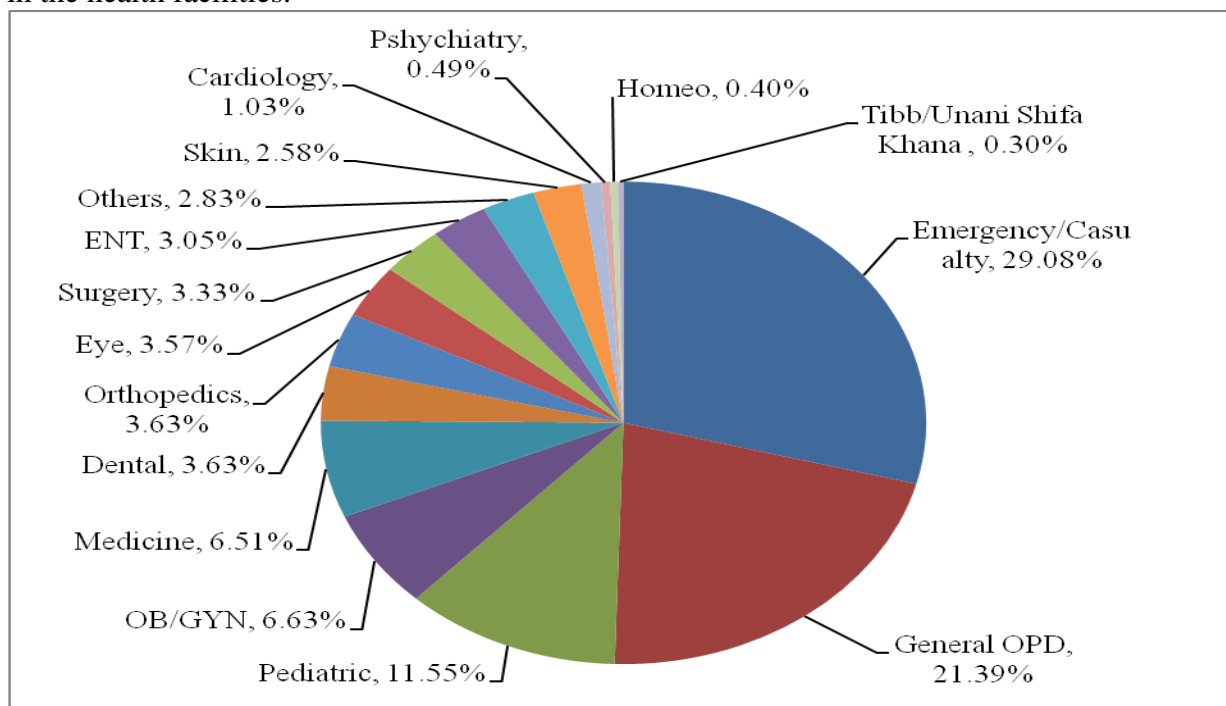
Similarly in case of female OPD attendance of age group from <1 to 14 is **(1,310,474)**, which is **34.24%** of the total female OPD attendance **(3,827,213)**.



In General OPD Attendance (Primary & Secondary Health Care Facilities) 55% female and 45% male patients visited.

3. Specialty Wise Break Up of Patients

The indicator gives us an idea about the distribution of patients to different specialties enabling the reader to broadly categorize and assess the flow of patients to different specialties available in the health facilities.



Graph of the indicator **OPD Attendance Specialty wise** shows the percentage of total new visits (Patients) of in the facility to different specialties (i.e General OPD, Medicine, Surgery, Pediatric etc).

Total New Visits		4442277	%age
Sr.#	Speciality	New Visits	
1	Emergency/Casualty	1291607	29.08
2	General OPD	950127	21.39
3	Pediatric	513220	11.55
4	OB/GYN	294391	6.63
5	Medicine	289085	6.51
6	Dental	161259	3.63
7	Orthopedics	161036	3.63
8	Eye	158754	3.57
9	Surgery	147840	3.33
10	ENT	135601	3.05
11	Others	125813	2.83
12	Skin	114821	2.58
13	Cardiology	45925	1.03
14	Pshychiatry	21784	0.49
15	Homeo Cases	17898	0.40
16	Tibb/Unani Shifa Khana	13116	0.30

Under the specialty; emergency/casualty, the number and percentage of patients are on top and stands at **(1,348,449)** with **29.47%**, General OPD on second number and is **(893,798)** which is **19.53%**.

Number of patients in the specialty of Pediatric and OB/GYN are **518,452** and **307,833** which is **11.33%** and **6.73%**.

The disorder of Dental caries and the specialty Skin Diseases stands at **165,766** with **3.59%** and **138,649** with **3.03%**.

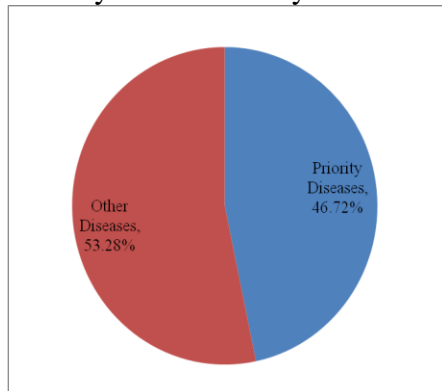
4. Diseases Pattern in Out Patient Department (of the total 43 priority diseases)

This indicator will help to understand which disease/cases were attended at the health facilities in a district.

The indicator can trigger a response in terms of additional resources allocation or redistribution of resources according to the disease pattern, or initiating specific preventive, promotive and curative services at specific area/catchment population.

For the purpose of the DHIS 43 diseases have been selected as “Priority Diseases” in consultation the other stakeholders, the Government of Khyber Pakhtunkhwa has adopted these enlisted priority diseases in continuation to the national decision.

These diseases are listed in below table, which present the numbers of patients provided care at Primary and Secondary Level Health Facilities.



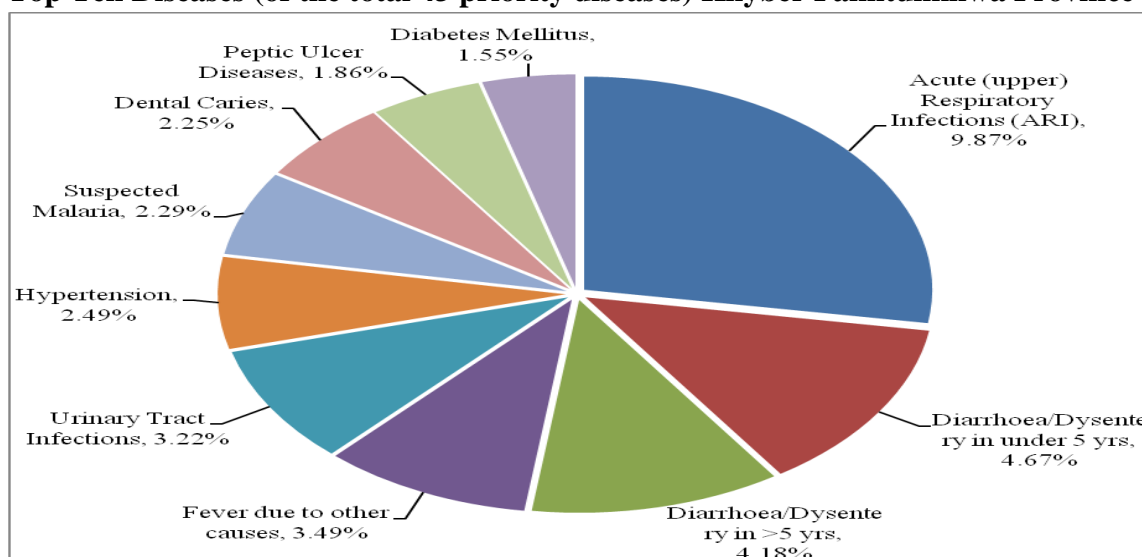
Graph shows percentage of Priority diseases and other diseases

Total OPD 3rd Quarter (July to Sept 2019)			6935135
S. No	Disease name	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	684473	9.87
2	Diarrhoea/Dysentery in under 5 yrs	324099	4.67
3	Diarrhoea/Dysentery in >5 yrs	290160	4.18
4	Fever due to other causes	241763	3.49
5	Urinary Tract Infections	223183	3.22
6	Hypertension	172839	2.49
7	Suspected Malaria	159069	2.29
8	Dental Caries	156091	2.25
9	Peptic Ulcer Diseases	129313	1.86
10	Diabetes Mellitus	107738	1.55
11	Scabies	92872	1.34
12	Worm infestation	81646	1.18
13	Road traffic accidents	67276	0.97
14	Asthma -	62440	0.90
15	Dermatitis -	61685	0.89
16	Otitis Media -	60481	0.87
17	Enteric / Typhoid Fever -	60031	0.87
18	Depression -	53279	0.77
19	Pneumonia under 5 years -	27547	0.40
20	Fractures -	23827	0.34

21	Suspected Viral Hepatitis -	21962	0.32
22	Pneumonia >5 years -	20341	0.29
23	Ischemic Heart Disease -	19859	0.29
24	Cataract -	15662	0.23
25	TB Suspects -	15450	0.22
26	Chronic Obstructive Pulmonary Diseases -	11898	0.17
27	Dog bite -	9845	0.14
28	Burns -	6689	0.10
29	Benign Enlargement of Prostrate -	4942	0.07
30	Epilepsy -	4415	0.06
31	Cirrhosis of Liver -	4291	0.06
32	Trachoma -	4122	0.06
33	Suspected Measles -	3717	0.05
34	Drug Dependence -	3540	0.05
35	Sexually Transmitted Infections	3491	0.05
36	Glaucoma -	3323	0.05
37	Cutaneous Leishmaniasis -	2647	0.04
38	Nephritis/Nephrosis -	2443	0.04
39	Suspected Meningitis -	619	0.01
40	Snake bits (with signs/symptoms of poisoning)	568	0.01
41	Suspected Neonatal Tetanus -	358	0.01
42	Acute Flaccid Paralysis -	96	0.001
43	Suspected HIV/AIDS	0	0.00
Total		3240090	46.72

Table shows the overall performance of priority diseases in 3rd quarter 2019

Top Ten Diseases (of the total 43 priority diseases) Khyber Pakhtunkhwa Province



5. COMMUNICABLE AND NON COMMUNICABLE DISEASE

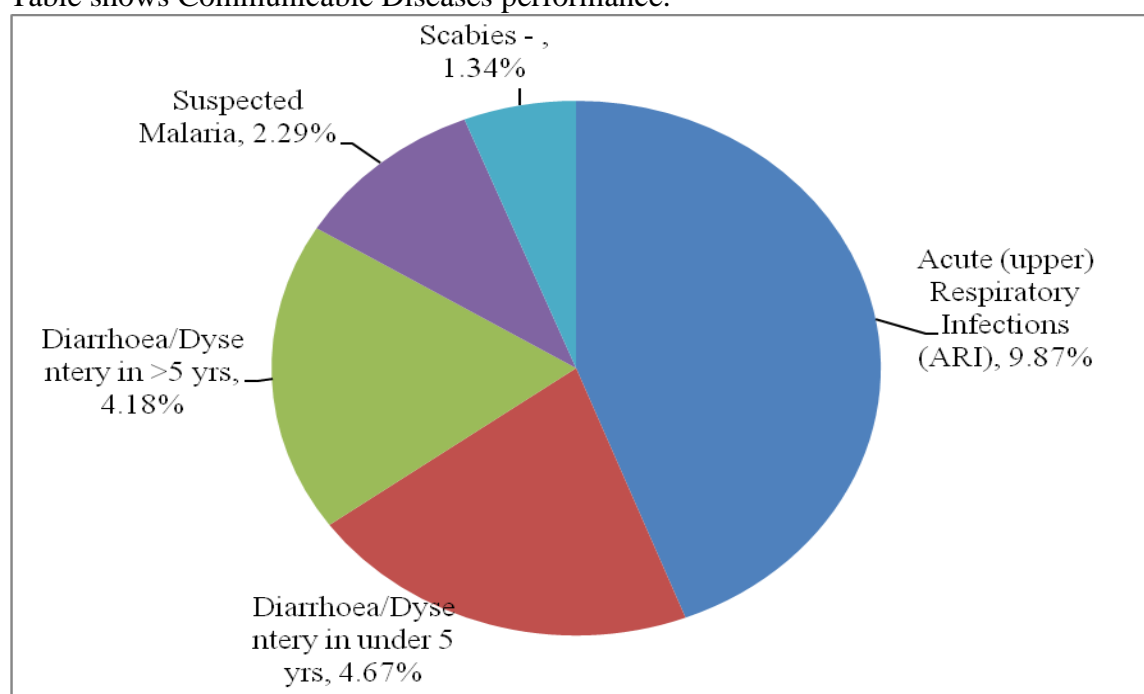
Out of 43 priority diseases, 19 are communicable and 24 are non-communicable diseases. Subsequent analysis shows the most common diseases and disease-wise breakup.

a. COMMUNICABLE DISEASES

Communicable disease is an infectious **disease** transmissible (as from person to person) by direct contact with an affected individual or the individual's discharges or by indirect **means** (as by a vector) compare contagious **disease**.

Total OPD 3rd Quarter (July to Sept 2019)		6,935,135	
S. No	Disease	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	684473	9.87
2	Diarrhoea/Dysentery in under 5 yrs	324099	4.67
3	Diarrhoea/Dysentery in >5 yrs	290160	4.18
4	Suspected Malaria	159069	2.29
5	Scabies	92872	1.34
6	Worm infestation	81646	1.18
7	Enteric / Typhoid Fever	60031	0.87
8	Pneumonia under 5 years	27547	0.40
9	Suspected Viral Hepatitis	21962	0.32
10	Pneumonia >5 years	20341	0.29
11	TB Suspects	15450	0.22
12	Trachoma	4122	0.06
13	Suspected Measles -	3717	0.05
14	Sexually Transmitted Infections	3491	0.05
15	Cutaneous Leishmaniasis -	2647	0.04
16	Suspected Meningitis -	619	0.01
17	Suspected Neonatal Tetanus -	358	0.01
18	Acute Flaccid Paralysis -	96	0.00
19	Suspected HIV/AIDS -	0	0.00
Total		1792700	25.85

Table shows Communicable Diseases performance.



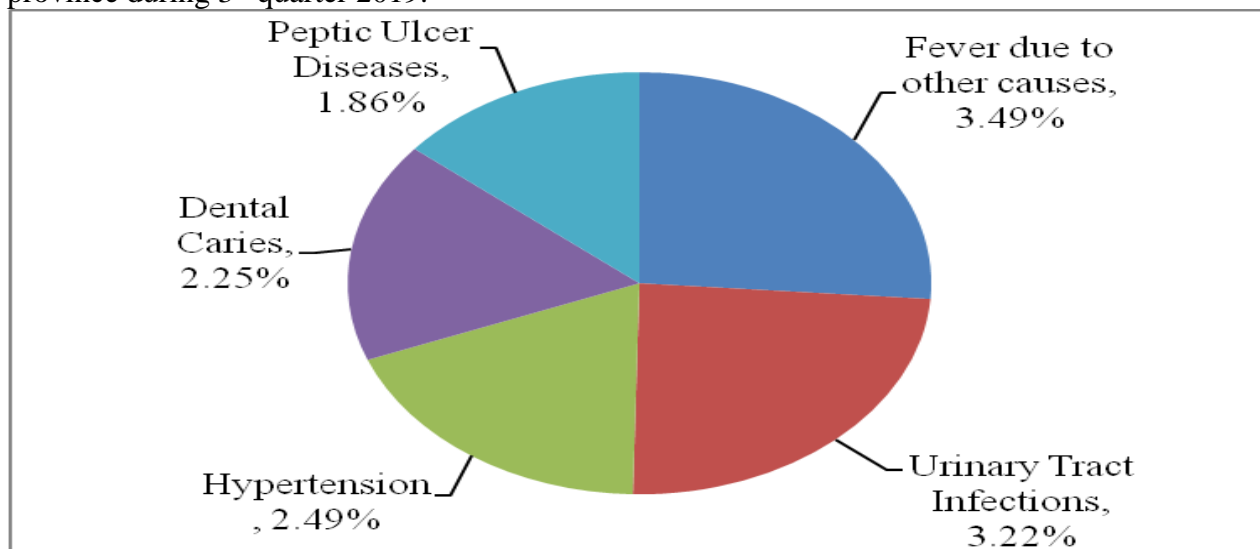
b. NON-COMMUNICABLE DISEASES

A **non-communicable disease** (NCD) is a medical condition or **disease** that is not caused by infectious agents (**non-infectious** or **non-transmissible**). NCDs can refer to chronic **diseases** which last for long periods of time and progress slowly.

NCDs are the leading cause of death globally.

Total OPD 3rd Quarter (July to Sept 2019)		6,935,135	
S. No	Disease	Total	%age
1	Fever due to other causes	241763	3.49
2	Urinary Tract Infections	223183	3.22
3	Hypertension	172839	2.49
4	Dental Caries	156091	2.25
5	Peptic Ulcer Diseases	129313	1.86
6	Diabetes Mellitus	107738	1.55
7	Road traffic accidents -	67276	0.97
8	Asthma -	62440	0.90
9	Dermatitis -	61685	0.89
10	Otitis Media -	60481	0.87
11	Depression -	53279	0.77
12	Fractures -	23827	0.34
13	Ischemic Heart Disease -	19859	0.29
14	Cataract -	15662	0.23
15	Chronic Obstructive Pulmonary Diseases -	11898	0.17
16	Dog bite -	9845	0.14
17	Burns -	6689	0.10
18	Benign Enlargement of Prostrate -	4942	0.07
19	Epilepsy -	4415	0.06
20	Cirrhosis of Liver -	4291	0.06
21	Drug Dependence -	3540	0.05
22	Glaucoma -	3323	0.05
23	Nephritis/Nephrosis -	2443	0.04
24	Snake bits (with signs/symptoms of poisoning) -	568	0.008
Total		1447390	20.87

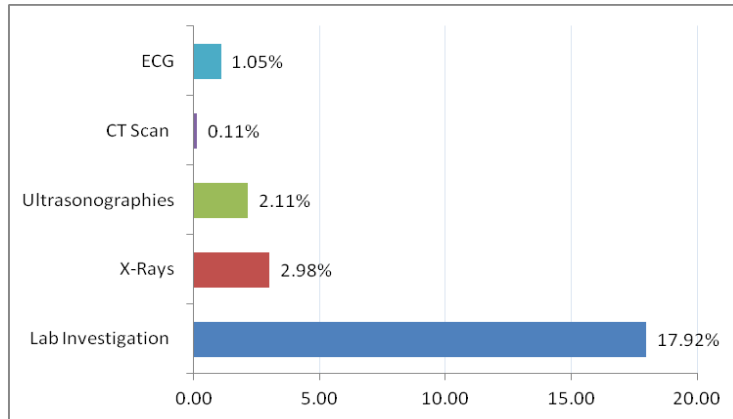
Table and Graph illustrates the trend of non-communicable diseases in Khyber Pakhtunkhwa province during 3rd quarter 2019.



6. Lab Services Utilization for Out Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of outdoor patients receiving diagnostic services from health facility.

No of OPD Patients	6948154
Lab Investigation	17.92%
X-Rays	2.98%
Ultrasonographies	2.11%
CT Scan	0.11%
ECG	1.05%

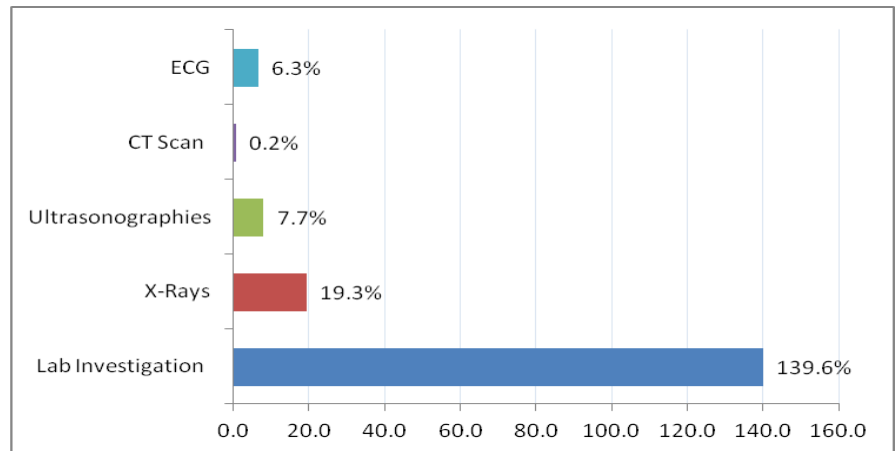


The graph reflects the figures and show quality of care in terms of utilization of investigation services.

7. Lab Services Utilization for In Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of indoor patients receiving lab services from the laboratory of the health facility. In addition statistics are gathered for other diagnostic investigations.

Total Admission	183361
Lab Investigation	139.6%
X-Rays	19.3%
Ultrasonographies	7.7%
ECG	6.3%
CT Scan	0.2%



8. Average number of Antenatal Care Services in the Facility

Antenatal care is an indicator of access and utilization of health care services during pregnancy. It is a measure of the percent of pregnant women who utilize antenatal care services provided at the government health facility at least once during their current pregnancy.

This indicator indicates that how many pregnant women in the catchment area population are covered through the facility for antenatal care services. It reflects the integrity of referral linkages between LHW and the facility based health care providers, the extent of mobilization of pregnant women or their families to utilize maternal health services from the government health facilities and or the trust of the community on the public health facilities/providers. It will also provide information about the registration of pregnant women in health facilities for availing the ANC-1 services.

S.No	District	Jul	Aug	Sep	Average
1	Swat	7781	6852	5974	5152
2	Peshawar	5362	4713	5119	3799
3	Mansehra	4968	5224	4215	3602
4	Dir Lower	5570	4615	4070	3564
5	Haripur	3792	6498	3654	3486
6	Mardan	4291	3845	2526	2666
7	D.I. Khan	3978	3171	3245	2599
8	Abbottabad	4504	2113	2739	2339
9	Malakand	3387	3527	2148	2266
10	Swabi	2946	2783	2549	2070
11	Nowshera	3042	2412	2484	1985
12	Dir Upper	2724	2554	1974	1813
13	Hangu	1714	2533	2609	1714
14	Kohat	2399	2223	2089	1678
15	Karak	2040	1911	1882	1458
16	Battagram	3609	1116	1088	1453
17	Shangla	1822	2060	1709	1398
18	Buner	1849	2014	1588	1363
19	Charsadda	1996	1543	1305	1211
20	Tank	1354	2059	1354	1192
21	Bannu	1591	1434	1579	1151
22	Chitral	1540	1238	1622	1100
23	Lakki Marwat	1207	1024	1474	926
24	Toor Ghar	300	291	285	219
25	Kohistan Upper	27	0	0	7
26	Kohistan Lower	0	0	0	0
27	Kohistan Central	0	0	0	0
Grand Total		73793	67753	59281	50207

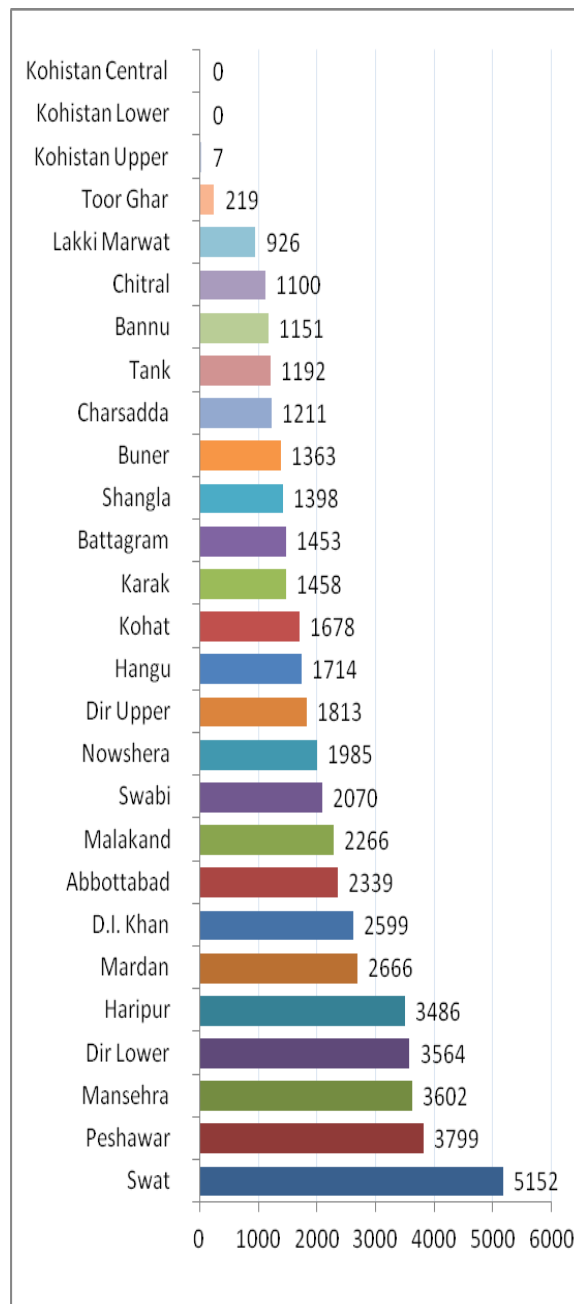


Table and Graph illustrates the statistical analysis about data regarding First Antenatal care services (ANC-1) in government health facilities. District Kohistan Central, Kohistan Lower, and Kohistan Upper show worst performance with an **average 0, 0 and 7** ANC-1 coverage in 3rd quarter 2019.

Swat, Peshawar, Mansehra and Dir Lower are the top performer among 27 districts.

9. District Wise Average Number of Deliveries in the government health facilities

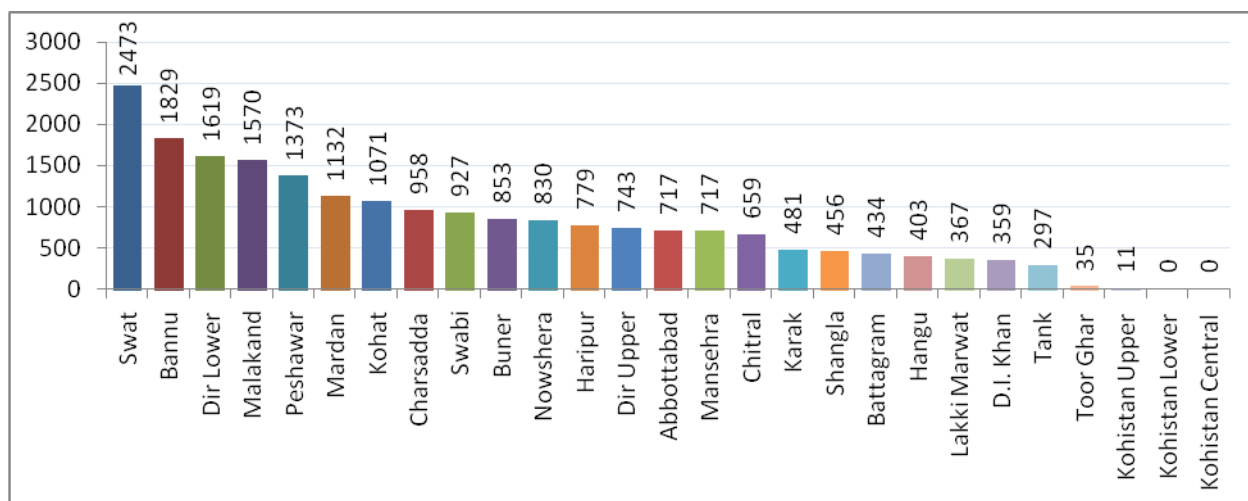
This indicator is reflective of the confidence shown by the general public in the government health facilities for carrying out normal deliveries.

S.No	District	Jul	Aug	Sep	Average
1	Swat	2911	2083	2426	2473
2	Bannu	1814	1771	1901	1829
3	Dir Lower	1670	1684	1502	1619
4	Malakand	1562	1599	1549	1570
5	Peshawar	1313	1410	1397	1373
6	Mardan	1460	1347	588	1132
7	Kohat	1121	1056	1035	1071
8	Charsadda	1551	1229	93	958
9	Swabi	1093	958	730	927
10	Buner	884	893	783	853
11	Nowshera	875	817	797	830
12	Haripur	761	904	671	779
13	Dir Upper	1012	535	682	743
14	Abbottabad	793	719	639	717
15	Mansehra	753	717	681	717
16	Chitral	704	660	613	659
17	Karak	519	453	471	481
18	Shangla	479	441	448	456
19	Battagram	600	355	346	434
20	Hangu	298	483	427	403
21	Lakki Marwat	428	496	177	367
22	D.I. Khan	363	343	372	359
23	Tank	282	263	347	297
24	Toor Ghar	36	36	33	35
25	Kohistan Upper	33	0	0	11
26	Kohistan Lower	0	0	0	0
27	Kohistan Central	0	0	0	0
Grand Total		23315	21252	18708	21092

District **Swat** is on top position of all 27 districts with number of average deliveries **2473** in government health facilities in the quarter. Districts Bannu, Dir Lower, Malakand and Peshawar reported 1829,1619,1570 and 1373 average numbers of deliveries conducted in the government health facilities thereby giving best performance.

Primary and secondary health facilities needs further strengthening in government sector and tertiary care hospitals needs to be further improved as well. Figures from tertiary hospitals are not added to these figures; if added these figures will change significantly.

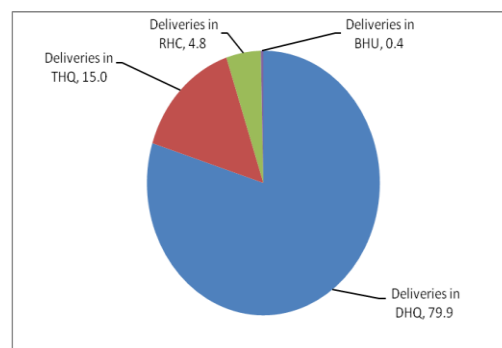
MTI Hospitals are not included in this list.



10. Health Facility-wise Number of Deliveries

This indicator reflects health facilities wise number of deliveries and the DHQ hospital stand **23,807**, which is **79.9%** of the total, THQ **4468 (15%)**, RHC reports 1424 (**4.8%**), and BHUs reports only **109 (0.4%)** deliveries.

DHQ	THQ	RHC	BHU
23807	4468	1424	109



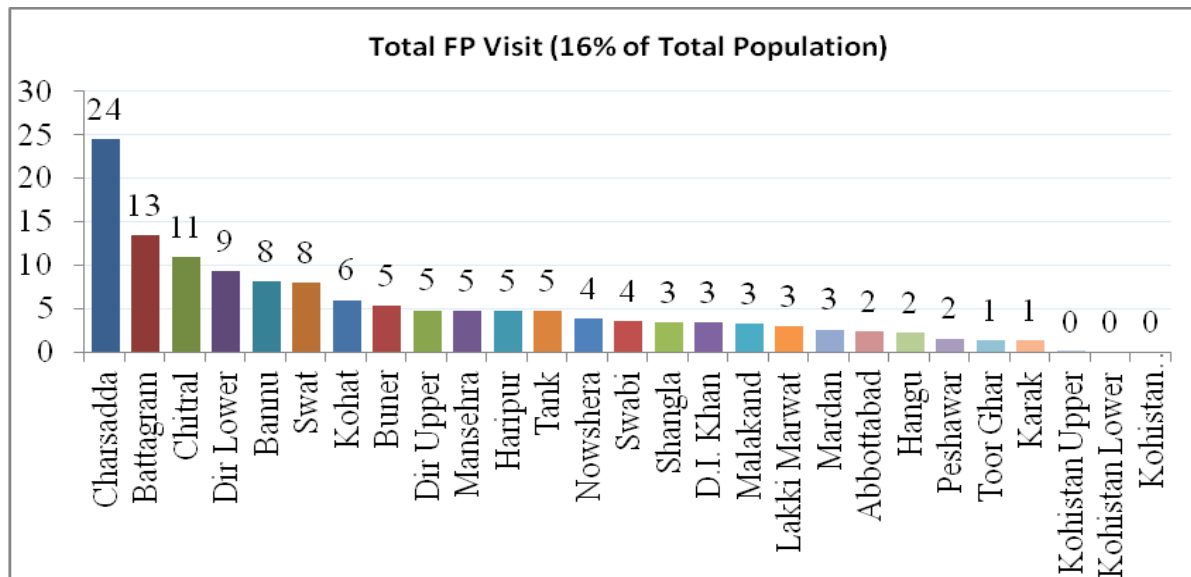
W&C Hospital and DHQ Hospital (MTI) Bannu not reported data.

11. Family Planning Visits 16% of the Total Population

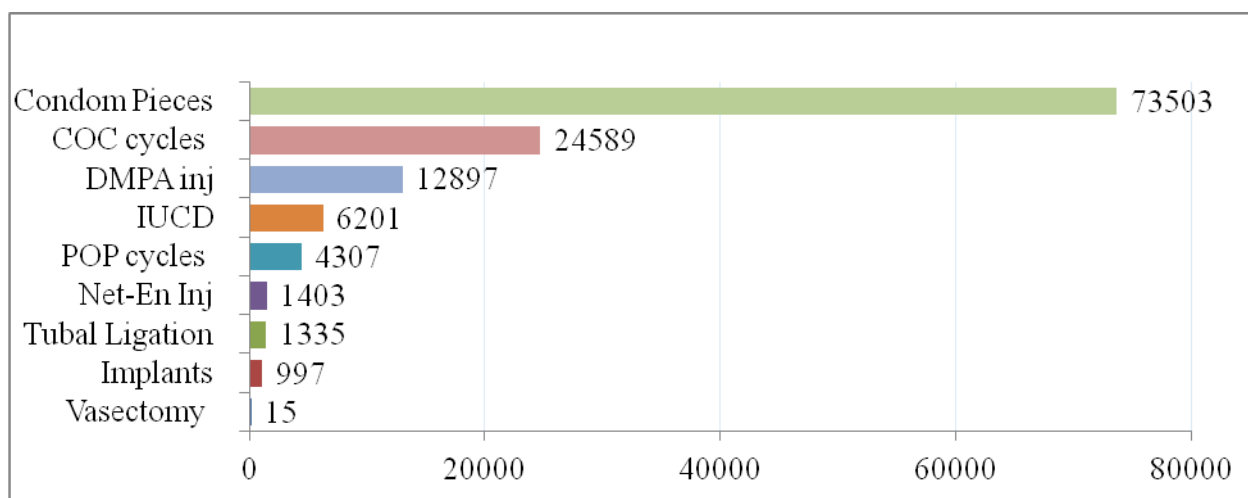
Family planning refers to the factors that may be considered by a couple in a committed relationship and each individual involved in deciding if and when to have children.

S. No	DISTRICT	Population	16% of Total Population	FP Visits -	%age
1	Charsadda	1616198	64648	15836	24
2	Battagram	476612	19064	2548	13
3	Chitral	447362	17894	1957	11
4	Dir Lower	1435917	57437	5329	9
5	Bannu	1167892	46716	3792	8
6	Swat	2309570	92383	7337	8

7	Kohat	993874	39755	2377	6
8	Buner	897319	35893	1900	5
9	Dir Upper	946421	37857	1814	5
10	Mansehra	1556460	62258	2962	5
11	Haripur	1003031	40121	1893	5
12	Tank	391885	15675	739	5
13	Nowshera	1518540	60742	2296	4
14	Swabi	1624616	64985	2339	4
15	Shangla	757810	30312	1046	3
16	D.I. Khan	1627132	65085	2170	3
17	Malakand	720295	28812	941	3
18	Lakki Marwat	876182	35047	1015	3
19	Mardan	2373061	94922	2443	3
20	Abbottabad	1332912	53316	1249	2
21	Hangu	518798	20752	467	2
22	Peshawar	4269079	170763	2656	2
23	Toor Ghar	171395	6856	95	1
24	Karak	706299	28252	370	1
25	Kohistan Upper	450000	18000	3	0
26	Kohistan Lower	350000	14000	0	0
27	Kohistan Central	160000	6400	0	0
Total		30698660	1227946	65574	5



12. Family Planning Services & Commodities Provided



DISTRICT	COC cycles	POP cycles	DMPA inj	Net-En Inj	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
Bannu	2934	274	1089	14	8791	60	0	0	0
D I Khan	474	53	236	38	9530	318	3	0	25
Lakki Marwat	576	118	188	485	2239	75	3	0	0
Tank	405	10	136	0	744	147	0	0	0
Abbottabad	308	2	141	1	221	30	0	0	0
Haripur	1088	120	305	6	947	130	5	0	19
Kohistan Upper	2	0	0	0	0	1	0	0	0
Mansehra	1470	210	810	19	5996	229	17	0	158
Battagram	1923	81	402	233	4792	142	0	0	0
Toor Ghar	28	0	40	0	159	2	0	0	0
Kohistan Lower									
Kohistan Central	0								
Karak	131	53	124	1	20	98	0	0	42
Kohat	1051	513	520	0	2288	497	89	0	199
Hangu	206	1048	64	0	830	31	0	0	0
Buner	858	125	284	66	7692	86	11	0	18
Chitral	905	83	488	103	902	106	17	0	19
Dir Lower	175	330	438	0	1954	57	0	0	0
Malakand	282	69	224	5	435	75	42	0	25
Swat	3263	145	2535	29	11642	1207	10	0	244
Dir Upper	118	169	686	31	358	76	0	0	0
Shangla	1065	158	182	151	1009	590	0	0	0
Mardan	1510	99	440		91	137	32		42
Swabi	2103	368	778	8	3672	216	2	0	0
Charsadda	1755	117	1412	166	3569	824	1060	5	41
Nowshera	1263	89	628	10	4394	591	31	10	68
Peshawar	696	73	747	37	1228	476	13	0	97
Total	24589	4307	12897	1403	73503	6201	1335	15	997

The indicator District-wise Family Planning Services & Commodities Provided is one of the most important indicator in health services. This reflects the results of all of the districts and show that which family planning services has taken by the couple.

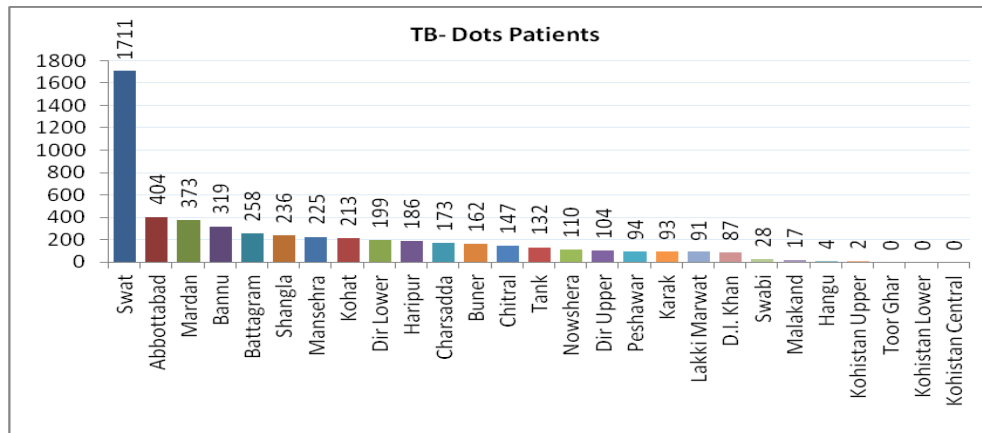
In the modern method of the family planning services, the condom is one of the most effective and simple method and couple preferred to take this services from health institutions.

Some of the couple preferred to take other family planning services i.e. COC cycles, POP Cycles or DPMA injections etc.

13. Intensive-Phase TB-DOTS Patients

Tuberculosis requires regular and uninterrupted treatment for a cure and a person missing the treatment poses a great threat for developing a resistant form of the disease; so the number of patients missing their treatment for more than a week needs to be actively traced and convinced to continue the treatment.

S.No	DISTRICT	Intensive-phase TB-DOTS patients -
1	Swat	1711
2	Abbottabad	404
3	Mardan	373
4	Bannu	319
5	Battagram	258
6	Shangla	236
7	Mansehra	225
8	Kohat	213
9	Dir Lower	199
10	Haripur	186
11	Charsadda	173
12	Buner	162
13	Chitral	147
14	Tank	132
15	Nowshera	110
16	Dir Upper	104
17	Peshawar	94
18	Karak	93
19	Lakki Marwat	91
20	D.I. Khan	87
21	Swabi	28
22	Malakand	17
23	Hangu	4
24	Kohistan Upper	2
25	Toor Ghar	0
26	Kohistan Lower	0
27	Kohistan Central	0
Total		5368



14. Proportion of Intensive phase TB-DOTS patients missing treatment >1 week

This indicator measures the proportion of TB-DOTS intensive phase patients missing treatment more than one week. This is the suggestive of the performance of the TB-DOTS treatment center and the associated treatment supporters.

S.No	DISTRICT	Intensive phase TB-DOTS patients missing treatment >1 week -
1	Bannu	6
2	Haripur	6
3	Abbottabad	5
4	Mansehra	4
5	Mardan	2
6	D.I. Khan	1
7	Shangla	1
8	Lakki Marwat	0
9	Tank	0
10	Kohistan Upper	0
11	Battagram	0
12	Toor Ghar	0
13	Kohistan Lower	0
14	Kohistan Central	0
15	Karak	0
16	Kohat	0
17	Hangu	0
18	Buner	0
19	Chitral	0
20	Dir Lower	0
21	Malakand	0
22	Swat	0
23	Dir Upper	0
24	Swabi	0
25	Charsadda	0
26	Nowshera	0
27	Peshawar	0
	Total	25

Under TB-DOTS, if a patient misses his/her treatment for more than 2 consecutive days during the initial intensive phase, he must be traced by the health worker or by the treatment supporter. In the continuation phase of treatment, if patient fails to collect his drugs within one week of drug collection day she/he must be traced by health workers.

