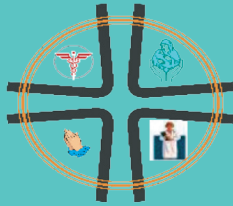


# St. Walburg's Nyangao Referral Hospital



## Annual Report 2024

*"Cure the sick and tell them: The reign of God is at hand" Luke 10:9*

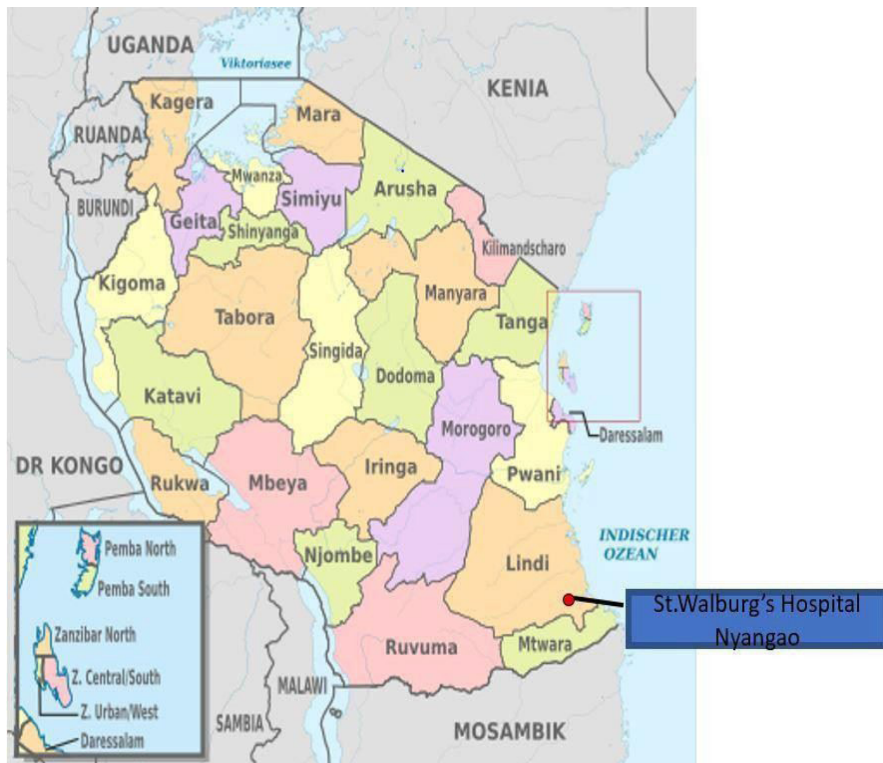
# St. Walburg's Nyangao Referral Hospital



## Annual Report 2024

*"Cure the sick and tell them: The reign of God is at hand" Luke 10:9*

**Map 1:** Showing Location of St. Walburg's Nyangao Referral Hospital in Tanzania



Source: Wikipedia

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## Acknowledgements

To the Bishop Catholic Diocese of Lindi for your leadership and guidance as we navigate major infrastructure improvements together with our esteemed stakeholders. Special recognition to the Missionary Benedictine Sisters, Artemed Foundation, Polish Medical Mission, and SES who helped us to acquire state-of-the-art technologies, enhance our facilities and life-changing programs in order to continue providing high-level care to the thousands of patients within the Southern zone Tanzania and beyond.

The spirit and generosity of the staff of the St. Walburg's Nyangao Referral Hospital has been nothing short of amazing over the years and 2024 was no different. Together, we were able to ensure exceptional quality health care services are provided to our people.

The Government of Tanzania through the Ministry of Health for generously finally earning us recognition as the referral hospital at a regional level September 18, 2024. The Regional Health Management Team, RHMT -Lindi and Council Health Management Team, CHMT -Mtama District Council for their collaboration and partnership in addressing the healthcare needs of our region. Without you, none of these accomplishments would be possible.

As you read through this report, we hope you feel a sense of pride. Our ability to keep pace with the latest advances in health care and increasing demand of our people is because of your forward-thinking dedication and compassion for others. We are eternally grateful to have you within our small Nyangao family.

Thank you again for your continuous trust and partnership. We look forward to another exciting year of great achievements.

In Mission with you,



Dr. Masanja Kasoga, MD,  
MMED Medical Officer In-charge



Mr. Hilary Mbando  
Hospital Administrator



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## List of Abbreviations

AIDS	Acquired Immune Deficiency Syndrome	ART	Antiretroviral Therapy
ARV	Antiretroviral drugs		
CareMD	Patient Care Medical Digitalization	CTC	Care & Treatment Centre
DC	District Commissioner/District Council		
DED	District Executive Director		
DMO	District Medical Officer		
eHMIS	Electronic Health Management Information System	ENT	Ear, Nose and Throat
FBH	Faith Based Hospital		
HIV	Human Immunodeficiency Virus		
MBS	Missionary Benedictine Sisters		
MCH	Mother and Child Health		
MOI	Muhimbili Orthopedic Institute		
NACTE	National Council of Technical Education	NHIF	National Health Insurance Fund
NSSF	National Social Security Fund		
OSB	The Order of St. Benedict		
PMTCT	Prevention of Mother-to-Child Transmission	PPP	Public Private Partnership
RCH	Reproductive and Child Health		
RMO	Regional Medical Officer		
RRH	Regional Referral Hospital		
TB	Tuberculosis		
VAT	Value Added Tax		
VIA	Visual Inspection with Acetic Acid		
WEBERP	Web Based Enterprise Resources Planning		

## Executive Summary

In 2024, the hospital faced challenges which put strain on the budget; first, there were floods due to excess rains which impacted income of our people majority of whom are peasants, further effects of the tariff changes in National Health Insurance treatment packages and reduced donations coupled with high costs of living caused by the Ukraine war, and inflation increasing the costs of consumables including drugs and medical supplies. The hospital had to prioritize its spending and find ways to cut costs to continue providing quality healthcare to its patients. Our gratitude to Sr. Raphaela Haendler OSB for humanitarian donations to the affected families of our staff, God bless you.

One notable area of concern is the decrease in number of outpatient clients. The number of outpatient attendance decreased by 4% from 67,411 in 2023 to 64,965 in 2024, while the number of inpatient admissions decreased by 6% from 8973 in 2023 to 8396 in 2024. The construction of new government dispensaries and health centres near the hospital may have contributed to this loss. This trend has made us strategize specialized services in our plans in order to serve as a referral Centre for facilities around Nyangao.

Non-communicable diseases continue to be a major health concern, leading among the outpatient and inpatient attendances. Stroke and complications of uncontrolled diabetes remain the leading cause of deaths for adolescents, young adults and the elderly. There were 3120 births with only one recorded maternal death.

The staffing situation was favorable. Few staff members chose to leave their positions to work for the government health facilities in different councils. We ~~also~~ welcomed several new government staff members from Mtama District Council. Our wish to get more staff on the government payroll was not paid the necessary attention nor proper follow-up. There was a serious staff turnover both at the

hospital and our nursing school. The hospital management has a retention scheme to solve the problem of staff attrition.

The hospital continued its collaboration with the government whereby the government demonstrated its commitment to support the hospital's effort to provide care to special groups such as pregnant women and under-five children by providing grants, an ambulance, staff etc. Maternal and pediatric health services have to be provided at low costs as per service agreement contract between the hospital and the government via Mtama district council signed in April 2024. Going forward, the hospital needs to advocate for increased funding from the government and private donors, to ensure that it has the necessary resources to provide these services.

St. Walburg's Nyangao Referral Hospital achieved several important milestones in 2024 including:

- Preparation of the master planning for the new hospital building infrastructure
- Attained a certificate of regional referral hospital on September 18,2024
- Two trainees returned from their postgraduate specializations. Dr Francis Msagati, Physician and Dr John Mtomo, orthopedic surgeon.
- The renovation of staff houses funded by Sr. Raphaela Haendler, OSB
- Together with our partners Artemed Stiftung we were able to provide different community projects
- The hospital management was able to pay all salaries and employment benefits to our staff in a timely manner, without incurring any debts to our employees. This demonstrates our commitment to ensuring that our employees are fairly compensated for their hard work and dedication.



The hospital faced several challenges in 2024 such as:

- The hospital faces significant frequent electricity cuts from the national grid which harms our equipment because the Victron battery backup system was down towards the end of the year.
- Late payments and changes in treatment packages by the National Health Insurance Fund (NHIF) has seen 50% reduction in income from the insurance.
- All in all, despite facing a challenging year the hospital remained committed to providing high quality health care to its patients. The hospital management and the staff worked together to overcome all obstacles posed by the budget deficit, inflation and other challenges, ensuring that patients received the care they needed.

Given the challenges we are facing, our hospital has developed a plan to address these issues to ensure that we can continue to provide quality healthcare services to our patients:

- To address problem with electricity, the hospital is collaborating with Sopowerful Foundation and Artemed Stiftung in order to install a 200kW solar power plant
- The NHIF package and late payment countermeasure plans include; to attract more patients and to ensure that patients receive the best possible care, initiatives include increasing the availability of drugs and investigations, specialized clinics and reducing the waiting time at the reception, OPD and laboratory. Moreover, the hospital staff has been directed to work diligently within their respective areas to ensure prompt service delivery.

As hospital management team, we are proud of our staff's hard work and dedication, and we are grateful for the trust and support of our stakeholders, patients and community. We look forward to continuing our efforts to improve and expand our services in the coming year.

Respectfully submitted on behalf of the hospital management team.

## **Introduction**

St. Walburg's Nyangao Referral Hospital is a Faith Based Hospital, FBH situated in Lindi District, Lindi Region. The Hospital is owned by the Catholic Diocese of Lindi, represented by the Right Reverend Wolfgang Pisa, OFM Cap. The Hospital has been largely supported by the Government of Tanzania, the Missionary Benedictine Sisters of Tutzing and Artemed Stiftung -Germany, Friends of the Hospital and other esteemed partners.

In 1947 a small dispensary was opened at Nyangao. In 1959 Sister Doctor Tekla Stinnesbeck ascertained that Nyangao was an ideal location for upgrading the dispensary to a hospital. Therefore, she initiated a plan for a hospital with 86 beds. The Hospital has been progressively growing and provides health services to the majority of the populations surrounding it and beyond. A Care and Treatment Centre, CTC was established in 2005 and cares for HIV/ AIDS patients and Prevention of Mother to Child Transmission, PMTCT.

Today the hospital is over 66 years since establishment with a capacity of 220 beds capacity and 155 actual beds. In April 2024, the Hospital renewed its service level agreement, SLA with Mtama District Council to provide specific medical services to its community for 3 years. This is an extension of the previous SLA which expired in March 2024. The agreement is in order to provide service to special groups of priority at a lower cost. These services include, the Reproductive and Child health (RCH) services, chronic diseases, elderly and poor patients. Services provided include health promotion, preventive, curative, rehabilitative and palliative services.

## **1.0 Vision, Mission and Core Values**

**Vision:** Nyangao Referral Hospital will be a flourishing Catholic Church hospital with a strong emphasis on excellent curative and preventative services for its patients, who will be cared for with compassion by best people available.

**Mission:** Nyangao Referral Hospital will be fully integrated into Tanzania's health care system and recognized as a partner by Government, have high standards of customer care, have motivated and well-trained workforce, and promotes Catholic virtues through the values of the hospital, which are compassion, excellence, integrity, professionalism, and best people.

**Core Values:** Compassion, Excellence, Integrity, Professionalism, Best people

### **1.1. Catchment Area & Population**

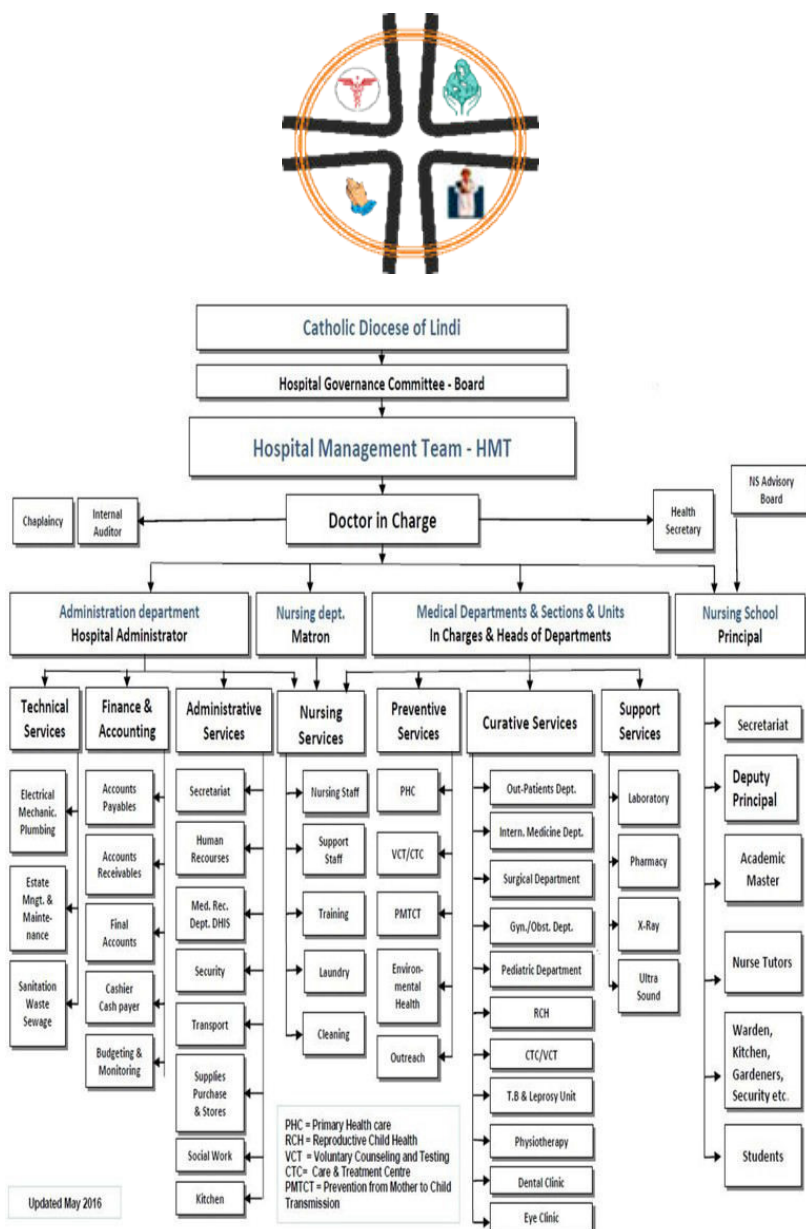
St. Walburg's Nyangao Referral Hospital is situated on the hills of the Nyangao village, north to the border between Lindi and Mtwara regions. Lindi region is surrounded by six Districts, with an estimated total of 1,194,028 inhabitants (**2022 Census**)

Surrounded by feeding dispensaries, health centres and district hospitals government and private facilities, the Hospital's coverage is beyond Lindi and Mtwara regions. Extending its operations cover from the east -southern zone of Tanzania between Kilwa and the border of Mozambique receiving patients from Mozambique. This implies that even if the Hospital acquires necessary resources at regional level, it still needs more resources to meet the growing health service demand.

## 1.2 Hospital Governance:

Hospital Board Members	Role	Position
Fr. Angelus Chitanda	Chairman	Priest
Dr. Masanja Kasoga	Secretary	Medical Officer In-Charge
Mr. Theophil Mrope	Member	Diocesan Health Secretary
Sr. Raphaela Mlwilo OSB	Member	MBS Representative
Fr. George Mwiru	Member	Diocesan Treasurer
Benard Kishamba	Member	District Economist
Mr. Evaristo J. Mnguli	Member	Community representative
Br. Jesaja Sienz OSB	Member	Representative of health facilities
Dr. John Lupapa	Member	District Medical Officer, Mtama
Dr. Kheri Kagya	Member	Regional Medical Officer, Lindi
Mr. Mohamed Babu	Member	Ward Council representative
Mr. Hilary D. Mbando	Invitee	Hospital Administrator
Ms. Happy Mrope	Invitee	Hospital Health Secretary
Salome Ndahani	Invitee	Hospital Accountant
Mr. Yosia Mwakyoma	Invitee	Hospital Patron

**Chart 1: St. Walburg's Nyangao Referral Hospital Organogram Structure**





## General Statistics Overview 2024

Subject	2022	2023	2024
Total Number of Outpatients	90130	67411	64965
Total Number of Inpatients/Admitted	8040	8973	8396
Total Number of Insured Patients	22509	21528	18943
Total Outpatients in Mobile Clinics	3244	2961	8907
Daily Average of Outpatients	257	185	178
RCH – Under-Five	14035	13092	7933
Vaccinations (all MCH Clinics)	13974	15866	15320
Antenatal attendances at Mobile clinics	452	158	227
RCH- Under five at mobile clinics	2706	1514	6630
Total number of beds available	211	211	155
Average length of stay in days	4	3	4
Admissions in private ward	508	369	456
Bed occupancy rate	37.2%	37.0%	84.4%
Number of deaths	238	199	159
Mortality rate	3.2%	2.2%	2.0%
Minor theatre procedures	3025	3678	3741
Major theatre operations	1507	1792	1705
Deliveries	2566	3240	3130
TB Diagnosis	227	195	312
Eye Clinic	546	403	694
Clients enrolled in HIV care	132	174	94
Cumulative Clients Enrolled in CTC	2995	3202	3258
Number of HIV tested positive	135	174	95
Laboratory Examinations	112897	104974	117089
Blood Transfusions	4354	1487	1756
X-Rays	7544	9474	9424
Ultrasounds	7951	9974	11184
Dental procedures	1463	1988	1971

## FINANCE DEPARTMENT

### Financial Performance in 2024

In 2024, St. Walburg's Nyangao Referral Hospital demonstrated strong financial resilience while fulfilling its responsibilities as a Regional Referral Hospital. Despite a challenging operational environment, the hospital maintained essential services and made notable strides in financial performance.

The year was concluded without a deficit, marking a positive financial outcome that reflects both discipline in financial management and dedication to service delivery. This surplus signifies the hospital's capacity to sustain operations, plan for future growth, and uphold its mission of compassionate, quality healthcare.

The hospital's financial activities during the year were supported through a combination of government subventions, internal revenue, and generous donor funding. Strategic initiatives were undertaken to enhance accountability, improve resource utilization, and strengthen financial systems—especially in areas such as revenue collection, expenditure control, and infrastructure investment.

### Revenue Sources

The financial foundation of the hospital in 2024 rested on three main sources:

- **Government Funding:** Core support was provided by the Ministry of Health and PO-RALG, covering personal emoluments, basket funds, essential medicines and supplies (via MSD), VAT exemptions, and allowances for medical interns.
- **Own Source Revenue (OSR):** Revenue from user fees, NHIF reimbursements, private services, and other non-medical services played a significant role.

- **Donor Contributions:** Philanthropic support continued to be a lifeline. Contributions from Sr. Raphaela OSB (Baby and Trauma Projects), Artemed Stiftung (community outreach projects, scholarships, IT equipment, Nyangao Primary School health project, laundry and water improvements), Friends of the Benedictine Sisters of Tutzing, and other private donors funded crucial investments in medical equipment, staff development, and quality enhancement.

## Major Expenditures

- **Salaries and Allowances:** Salaries for government staff were fully covered by the MOH, while the hospital supplemented critical allowances and overtime through its own revenues. However, concerns about performance led to a push for linking compensation with measurable outputs.
- **Medical Supplies and Equipment:** Although MSD provided basic supplies, delays and stock outs remained a challenge. Donor-funded projects helped cover shortfalls, especially in maternity, orthopedics, and neonatal care.
- **Utilities:** Electricity and water continued to consume a significant share of operational costs. In response, the hospital strives to install water meters across institutional beneficiaries—such as the Parish, Convents, and staff houses—to promote accountability and cost-sharing.
- **Capacity Building:** Staff training was a priority. Efforts focused on WebERP system training to improve internal controls and overall efficiency. Financial literacy sessions for departmental heads also began, laying a foundation for informed financial decision-making across the hospital.

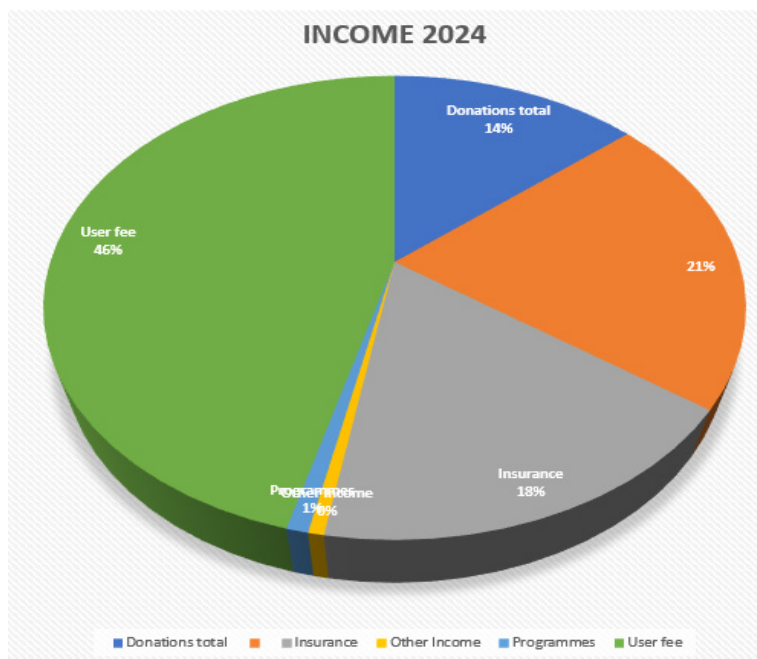
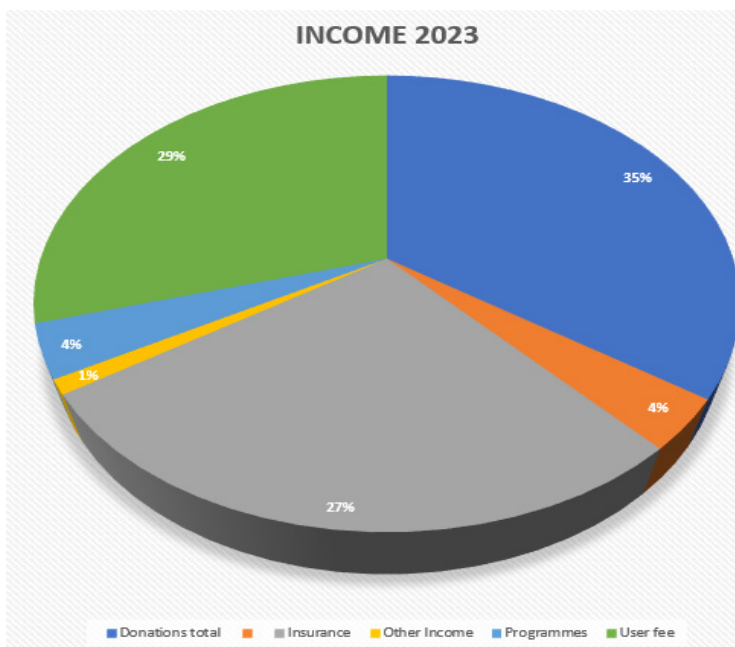
## **Financial Management and Systems**

The Finance Department successfully implemented its 2024 work plan. Notable achievements included:

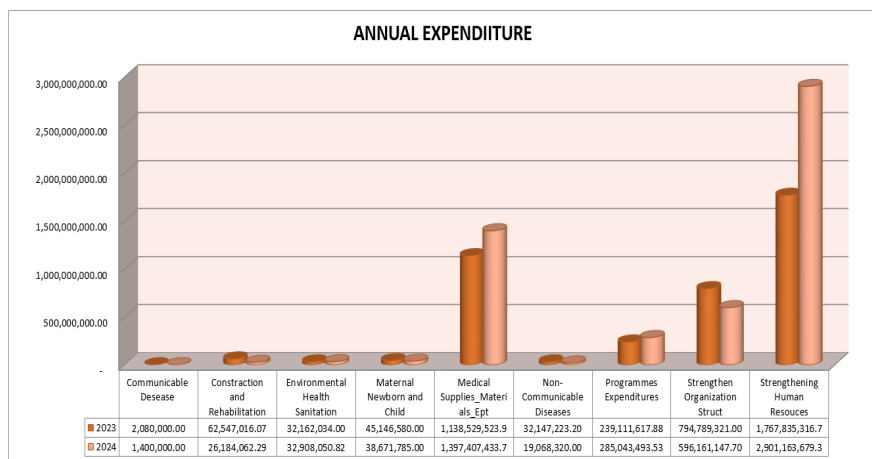
- Accurate and timely recording of all financial transactions, including payroll, inventories, and asset management.
- Preparation of monthly and quarterly financial reports to support decision-making.
- Updating and maintaining the hospital's fixed assets register and applying sound inventory management practices.
- Adoption of a decentralized, participatory budgeting approach—empowering departments to take part in planning and implementation, thus enhancing accountability and ownership.

## **Conclusion**

The year 2024 was a pivotal one for financial governance at St. Walburg's Nyangao Hospital. With improved donor engagement, better financial systems, and critical infrastructure investments, the hospital strengthened its operational foundation. While revenue generation and procurement efficiency still pose challenges, continued emphasis on accountability, capacity building, and strategic partnerships will be key to sustaining financial health. Most importantly, these efforts ensure the hospital remains a dependable provider of high-quality healthcare for the people of Lindi and beyond.







## Human Resources

### 1.0. Staff Category

<b>CATEGORY</b>	<b>2024</b>
Hospital payroll	103
Staff on government payroll (grants)	79
Seconded by Ministry of Health	06
Seconded by DED-Mtama	31
Part-time staff	53
<b>TOTAL</b>	<b>272</b>

### Internship

16 Intern Doctors (11 Male, 5 Female) were attached for internship at our hospital while others completed their rotations.

### 2.0 Training

#### 2.1 Long Term Trainings

Long trainings were as follows;

1. Robert Michael Sembela (Medical Doctor) taking 4 years Masters in Medicine (MMED-Anesthesiology) at Kilimanjaro Christian Medical Centre –Moshi under Artemed Sponsorship to complete on 2026
2. Benjamin M. Mahulu (Medical Doctor) taking 3 years Masters in Medicine (MMED-Pediatrics) at Bugando Medical Centre-Mwanza under Artemed Stiftung Sponsorship to complete on 2025
3. Shukrani Ngereja (Medical Doctor) taking 3 years Masters in Medicine (MMED-Urology) at Muhimbili Health Allied Science-DSM under Artemed Stiftung sponsorship to complete on 2025

4. Helena Joseph Ukason (Assistant Nursing Officer) taking 4 years Bachelor Degree in Nursing at Bugema University-Uganda under Artemed Stiftung Sponsorship
5. Happy Mrope: (Health Secretary) taking 2 years Master of Art in Monitoring and Evaluation at Open University of Tanzania under hospital sponsorship expecting to complete on 2025
6. Dr. Roland Mafuruka; taking 3 years master's degree in Medicine, MMED Internal Medicine at Kairuki University expected to complete in 2027. Sponsored by Artemed Stiftung Foundation
7. Dr. Lucas Kiyuga: taking 3 years Master's degree in General Surgery at KCMC-Moshi expected to complete by 2028. Sponsored by Artemed Stiftung Foundation
8. Dr. Oscar Lugano: taking 3 years Master's degree in Emergency Medicine at KCMC-Moshi expected to complete by 2028. Sponsored by Artemed Stiftung Foundation
9. Dr. Shanel Komba (Medical Doctor) taking 3 years Master's degree in Emergency Medicine at CUHAS-Mwanza expected to complete by 2027. Sponsored by Artemed Stiftung Foundation
10. Craft Ditrick Ng'itu (Assistant Nursing Officer) taking 4 years' Bachelor of Nursing at KCMC under Self-Sponsorship expected to complete by 2026.
11. Dr. Hamis Issa Ngavalanga (Medical Doctor) taking 3 years Master's degree in Medicine, MMED Radiology at Kilimanjaro Christian Medical Centre sponsored by Artemed Stiftung expected to complete on 2026
12. Elizabeth Thomas Shawa (Accounting Officer) taking 2 years Certified Public Accounting (CPA) under Artemed Stiftung sponsorship to complete on 2026

13. Sr. Imara Ungele (Pharmaceutical Dispenser) taking 2 years Diploma in Pharmacy at Hisani Institute of Health and Allied Science under hospital sponsorship to be completed on 2026
14. Nestor Damian (Nurse) taking 1 year upgrading Diploma in Nursing at Sr. Dr. Thekla School of Nursing Nyangao under hospital sponsorship, to be completed on 2025

## **2.2 Short Term Trainings**

Majaliwa Chumbo (Medical Doctor) and Salmon Ngatunga (Assistant Nursing Officer) attended 6 months short course on Emergency and critical care at Mbeya Zonal Referral Hospital under hospital sponsorship

## **2.3 Completed Trainings**

1. Dr. John Martin Mtomo: 3 years Master's degree in Medicine, MMED Orthopaedics and Trauma at Catholic University of Health and Allied Science (CUHAS) Bugando by November 2024. Sponsored by Artemed Stiftung Foundation
2. Dr. Francis Msagati; completed 3 years master's degree in Medicine, MMED Internal Medicine at Dodoma University of Health and Allied Science (UDOM) on November 2024. Sponsored by Artemed Stiftung Foundation
3. 1 Nurse (Magreth Mpunga) completed 3 months course in Ophthalmology at Mvumi- Dodoma on May 2024
4. 1 Nurse (Liston Edetrude Livigha) completed 12 months course in Anesthesia at KCMC- Moshi on May 2024
5. 3 Nurses completed 1 year upgrading course of Diploma in Nursing at Sr. Dr. Thekla School of Nursing-Nyangao on October 2024 under self-Sponsorship

(Joyce John Millanzi, Fabian Abdi Athuman and Daud Maurus Daud)

### 3. Staff Employment

<b>CADRE</b>	<b>Number</b>
Health Assistant	1
Radiographer	2
CPA(T)	1
Assistant Nursing Officer	1
Medical Doctor	3
Nursing Officer	1
Pharmaceutical Technologist	1
<b>TOTAL</b>	<b>10</b>

### 4. Staff Turnover

<b>REASONS</b>	<b>2023</b>	<b>2024</b>
Resignation	2	1
Resignation on Government posts	8	13
End-contract	1	1
Transfer	3	0
Deceased	1	1
Compulsory Retirement	5	4
Voluntary retirement	1	0
Retirement on medical ground	1	0
Back to employer after temporary secondment	11	5
<b>TOTAL</b>	<b>33</b>	<b>25</b>



## Curative Services

### Patient Category

AGE GROUP	Under 5	5-60Years	60Years	Total
New patients	2,732	12,941	2,457	18,130
Return patient	9,620	21,859	6,357	37,836
<b>Total</b>	<b>12,352</b>	<b>34,800</b>	<b>8,814</b>	<b>55,966</b>

### Billing Category

Billing	Cash	Insured	RCH Unit	Exemption	Promise to pay
Total	1864 (53.4%)	1186 (34.2%)	383 (11.1%)	21 (0.6%)	12 (0.3%)

### Table: OPD Department Top Ten diseases in 2024

RANK	DIAGNOSIS	2023	%	DIAGNOSIS	2024	%
1	Hypertension	13,790	20.5	Hypertension	7,027	20.0
2	Spondylosis radiculopathy	10,956	16.3	Spondylosis radiculopathy	6,996	19.9
3	Urinary Tract Infection	10,212	15.2	Respiratory Tract Infections	5,365	15.2
4	Malaria	10,064	15.0	Peptic Ulcer Diseases	4,705	13.4
5	Peptic Ulcer Diseases	8,529	12.7	Urinary Tract Infection	3,598	10.2
6	Respiratory Tract Infections	6,683	9.9	Malaria	2,794	7.9
7	Diabetes Mellitus	2,470	3.7	Pregnancy and its Complications	1,489	4.2
8	Hyperlipidemia	2,412	3.6	Hyperlipidemia	1,132	3.2
9	Pulpitis	2,151	3.2	Benign prostate Hyperplasia	1,118	3.2
10	Benign prostate Hyperplasia	2,044	3.0	Pulpitis	1,006	2.9

## **A Snapshot of Patient Demographics and disease pattern 2024**

Nyangao Referral Hospital continues to play a pivotal role in the delivery of healthcare services to the people of the Southern zone, Tanzania. An analysis of outpatient department data January - December 2024 provides valuable insights into the prevalent health conditions affecting the community.

Hypertension emerged as the most significant health concern, accounting for 19.41% of all outpatient cases. It was followed by spondylosis (15.44%), malaria (13.50%), and urinary tract infections (13.36%). Combined, these four conditions made up approximately 61.7% of all outpatient diagnoses, highlighting their considerable burden on the region's healthcare system.

These data further highlight the burden of non-communicable diseases (NCDs), with hypertension and hyperlipidemia ranking among the top conditions. This trend aligns with the global shift towards NCDs as primary health challenges. The hospital's role in managing these chronic conditions is crucial for improving the overall health and well-being of the population.

While infectious diseases such as malaria and urinary tract infections remain prevalent, their proportion has declined in comparison to non-communicable diseases (NCDs). This shift reflects not only national public health improvements but also the hospital's ongoing efforts in disease prevention. These include regular health education sessions, community outreach programs, distribution of mosquito nets, promotion of hygiene practices, and early screening for infections. Despite this progress, continued vigilance and strengthened preventive measures remain essential to sustain and further this downward trend.

Conditions such as conjunctivitis, septicemia, and pulpitis, although less frequent, represent a diverse range of health issues addressed

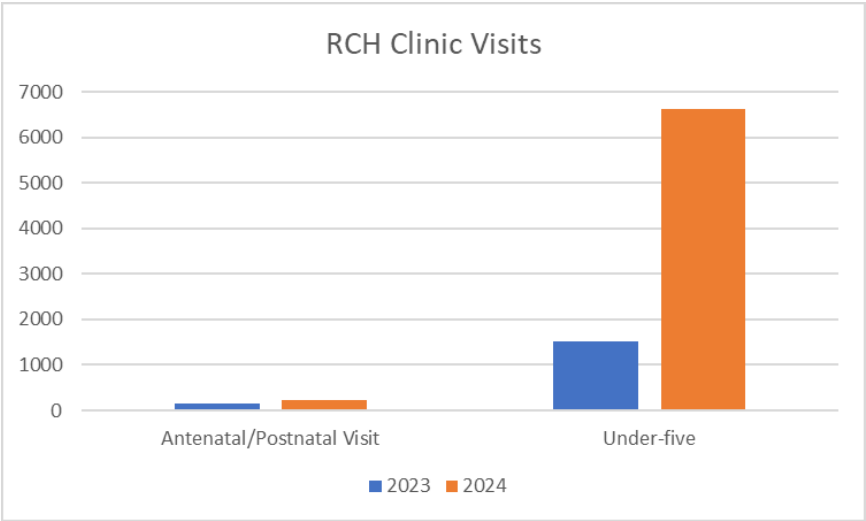
by the outpatient department. The hospital’s commitment to providing comprehensive care is evident in its ability to manage these conditions effectively.

In conclusion, the predominance NCDs emphasizes the importance of preventive care, early detection, and chronic disease proper case management. A wider range of healthcare services provided is crucial in addressing the diverse health challenges faced by the community.

**Reproductive and Child Health Services, RCH**

The Reproductive and Child Health services (RCH) department provides antenatal, postnatal and under-five children care services including prevention of mother to child transmission of HIV, vaccinations, family planning, health education and care for under five children. It has one daily static clinic and several mobile clinics for the nearby three villages, which are Mtakuja, Litingi and Ng’awa.

**Chart:** RCH Clinic Visits



**Picture:** Reproductive and child health team providing education on nutrition at Ng’awa village

## **Nursing care services**

The nursing department implemented various activities in order to improve the quality of health care services delivery to clients. The hospital patron works in collaboration with hospital management to ensure proper documentation in CareMD electronic system reducing unnecessary paper work and double documentation. Through Artemed Stiftung we were provided with Laptops and Ipads which were introduced to facilitate documentation when taking vital signs and during the ward rounds. Various medical equipment like patient monitors, infusion pumps, delivery beds were purchased in order to improve quality of nursing care services. The department also modified nurse's duty rosters by introducing 12-hourly shift in some departments in order to ensure continuation of care as well as to increase the number of nurses to patient ratio. Other interventions on the nursing care aspects are continuing where by the department is keen to ensure strict adherence to standard operating procedures.

Nurses attended various trainings both on job and short-term trainings for instance, Critical care training for 6 months for 1 ICU nurse together with several on job trainings on quality improvement, customer care etc. A total of 11 registered nurses successfully renewed their expired licenses. The Patron office assists nurses to acquire CPD points. More than 1200 scrubs suites were donated to be used by nurses and other hospital staffs thanks to Artemed Stiftung.

The major challenge in 2024 was high turn-over as many nurses (17 nurses) left for government posts, others had mandatory retirement due to their old age. New nurses were recruited to replace and cover for the deficit in the respective departments. The hospital management team is introducing different retention schemes in order to attract and retain staff

Aiming to improve the quality of nursing care in general through continuous daily supervision by Patron office and ward incharges, the department conducts various assessments making action plans which can be implemented.



**Picture:** *Nurses providing education to mother after delivering on child caring*

### **Quality Improvement/ Hygiene**

The Quality Improvement Team (QIT) actively worked to enhance quality healthcare service delivery and hygiene standards. Regular monthly meetings, staff training, and supportive supervision have played a key role in improving the quality of services. Two internal assessments on clinical auditing and Infection Prevention and Control (IPC) were conducted, including culture and sensitivity tests to identify sepsis-causing agents and fumigation to control infections. Additional sanitizer dispensers were installed, and surveillance of Surgical Site Infections (SSI) and Catheter-Associated Urinary Tract Infections (CAUTI) was implemented with monthly reporting.

The audits revealed notable improvements in infection prevention practices and clinical standards. Increased hand hygiene compliance, reduced rates of Surgical Site Infections (SSI) and Catheter-Associated Urinary Tract Infections (CAUTI), and enhanced staff awareness were observed. The introduction of routine fumigation, culture and sensitivity testing, and regular staff supervision significantly contributed to better infection control. Installation of additional sanitizer dispensers and continuous surveillance supported sustained hygiene improvements across departments.

To maintain high hygiene standards, five cleaning wagons were procured and distributed, while daily supervision ensured the availability and use of essential cleaning materials, PPEs, antiseptics, and disinfectants. The incinerator was fenced. Timely repairs of critical medical equipment such as theatre beds, infusion stands, lockers, wheelchairs, and mortuary stretchers. Several hygiene education sessions were conducted for patients and their relatives to prevent communicable diseases, and staff received training on newly introduced Standard Operating Procedures (SOPs) for hand hygiene, waste management, and decontamination. A structured monitoring system was introduced, with regular inspections using checklists to reinforce compliance.

Significant improvements were made in the laundry and linen management, including the installation of three modern washing machines and staff training on their use to reduce infection risks. Additional linen wagons, staff scrubs, bed linens, and blankets for newborns were distributed donated via Artemed Stiftung. Environmental hygiene was also prioritized ensuring hospital surroundings remain clean and free from animal intrusion.

Overall, these efforts have strengthened infection control, improved hygiene, and enhanced patient care. The Quality Improvement team remains committed to sustaining these initiatives to ensure a safer and healthier hospital environment.



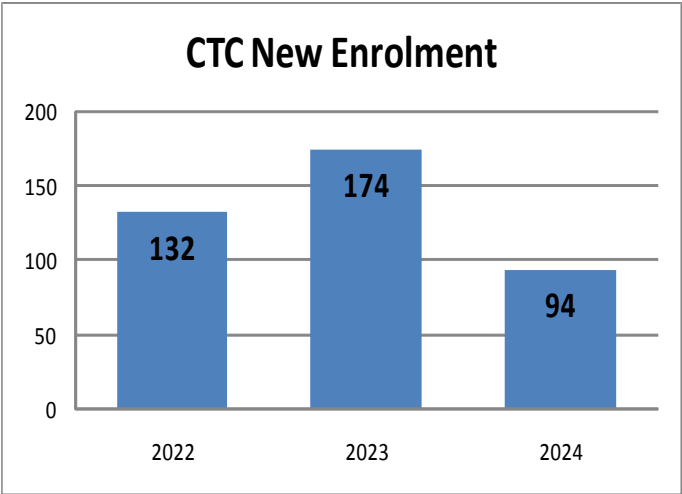
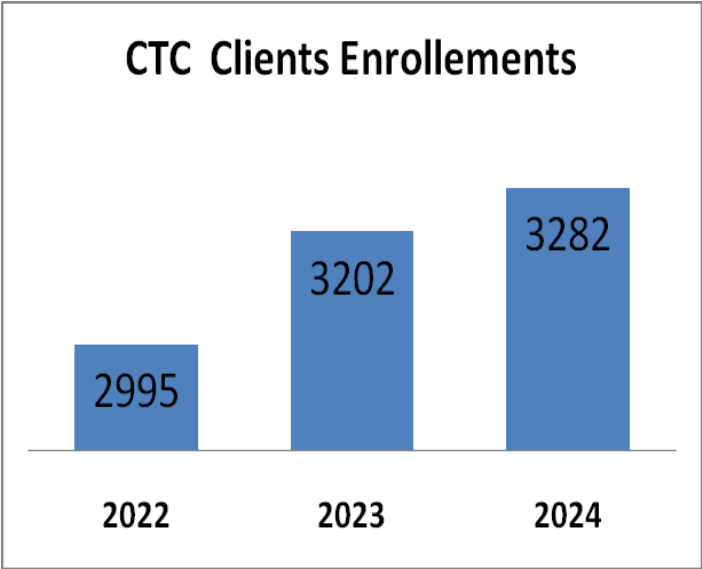
**Picture:** *Sr. UllaMariam, Ms. Angelika and Michael handing over some hygiene items*

## **HIV/AIDS Care and Treatment**

USAID-Afya Yangu continue to ensure availability of screening services, care and treatment for HIV/AIDs patients. The program through PREP services has extended services to client by adding HEPATITIS and STIs diseases and causes hierarchical changes from NACP (National Aid Control Program to NASHCoP (National Aids Syphilis Hepatitis Control Program)

Treatment advocacy for aged related group 15-24yrs and EPIQ program under USAID Afya yangu continued in 2024 dealing with community testing especially KVP (key vulnerable people) and kizazi hodari dealing with testing children aged 0 -15 living with HIV in the community helping majority of poor house hold in community. Cervical cancer screening through visual inspection with acetic acid (VIA) for the purpose of prevention early detection and treatment of cervical cancer is being done at

CTC. **Chart:** Clients enrolment at CTC Department





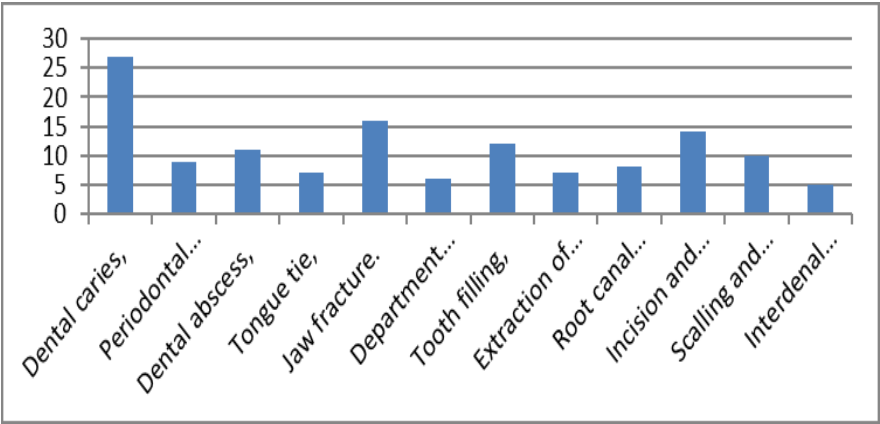
Dental Department

The department is run by an Assistant dental officer (ADO) and a Dental Therapist (DT). In 2024 the dental clinic registered 1971 patients compared to 1988 patients in 2023. A good investment in dental material and equipment capacitated the unit to perform properly. The team provided oral health education to hospital staff, RCH clinic and community.

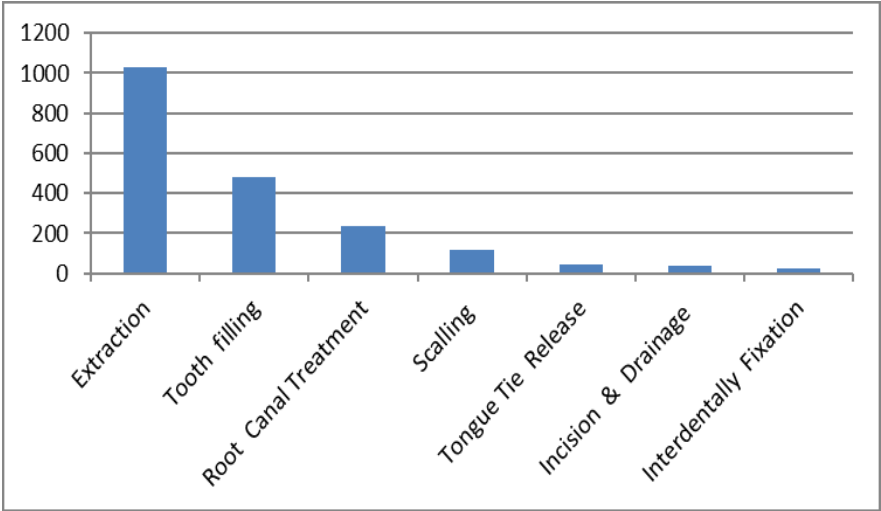
Also, the department conducted outreach program in primary schools and health facilities. Through outreach program interventions provided to patient screened serving them from life threatening conditions such as dental abscesses and Ludwig angina which were significantly reduced.

The hospital management supported staff to participate in activities during the International oral health day in Lindi region held at Kilwa District.

**Table:** Leading conditions in the Dental Unit,



**Table:** Service offered in Dental department



**Medical Departments**

**Emergency/Casualty Unit**

The hospital continued to strengthen its Emergency Unit in response to the growing demand for timely and effective emergency interventions. The unit remains a critical part of the hospital, ensuring that patients with life-threatening conditions receive immediate assessment, resuscitation, and stabilization, significantly improving survival outcomes. The Emergency Unit operates 24/7 and is staffed by a medical doctor trained in emergency medicine, supported by two nurses per shift day and night. Their collective expertise and dedication have played a crucial role in saving lives and enhancing the quality of emergency care delivered at the hospital.

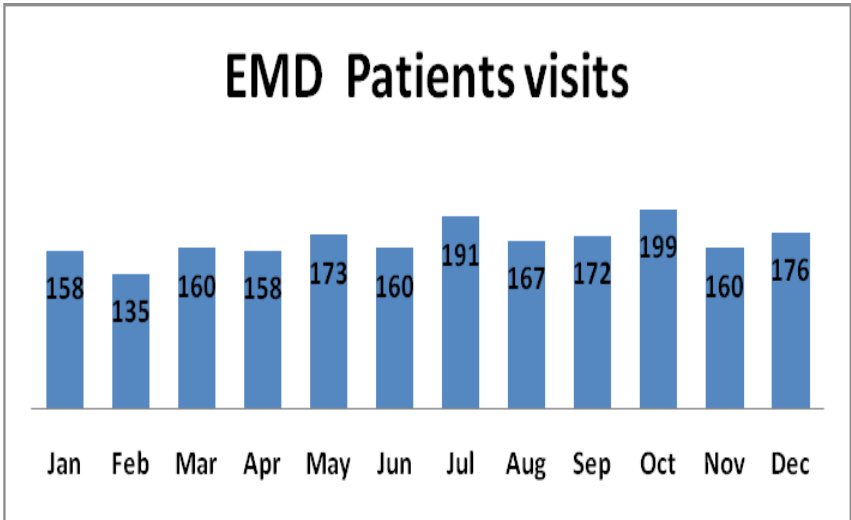
### **Achievements;**

- One of our doctors is sent for a Master's degree in Emergency Medicine, ensuring the continuous development of specialized expertise within the hospital.
- One medical doctor and one nurse attended 6 months short course training for Critical care and emergency medicine at Mbeya Zonal Referral Hospital supported by Sr. Raphaela Haendler OSB.
- Two nurses attended Arusha Emergency medicine seminar where they acquired skills in Advanced Trauma Life Support (ATLS) and Basic Life Support (BLS), improving their ability to manage critical cases.
- The unit successfully managed about 2009 emergency cases in 2024, a notable increase from the previous year.
- Response time for critical cases was significantly reduced, leading to better survival rates for conditions such as trauma and cardiac arrests

### **Challenges;**

Despite notable progress, the Emergency Unit faced key challenges in 2024, including a shortage of mobile beds, limited space, lack of portable ultrasound and ECG machines, and the transfer of trained nurses to other hospitals. These constraints affected service delivery, especially during peak hours. However, the dedication of our EMD doctors, nurses, and support staff, alongside strong collaboration with hospital leadership and patient families, made our achievements possible. As we look ahead to 2025, we remain committed to delivering high-quality, timely, and compassionate emergency care.

**Table:** Number of patients attended at Emergency Unit



**Internal Medicine Department**

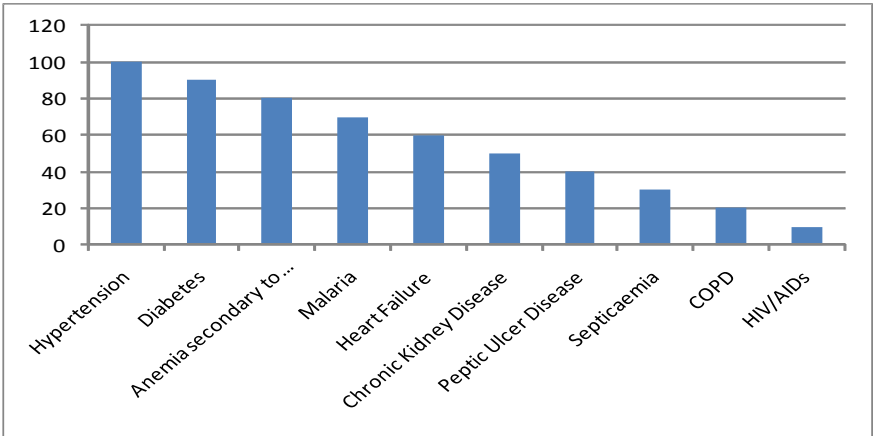
End of 2024, the department welcomed Dr. Francis Msagati, physician who returned from his postgraduate training in Internal medicine. He is supported by 3 MDs assigned to their respective units. The department serves the Medical Outpatient Department (MOPD), Internal Medicine Wards, and the Intensive Care Unit (ICU). These units provide care for patients with both communicable and non-communicable diseases.

Non-communicable diseases (NCDs) constitute the majority of cases in both the MOPD and the Medical Inpatient Department (MIPD). To address this growing concern, an NCD clinic was established with the primary objectives of increasing awareness, reducing disease burden, preventing complications, and promoting healthier lifestyles. The clinic achieves these goals by providing health education, screening tests, diagnostic services, and evidence-based treatment.

Two (2) staff attended a 6-month short course on emergency and critical care from February to August. This training significantly enhanced the team’s skills and contributed to improved service delivery.

Additionally, we had the privilege to host two experts, Sr. Dr. UllaMariam and Dr. Gosia, who joined us at different times to support health interventions. Before the arrival of our current physicians, it is these two who played an instrumental role in the management of most challenging conditions, demonstrating exceptional expertise and dedication.

**Table:** Top Ten diseases in Internal Medicine



**Pediatric Department**

**Neonatal Intensive Care Unit, NICU**

The NICU was reorganized into sections in order best to provide management of the newborn babies admitted for care in the unit. Formerly the nursing station is now used as the resuscitation area. The nursing station is now at the centre of the room providing adequate monitoring of all newborns admitted in the NICU.

A visiting Pediatrician from Ndanda Referral hospital assisted by hospital staff facilitated one on job training which includes health care workers from NICU, obstetrics and gynecology, and RCH on neonatal intervention. We conducted a 3 days newborn care mentorship from the Ministry of Health, in which all of these has improved our neonatal care services and patient survival. One MD attended a 1-week international neonatology conference which was held and facilitated by Arusha Lutheran Medical Center aiming at increasing awareness on common neonatal conditions, procedures as well as sharing experience on the best practices from other best performing facilities.

A total of 14 outreach clinics were conducted at health centers and dispensaries within Mtama district council. The primary objective of these outreach clinics was to provide RCH services with targeted training and supportive supervision for health care providers. Emphasis was placed on addressing common neonatal conditions, conducting neonatal resuscitation, and implementing pre-referral management protocols.

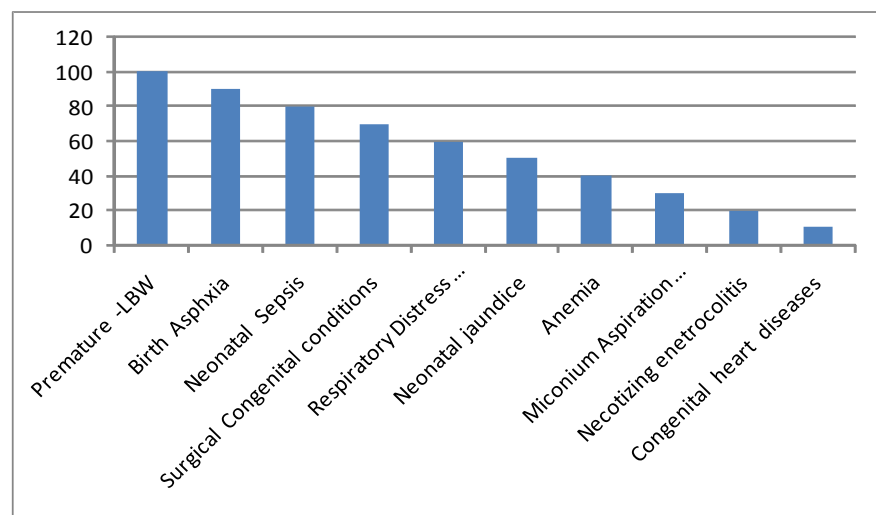
New equipment procured including 1 patient monitor, 4 infusion pump, 1 iPad (Via Artemed Stiftung), 2 pulse oximeter machines and 2 CPAP machines (donated by Sr. Raphaela Haendler OSB). The equipment helps greatly in the management and overall improvements of service care delivery.

Our top ten diseases included: prematurity, birth asphyxia, neonatal sepsis, surgical congenital conditions, respiratory distress syndrome, neonatal jaundice, anemia, meconium aspiration syndrome, necrotizing enterocolitis and congenital heart diseases.

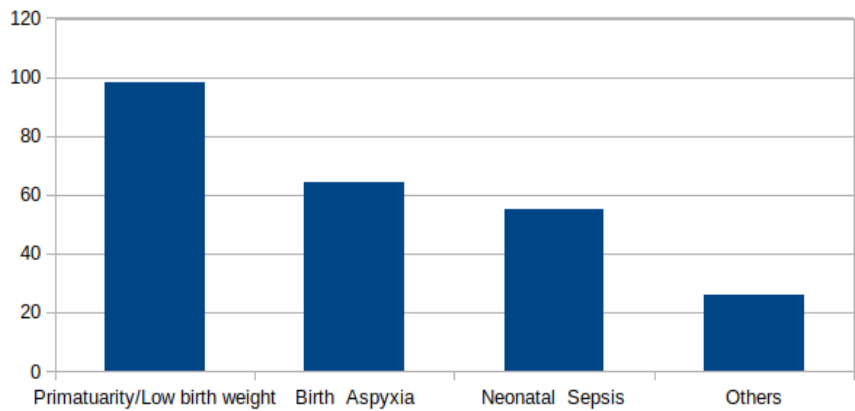
**Table:** General Statistics in NICU

Statistics Over view	Year		
	2022	2023	2024
Admissions	524	625	650
Total Patient's days	2733	2753	4164
ALOS	4	4	6
Bed Occupancy Rate	68.%	69.%	82.%
No. of Deaths	36	44	39
% of Death	7.10%	7.04%	6.0%

**Chart:** Top Ten Condition in NICU



**Table:** Most common conditions in NICU



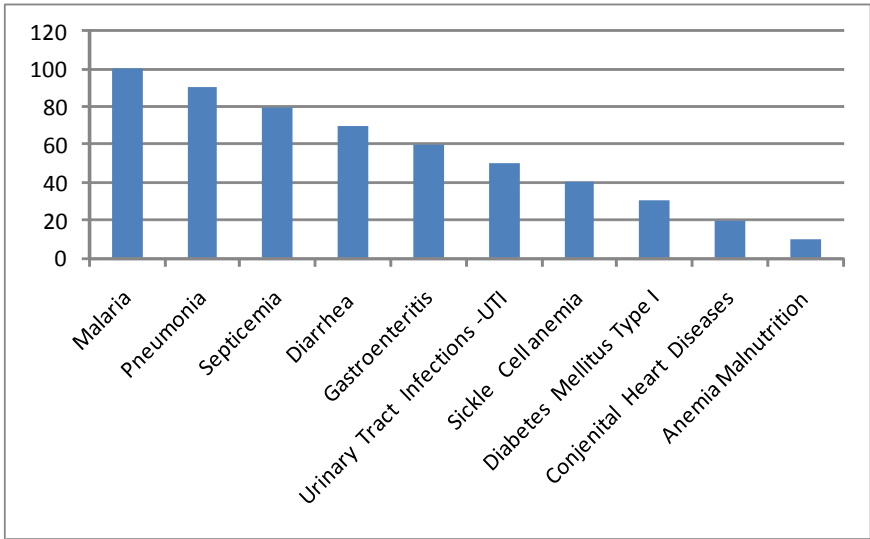
**Pediatrics Ward**

Pediatric department focuses on providing medical care and treatment to infants, children and adolescents up to the age of 15 years. Services offered include routine check-ups, vaccinations, management of acute and chronic illnesses such as infections, asthma, diabetes and developmental disorders. Also, the department provides preventive care, growth monitoring, nutritional counseling and guidance on child developmental milestones. Pediatric specialist work closely with families to ensure comprehensive and compassionate care, emphasizing the importance of early detection, interventions, and promoting overall health and well-being in pediatric patients.

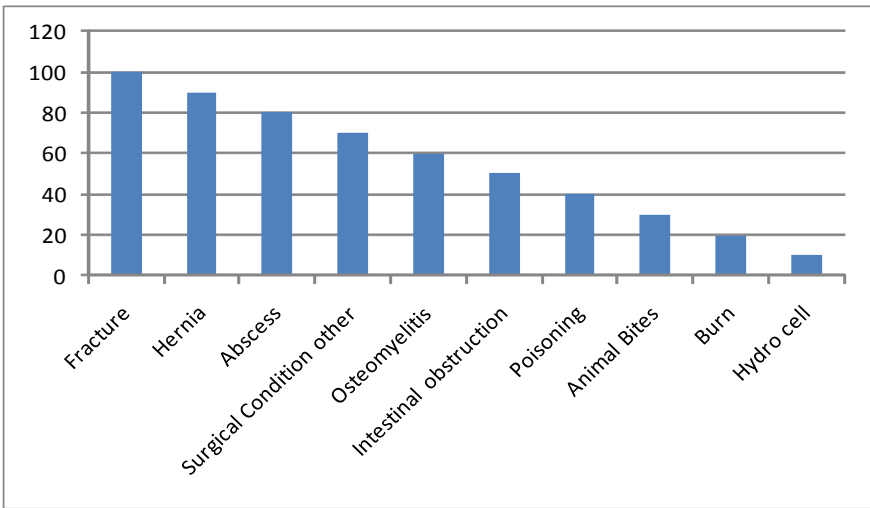
Training on Malnutrition was conducted by hospital nutritional officer which included the concept of nutrition in general and how to make nutritional formulas like F-75 and F-100. The Pediatrician continued to strengthen our pediatric team and coaching interns for two days a week. We prepared one nutritional office and established one high dependency unit for babies who need close monitoring and one monitor on equipments. Top ten diseases in our department included malaria, pneumonia, septicemia, anemia, malnutrition, gastroenteritis, urinary tract infection, sickle cell anemia, diabetes mellitus type 1, and congenital heart diseases.



**Table:** Top Ten Diseases in Pediatric Ward



**Table:** Top Ten Pediatric Surgical condition



## **Obstetrics and Gynecology Department**

The Obstetrician and Gynecologist assisted with 2 medical doctors and a team of 22 Nurse Midwives serves both the Antenatal, Labor and Delivery and Postnatal ward. There were 3130 births in the year 2024 (3240 births in 2023). Regrettably, we could not escape 1 maternal death (4 maternal death in 2023) due to stroke as a complication of inadequately managed hypertensive disorders of pregnancy. May her Soul rest in eternal peace, Amen.

The Outreach program to improve perinatal outcomes in facilities around Nyangao reached several health facilities in Mtama, Newala and Masasi Districts. This Program greatly contributes to reduction in maternal and perinatal morbidities and mortality. The Lindi region and southern zone recognizes our initiative as the best model contributing to safer motherhood. For this, we are forever indebted to great efforts fundraising for this support by our dear Sr. Raphaela Händler OSB. Thanks to Dr. Kurt Bishopburger and friends for the support of important equipment in the labor room such as new delivery beds, infusion pumps, patients' monitors and Penguin suckers.

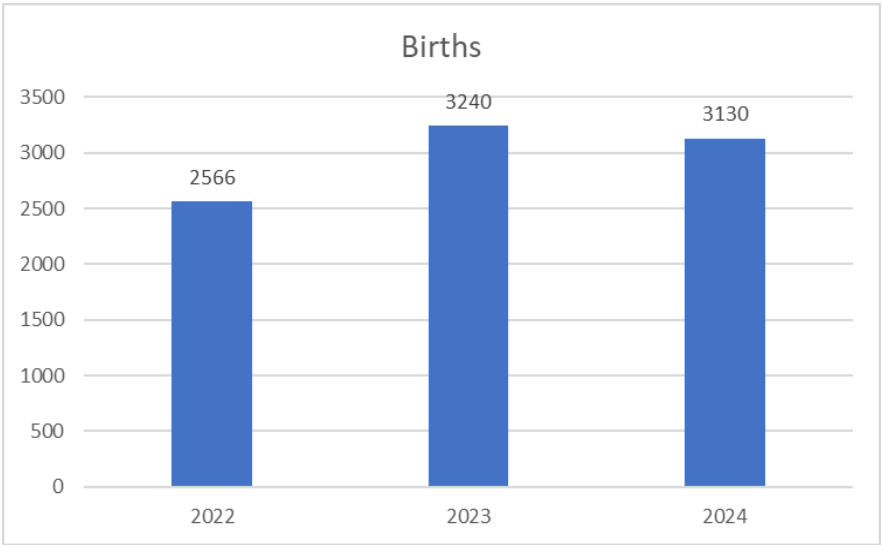
Nyangao referral hospital remains the centre for CEMONC training for the Ministry of Health for the newly opened CEMONC centers and new staffs of the Mtama district. In 2024 we provided attachment training to the newly employed nurses and anesthetists from Mtama District Hospital.

Due to congestion in the obstetrics ward, we transferred the gynecology unit to the female ward where an 8 beds room is specifically dedicated for gynecological patients. Visiting experts from Germany via Artemed foundation continue to exchange expertise and skills in managing difficult obstetrics and gynecological conditions.

The maternal and Perinatal Death Surveillance Response (MPDSR) with zoom meeting have been conducted at all levels by the Ministry to the facility level in order to review maternal and neonatal deaths and nearby miss with the aim to assess for areas of improvement and to take appropriate interventions to prevent recurrence.

The work of obstetrics and gynecology department would not be possible without our many different sponsors and donors. On behalf of our team and all our local partners, we extend our deepest gratitude to you for your invaluable support.

**Chart:** Number of deliveries



**Surgical Department**

Overall, the surgical department had a good year, major and minor surgeries were performed efficiently and with good outcome. Led by the General Surgeon who works with visiting otolaryngologist from Mtwara and orthopedic surgeons from Muhimbili Orthopedic

Institute, MOI. We welcomed Dr. John Mtomo, an orthopedic surgeon returning from his postgraduate specialization in orthopedics and trauma. There are 5 medical doctors, 3 in General surgery and 2 in Orthopedics.

Germany friends Prof. Hans and his wife Dr. Gabriela visited twice this year, first in March and later in October 2024 supplying medical equipment, training staff and most importantly giving chance for the surgeon to get a short breather. A vascular surgeon Dr. Guido visited briefly observing how we conduct our business in the department. It was such a productive visit which helped to improve activities and organization in the department.

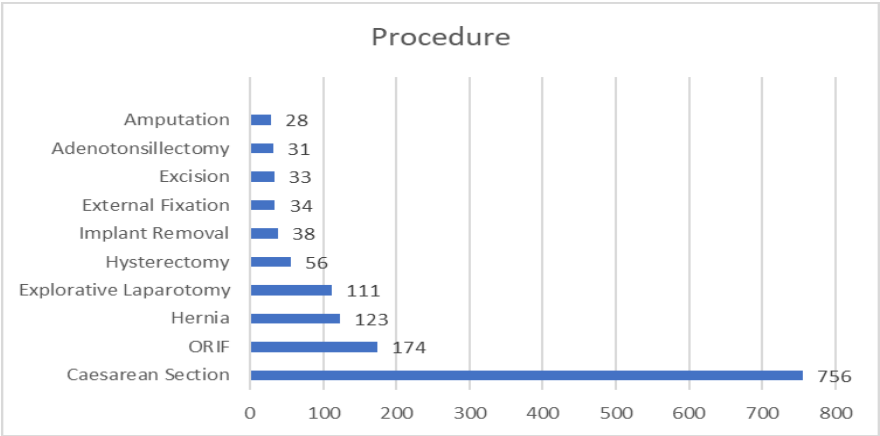
A total of 1726 surgeries were performed, 483 General surgery department, 314 orthopedics (done by orthopedic surgeons from MOI) and 929 in obstetrics and gynecology. There were major and interesting surgeries performed by general surgeons like Nephrectomy, Pyloromyotomy, Bilirubin 2 surgery, cholecystectomies, and pediatric anastomosis secondary to jejunum atresia.

The department also offers outpatient services for consultation, investigations and minor procedures.

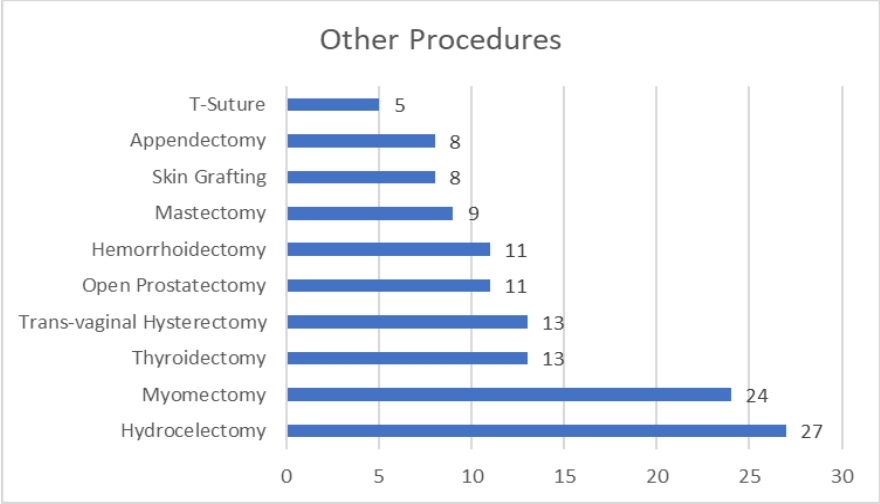
The acting director of MOI and his team visited our facility to oversee the progress of our Memorandum in the past 2 years. A total of 1282 procedures were done by 21 visiting orthopedic surgeons from MOI. The doctors have vastly assisted victims of trauma and reduced the cost of travelling long distances of about 530km to obtain specialized services. Motor traffic accidents are the number one cause of orthopedic attendances in the hospital.

Furthermore, the visiting ENT surgeon has vastly improved services for related conditions especially for children. The specialist usually visits once per every month conducting outpatient services and performs major surgeries with high success rates

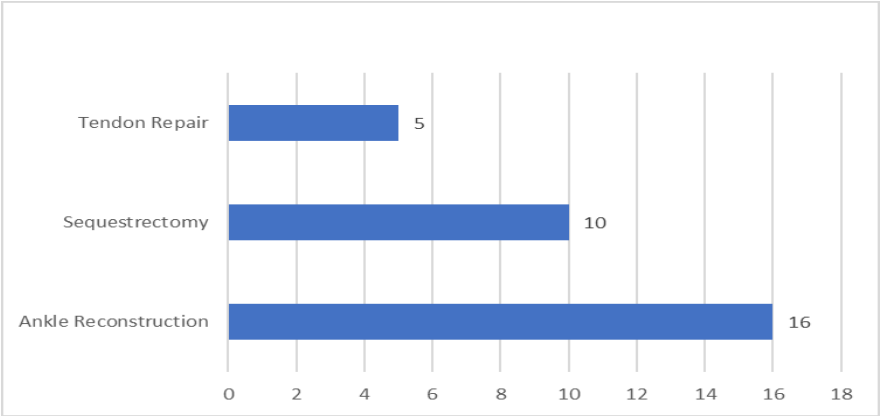
**.Chart: Top Ten most common Surgical Procedures**



**Chart: Other Surgical procedures**



**Chart:** Other Orthopedic Procedures



**Picture:** *Surgical team at work*

**Anesthesia Unit**

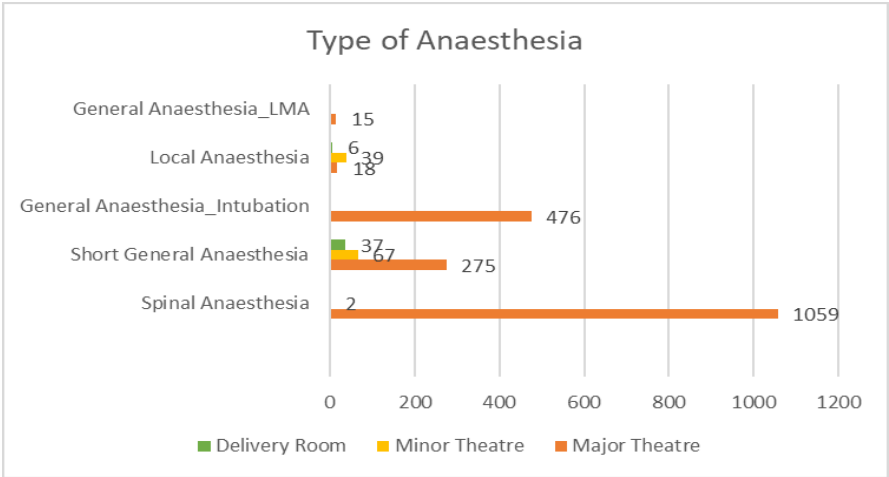
The unit consists of 7 qualified anesthesia nurses. Three were attached by DMO-Mtama in order to acquire more experiences as they wait for their facilities to start CEMONC services. One trained Anaesthetist nurse left the hospital for government positions.

Dr. Daniela Kietzmann, consultant anesthesiologist from Sweden continues regular trainings of the team ensuring safer anesthetics practices. Through here initiative we received a new Universal

anaesthesia machine, Capnograph machines, pulse Oximeters, CPAP machines and spare connecting tubes supported by Sr. Raphaela Haendler OSB.

A new portable ventilation machine donated by Artemed Stiftung via Sr. UllaMariam is a lifesaving in our ICU and already assisted more than 30 critically ill patients since its installation in June 2024.

**Chart:** Type of Anaesthesia



**Support Services**

**Radiology Department**

In 2024, a total of **8,454** X-Rays examinations were done compared to 9474 X-Rays in 2023. There were **10,271** Ultrasound examinations done compared to 9974 examinations in 2023. There are 4 staff, 2 Radiographers, 1 Sonographer and 1 medical attendant at the reception and registration area.

The GE System Ultrasound machine broke down end of the year hence, the small portable scanner from the labour ward was used

instead. The probe for cardiac examinations was damaged after a few months of operation. The X-Ray on and off problems were temporary fixed during the period. Two Radiographers attended the training by Tanzania Atomic Energy Commission, TAEC in Arusha.

## **Laboratory**

Recognized as a level II Regional Referral Hospital laboratory it comprises of 8 sections namely; reception area, phlebotomy, blood Transfusion, microbiology, parasitology, hematology, clinical chemistry, immunology and serology. The unit consists of 15 staff; 1 Laboratory Scientist, 7 Laboratory Technologists, 2 Assistant Laboratory Technologists, 3 Medical Attendants, 1 Data clerk and 1 cleaner.

The laboratory is equipped with standard Medical Laboratory Equipment. The laboratory implements, maintains and sustains Quality Management System (QMS) and has been fully accredited by the Southern Africa Development Community Accreditation Services (SADCAS) in 9 scopes i.e. HIV, HBsAg, HCV, MRDT, Malaria Microscopy, Gene-xpert, TB Microscopy, ABO and Cross-match and the status has been sustained. Twenty-one major non-conformities were identified during onsite SADCAS assessment in November 2024 compared to 33 non-conformances identified during the previous onsite assessment done in December 2022. All identified non-conformances were effectively cleared.

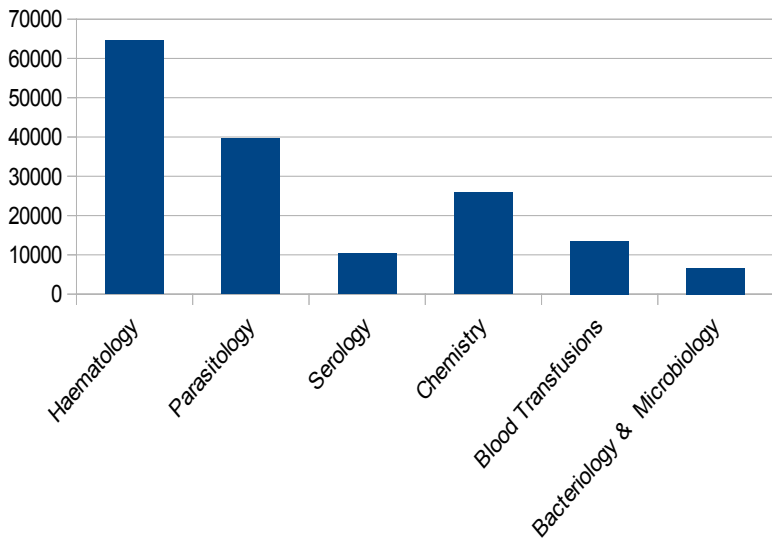
The installation of Hematology analyzer (GENRUI KT 6610) as a backup machine which ensures consistence patients` sample testing:





**Picture:** Hematology analyzer (GENRUI KT 6610)

**Table:** Investigations Performed



## **Pharmacy Department**

In 2024, the hospital improved the staffing level to ten staff (9 staff are qualified personnel).

The department is committed to deliver high-quality pharmaceutical care services to both the inpatient and outpatient attendees. This is achieved by ensuring:

- Availability of high-quality medicines and medical devices
- Cost-effective pharmaceutical services
- Patient and client education regarding the provided services
- Confidentiality of client information
- Proper storage and dispensing of medicines and medical devices
- Rational and appropriate use of medicines
- Client satisfaction with the services provided

All Health commodities are purchased from Medical Store Department (MSD), Zeepyi Pharmaceuticals Ltd and Action Medeor Tanzania. We are also receiving other medicines and medical supplies through vertical programme e.g. ARV's, TB/Leprosy and Antimalaria. The hospital has more than 270 items with the average of 97% availability.

This year a hospital pharmacist attended a three days' workshop on stores management web based electronic system (e-LMIS) to improve on forecasting and quantification of health commodities.

We are very grateful for the donation of free medicines via Tanzania Episcopal Conference, TEC and our suppliers such as Zeepyi Pharmaceuticals, their support greatly increased the availability and access to medicine and medical equipment.

**Table: Fast- and slow-moving items**

S/N	10 Fast Moving Items		10 Slow Moving Items	
	Description	Quantity	Description	Quantity
1	Ferrous Sulphate+ Folic acid	144967	Snake venom Antiserum	1
2	Amoxicillin 250mg	128024	Atropine eye drops	2
3	Paracetamol 500mg	122483	Anti-D immunoglobulin injection	18
4	Metronidazole 200mg	121220	Warfarin 5mg	19
5	Nifedipine 20mg	112149	Human Chorionic gonadotropin injection (HCG)	26
6	Omeprazole 20mg	103487	Enalapril 2.5mg	30
7	Pregabalin 75mg	101859	Low molecular weight heparin	42
8	Atorvastatin 20mg	83179	Mannitol 20% w/v	88
9	Ibuprofen 200mg	80112	Dextrose 50%	94
10	Piroxicam 20mg	77508	Promethazine 25mg	501

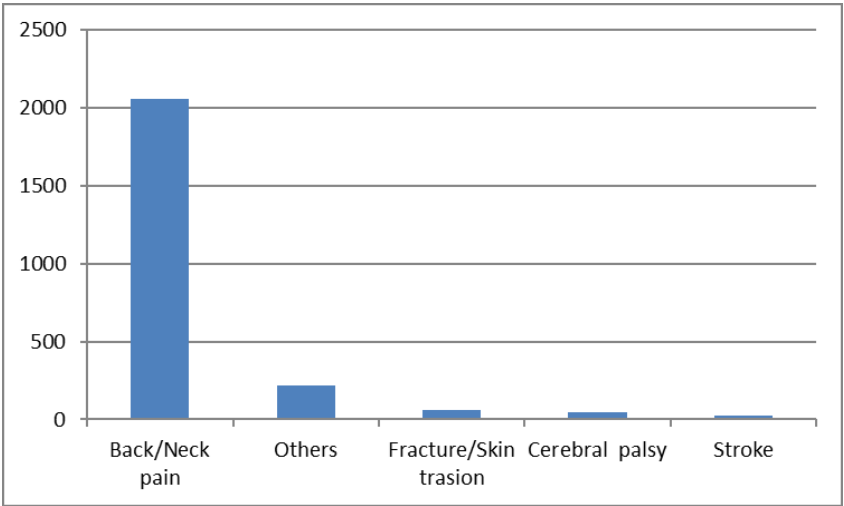


**Picture: Hospital Pharmacy**

## Physiotherapy Unit

Equipped with modern medical equipment and conducive environment for physiotherapy administration, the two qualified personnel in the unit continue to provide quality care to clients. The leading condition remains neck and back pain commonly affecting the majority in the community.

**Chart:** Top five leading diagnosis Physiotherapy



## Palliative Care Unit

A dedicated multidisciplinary team of 10 members including doctors, nurses, a physiotherapist, a social worker, a pharmacist, and a chaplain provide holistic support to patients and their families.

The palliative care team focuses on relieving symptoms and stress associated with illness to improve the quality of life. The team demonstrated a strong commitment to delivering comprehensive and compassionate care. Beyond providing morphine and other medical support through donations and community volunteers, the team also offers food and essential supplies to ensure that patients

receive nutritious and comforting meals during their final days. The team addresses the social, spiritual, and psychological needs of patients.

### **Outreach Services and Patient Follow-up**

The team conducts weekly outreach visits every Friday from 10:00 AM to 5:00 PM, reaching approximately 12 patients who require palliative care beyond those admitted to the hospital. These visits include assessing current and past complaints, conducting physical examinations, and providing holistic care, covering physical, social, spiritual, and psychological aspects.

Additionally,

- Every Tuesday, the team visits inpatients in need of palliative care.
- Every Wednesday, phone calls are made to home-based patients to check on their health status, monitor progress, and ensure proper follow-up.
- Monthly meetings are held to discuss patient progress and evaluate the team's overall performance.

The top five diagnoses among patients include cancers, HIV, congestive cardiac failure (CCF), stroke, keloids, and cerebral palsy.

### **Training and Capacity Building**

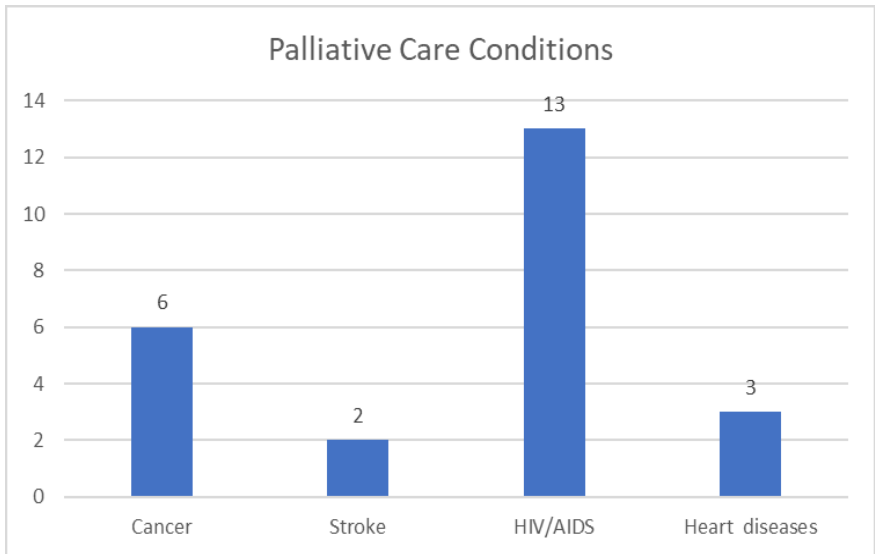
February 2024, 3 team members attended a short course on Palliative Care at Muhimbili National Hospital. The goal was to enhance awareness and knowledge while sharing experiences with other palliative care teams across the country. The training included visits to Ocean Road Cancer Institute, PASADA, and Muhimbili Pediatric Oncology Units, broadening their understanding of palliative care across different age groups and medical conditions. Moving forward, the team aims to participate in more training programs and exchange visits with other hospitals.

June 2024, the team successfully raised awareness among healthcare workers at Nyangao Hospital through a Continuing Medical Education (CME) session. The training, conducted by mentors from Muhimbili University of Health and Allied Sciences (MUHAS), focused on palliative care and was followed by the official launch of the Palliative Care Office at the hospital. This initiative has significantly improved attitudes toward palliative care and the use of morphine among healthcare workers.

**Challenges and Call for Support**

Despite the team’s dedication, challenges persist, particularly in securing funding. Additional support is needed to sustain the team’s compassionate work and expand services to reach more patients in need. Heartfelt appreciations go to Sr. Raphaela Haendler OSB, for her unwavering support in caring for terminally ill patients. Your contributions are invaluable in making a difference in the lives of those in need

**Chart:** Conditions Enrollment in Palliative





### **Power/Solar Project;**

Discussions are ongoing for a large-scale solar power plant which will significantly reduce the cost of electricity for the hospital. Currently, the hospital spends approximately 9 million Tshs per month on Grid electricity bills.

According to Prof. Peter Schmieg, the solar project can progress alongside the Master Plan for the building infrastructure. We were also fortunate to host visitors from Sopowerful, a company specializing in support for green energy from the solar. They conducted a site study, and we remain hopeful that negotiations will lead to the successful implementation of this project.

### **Laundry Project;**

We extend our sincere gratitude to Laurens and Marion Herting for funding the laundry project where 3 new washing machines and a hot water via solar system were installed. Their generous support via Artemed Stiftung and Greenlink Company from Arusha has been crucial in terms of procurement of these machines and provision of technical support.



**Picture:** 3 New Washing Machine (2 on the left 45Kg, 1 on the Right 25Kg) All machines are connected on the hospital network can be seen and monitored remotely for troubleshooting their problems and checking their performance easily





**Picture:** *Solar Heaters 1800lts tanks*

### **Ironing Machine;**

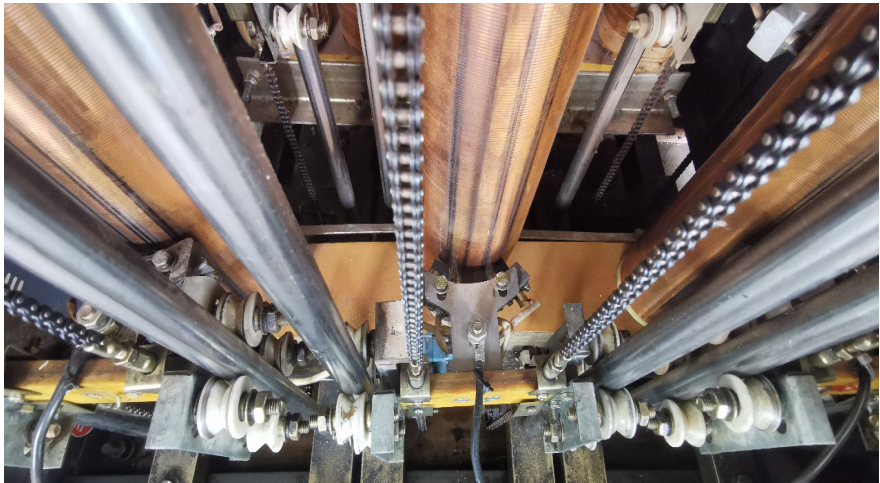
Electrician Gunther Roser installed the missing part in our Ironing machine solving the long-standing problem with our large very old model but the only functioning Ironing machine in the unit. We will forever be indebted by his technical support as the machine is working properly after replacement of the spare parts.



**Picture:** *Repaired Old Ironing Machine*

## Electricity;

End of the year we had a serious breakdown of our Victron battery backup system, the hospital power stability and safety has never been the same. Eng. Geoffrey Temihango and colleagues repaired the 100KVA Stabilizer which works well protecting the Victron Inverters and battery. Eng. Henrik identified and solved the problem of overheating of the generator which was due to poor ventilation of the machine.



**Picture:** *The 100KVA Mechanical Stabilizer*



**Picture:** *Improvised Ventilation System on the generator roof to facilitate cooling of the generator*

### **Sewage System;**

The Sewage system is running well, we continue to solve various challenges especially the blockage of pipes and manholes. Continuous education to users in order to prevent clogging of the system is provided regularly. We conduct regular inspection and prepared a budget for major repairs especially for manhole and the fence in sewage ponds.

The sewage system of the Sisters Convent and Sr. Dr. Tekla School of Nursing have been connected to the Hospital's centralized waste management system. We thank Sr. Raphaela Haendler OSB for the funding of this project.

### **Water;**

Guest Eng. *Deininger Michael*, water specialist via Artemed Stiftung, worked on the issue of clean water reaching the hospital. Among other things from his initial report; he identified contamination of

our village water supply, huge losses via farming and gardening activities among beneficiaries leading to frequent breakdown of our underground pumps. There was a non-functioning machine in the laboratory which supplied undistilled/unfiltered salt water unsafe for the laboratory machines and theatre instruments.

In order to control water wastage in the future, all users will be charged as per amount utilized especially if one spent above allocated free amount in liters. Thanks to Sr. Raphaela Haendler OSB this fund is already in our accounts.

We also thank Eng. Michael for his efforts to acquire modern meters for monitoring water usage in the hospital and all users. Eng. Michael is looking into the problem of our clean water wells most especially the issue of our frequent pump breakdowns. His advice continues to be implemented by management in collaboration with the maintenance department to be able to achieve and save costs for the purchase of pumps often. We measure the conductivity of water weekly of all water sources that are used for the hospital.



**Picture:** *Device for measuring the conductivity of water*

In future the plan is for the hospital to find a suitable filtration or treatment plan in order to protect our new washing machines and heating elements of the solar heaters for the hot water system.

## Other Activities

**OPD Area:** The technical unit supervised the construction of the Canopy in the OPD Reception and Billing area including addition of the new desk for service providers solving the increased demand for service delivery windows from one window to four windows. Also, we organized and supported the renovation of OPD room No. 20 for the Internal Medicine physician.



**Picture:** Canopy extension at the Reception and Billing area

### **ICT Department:**

In the department we received a number of ICT and electrical equipment from Artemed Stiftung crucial for performing our activities. We received both remote and physical technical support from Artemed Stiftung experts. The Hospital signed technology memorandum of understanding which will help in provision of technical support and equipment.



The following are the major activities that have been performed in our department in the year 2024.

- We managed to reduce internet costs for both providers; Vodacom and TTCL where the costs have been reduced from 1,654,999.50 Tshs to 1,400,000 for Vodacom and from 400,000 Tshs to 100,000 Tshs for TTC. This was possible after negotiations with the internet services providers.
- One new access point was installed near Administrators' house in order increase signal strength so that access to the hospital systems should be better and one access point was installed near CTC to replace the AP 16 which was damaged by rain.
- We changed the locations (server) of the X ray images (Orthanc) from the client computer to the main server. A new virtual machine with the capacity of 500GB has been created in the main server to store x-ray images. The address for accessing images has also been changed. Now imaged are viewed in a separate page from that with the system (CareMD).
- We performed planned periodic maintenance activities in the ICT equipment of the hospital.
- Some of the machines were integrated with the system so that test results can be uploaded directly on of these machines is the Haematology analyzer machine.
- Laying and installation of network cables and mini switch at laundry was done in order to supply the machines with internet. Configuration of the washing machines was also done.
- The department provided technical support to system and network users so that activities can be performed well.
- Changing UPS for servers; The old UPSs have been replaced with the new one which has three battery packs. The new UPS installed can provide power for 42 minutes if power goes off.

- Two network switches were replaced with the new ones. Switch two that was installed in the server room and switch number four which was installed in labor ward. These two switches have been replaced because most of their ports were incapable of providing power over ethernet. The switches were also configured.
- The cloud key which was used to control network access was changed and replaced it with UDM Pro which is more advanced.
- Two shells were installed and configured for control of electrical power.
- One DECT gateway has been installed outside laboratory to increase signal strength around laboratory, radiology building and OPD.
- We have installed and configured thirteen desk phones in wards, EMD, TB, OPD room5, CTC, laboratory and pharmacy store.
- Notebooks and iPads have been configured and we have distributed most of them to various departments for use.
- We prepared and organized zoom meeting discussing way forward on integrations and upgrading MTUHA in the system (CareMD).

Department members also performed other tasks like installing some software programs to some of computers, attending Data Quality Assurance meeting, Technology Meeting, HMT meeting, MTC meeting and Quality Improvement Meeting.



**Picture:** Access point number 17 (AP17 Hostel) that was installed to replace the previous one that was damaged by rain



**Picture:** New servers that were installed to replace the old ones



## **Biomedical Department:**

The biomedical unit successfully carried out regular preventive maintenance for hospital equipment every three months, ensuring all serviced machines were labeled with a maintenance schedule sticker. Key repairs included replacing damaged oxygen saturation probes for patient monitors and cleaning bacteria, dust, suction, and oxygen concentrator filters to maintain optimal functionality. Staff were also trained on filter maintenance to prevent oxygen supply issues. Regular internal and external cleaning of equipment was performed using disinfectants and blowers to remove dust and debris. Additionally, bacteria filters in suction machines were replaced whenever they showed signs of blockage or failure to generate proper negative pressure.

May 2024, the department participated in a two-days training on Supportive Supervision and Mentorship at Sokoine Regional Referral Hospital facilitated by the Ministry of Health and PATH. The training focused on using the AfyaSS Program to improve healthcare services and for conducting supportive supervision. Staff from hospitals across Lindi Region, including Kilwa, Nyangao, and Kiwalala took part in the training. Following this training, we conducted twice internal supervisions to enhance service delivery within the facility.

Looking ahead, several key recommendations have been made. Repairs of the anesthesia machine and autoclave should be prioritized once the required spare parts, such as heating elements, are made available. The hospital inventory needs continuous updating with pricing, installation timelines, and other essential details. Improved collaboration with suppliers, engineers, and hospital staff is necessary to ensure timely resolution of equipment issues. Lastly, user training and daily monitoring of medical devices remain crucial for maintaining safety and efficiency. To further enhance service management, training on the MEMIS program is recommended for better handling of equipment service requests.

**Table:** Medical Equipment Supported by Artemed Stiftung

Item Description	Quantity	Department	Installation Date
ARI Infusion Pump	5	NICU, Labor Ward, Pediatric Ward	17/11/2024
Portable Multi-Parameter Patient Monitor	5	Labor Ward, NICU, Paediatric Ward	19/11/2024
Manual Delivery Bed	4	Labor Ward	28/11/2024
Penguin Sucker	5	Labour Ward	28/11/2024

**Social Welfare and Complains Office**

End the year 2024, we welcomed Mr. Anold Joackim as the new social welfare officer replacing the very shortly served Mr. John Thomas who left for greener pastures. Nevertheless, the Social Welfare and Complaints Office maintained its commitment to serving the community, addressing diverse needs and challenges.

The office provided patient assistance and financial support disbursing funds to clients including vulnerable individuals, those with mental health issues, and emergency cases. This support was allocated for temporary exemptions to be recovered later or provided for full exemptions especially in case of the most vulnerable groups or individuals. We see a rise in mental health-related cases, highlighting the growing need for mental health services.

Beyond financial assistance, the office provided counseling, resolved family disputes, and addressed complaints regarding the reception unit, resulting in disciplinary actions. They also successfully renewed health insurances for individuals supported by the hospital, conducted follow-up visits to children at their homes, and organized palliative care visits also, the preparation the palliative care budget.

Additionally, the office hosted and bid farewell to international visitors, showcasing collaborative efforts.

**Table:** Total number of exempted Patients in 2024

Exemption Group	YEAR	
	2023	2024
Temporary Exemptions	254	175
Full Exemption	154	111
Complains Received	52	44
RCH Under-five	11484	10828
RCH Antinatal and Postnatal	9224	8566

**Pastoral Services**

A hospital can be a frightening and draining place for anyone and a high stress work environment for the hospital staff. The hospital chaplain’s support alleviates that fear by providing emotional and spiritual support, also known as pastoral care.

The hospital Chaplain, Fr. Didas Kaoneka organized a forum for the hospital staff to reconcile with our creator in groups each for 2 days. These sessions are important as they serve as a remind to the purpose for us to perform and witness the miracle of healing as Jesus our Lord did for the blind, lame, lepers, deaf and many others in need.

Spiritual talks, counselling and preparation for their last journey for critically ill patients is being provided relieving both the sick patients and their love one. The entire staff meets for communal prayers every morning while participate in a holy mass twice a month. All the staff enjoy harmonious working environment and unity.



**Picture:** *Christmass 2024 celebrations*

## **Hospital Garden and Seedlings Project**

Apart from the distribution of the seedling in different organizations i.e. Schools, Sister's Convent and Church, families and individual we conducted supportive supervision visitations in order to monitor progresses and follow up on the care those who took the seedling. Secondary schools have shown best examples in managing the seedling compared to individual farms.

## **Community Outreach Projects**

### **Nutrition:**

The third phase of the project to improve childhood under nutrition in our surrounding communities was expanded to include Mtwara region villages. This year we signed memorandum with Mtwara district councils in order to reach the needy from this community. In

collaboration with Artemed Stiftung and the government the project reached 3,438 Children under-five, 4,170 women and caregivers, 349 were men. Health education on hygiene, Cervical cancer and importance of screening and vaccination to young girls, healthy nutrition, importance of breast-feeding, coverage with a health insurance and income generating activities for self-sustainability.

A total of 35 children with severe Acute Malnutrition (SAM) were identified and admitted in the pediatric ward for multidisciplinary management involving use of locally made therapeutic milk as guided by the nutritionists. There were 330 children with moderately malnourished cases. A total of 45 children were found anemic with Hemoglobin less than 7.0g/dl.



**Picture:** Child with Severe Malnutrition

## **Screening Services**

The hospital provides the screening services to women at risk. A total 750 women were screened for cervical cancer, 10 women were found VIA positive and referred to gynecology department for intervention or referral to cancer institutes.

## **Gender Based Violence (GBV)**

There are more prevalent and fueled by society attitudes and practices that promotes Gender inequality and put women in a subordinate position that undermines their dignity, 55 cases were intervened. We sensitize and create awareness on the root causes of gender-based violence (GBV) and mobilization.

We recommend interventions that promote dialogue about gender-based violence (GBV), to encourage reporting and promote help seeking to stop violence and to increase utilization of the available support service, economic empowerment to increase their autonomy in relationship and ability to report.

The key elements of community-based programming are social mobilization approaches to community- based problem- solving, monitoring of children's nutrition status, and an effective chain of reporting so that the essential services and support can be provided which are outside the capacity of communities themselves.

## **The ArteJiko Cooker Project**

The ArteJiko Project is a clean cooking initiative implemented in 2024 at St. Walburg's Hospital Nyangao, aimed at promoting sustainable energy, healthier cooking environments, and community empowerment. The project is a collaboration between St. Walburg's Hospital Nyangao and its long-term partners, particularly Artemed Stiftung, along with German supporters and local stakeholders.

Milestones in 2024 were;

- **Stakeholder Consultation Meeting:** Held on 21st September 2024 at Nyangao, bringing together regional and district government representatives, environmental authorities, the Ministry of Energy, Tanzania Bureau of Standards, and international partners. The meeting introduced the ArteJiko initiative and discussed local needs and sustainability strategies.
- **Community Sensitization and Piloting:** Initial awareness campaigns and small-scale distribution of ArteJiko cookers were carried out in the hospital community and neighboring villages, with feedback collected to guide large-scale rollout.
- **Technical and Quality Assurance:** Collaboration with experts to ensure the cookers meet local and international safety and efficiency standards.
- **Capacity Building and Training:** Local women were trained on usage and maintenance of the cookers, forming the foundation for long-term adoption and entrepreneurship around clean cooking technologies.

The ArteJiko Project aligns with the hospital's vision of not only healing the sick but also improving community wellbeing. Through this initiative, the hospital contributes to the Sustainable Development Goals (SDGs), especially SDG 3 (Good Health), SDG 7 (Affordable and Clean Energy), and SDG 13 (Climate Action).

Looking ahead, 2025 will focus on mass production, subsidized distribution, and monitoring impact across Lindi region and beyond.





**Picture:** *Artejiko stackholders meeting*



**Picture:** *Cooking with ArteJiko*



## Sr. Dr. Thekla's Nursing School

### Vision

To help protect and improve the health of Tanzanians by being an institution of excellence where competent and caring nurses are trained.

### Mission

To reduce suffering and to improve people's health by applying the best knowledge, skills, and attitudes which will enable graduates to work in different and challenging situations as highly skilled and proud health workers.

In 2024 the school had 167 Students as follows;

CLASS	GENDER		TOTAL
	MALE	FEMALE	
1st Year (NTA LEVEL4) NMT programme	13	09	22
2nd YEAR (NTA LEVEL 5) NMT Programme	13	15	28
3rd YEAR (NTA LEVEL 6) NMT programme	08	17	25
CHW programme	45	47	92
TOTAL	78	88	167

## Staff Profile

The school have a total of 16 staff as per the summary below:

Staff Cadre	Total
Tutors (1 is on long term training (BSc in Nursing)	5
Clinical Instructor	1
Secretary	1
Accountant	1
Tailor/Office Attendant	1
Cooks	3
Security Guard	4
Warden	1
Total	16

## Enrollment of Students:

This year, SR. Dr. Thekla Nyangao School of Nursing saw a significant increase in student enrollment. We proudly welcomed a total of 92 new students into our Community Health Workers training program and 39 for NMT, marking a pivotal moment for our institution as we continue to meet the growing demand for healthcare professionals in the region.

## Academics

**Classroom Sessions:** The academic year was characterized by high-quality classroom teaching, where students received in-depth knowledge and practical skills to prepare them for the challenges of the healthcare sector.

**Fieldwork:** Students actively involved in fieldwork placements including Nyangamara Village and Health Centre, St. Walburg's Nyangao referral hospital, and Ligula Regional Hospital which allowed them to gain first-hand experience in hospitals and community health centers. This hands-on approach ensures that students apply their theoretical learning in real-world healthcare environments.



**Picture:** *Our NTA level 5 students when they are at Nyangamara Primary School for health education as part of their community health fieldwork*

## Initiation of New program

This year, the Ministry of Health (MOH) initiated a community health worker training program, and SR. Dr. Thekla Nyangao School of Nursing was entrusted with the responsibility of training 92 students first intake. This partnership between the school and the MOH aims to enhance the capacity of community health workers to serve in rural and underserved areas.

**Support by SR. Raphaela Haendler OSB:** SR. Raphaela's generous donation played a crucial role in the success of the program. Her investment in classroom preparations, including the provision of furniture, created an optimal learning environment for the students.

**Hospital Contribution:** St. Walburg's Nyangao Referral Hospital continues to be an invaluable partner, providing clinical placements and supporting the first batch of community health workers. The hospital's contribution ensured that the students received practical experience necessary for their training.



**Picture:** *Our community health workers (CHW) students when they are in the classroom for the lecture.*

## End-of-semester examination results

The results for both Semester 1 and Semester 2 exams showed exceptional academic performance. Our students maintained a high pass rate, reflecting their dedication and the school's commitment to quality education. Please see the tables below

### Summary; End of semester one results

NTA LEVEL	TOTAL NO. OF STUDENTS	PASS (%)	SUPPLEMENTARY (%)
4	31	100	0
5	08	100	0
6	25	96	4

### Summary; End of semester two results

NTA LEVEL	TOTAL NO. OF STUDENTS	PASS (%)	SUPPLEMENTARY (%)
4	29	93.1	6.9
5	08	75	25
6	25	100	0

## Graduation

The graduation ceremony held this year was a proud moment for the school. A total of 25 students graduated, ready to make their mark in the healthcare field. The event was graced by our Nyangao Parish Priest, Fr. Sylvanus Kessy, who served as the Guest of honor. The ceremony was attended by faculty, family members, and distinguished guests, and it showcased the accomplishments of the graduates as well as the hard work that went into their academic journeys.



**Picture:** *11TH School graduation. Our graduates with Fr. Sylvanus Kessy (Nyangao Parish Priest)*

### **Sewage System Construction Project**

The construction of a modern sewage system for the school was made possible via the support by Sr Raphaela Haendler OSB. This essential infrastructure project has greatly improved the sanitation facilities on campus, ensuring a cleaner and healthier environment for both students and the staff. The completion of this project is a testament to SR. Raphaela's commitment to the school's growth and welfare.

## **Acknowledgments and Gratitude**

We extend our heartfelt gratitude to the following individuals and organizations whose support has been instrumental in the success of the school:

Sr. Raphaela Haendler OSB: Her continued generosity has made significant contributions to the school, from classroom investments to infrastructure projects, her unwavering support has been critical to the school's development.

Entire St. Walburg's Nyangao Referral Hospital Management: Their ongoing collaboration with the school in providing clinical placements and supporting our programs is greatly appreciated.

SOLMNE: Their steadfast partnership and dedication to nursing education have been crucial to the success of the school's programs.

Artemed Stiftung: Artemed's support in various educational and infrastructural initiatives has played a significant role in enhancing the quality of education offered.

Dr. Winfried Zacher: His expertise, guidance, and contributions to the school's academic and fieldwork initiatives have been invaluable.

In conclusion, this year has been one of growth, achievement, and collaboration at SR. Dr. Thekla Nyangao School of Nursing. We look forward to another fruitful year as we continue to provide quality nursing education and contributing to the growth of the healthcare sector.

## **Remarkable events during the year 2024**

### **World patients' day commemoration**

A patients' day on 11<sup>th</sup> was commemorated by community sensitization on health-medical check-ups on non-communicable diseases (BP, Malaria, Diabetes Mellitus, Cervical and breast cancer screening as well as Body Mass Index for 3 days with a total of served 169 and blood donation for 4 days in various villages around and nearby Nyangao with a successful collection of 83 units of blood for saving life for the needy.



**Picture:** *Screening for non-communicable diseases and blood donation during World Patients Day Celebrations*

### **St. Walburg's day commemoration**

Commemoration of St. Walburg's day on 28<sup>th</sup> was preceded by normal mass at Nyangao parish and attended by different stakeholders including local government leaders on wards and villages level as well as nearby school leaders.

A day was celebrated by health sensitization on non-communicable diseases by body exercises through different bonanza activities as well as providing basic needs to patients such as soaps and soft drinks





**Picture:** *Weaners of bonanza receiving gifts during St. Walburg's Day Celebrations*

### **NHIF new services packages**

National Health Insurance Fund on its improvement has come up with introduction of new services packages which has largely affected most health facilities with uncertain impact. Our hospital has been attentive on reviewing services package to discover those uncertain impact on service pricelist on both insurance and cash patients without affecting services to patients and customers. This has resulted into the subsiding of the revenues by NHIF.

### **Ambulance handover by the government**

The hospital has been blessed to have been donated with the new ambulance by the government through PPP between the hospital and Mtama District Council. A handover event was held at 27<sup>th</sup> April at the hospital honoured by the Member of Parliament for Mtama constituency, Hon.Nape Nnauye (who is also a Minister for Information under the National Republic of Tanzania) accompanied by different political party leaders, government leaders from Mtama council and at the ward level.



**Picture:** (Lt) Hon Nape Nnauye, MP during handing over an Ambulance donated by the government (Rt) Rt. Rev. Bishop Wolfgang Pisa OFM Cap blessing the Car

### **New SLA signing activity**

The hospital with collaboration with DED's office handled the signing new SLA event with VAH level for the next 3 years to commence on May 2024 with the same aspects of the agreement. An event was honoured by the Lindi Regional Administrative Secretary accompanied by other government leaders of the regional and district levels



**Picture:** Meeting between Artemed Stiftung administration, the master planner and Mtama District Council leaders.

## Responsibility for Mtua Health Centre

Mtua Health Centre owned by the Diocese Lindi was handed to our hospital for full responsibility on the day to day of its running following its underperformance. The Hospital Management and heads of departments visited the facility to address urgent needs such as Shortage of staff, medicines and medical supplies and inadequate infrastructure.



**Picture:** *HMT visit at Mtua Health Centre*

## Responsibility for Mtua Health Centre

Diocesan health facilities had an opportunity to have meeting with Hon. Bishop facilitated by diocesan Health secretary for discussing crucial matters pertaining health delivery improvement with the following highlights; (1) vote of thanks for efficient health service delivery despite of day to day running challenges (2) advice on resources sharing between hospitals (3) Emphasizing catholic identity regardless of mixed dominions (4) emphasis of notifying the diocese on the normal routine hospital activities (5) plan of visiting the hospital on 24<sup>th</sup> May 2024

## **Upgraded Hospital registration Status by PHAB**

September 18, 2024 enters records for an important milestone of our hospital, for it will be remembered as the day we received the title “St. Walburg’s Hospital Nyangao Referral Hospital” a referral hospital at regional level. The process to reach here was met with a lot of challenges at times seemed nearly impossible, we commend the resilience and good will of all players involved in the process. This status is important as we aim to attain provision of quality specialized services by heavily investing in qualified work force, infrastructure and medical equipment.

## **Official Meetings**

On October 15, we hosted a team from CSSC who came for internal supportive supervision as part of follow up on the assigned tasks after several previous assessments were made. The team emphasized on the need for more investment in quality improvement. Another visitor was the director of Muhimbili Orthopaedic Institute (MOI) and his delegation. The visit aimed at making follow up on the provided orthopaedics and trauma services and in order to strengthen our collaboration on additional and super-specialised services. The institute committed and promised to continue further our cooperation in the areas that we wish to venture! Lastly, USAID-Afya Yangu visited again seeking to further our collaboration in a new sub-program (Kizazi Hodari) which focuses on youths’ development visited. They are keen to partner with the existing hospital community project financing and its staff an idea which is still on discussion.





**Picture:** Meeting with CSSC team visiting for SafeCare assessment



**Picture:** Members attending Hospital Board Meeting

### **Experience sharing at Cardinal Rugambwa Hospital**

The hospital management visited Cardinal Rugambwa hospital owned by the Archdiocese of Dar es Salaam which has the same scope of service as Nyangao. The aim of the visit was to acquire experience especially after they were awarded a Level 5 score on SafeCare Assessment by the ministry and CSSC while we could only manage level 3 for many years already! Generally, Nyangao hospital has more than what is needed to be a Level 5 facility given what we saw at Cardinal Rugambwa, we just need to do a little better in our performance and planning to get there. We made an action plan on areas which needs improvement.



**Picture:** *A group photo of the Hospital top Management Team with Cardinal Rugambwa Hospital Staff during experience sharing visit*

## **The return of 2 Specialists after completing their Specializations**

Late in November we were overjoyed to welcome back Dr. John



**Picture:** *Dr. Francis Msagati (Lt) and Dr. John Mtomo (Rt) returned from their specialization*

## **SADCAS assessment towards accreditation**

We hosted a team from SADCAS who came for the third periodic assessment of our laboratory. All components (system and technical) of the quality management system were assessed. Evaluations of our records against the criteria of our own Management System Documentation, the criteria of ISO 15189:2022 and additional SADCAS/ILAC/IAF requirements formed part of the assessment activities. Some more information could be thought from the SADCAS website where one could access the documents [www.sadcas.org](http://www.sadcas.org). We successfully cleared all gaps and managed to maintain the accreditation on all scopes.

## **Supportive supervision by PORALG**

We hosted officials from Presidents' Office, Regional Administration and Local Government together with the regional (RHMT) and

district (CHMT) team in a routine supportive supervision to assess the quality and sustainability of our services. The team was very much satisfied with the quality of our services to the needy.

### **Loss of 1 staff by disappearance**

On 3<sup>rd</sup> May we received a sad information from the family of our fellow staff Christopher Gilbert Mnali (Assistant Environment Health Officer) on his disappearance while he was at his home place Mingoyo- Mnazi Mmoja. Upon his disappearance the following were taken into consideration;

- Prior reporting at the resident Police station- Mingoyo
- Hospital staff accompanied by family members as well as community members made a massive search and hunting around Mingoyo forests in vain
- Reporting the information on different media
- 9 days devotional praying
- Finally reporting the information to the District Executive Director for Mtama Council where all employment matters of the disappeared staff are taken care of



**Picture:** *The disappeared staff, Christopher Gilbert Mnali*



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