



KHYBER PAKHTUNKHWA HUMAN CAPITAL INVESTMENT PROJECT (KP – HCIP), HEALTH DEPARTMENT PESHAWAR

(All communications should be addressed to the Project Director and not to any official by name.)

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Address: House # 240, Street # 13, Defence Colony, Shami Road Peshawar



Assessment Report Comprehensive Emergency Obstetric and Newborn Care (CEmONC) Center

Health Facility: Government General Hospital, Nishtarabad, Peshawar

Assessment Date: 17th September, 2025

Assessing Authority: Khyber Pakhtunkhwa Human Capital Investment Project (KP-HCIP),
Health Department Peshawar

1. Summary

The CEmONC assessment of Government General Hospital, Nishtarabad, reveals a facility that is fully functional and well-equipped to provide comprehensive emergency obstetric and newborn care. The center successfully meets all nine essential signal functions and demonstrates strong performance across key domains including human resources, infrastructure, equipment, and quality of care processes. The facility operates on a 24/7 basis, ensuring uninterrupted access to critical lifesaving services. Notable strengths include a complete and skilled medical team, a well-stocked pharmacy, and robust protocols for infection prevention and respectful care. Areas for monitoring include the utilization rates of certain services and the formalization of the emergency transport system.

2. Detailed Findings by Category

2.1 Signal Functions (The Core 9 Life-Saving Procedures)

The facility demonstrates excellent capability, performing all nine signal functions without exception. This includes advanced procedures like manual removal of placenta, assisted vaginal delivery, caesarean sections, and blood transfusion services, confirming its designation as a fully operational CEmONC center.

2.2 Human Resources & Staffing

The hospital is **exceptionally well-staffed** with a full complement of skilled personnel available round-the-clock. The team includes obstetricians/gynecologists, medical officers trained in emergency surgery, registered midwives, an anesthetist, a pediatrician, lab technicians, and skilled theatre nurses. The assessment confirms that the number of staff per shift is adequate for the patient load, which is critical for managing emergencies effectively.

2.3 Infrastructure, Equipment & Supplies

The physical infrastructure and equipment are fully functional and support the delivery of quality care. The facility has a dedicated operating theatre for caesarean sections, a functional delivery room with privacy and emergency equipment, and a designated postnatal and newborn care area. A reliable blood storage facility is present on-site.



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- **Note on Transport:** An ambulance service is noted (1122 Ambulance Service), indicating a system is in place, though it may benefit from further integration into formal referral protocols.

2.4 Essential Equipment

All essential medical equipment is **available and functional**. This includes partographs for monitoring labour, resuscitation equipment for both mother and newborn, IV sets, surgical instrument sets, an anesthesia machine, and a reliable backup electricity source.

2.5 Essential Drugs

There are no reported stock-outs of critical, life-saving drugs. The pharmacy maintains consistent stocks of uterotonics (Oxytocin, Misoprostol), Magnesium Sulfate, parenteral antibiotics, antihypertensives, and anaesthetic drugs. This is a key indicator of a reliable supply chain and effective management.

2.6 Service Availability & Utilization

Services are **available 24/7**, including nights and weekends, with clear protocols for receiving and sending referrals.

- **Caesarean Section Rate:** Reported at 20% of expected births. This falls within the WHO-recommended optimal range of 5-15% for population health outcomes, though the upper limit suggests a high utilization that should be monitored to ensure it is based on clinical need.
- **Blood Transfusions:** An average of 10 transfusions per month for obstetric cases indicates active management of conditions like postpartum hemorrhage.

2.7 Quality of Care & Processes

The facility demonstrates a **strong commitment to quality and safety**.

- **Protocols & Records:** Staff use evidence-based guidelines and maintain complete, confidential medical records.
- **Infection Prevention:** Robust protocols are in place, including a functional sterilizer/autoclave and proper waste disposal.
- **Audits & Reviews:** Regular Maternal and Perinatal Death Reviews (MDRs) are conducted to learn from cases and implement improvements.
- **Respectful Care:** Policies and practices ensure dignified and private treatment for all patients.
- **Training:** Staff participate in continuous training and emergency skills drills, ensuring preparedness for complications.

2.8 Administration & Management

The center is well-managed with clear systems for sustainability.

- There is a designated in-charge responsible for the CEmONC center.
- A financial system ensures services are accessible to all, regardless of ability to pay.
- Supply chain management is reliable, preventing stock-outs of essential items.
- Equipment is regularly maintained via a logbook system.



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- A data management system is in place for collecting and reporting HMIS data.

3. Conclusion and Recommendations

Conclusion:

The Government General Hospital, Nishtarabad, is a high-performing CEmONC center that meets and exceeds the standard criteria for providing emergency obstetric and newborn care. Its strengths in staffing, equipment, drug availability, and quality processes make it a critical asset for reducing maternal and neonatal mortality in the region.

Recommendations:

1. Monitor C-Section Rates: While within an acceptable range, the 20% rate should be periodically audited to ensure all procedures are medically indicated and align with best practices.
2. Formalize Transport Protocol: Strengthen the emergency transport system by formally integrating the ambulance service into written referral protocols to ensure seamless patient transfers.
3. Continue Quality Initiatives: Sustain the excellent practices in place, particularly the regular death audits and staff training drills, which are vital for continuous quality improvement.

This facility serves as a model for comprehensive emergency obstetric care in the region.