

CAMEROON BAPTIST CONVENTION HEALTH SERVICES



ACTIVITY REPORT, 2019

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i) **List of Abbreviations**

ACP	AIDS Care and Prevention Program
ANC	Antenatal Clinic
ART	Anti-Retroviral Therapy
ARV	Anti-Retroviral
BBH	Banso Baptist Hospital
BHB	Baptist Hospital Banyo
BHM	Baptist Hospital Mutengene
BL	Burkitt Lymphoma
BTMAT	Beryl Thyer Memorial Africa Trust in the UK
CBCHS	Cameroon Baptist Convention Health Services
CBID	Community Based Inclusive Development
CCP	Chosen Children Program
CDC	Centers for Disease Control and Prevention
CHF	Congestive Heart Failure
CIACP	Community Initiative AIDS Care and Prevention
COC	Chief of Center
CoMCHAs	Community Mother Child Health Aides
CP	Central Pharmacy
DBH	Dunger Baptist Hospital
DHS	Director of Health Services
EBHY	Etoug-Ebe Baptist Hospital Yaounde
EDID	Empowerment and Disability Inclusive Development
EFC	Extended Forum of Care
EGPAF	Elizabeth Glaser Pediatric AIDS Foundation
FP	Family Planning
HMIS	Health Information Management Systems
HSC	Health Services Complex
LAP	Life Abundant Primary Health Care
LRTI	Lower Respiratory Tract Infection
MBH	Mbingo Baptist Hospital
MBHD	Mboppi Baptist Hospital Douala
MOH	Ministry of Health
NLC	New Life Club

NTP	National Tuberculosis Program
PCR	Polymerase Chain Reaction
PEPFAR	President's Emergency Plan for AIDS Relief
PHC	Primary Health Care
PMTCT	Prevention of Mother-to-Child Transmission
PO	Partner Organisation
PSG	Parent Support Group
PwD	People with Disabilities
SEEPD	Socio-Economic Empowerment of Persons with Disabilities
SG	Support Group
SPD	Services for Persons with Disabilities
SPO	Strategic Partner Organisation
URTI	Upper Respiratory Tract Infection
UTI	Urinary Tract Infection
YONEFOH	Youth Network for Health

ii) Mission Statement

The Cameroon Baptist Convention Health Services seeks to assist in the provision of care to all who need it as an expression of Christian love and as a means of witness in order that they might be brought to God through Jesus Christ. Thus, the Health Board shall provide exemplary health care with genuine compassion and with overriding purpose of evangelical witness.

iii) Vision

Quality care to all

iv) Acknowledgement

The results presented in this report are achieved through the collaborative efforts of our patients, partners and friends who have supported us in prayers and with material and financial resources.

A. INTRODUCTION

We praise God for His Grace and for the opportunity to serve Him. Established in 1936 by the American missionaries - the Cameroon Baptist Convention Health Services (CBCHS) transitioned into a solid indigenous organization in 1975 is now the second largest healthcare organization in Cameroon. The CBCHS runs a network of health facilities that include 7 Hospitals, 33 Integrated Health Centers, 50 Primary Health Centers and a Pharmaceutical Procurement and Distribution service and continues to make major contributions in alleviating human suffering with an underlying philosophy of Christian love as enshrined in her Mission Statement. Other services and programs that contribute to enhancing patient care include the Baptist Training School for Health Personnel, Bansa and the Baptist Institute of Health Sciences (BIHS) that trains clinical and paramedical personnel for the Health System, a comprehensive AIDS Care and Prevention Program, Non-Communicable Disease Program, Malaria Program, Services for Persons with Disabilities, the Centre for Clinical Pastoral Education and Social Services, and Community Counseling Clinic. The services of the CBCHS are in eight of the ten Regions of Cameroon. The CBCHS addresses both clinical and public health problems affecting individuals and communities in Cameroon and internationally.

In 2019, there was an overall increase in outpatient and a decrease in inpatient service uptake. The socio political environment in the Northwest and Southwest continue to make service uptake unpredictable. We appreciate the support and encouragement from Board members, the staff and our International Partners. To God be the Glory.

B. NARRATIVE REPORT

1. Mbingo Baptist Hospital and Supervised Integrated Health Centers

The year 2019 has not been a smooth one due to the deepening socio political crisis characterized by road blocks and lockdowns which greatly slowed down key activities like the construction of the hydroelectric plant project in particular. Although the wards were a bit busy, the outpatient attendance drastically dropped in 2019. This year the hospital served a total of 41,882 outpatients and 5,165 inpatients compared to 64,485 and 7,829 respectively in 2018.

1.1. International World Leprosy Day: The 66th International World Leprosy Day celebration on January 27, 2019 was low key because only one of the three patients who was to be discharged was able to attend. Instead of running the program in the Chapel as in the past, it was done at the New Hope Village only with the patients and a few staff and leaders.

1.2. Spiritual Emphasis and Medical Day of prayer: The MBH 2019 Spiritual Emphasis was held from August 28 – 30 with a total attendance of 1630 for the three days. Churches were not visited on Sunday September 1st due to the lockdown. The Chaplains were unable to move to the Supervised Health Centers where they were assigned as speakers due to lockdown. Consequently, the Spiritual Emphasis of the centers was re-scheduled on September 23 - 27, 2019.

1.3. Baptism of patients/caregivers: The Chaplains' efforts of counseling/evangelizing resulted to six patients/caregivers receiving Christ and receiving baptism in the Mbingo 1 CBC Church and in the Hospital. These patients/care givers insisted to be baptized in Mbingo before they go to their homes. Two of them are in a Baptist Church in Nkongsamba, two in Baptist Churches in Yaounde while two (a couple) who were Catholics went back and continued in the Catholic Church.

1.4. Baptist Institute for Health Sciences (BIHS): Three Board meetings of the Institute were held this year. The first Board meeting was on February 26, 2019 in Yaounde in Mvan. Due to travel difficulties, the last two meetings were through zoom.

1.5. PAACS/CIMS Program: Due to the ongoing crisis, not all visiting Faculty members were able to come. The frequent road blocks led to decrease patient attendance. As a result of the aforementioned, the PAACS program was suspended in 2018. The good news is that the program will re-open on January 1, 2020. The PAACS/CIMS graduation held on December 14, 2019. The two who graduated are Dr. Sama Akanyun from PAACS and Dr. Sunday David Limnyuy from CIMS. Dr. Sunday David completed a one-year program in Critical Care Medicines at Christian Medical Hospital Vellore, India. Five Residents were admitted into the CIMS program this year while PAACS enrolled four. The program of these new enrollees will start on January 1, 2020.

1.6. Inclusive School and Sign Language Centre (ISSLC) Mbingo 1: Due to restriction by the crisis we were unable to run the normal primary school and resorted to the organization of home schools for 46 pupils who were all staff children living in the Hospital premises. The usual school resumed on October 14, 2019 in the school premises with an enrolment of 324 pupils.

1.7. The Elastography Machine: In 2018, Mbingo acquired an Elastography Machine (a special ultrasound setup that is used in measuring the degree of stiffness in different body organs, notably the liver) and it did not function well. The machine was shipped back to SIEMENS and it was replaced in 2019.

1.8. Radiotherapy Project: The design for the bunker for the linear accelerator is nearly complete. The design was approved by the Radiation Safety office in Yaounde. Visiting builders will come in 2020 to assess the site and make plans for building the bunker. Funding came through Professor. Ngwa of the Dana Faber Cancer Center of Harvard. Two staff are undergoing training in preparation for the program;

Mr. Stanley Kelesi, Medical Physics in Germany and Dr. Ntumnsi Akundoh Tontu in South Africa for Medical and Radiation Oncology.

1.9. Oxygen Piping Project: The Oxygen Piping Project was not completed because the contractor absconded. We are trusting God for the realization of the project with with external funds to be raised by the NAB.

1.10. Prepaid electric meters: The installation of prepaid electric meters in staff homes have eased the management of electricity bills and there are no complaints of inaccurate calculation of bills.

1.11. Renovation/maintenance: The Theatre and Surgical Ward were renovated with external funds raised by Dr. Palmer. The renovation includes tiling of floors, repainting of the walls and replacing the plywood ceiling with labrine.

1.12. Completion of a hall at ISSLC Mbingo:



The construction of a befitting hall at the Inclusive School and Sign Language Centre (ISSLC) Mbingo with 500 capacity was completed, dedicated and handed over on August 24, 2019. We thank the Wilde Ganzen Foundation in Netherlands for donating the funds to enable us realize the project.

Low cost house project: The project includes a two block of three apartments each, started in 2018. One apartment is complete and occupied while the other will be completed in 2020.

1.13. Mbingo Supervised Health Centers. Following the recent redistribution of health centres, Mbingo Baptist Hospital now supervises 5 including Akeh, Belo, Finkwi, Kwighe and Sabga Baptist Health Centres. The Centers had various experiences of the socio-political crisis which contributed to little or no implementation of planned activities and reduced clientele.

2. Banso Baptist Hospital and Supervised Integrated Health Centers

The Management and staff of Banso Baptist Hospital and its Supervised Health Centers remain thankful to God for sustenance throughout the year. This year was not free of challenges. The uncertainty and fear of the unknown embedded in the minds of our base population has predisposed them to emotional, psychological and physical trauma with adverse and devastating health conditions for which remedies are hard to get. Due to the ongoing crisis which has reduced the clientele of the Hospital, several staff have been redeployed and some services relocated.

These challenges notwithstanding, much has been accomplished in 2019. This year the Hospital served a total of 44,168 outpatients and 2,669 inpatients compared to 77,915 and 6,193 respectively in 2018.

Due to road blockages which are characteristic of the ongoing socio-political crisis in the Northwest and Southwest regions, movements to all BBH supervised Health Centers is possible only by bike, using expensive, rough and dangerous bush roads. The Administration of BBH is thankful to the Director of Health Services for donating a brand new motor cycle that has facilitated supervision to the health centers under these circumstances.

This year, a prim-nursery extension was purchased and put to use. The first set of triplets for the year were delivered and successfully managed in the pre-nursery. Some Physicians completed their practical experience and were posted to the Hospital. The weekly clinical presentations by both medical and para-medical staff are ongoing and contributing to upgrading the know-how and skills of the staff.

3. Baptist Hospital Mutengene and Supervised Health Centers

The service uptake of Baptist Hospital Mutengene did not follow the usual trend due to the political environment in the Northwest and Southwest regions. The Hospital served 9,1671 outpatients and 5,430 inpatients this year. Baptist Hospital Mutengene was visited by Prof. Peter Hesselning and Dr. Paul Wharin. Two additional Doctors joined the team of doctors.

The KYN team from the Central Administration presented a new automated diagnostic equipment known as the Keto Scale to the Hospital. The Hospital Staff were educated on index tool and Business Plan by the Performance Based Financing Manager for the Southwest Region.



Basement of the Trauma Project

Infrastructure-wise, the basement of the Trauma Project is near completion pending electrical installations, fitting of doors and windows, tiling and painting. Similarly, Baptist Hospital Mutengene is appreciative of the funding of 5,000,000 FCFA which was received from United Nations Population Fund (UNFPA) to renovate the former Chapel for use as Maternity Waiting Home and the One-Stop Shop to take care of cases of Gender Based Violence.

3.1. Kumba Baptist Health Centre: This facility is in one of the towns that is hard hit by the crisis. However, the service uptake is steadily increasing after the sharp reduction that was experienced previously.

3.2. Ekondo Titi Baptist Health Centre: The service uptake in this institution has significantly reduced but in being sustained, trusting that they will increase over time as the crisis slows down.

3.3. Bafia Baptist Health Centre: This center was shutdown for close to a year as a result of intensified crisis in that community. It was reopened this year and will be closely monitored to ensure staff safety and service uptake. The Soppo Field Pastor visited the facility in November. He prayed with and encouraged them.

4. Mboppi Baptist Hospital Douala (MBHD) and Supervised Health Centers

This year Mboppi Baptist Hospital, Douala (MBHD) hosted the following Conferences:

- Paediatric Oncology Multidisciplinary workshop to train CBCHS staff on Childhood Cancer diagnosis and treatment and scale up to the big hospital. The workshop was facilitated by Professor Hesselting and Dr. Wharin from South Africa and UK respectively.
- International Conference on Colposcopy and Cervical Cancer that brought medical personnel from Cameroon, Nigeria, Kenya and USA and focused on the diagnosis and treatment of precancerous lesions. The Conference emphasized on the importance of the cervix vaccines for HIV positive children less than 15 years.

The Hospital received several donations from individuals, churches and organizations including material items and money, some of which was designated to the needs of patients; especially the bills of IDPs. A total of 1,487,500 FCFA was donated for bills the payment of bills of needy patients. A Non- Governmental Organization known as “Foundation Kangarou” Cameroon donated 5 beds, 5 mattresses, 5 Bedside Lockers and 1 Digital Scale Balance to the Maternity of the Hospital.

Other major accomplishments of the Hospital for this year include the following;

- The creation of a new Sterilization Unit and the procurement and installation of a big Autoclave Machine with the capacity to sterilize all the material and instruments of the Hospital. Consequently, there will be no more autoclaving in the theatre, thus creating enough space for other activities.
- The procurement of medical equipment including maternal/fetal monitor, fetal doppler and electro surgical machine for the Maternity and for the Dental Compressor, Suction Machine, standing examination lamp and LAB Micro-Moto.

4.1. Baptist Health Centre Bonaberi: This center became operational on November 5, 2018 in a rented building. Its first anniversary was celebrated November 5, 2019. The services provided include laboratory, Dental, Pharmacy, imaging, Women’s Health Program and General consultations. The service uptake of the facility is steadily increasing. In 2019, the Health Center served a total of 51,241 outpatients and 1,324 inpatients. The theatre is being set up for surgical interventions especially for C/S considering the Maternity Services that is ongoing. The center has a Paediatrician. The Center is fast growing and will need more staff and a permanent site soon.

4.2. Baptist Health Centre Kribi: This center is approximately one-and-a-half-year-old. It went operational on April 7; 2018. Patient attendance is moderate. Services are highly appreciated by the District Medical Officer who visited the Health Centre and recommended that the CBCHB should request for authorization to run a Hospital. At moment, the centre functions as an Outpatient Department with a small section of the building used for maternity services. The health center served a total of 23,295 outpatients and 744 inpatients in 2019. The major needs of the center are more space for services and equipment.

5. Baptist Hospital Banyo and Supervised Health Centers

In 2019, Baptist Hospital Banyo served a total of 9,091 outpatients and 1,306 inpatients. We are so thankful to the Health Services Central Administration for their continues support and especially to the Director of Health Services for the support given to us in the North Bound facilities.

The hospital was blessed with a lot in 2019. Help for Brothers INT based in Germany announced a donation of EUR 20,000 (or 13,000,000 FCFA) for the construction of the Physiotherapy Block in Banyo which will greatly enhance the service. The Hospital also received a donation of an old Converge Hilux which is undergoing some repairs. The vehicle will facilitate movements and outreaches to communities.

The major challenge of the Hospital will be the retirement of Dr. James from January 2020. We appreciate God for what Dr. James did to the entire Banyo community and his commitment to service. Our prayer is to have another Missionary Doctor to replace Dr. James.

5.1. Nyamboya Baptist Health Center: This is the leading Health Center in the area and recognized by Government as the Buruli Ulcer Treatment site. The center now has a new Chief of Center in the person of Mr. Yham Noah. The new Chief of Center has committed to improve outreach work, outpatient attendance and to increase ANC uptake. The center plans to buy an ultrasound machine and create more space for services.

5.2. Sarki Baka Baptist Health Center: The OPD Block is being completed while part of the building is already under use. The Center served many IDPs seeking refuge around the area.

5.3. Allat Baptist Health Center: This is the leading Health Center in the area. It was recently approved as a cheque santé center.

5.4. Tibati Baptist Health Center: The Center is gaining grounds and has been recognized by the District authorities. The center served over 300 patients during the first Doctor support visit in November. The center is in the process of registering the 10 hectares of land that was acquired.

6. Etoug-Ebe Baptist Hospital Yaounde (EBHY) and Supervised Health Centers



Etoug-Ebe Baptist Hospital, Yaounde

The EBHY has General Practitioners, Dental Surgeons, Nurse Practitioners in addition to other Clinicians, Paramedical and Support Staff. Other part time or visiting Specialist Doctors are Gynaecologists, Ophthalmologists, Dermatologists, Orthopedic Surgeons and Reproductive Health Doctor. This ensured that quality services were

provided to all clients throughout the year. The leadership team met and evaluated the quality of services and put in place measures for improvement. Subsequently all the Doctors will meet quarterly to look at ways of improving patient care. We continued with the three shifts system that was started last year and patients have access to care 24/7. The Doctors are on calls every night. A Blood Bank was purchased and campaign for free blood donation is ongoing for regular blood supply in the Bank. This will facilitate quality service provision to patients presenting with anaemia. The Hospital was included in the Performance Based Financing program and her leaders and staff trained on its procedures and documentation.

Blood Bank



The Diabetic/ Hypertensive Clinic was rescheduled due to the increase number of clients, most of the new members being Internally Displaced Persons from the Northwest and Southwest regions. The Diabetic Clinic now runs for 3 days per month while there are two hypertensive clinic days. The World Diabetes Day was commemorated with sporting activities and a meal.





World Diabetes Day celebration in pictures

Staff of the hospital benefited from both internal and external trainings including training on EMR, Ocular Imaging and Hygiene and safety, conducted by the Regional Delegate of Labour and Social security. Security measures were taken like creating an assembly point.



EMR trainers receive certificates



Hygiene and Safety Committee

Other capacity building activities include supervision by MOH, Regional Delegation of Public Health, Health District, the Health Area and other partners. The US Center for Disease Control conducted a SIMS visit to the Hospital and was amazed at the improvement in the quality of care rendered at the Care and Treatment and MCH units. Service Conferences were ongoing at the level of departments. Our Laboratory received two supervision visits from GHSS/ MOH with positive and encouraging feedback. The Laboratory is at level 4 in the accreditation process. Laboratory staff will receive further training and eventually, the laboratory will be fully accredited.

There is good collaboration between the Hospital and other CBC institutions in Yaounde as evident by the meeting of all CBC institutions in Yaounde (BHS Awae, Nkoabang Baptist Health Centre, Ekounou Baptist Health Centre, Mvan Resource Centre, and EBHY) at the initiative of the Field, Pastor Rev. Dr. Ndittemeh. The Hospital has a cordial relationship with the Ministry of Health at all levels and with partners.

The first phase of training of staff on EMR by the MOH went well and is to be continued. Certificates of participation were given to the 1st group of staff trained.

The chaplain and the Spiritual Life Committee continued to provide pastoral care to the ever-increasing clients and also on interpersonal basis counseled staff, especially the new ones. The Hospital now has 8 devotion sites.

The main challenge of the EBHY is limited work space and increasing number of bill penders who are mostly Internally Displaced Persons from the Northwest and Southwest regions.

6.1. Ekounou Baptist Health Centre

Ekounou Baptist Health Centre is 13 years old since creation and over a year old in its new site at Ekoumdoum neighborhood in Yaoundé IV Sub-Division. Their first anniversary in the site was celebrated on March 19, 2019.



Their New Assistant Administrator, Ms Tangwa Faith, started work on January 21, 2019. The Chief Medical Officer Dr. Kinne Mane Virginie was appointed on September 1, 2019 and this has really improved the management of the Centre. The center now has a staff strength of 195 including six General Practitioners, a Dentist, an Ophthalmologist, a Gynecologist, an Internist and, a Reproductive Health Specialist. In 2019, a total of 64,365

outpatients and 1,336 inpatients were served.

The routine activities of COPE, Infection Prevention/Hygiene and Safety Committee were implemented to ascertain quality services. The facility now owns an Ultrasound Machine and a Digital X-Ray. There is a Theatre which have enhanced the care clients receive. The theatre became operational this year.



X-ray Technician at work



Theatre Team at work



First C.S conducted

The Center held two retreats on the theme “Let your light so shine” and “Oh that they were Servants”. The center acquired several new equipment this year: Digital X-Ray, Electrolyte Analyzer for the Laboratory, Photocopier for the Secretariat, Theatre equipment, Blood Bank, Keito Machine and Electronic BP Monitor. The biogas is functional with balloon installed and is being used in the Centre Canteen, Treatment Room and Relievers house. The facility was selected for the PBF program and staff trained. The Physiotherapy, Dental, ENT, WHP and Eye Departments carried out routine outreach activities throughout the year as planned.

6.2. Voundou Baptist Health Center is seven years old since it was integrated from aLAP PHC and has a staff strength of 26. Infrastructural improvements are being made although more space is needed for inpatient services. The Health Center continued to carry out outreach services to Ma’a Jerusalem, Ma’a Camp Kata, Nuila and Bagara with all having encouraging uptake.

The presence of a 19KVA generator has led to a steady energy supply and led to the management of cases which we previously were unable to handle. In the same light, the Health Center purchased a solar fridge to preserves vaccines. Other equipment acquired include a Radian Warmer and Solar System. The fencing of the Health Centre has stopped stray animals from coming in to the compound and also



Visit of the DHS

prevented bill penders from absconding. The Health Centre now has an eating house for the patients and staff made of wood.

The Center received many supervisors this year and was especially glad with that of the Director of CBC Health Services.

The challenges of the Center include inadequate work space, the need for an ultrasound machine and poor road network.

6.3. Nkoabang Baptist Health Centre: The Nkoabang Health Center served a total of 20,903 patients in 2019. The staff situation significantly improved from 54 last years to 72 this year. The Centre has a very cordial relationship with the MOH at all levels and churches around Nkoabang. A Blood Bank was acquired for the center this year. The center carried out outreach services at Awae Village and Nkolafamba. An Optical Workshop is being set up for the Center and will be completed in 2020.

The needs of the Health Center are more work space, a high-quality Ultrasound Machine and a service vehicle.

6.4. RESOURCE CENTRE – MVAN, YAOUNDE:

The Resource Centre is one of the most recently developed facilities of the CBCHS. It is located strategically opposite the military Airport in Mvan – Yaounde on a land with total surface area of 1881m². The facility was acquired from SIL Cameroon in 2016 and after a lot of reconstruction and modifications, the center was put to use in



Mvan Resource Centre

September 2018. Unlike other health facilities of the CBCHS which directly respond to the needs of the sick, the Resource Centre provides resources and facilities for research, capacity building and projects management.

The Resource Centre serves both the CBC Health Services and other organizations involved in similar work as that of the CBCHS. The center now hosts several programs and organizations like the PEPFAR-funded HIV-Free Program, the Liliane-funded EDID Program, the Research units of the Non-Communicable Diseases (NCD) Program, the Family Health International (FHI) 360 and the Management Science for Health (MSH)

The Resource Centre offers an environment and facilities for quality work. It has spacious office and sleeping rooms both for CBCHS and other partner/sister organizations as well as halls for retreats, seminars, symposiums, workshops and ceremonies. The center can now boast of about 40 normal offices,

5 Halls and 20 comfortable sleeping rooms of different standards. It has enough space for parking and there is a building currently under construction which when completed will provide more sleeping rooms, office rooms and halls for meetings. The center is under 24/7 video surveillance to step up security. It also has an ultra-modern lift that facilitates movement up and down the 4-storey building and also making it disability-friendly. There is a 1000 KVA Generator and an 85m deep bore hole to ensure constant power and water supply respectively. It has a Chaplain and an Administration to fully run the facility and resources.



Visit of CBC Leaders

The center has hosted high profile meetings such as the Board meetings of the Baptist Institute of Health Sciences as well as preparatory meetings of the Education Committee for the General Session in 2020.

The doors of the center remain open for visitors and guests at all time. It also welcomes opportunities to host and/or provide office space for other organizations and services who do reputable work in the country. Our rates are relatively affordable and lower than most other places in Yaounde.

7. Life Abundant Primary (LAP) Healthcare

The Life Abundant Primary Health care program (LAP) currently covers 45 communities in five of the country's ten regions (Northwest, Southwest, West, Adamawa and Centre regions). In 2019, LAP continued with its main activities which are centered on community health awareness to optimize disease prevention and uptake of services, create primary health units that are adapted to the people's priority needs; and strengthen the local community to be fully engaged and take responsibilities for their own healthcare financing and management.

In line with education, LAP has carried out several capacity building sessions for different level of staff based on needs:

1. Nine candidates from eight communities were trained for two months on Promoter Basics at Allat Baptist Health centre and a one-month practical experience in four LAP PHCs (Koata, Mbougam, Koumenke and Bapi PHCs).
2. Six Village Health Workers (VHWs) from Mbirijiom, Mbougam and Nkfui attended a three days training on Basic Life Support in Obstetrics (BLSO) while the Community Mother Child Health Aides (CoMCHAs) attended a BLSO seminar that was organized in Bamenda.

3. A seminar on identification of disease outbreak, Resource Mobilization, Lobby and Advocacy and reporting was organized for 28 persons (12 from Bapi VHCs and 16 from Mboungam VHC).
4. Twelve participants from different LAP Communities went through a month of CoMCHA Basic training in Ngounso Baptist Health Centre and a month of practical experience.
5. An orientation seminar was conducted with 30 service providers (PHC nurses and VHCs) on Quality Basic emergency maternal Obstetric Neonatal Care (BeMONC). The seminar aimed at strengthening national capacity to deliver high quality, integrated services for maternal, neonatal and adolescent health, family planning and management of Gender-Based Violence, especially for most vulnerable persons.

In collaboration with the Women's Health Program (WHP) of BBH, LAP carried out Cervical Cancer sensitization and screening of women of child bearing age and above in six PHCs in the West and Adamawa regions. A total of 157 clients were screened and four positive cases found and treated with thermal coagulation. The low turnout was because this screening was carried out during the fasting and farming period.

There has been great improvement in community participation as elites were involved and provided material and financial support to PHCs leading to the following realizations;

1. The Mbah and Mbirijiom PHCs constructed a five-room building with the support of their community members
2. The Bapi PHC now has a new maternity structure which is at the level of the roof, thanks to one of the elite who saw the need and committed to fund the project to completion. The CBCHS Communication Unit visited this PHC and made a documentary on this building project.

LAP carried out prospection in Nkongsamba, Mbanga and Mankenene communities. These communities have potentials for the establishment of new health facilities.

LAP organized a community health fair in Bapi and in Mboungam with the goal of creating awareness, and screening the population on several health issues including: Cervical, Breast and Prostate cancer, Ear, Nose and Throat (ENT) care, Eye Care, Dental health, Mental health, Non Communicable Disease (NCDs), and Nutrition Improvement. The population of these two communities turned out and more than 2000 people listened to health talks and over 500 watched the Jesus' Film that was projected. The consultations statistics are in the table below

CONSULTATIONS	BAPI	MBOUNGAM	TOTAL
Eye	180	138	318
Mental	56	14	70

Women's Health (Cervical Cancer)	63	40	103
Know Your Number (KYN)	151	101	252
ENT	30	31	61
NIP	24	39	63
Dental	28	38	66
Prostate	59	52	111
General consultations	81	169	250
VCT	21	80	101
Spiritual counseling	12	8	20
Total	705	710	1415

Through the Bread for the World project that LAP is implementing, six PHCs in the West and Adamawa regions with medical equipment (delivery beds, water filters and baby electronic scales) were supported based on a need assessments. LAP received 15 cartons of commodities (delivery kits) from UNICEF for reproductive healthcare as part of the humanitarian assistance to reduce maternal/infant death in the communities affected by the Anglophone crisis.

The current challenges of LAP are difficulties to move and supervise sites due to the crisis in the Northwest and Southwest regions and inadequate laboratory staff,

The Administration and staff of LAP are thankful to the (North America Baptist Conference (NAB), Bread for the World (BftW) of the German Government, UNICEF and LAP Friends for their financial, human and material contributions which enabled the LAP Program to continue to increase and improve access to healthcare services for the people in the rural communities of Cameroon.



Graduation of nine Promoters, Allat Baptist HC



Graduation of 12 CoMCHAs, Ngounso BHC



Community contribution at Bapi new maternity building project

8. Baptist Training School For Health Personnel (BTSHP), Bansa

This report covers the period from October 2018 to December 2019. The Baptist Training School for Health Personnel, (BTSHP) is 64 years old. Despite the tense socio-political atmosphere in Kumbo related to the on-going crisis in the North West and South West regions, activities have been going on hitch-free, except that the cost of living in Kumbo has increased significantly due to high cost of goods and transportation.

8.1. Departments and Programmes.

The school has ten Departments and 29 Programmes. In response to the need to improve the quality of care in specific domains, some new programmes have been added from 2011 including: Orthopedic Clinical Officer, Registered Nursing, Nursing Auxiliary, Professional Development, and Surgical Nursing Residency among others. The first batch of Registered Nursing and third batch of Professional Development (PD) completed in 2018 and were posted.

8.2. Approval of Pharmacy Courses

We are happy to announce the approval of Pharmacy Technician and Pharmacy Assistant courses by the Ministry of Public Health this October 2019. We will concentrate our efforts to renovate the former Rest House block to prepare more lecture halls to accommodate Pharmacy trainings.

8.3. Staffing

The massive request for transfers of staffs within the academic year almost hampered the smooth teaching and learning activities. Thanks to the cooperation of the few remaining staff that the courses were quickly redistributed to avoid any serious negative consequences on the students.



9. CBCHS CENTRAL PHARMACY

The Central Pharmacy has continued to meet the needs of patients by making sure approximately 80% of medicines are available in all CBC Hospitals and Health Centers. This has been with a lot of challenges due to bills awaiting payment. The value of CP order, that are yet to be paid by the Drug Revolving Fund (DRF) is 1.190.600.000 FCFA (601.100.000 FCFA for local orders and 489.500.00 FCFA for international orders) Meanwhile, CBCHS institutions owe the DRF 1.234.000.000 FCFA. In effect, DRF committed at the beginning of the year to ensure timely payments of essential medicines and priority consignments of medical equipment and machines from international sources in a bid to improve on access to medicines for the patients at affordable costs. It is worth noting that the ratio of international versus local purchases for 2018 was 19:81 and the DRF made the commitment to move it to 50:50 before the end of 2019. However, this ratio improved to 39: 61 at the end of 2019. The Central Pharmacy received 7 containers of procured international orders of drugs and medical consumables from Durbin PLC in UK and one from IMRES in the Netherlands. The Clean Room, IV bags and Santapet Eye Drops materials were also received from China. The Central Pharmacy received 12 containers of donated items in 2019; 7 from Hope and Healing International (HHI), Canada, 2 from Brother's Brother Foundation, 1 from Jacob's Well, England and 2 from

NAB White Cross, USA. These consignments contained mostly hospital beds and medical consumables, educational materials and equipment to help furnish some of the completed Hospital buildings and newly created Health Centers such as Bonaberi and Tibati.

Out of the 8 pharmaceutical production lines envisaged for automation, 2 have been completely automated: the IVs and Eye Drops Pharmaceutical Production lines.



The automated lines of IVs and Eye Drops Pharmaceutical Production

The Water Treatment Plant, Boiler, Distiller, Autoclave, Filling machines, Mixing Tanks and the Clean Room were installed. The 2.000 liters Autoclave is the main game changer and will boost IV Production to the volume of 4.000 bags per batch as against 1.200 bags per batch previously produced by the obsolete production line. A total of 74 Production Batches of IV Infusion fluids were registered with a total of 299.750 bags of different volumes produced. A total of 50 productions batches of eye drops were carried out with a total of 90.153 bottles produced.



The Eye Drops and IV Infusion Fluids Production Units

The availability of these machines and installation of the Clean Room guarantees the securing of a Certificate for current Good Manufacturing Practice (cGMP) which will facilitate the Commissioning of the facility by the Minister of Public Health and the products will be ready for the external market after sufficiently feeding CBCHS institutions. The second phase of the automation processes of pharmaceutical

production will be the acquisition of machines for preparations of Oral Liquids (Syrups) and Topical medications such as creams/ointments.

The Non-Sterile Production unit manually produced 27,726 of 100ml bottles of paracetamol 120mg/5ml syrup, 774 of Antiseptic Hand gel in 1 liter, 5,346 1liter pack of MMT powder and other oral liquid preparations. With the creams and ointments, production yielded 1,254 of 1-liter Cetrimide 1% Powder, 484 kg of Neomycin 0.5%/Hydrocortisone 1% Skin ointment, 701 kg of Deep Relief Cream, 717 kg of ultra sound gel, amongst other topical preparations.



The manual production of Antiseptic Hand Gel and Paracetamol

Administration is in the process of obtaining authorization for the manufacture of Oral Morphine. The Chemical Production unit produced 24,050 liters of bleach, 3,166 packs of 4kg sachets of powder detergent and 11,646 liters of liquid detergent, 40,624 tablets of medicated/antiseptic soap and others smaller items.

Central Pharmacy is making considerable efforts to automate the other pharmaceutical production processes by contacting funding partners in a bid to transform Central Pharmacy into an industrial pharmaceutical plant in 2020. Central Pharmacy is currently communicating with Roche, Novartis, Mylan and Odypharm Pharmaceutical manufacturers. Discussions on pharmaceutical manufacturing partnerships for tablets, capsules and sanitary products are in progress with Mylan and Odypharm.



The bottling of HESCO Water has been relatively stable in 2019 and 284,154 bottles were produced against 173,135 bottles in 2018. Daily production capacity averagely stood at 4,658 liters and 61 actual production days were recorded in 2019. The main challenges have been the breakdown of the Production Line which is old; the inability to repay the outstanding debt with MUGFIC Bank and a more reliable source of quality preforms. HESCO desires to get an international supplier that will ensure regular supply of

quality preforms which will guarantee a constant availability of HESCO water to meet the needs of her clientele.

Laboratory activities increased throughout the year as a result of the increase production activities. A total of 741 analytical tests were conducted in the QA Lab in 2019. Of this lot, 22 medicine samples failed analytical tests, representing a 2.97% fail rate, with majority of them from local suppliers.

This year, 12 water samples were analyzed from the boreholes of Baptist Hospital Mutengene, Saker Baptist College Limbe, Etoug Ebe Baptist Hospital Yaounde, Ekounou Baptist Hospital Yaounde, CBCHS Resource Center Mvan, Yaoundé amongst others.

Central Pharmacy maintained a cordial relationship with DIFAEM in Germany and appreciate the donations of chemical reference standards for medicines and reagents that was made to facilitate Minilab medicine testing.



QA Analyst

Nine (9) undergraduates were on internship and 2 research students (MSc and PhD) working on water analyses from the University of Buea carried out their research at the QA Laboratory. CP is looking forward to establishing excellent working relationship with the Universities of Buea, Bamenda, and Douala in 2020. CP is equally working towards getting the Government and ISO certify the QA Laboratory unit.

The main challenge has been to receive reagents for SP 800 Spectrophotometer which was recently acquired. This equipment will help overcome the difficulties in water analyses.

9.1. Health Services Complex: In collaboration with Mildmay Institute of Health Sciences Uganda, the Regional Training Centre for Excellence (RTC) is continuing to train students in Health and Social Systems Management validated by Manchester University in UK, Community and AIDS care Management validated by Mbarara University of Science and Technology in Uganda and Pediatric Palliative Counseling and Care as well as Nutrition and Dietetics validated by Mildmay Institute of Health Sciences in Uganda. The Memorandum of Understanding (MoU) between Mildmay Uganda and the CBCHS was renewed to run from January 1, 2019 till December 31, 2022. The RTC now has a Dean and a Registrar and has applied for authorization from the Ministry of Higher Education in Cameroon to operate as The Baptist School of Public Health (BSPH). The complex is also host to several HIV Program services like the Community

Initiative AIDS Care and Prevention Program, the Chosen Children (Orphan) Care Program, the HIV Free SW Project, the Reference Laboratory for HIV testing services as well as Guest House facilities.

10. Socio Economic Empowerment of Persons with Disabilities (SEEPD) Program

The SEEPD Phase III Project ended in December 2018 with a term evaluation which recommended a planning phase. The year 2019 has been a gap year with most focus and resources all geared towards strategic planning for the next phase. The program designed the activities to help build up the structure necessary for a successful kick-off of phase 4. While planning has been the key area of focus for the year, some routine activities continued. The highlights of the program interventions of the year are as follow.

10.1. Medical and Rehabilitation services

In 2019, even while the program was on a transitional phase with no direct activities within the health component, interventions to improve access to medical services to prevent, treat and rehabilitate disabilities continued at a lower scale partly because of insecurity imposed by the current socio-political crisis affecting the region. That notwithstanding, the following results were recorded following facility-based interventions.

Sensitization and awareness campaigns on existing medical services were carried out in 108 communities reaching 222,787 persons with messages on prevention of disabilities and existing services, 513 persons were identified with various forms of disabilities which include, Mental illness, Clubfoot, cerebral Palsy, hearing Impairment, Visual Impairment, mobility impairment, Speech Impairment etc. Over 30 children with clubfoot have been treated. A total of 64 different types of assistive devices was dispensed to support mobility and other needs of PWDs while 2 children received cataract correction

Access to Eye; Ear Nose and Throat; Physiotherapy; and Mental Health services at base hospital was reported at 100122 people. On overall, this marks a 2.92% increase in access to medical services from 97,277 reported in 2018.

The various service types recorded the following number of clients; Eye Service - 55,566, ENT -15,922, PT/ORTH -22634 and MH-6000.

Despite the partial suspension of outreach activities in crisis highly hit areas of the Northwest, the program through the Non Cash Resource Partnership Project of Hope and Healing International (formerly CMB Canada); seized the opportunity of the Mini Health Fair organised by the LAP in the West and Adamawa

regions, to offer free direct readers to the population. A total of 1300 people screened for eye conditions and 141 persons benefited from free direct readers; many of whom testified to the life changing experience that the spectacles will offer to them.



Direct Reader Beneficiary Tests Spectacles



Visual Acuity Test on Outreach

10.2. Inclusive Education

With much disruption caused in school activities in the Northwest, there has been a considerable downsizing of education activities. That notwithstanding, efforts have been made to take Inclusive Education services to displaced persons even out of the Region. At a strategic level, the program continued its partnership with Regional Education Authorities and the CBC Education Department through which key interventions aimed at strengthening systems were undertaken. Below are key highlights:

- GBHS Banyo was provided technical support to include 3 students with disability (visual impairment) into GBHS Banyo. This support was provided through the assigning of a Resource Teacher to Banyo to provide Braille and transcription services to facilitate the teaching and learning process. That notwithstanding, there are dire needs for capacity building and behavior change communication.
- Sensitization on the need for the education of Children with Disabilities reached out to 15,192 people.
- 94 Children with Disabilities enrolled in Mainstream and Inclusive schools with support from Liliane Foundation; the University of Bamenda enrolled first learner with hearing impairment into the Department of Combined Mathematics and Computer Science out of a total of 8 learners with disabilities who accessed tertiary education this year.
- Technical support in the form of capacity building for IE provided to 267 teachers of Government Secondary Schools; teachers from 11 schools of the Baptist education system and 4 resource teachers.

- Technical support in the form of supervision and mentoring of trained teachers done to 6 Baptist schools. In addition, advice was provided in equipping the Baptist Resource Centre for Inclusive Education.
- In 2018, the programs formalized an MoU with Index Braille to be the sole distributor of Index Braille Embossers in Cameroon. Through this partnership, 3 copies of the Index Everest D-5D were sold in



Fig 4: Blaise making use of laptop to access lectures at University of

2019. To ensure maintenance of Braille embossers, one technician was provided a factory training in Sweden.

- A scholarship for deaf girls to access primary schools secured through the Dordrecht Bamenda Foundation Partnership.

10.3. Livelihood

With global attention tilting towards village savings and lending schemes as a sustainable model for livelihood, in 2018, with support from CBMA, the SEEPD Program started a pilot under the brand name: Community Based Advanced Njangi (C-BAN). This pilot started in the Northwest region and was eventually expanded to the West and Adamawa regions to 14 new groups formed by Field Workers. The following are key updates from the pilot:

- After identification, assessment and development of business plans 16 Persons with Disabilities were supported to enhance their livelihoods in different sectors. Most of them are able to register and participate in CBAN groups. 12 Persons with Disabilities were enrolled in vocational training.
- A total of 453 people in 24 groups served a total of 7,581,475 frs over a period of 2 years.
- A total of 115 people contracted loans for the first time and 231 people benefitted from it.

10.4. Community.

By the end of 2018, for safety and security, CBR activities in the Northwest region were relocated to safer communities. This led to the transfer of some field staff to relatively safer communities in the West and Adamawa regions, where high numbers of IDPs were reported. The identification and assessment, provision of assistive devices as well as other forms of support to Persons with Disabilities gained traction in these regions across the year.

- Sensitization on the rights of People with Disabilities reached 13,119 people.
- People with Disabilities continued to exploit their potentials in inclusive settings with 3 youths participating in the feast of the Ramadan; 5 in the Oku Cultural activities, 11 students in youth day celebrations; 5 women in the International Women's Day; and 2 girls in church choirs.
- The experience of 150 Children with Disabilities in the face of the crisis was documented
- CUAPWD with support from Lilian Foundation extended humanitarian aid to 500 People with Disabilities.
- Advocacy led by the DPOs improved access to mainstream humanitarian aid for 63 people with disabilities.
- DPOs demonstrated self-mobilization through the participation of 14 young boys with mobility impairments at the African Amputee Football competition in Angola
- A total of 563 young people at the Washington Mandela Fellows Impact Symposium were sensitized to facilitate access and participation of People with Disabilities in youth development initiatives.
- CBCHS/UNICEF Rapid Response Mechanism granted access to care, supplies to 1,247 Internally Displaced People with Disabilities in Kumbo.
- Mobility devices were provided to 64 People with Disabilities in the Adamawa region



Fig 6: Tricycle provided to Persons with Disabilities by CBR



Fig 7: Amputee football match

10.5. Child protection

Child protection interventions in 2019 focused on capacity building, technical support, and provision of psychosocial support as well as case management of abuse incidents including rape and substance abuse.

10.6.Capacity building

In partnership with Humanity and Inclusion, two Gender and Disability Inclusive development communities of practice were formed to stimulate social learning. A total of 180 staff and frontline services providers from a wide range of Organizations from these communities were trained and provided with tools for reporting alleged and actual child abuse incidences.

To scale up the implementation of Child Safeguarding Guidelines for schools, 105 (32males and 73females) teachers and board members of the CBC Education Board were trained on child safeguarding, and supported to develop guidelines for keeping children safe and on anti-bullying techniques. A draft Safeguarding Guidelines for all CBC Schools has been developed, approved and will be launched in January 2020.

A total of 75 stakeholders (within the referral pathway and all members of the Community of Practice) received trainings in child safeguarding.

109 community agents trained in Kumbo within the Rapid Response Mechanism Project funded by UNICEF to identify and report cases of child abuse including unidentified and separated children for possible identification and documentation as well as reunification with parents and guardians.

A total of 24 child friendly spaces were set up and are operational in the same locality, with over 85,000 children receiving psychosocial support and recreational services as well as menstrual hygiene awareness. Over 2,000 adolescent girls received reusable sanitary pads of 3 packs of 9 pieces each.

10.7. Technical support

Technical support to institutionalize child safeguarding was provided to frontline services providers on the referral pathway; CBCHS Policy presented during the Child Protection Area of Responsibility meeting to over 50 frontline service providers and supported on how to develop compliant institution specific policies in the wake of the ongoing humanitarian assistance in a bid to reduce risks or harm to children accessing humanitarian assistance humanitarian actors.

In collaboration with UNFPA we trained, 56 (29 females and 26males) Government stakeholders, humanitarian and local actors for both Northwest and Southwest on considerations for children and

vulnerable adults in humanitarian settings and supported technically in the development of the standard operating procedures for the two regions coverage matters of child abuse and GBV.

10.8. Psychosocial support

A total of 8 abused children (1 male and 7 females) and their families received psycho-social support at facility level. Collaboration with the Senior State Counsel, other law firms in the referral pathway, provided legal support to the 8 abused cases.

10.9. Awareness raising

Awareness activities to promote the rights of the child were propagated using the mass media and IEC materials and a National Symposium on Child Abuse to present findings of a research on the Abuse of Children with Disabilities in Cameroon. A total of 37 media campaign outings were undertaken and 2000 flyers and leaflets distributed to 123 persons who attended this Symposium.

10.10. Gender

In the Gender component, the following activities were carried out:

- A total of 55 women and girls with disabilities were trained to support them access dignified services in humanitarian settings. This was within the framework of a project to provide lifesaving GBV and SRH services to survivors in the Far North, Northwest and Southwest regions of Cameroon with support from CERF by UNFPA. Over 150 women and girls needs assessed for the provision of assistive devices. 11 received hearing aids, 10 received either canes or eye glasses while another 33 earmarked to receive wheelchairs or crutches/braces in the days ahead with funding from the CERF Project.
- A referral pathway was developed and strengthened indicating frontline Services Providers of lifesaving GBV services. A referral and counter referral booklet developed supporting the process within the framework of two projects supported by Humanity and Inclusion and Canadian Fund for Local Initiatives.
- The Program launched the 16th days of Activism against Gender Based Violence on November 26th in Bamenda during one of the CoP meetings with international humanitarian actors like WFP, UNFPA, UNICEF, INTERSOS, UNHCR, CARE present.

10.11. Program Management

The following key project diagnostic actions were undertaken during the year:

- Context analyses were undertaken in four (4) Regions: Northwest, Southwest, West and Adamawa and the University of Bamenda, with a focus on the situation of Disability in these different contexts.
- Access audits were also conducted as an integral part of the four (4) context analyses done for the Northwest, Southwest, West and Adamawa Regions and the University of Bamenda and reported.
- A gender analysis was conducted as integral part of the four (4) context analyses done for the Northwest, Southwest, West and Adamawa regions and the University of Bamenda and reported.

The project planning and design activities that were carried out included the conduct of two (2) planning/design workshops with the first bringing together a total number of 71(40males, 33Females) participants comprising a cross section of SEEPD Program stakeholders from the public, private and civil society sectors including but not limited to 20 councils in the Northwest Region, Northwest Regional leadership of the UCCC, Regional Delegates for Social Affairs, Women's Empowerment and the Family, Basic and secondary Education, Health, University of Bamenda, Disabled People Organizations, the Media (as stakeholders), mainstream religious organisations, traditional institutions, banks and telecommunication



Group session at wider stakeholder planning workshop

Staff and students with disabilities at UBa planning workshop

companies and international NGOs.

The second workshop had a total number of 65(46 males, 19 females) participants comprising staff and student of the University of Bamenda. The workshops aimed at presenting the contextual analysis conducted for the Northwest Region and the University of Bamenda respectively. The workshops discussed the findings and the proposed solutions to the identified gaps and challenges to achieving inclusion in the NWR and the University of Bamenda using a multi sectorial approach.



Fig 12: Organizational Capacity Assessment with the GCE Board

- An organizational capacity assessment (OCA) was conducted with 23 selected stakeholders from the

SEEPD network with a view to inform new partnerships for CBID.

- A two day capacity assessment was done for 15 staff on the Services for People with Disabilities with the aim of testing skills in Project Management and M&E.

Progress has been made in the development of a proposal including the Concept Notes, proposals and budgets for new multi-year plan for the SEEPD Program developed for the Northwest Region with a focus on CBID, and submitted to CBMA, and funding for activities approved. A multidisciplinary committee completed the design of an integrated data collection tool. A call for applications for Database Designers was launched, applications received and reviewed, and a final selection of Database Developer done. The database developers are working on a user-friendly cloud-based tool that can be accessed by different actors.

The SEEPD program carried out the following communication actions in a bid to improve on program visibility:

- Produced 47 Radio Spots of 5 minutes on Cerebral Palsy, Birth defects, Audiology that were broadcast in over 7 radio stations in the Northwest, Southwest and Adamawa Regions.
- Carried out 10 editions of micro programs on Cerebral Palsy, Mental Health, ENT broadcast in 3 local languages in the Adamawa Region.
- Developed 3 radio programs focused on CBID, broadcast by CRTV National and Northwest Regional Stations on the radio slots “Luncheon date” and “Highlands Morning Show”
- Produced 7 radio programs and broadcast on CRTV Northwest focused on sex education, Mental Health, Child Protection and Gender Based Violence during emergencies.
- Seven television reports on SEEPD Program’s activities were produced and broadcast by 3 TV stations, Canal 2, STV and Equinox.
- Seventeen news articles were published in 3 Newspapers; CBC Health Services Chronicle, The Independent Observer and The Baptist Voice Newspaper on Mental Health and C- BAN activities.
- Sixteen news articles on the SEEPD stakeholders planning workshops, CBR workshop on SIEP Project were published on the CBC Health Services Website.
- Forty-one post on stakeholders planning workshops, CBR workshop on SIEP Project, The symposium on Child Abuse, disability awareness week were published on the CBC Health Services Facebook and twitter accounts.
- Two mini documentaries on: Sign language, CBC School and Sign Language Centre were produced and published on the CBC Health Services Facebook page, twitter and SPD youtube accounts.

- A total of 2500 posters on ENT, Eye, Mental Health, PT were produced in French and 1,154 program brochures were distributed.

Advocacy for the adoption of inclusive practices was done to international humanitarian actors operating in the Northwest region to include disability in their interventions. Advocacy was also done to NRC, OCHA, UNICEF, UNFPA, WFP, Red Cross and Medecins du Monde. The program received support from UNFPA to enable the Gender Officer attend a 4-day training in Abuja Nigeria on Including Women and Young Adolescents with Disabilities in GBV and SRHR programming in development and humanitarian settings.

10.12. Conclusion

The work of the SEEPD Program is highly praised by CBM and Australian AID for having great impact in the lives of Persons with Disabilities as well as influencing institutions and individuals. The achieved results backed by evidence was the push factor for the approval of the funding of the fourth phase of the Program which will run from 2020 – 2022. The attainment of results can be attributed to the program's commitment to engage on a multi stake holder platform, backed by strategic leadership from the CBC Health Services. As we move into the next phase, we hope to further solidify existing relationship with existing partners by strengthening their capacity to undertake inclusion as institutions.

11. Cameroon Clubfoot Care Project (CCCP)

A term evaluation was done for the second phase of the Cameroon Clubfoot Care Project which facilitated learnings from the first five years of implementing the Clubfoot Care Project and also informed the design of the scale up phase. Based on findings from the evaluation, a transition phase was approved with the view to facilitate stakeholder buy-in and fully engage Government in the design and implementation of the next phase. In the light of the foregoing, interventions were designed to ensure that a multi-stakeholder participatory planning and design enhances Government ownership in the management of a National Clubfoot Care Program while at the same time, ensuring that access to Clubfoot treatment continues in all project facilities. This report highlights the following accomplishment of the Project in 2019.



A Stakeholder planning workshop to develop a new strategic direction for a third phase of the Project following the recommendation of the evaluation of the second phase was held in Yaoundé. The purpose of the workshop was to foster a participatory approach to planning for a third phase of the

Cameroon Clubfoot Care Project. The workshop brought together 46 stakeholders including partners for Service Provision (5), Service Providers (15), Media Partners (3), Local Authority (1), Beneficiaries (2), Government Actors (2), DPOs (1), Implementing Partners (10) and CBM CO and Germany (7). For two days the stakeholders developed a new strategic direction and implementation strategies for the third phase of the project which was approved.

Following data management challenges that were experienced in the first and second phases of the project, an activity to set up a data management system was planned. The system whose development is in progress is aimed at introducing an electronic cloud-based data management system accessible remotely



Fig 2: Orientation session with databases software developers

with and without internet connection. An open call to hire a consultant was launched and through a competitive process and out of 4 software developers who applied, “Further Solutions Consultancy” was selected and awarded the contract. The target is to complete the software development by January 30, 2020.

A number of measures were taken to ensure that children born with clubfoot access care in specialized treatment clinics. Firstly, treatment material including Plaster of Paris and soft roll were bought and distributed to 14 treatment clinics. Two new clinics (Ngounso Baptist Health Center and Baptist Hospital Banyo) in the West and Adamawa Regions respectively were initiated to fill the gaps created as a result of halt of services in some three clinics in the socio-political crisis stricken English speaking regions. Also, to facilitate access to Clubfoot treatment for children from needy families, treatment subsidies were provided to 15 cases. In total, treatment was provided to 136 persons in 2019.

The project used different strategies to generate demand for services. A total of 58 Clubfoot awareness messages were produced and shared to 22 radio stations, 2 television channels, two Social Media and the CBCHS Website for dissemination.

This planning phase of the program resulted to the approval of a multi-year project to be funded by CBM Germany from 2020 to 2023.

12. Empowerment and Disability Inclusive Development (EDID) Program

12.1. Introduction

The Empowerment and Disability Inclusive Development (EDID) is a program within the Services of Persons with Disability Program (SPD) in the Director of Health Services’ office funded by the Liliane Foundation. The EDID program works with over 20 Partner Organisations (POs) in 8 regions of Cameroon to enable children and youths with disabilities from 0-25 years have access to education, health, social and

livelihood opportunities and also make sure that an enabling environment is provided for them in the families, communities and nation at large. It uses two strategies to provide interventions: Child Development and Enabling Environment. Child Development are interventions directed to support the child with a disability as an individual, while enabling environment are interventions directed at eliminating/limiting the barriers in the environment that children with disabilities face such as inaccessible environments, unfavourable laws, negative attitudes and communication barriers.

12.2. Collaboration with The Government

A Memorandum of Understanding between CBCHS and the Ministry of Social Affairs is currently being finalised with some of the objectives being to work collaboratively with the ministry of social affairs to prevent, treat and rehabilitate disabilities in Cameroon; to jointly advocate for the inclusion of children with disabilities in mainstream education opportunities in Cameroon; to jointly develop strategies to mainstream disabilities in local and national development efforts amongst others. In it, MINAS commits to facilitate custom duties and tax exoneration to CBCHS for the importation of assistive devices to children and Persons with disabilities as well as involve CBCHS as a key actor in policy discussion at the national and international levels and also provide an enabling environment for the full attainment of its social mandate in Cameroon. This MoU, although doesn't guarantee any direct financial assistance to program beneficiaries, It's a good opportunity for visibility and it shows that the organisation's efforts in the disability sector has been highly recognised by the government.



Management Meeting with Ministry of social affairs & CBCHS staff



MINAS Opening Symposium on Child abuse

12.3. Advocacy in the Face of Effective Decentralisation

Furthermore, one of the positive changes that is coming to Cameroon as a result of the anglophone crises is the continuous promises by the government of effective decentralization. This means more resources will be made available at the local levels and local development projects will be decided upon by the local population. This provides a favorable atmosphere for POs to undertake lobby and advocacy at their local levels. The SPO is making use of the opportunity to train and coach POs on advocacy and local resource mobilization

12.4. Key achievements from some Partner Organisations

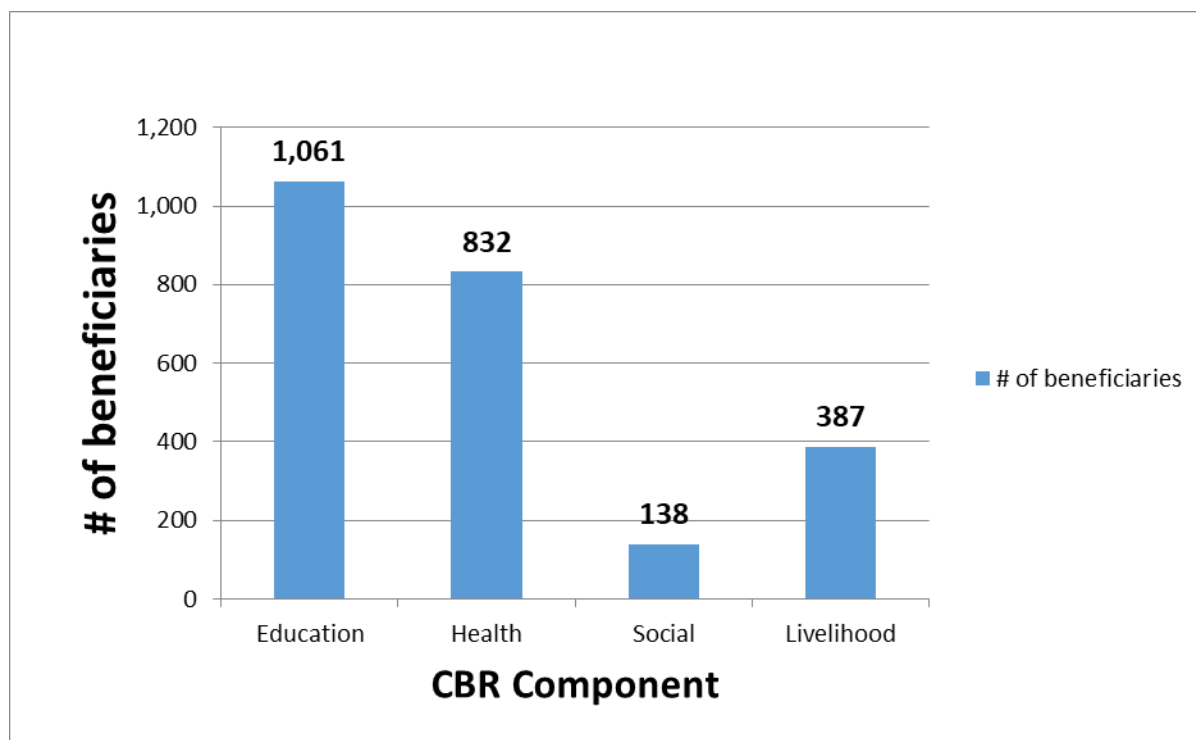
The EDID program has a total of 23 Partner Organisations. These Partner organisations through the financial and technical support from the CBCHS are making good progress in the implementation of Child Development and Enabling Environment Activities. In the area of child development and enabling environment the PO achieved the following and this can be seen below from the analysis of the statistics for the first and second half of 2019

12.5. Analysis of Statistics for first and Second half of 2019

Data collected from 20 out of 23 (87%) POs who have submitted justifications for the first and second half of 2019 revealed that a total of 2418 children and youths benefited from interventions under different components. Figure 1 presents a graphical picture.

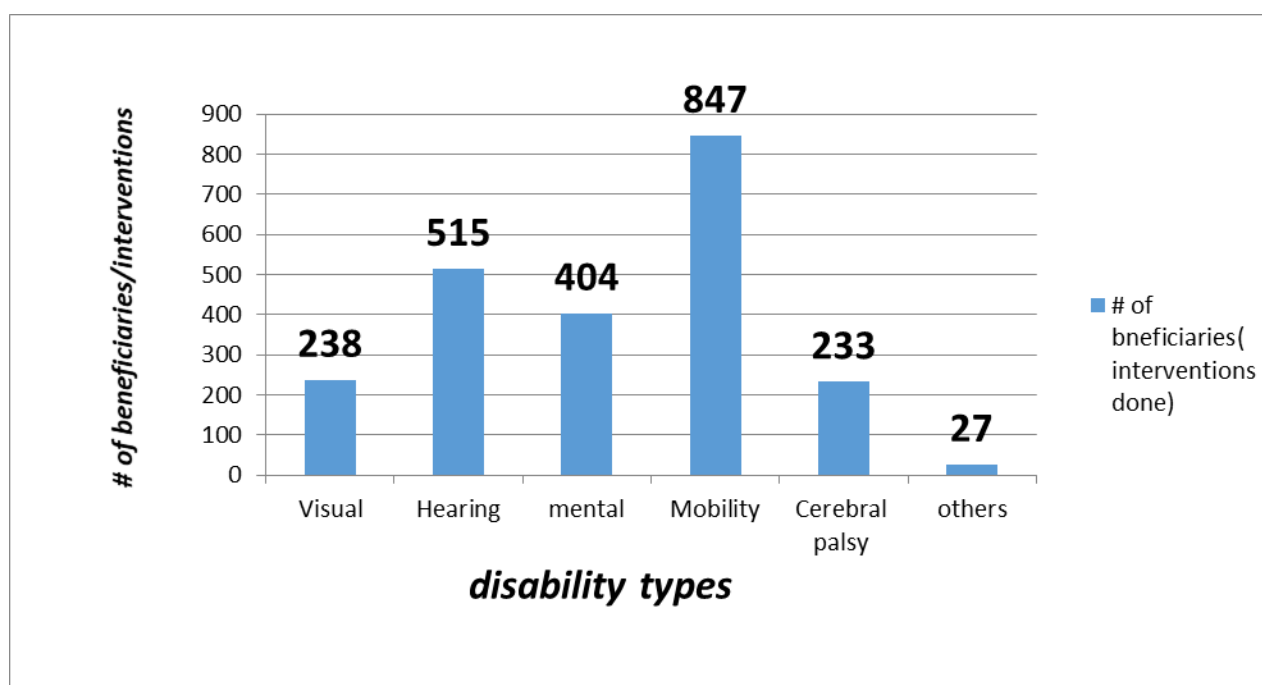
The Education component had the highest number of beneficiaries (1,061 interventions). This is closely followed by the health component (832). Although the social component appears to have the least number of beneficiaries (138), it however doesn't mean that only 138 beneficiaries benefitted or are provided with social inclusion opportunities. The social component is cross cutting and very difficult to separate from the other components. Based on the CBR approach currently practiced by all Partner organisations with emphasis on inclusion, it can be rightly said that all children under the program benefitted from social inclusion opportunities through aspects like inclusive education, inclusive health, inclusive livelihood opportunities. This provided an opportunity for children with disabilities to socialize with their counterparts without disabilities

Figure 1: summary of beneficiaries per CBR component



Program beneficiaries are children with different type of impairments and the indirect beneficiaries are parents, caregivers and other community stakeholders. A total budget of 241,500,000 FCFA was allocated to the POs. Dividing by the total number of beneficiaries, it can be estimated that it takes an average of 104,692 FCFA to support a child with impairment on annual basis in Cameroon

Fig 2: Summary of interventions/beneficiaries per disability area



Further analysis by disability is revealed in Fig 2 above. The highest numbers of beneficiaries were those with mobility impairment. This can be attributed to the fact that this category has more opportunities like surgeries, orthopedics devices, physiotherapy, occupational therapy and also education to benefit from than those with other impairment like visual or hearing whose interventions may only be education and provision of required assistive devices. Compared to previous years, interventions to children with cerebral palsy has significantly improved, as a result of the STEP (Support Tools Enabling Parents) approach.

Other areas of achievements recorded through the partner organizations includes: increased levels of collaboration from the government and other stakeholders as a result of increased in advocacy and massive sensitizations carried out: Increased in the number of schools admitting children with disabilities; increased in early childhood development interventions as a result of regular field visits whereby children with disabilities are identified early and followed up; Improved quality of services provided by different service providers as a result of regular monitoring visit by partner organizations to those institutions: improved quality of life of parents of children with disabilities by the engagement in different livelihood projects as a parent support group.

12.6. Capacity Strengthening of the Partner Organizations

The SPO strengthened the capacity of partner organizations through trainings, meetings, networking activities and also carried out field visits to assess the progress of work the POs are doing and addressing challenges encountered in their contexts. The SPO audited some POs and organized exchange visits among POs/ PSG for experience sharing and a lot more was achieved in the first and second half of the year as explained in each point below.

12.7. Field Visits

As a Strategic Partner Organization, the CBCHS has as mandate to coach, coordinate and supervise the work of Partner Organizations within her network. One of the ways of meeting this objective is through field visits. In 2019, the CBCHS visited her POs in the Far North, North, East, West and Centre Regions. The objectives of these visits were to assess the work of the POs, the challenges encountered in their contexts, reviewing the implementation of activities. The team undertook field visits to beneficiaries to evaluate the impact of services provided in the lives of children with disabilities, their families and the community at large. Working sessions were held with POs and PSG.

12.8. Audit of POs

An audit of the POs was conducted by the internal audit department of the SPO. During this audit visit, the internal auditors assessed the POs both at the office level and in field, especially at the level of beneficiary homes. The objectives of the audit visits were to:

- 1) Ascertain the veracity of the amounts on the justification forms
- 2) Verify the Effective presence of the CBR workers in the field
- 3) To test the profiles of the beneficiaries for eligibility
- 4) To ascertain to what extend the previous recommendations have been applied
- 5) Identify the challenges faced by the Partner Organisation
- 6) Propose solutions where feasible

Following revelations from the audit, a feedback session was held with 7 partner organisations in Yaounde. Some of the resolutions agreed together with the POs include: conduct holistic assessment of children and family at large in order to determine those who are indeed needy before financial support is provided; POs should operate within the limits of geographical boundaries to avoid crisscrossing among them and ease follow up; each PO should set up a control system to ensure quality and effectiveness of its work etc.

12.9. Support Tools Enabling Parent (STEP) project

STEP is a simple step by step approach to the management of children with central neurological disorders, like cerebral palsy. STEP transforms all the day to day activities of the child like eating, drinking, sleeping, sitting and positioning into functional treatment therapy, thereby limiting the tendencies of a particular time dedicated to visiting a therapist for treatment intervention. The approach which was originally being piloted in the Northwest and Southwest has now been extended west and Adamou regions and soon to be scaled out to all other regions as a result of the improved quality of life registered. 134 Children with neurological disorders were enrolled and both the community, families and field workers attest great changes in the life of STEP beneficiaries. This is an indication that this approach has proven to be an effective one for the care of Children with cerebral palsy. During this first half, Dr. Petra (an Occupational Therapist from the Netherlands) visited Cameroon and provided field and classroom coaching to STEP field workers who came in from all these regions to Bafoussam and Douala where the coaching took place. In addition, some STEP implementers attended a workshop in Kampala in April for further coaching. More so, from 20th August to 9th June, the STEP leadership in the persons of Kees van den Broek and Kenneth Nangai were in Cameroon to further strengthen the skills of STEP implementers. All these capacity building, together with active implementation and monitoring has resulted to increased number and quality of children with cerebral palsy attended to by the program.



STEP beneficiary visibly happy with his newly acquired chair

12.10. Exchange Visit among POs/Parent Support Group (PSG) for experience sharing

The EDID program facilitated an exchange visit among its partner organisations. A total of 8 POs with their parent support groups took part in this exchange. Partner Organizations were paired taking in to consideration their strengths, their specific needs and their ability to learn from each other informed by a SWOT analysis that was conducted prior to the visit. According to the reports of the different Partner organizations, the visits were very fruitful because experimental learning took place, permitting them to learn the implementation of CBR in different contexts



12.11. Intervention in crises regions

The SPO partnered with the coordinating unit of the association of persons with disabilities (CUAPWDS) to ensure that persons with disabilities in the northwest who are affected by the crises got intervention. In this

regard, the program supported CUAPWDs to carryout advocacy to humanitarian organizations to enable them see the need and act on mainstreaming disability in all their interventions. Successful advocacy resulted to the inclusion of persons with disabilities in humanitarian relief packages and the modification of policies by humanitarian agencies to mainstream disability in their processes.

Some of the key activities and results include:

- Identification of a total of 690 internally displaced persons with disabilities
- Increased advocacy led to even more inclusion of persons with disabilities in humanitarian relief packages.
- 40 stories of Internally Displaced Persons with Disabilities (IDPwDs) documented and shared with Human Rights Organizations:
- Relief assistance provide to 93 displaced PwDs in partnership with 5 relief agencies
- 50 IDPwDs provided loans and grants
- Networks created with humanitarian relief agencies like OCHA, UNHCR, Doctors without borders, doctors of the world, Catholic Relief services and other local organizations who are now aware of the need to include persons with disabilities in humanitarian efforts
- 35 state actors are now aware of the principles of protection of PwDs in crisis situation
- Through media sensitization on local and international media including the BBC displaced PWD give testimonies of continuous assistance from individuals and organizations due to their participation and sharing on the effects of the crisis in their lives on the radio

12.12. Participation at International Conferences for Capacity Building

- i. **Disaster Risk Management Workshop:** This was a 4 days' workshop organised and facilitated by LF. It took place in Kampala Uganda from 7-10th April 2019. A member from the SPD team – Awa Jacques Chirac attended together with a member of staff from a PO- Lenjo Derick. This training was very timely for Cameroon given the ongoing crises in the Northwest and Southwest regions whereby, the SPO through the coordinating unit of the association of PwDs has been providing relief for Internally Displaced PwDs by linking them to humanitarian aid agencies, strengthening their capacities to cope in such situations, providing grants and loans as well as advocating with various involved actors to respect the principles of the protection of human rights during conflict situations.
- ii. **STEP:** Four members of staff (two from the SPO team and two from POs) participated in a STEP workshop in Kampala in April. During the workshop, their capacity was further strengthened in the management of children with CP in addition to the trainings and coaching already received in Cameroon. The results are evident in the field as field workers now show a lot of passion and commitment in the management of children with CP. Unlike before where managing Children with CP by field workers was a huge challenge, now field staff demonstrate a lot of confidence and pro-activeness. Physiotherapy staff are also actively involved in following up children with cerebral palsy in the community.



With STEP facilitators in Kampala



STEP workshop in Kampala

12.13. Liliane Inclusion Network (LINC):

A member of staff also attended the LINC meeting together with other African SPOs in Ghana. It was an opportunity for experience sharing and also mapping the way forward for networking among Liliane foundation Strategic Partner Organisations in Africa. During the LINC meeting, the coordination of LINC Africa was entrusted to CBCHS. The SPO represented by Awa Jacques Chirac was also in the Netherlands during the 2nd half of the year where the STEP evaluation report was shared.

12.14. Feasibility Study for physiotherapy and CBR training programs in Cameroon

Because of the need to improve quality rehabilitation services within the CBC Health Services and Cameroon as a whole, on CBCHS request, the LF supported the SPO with a Consultant, Marieke Verhallen who was in Cameroon from February 3rd to 23rd 2019 to carry out a feasibility study to inform the leadership of CBCHS and LF on the possibilities of starting/improving quality of PT and CBR trainings in the CBCHS. The consultant was accompanied by 3 core team members of the CBCHS (Fanfon Timothy, the head of PT services; Kenchi Joseph the head of CBR services, Foyeth Eugene the policy advocacy advisor)

The various consultations and visits to different personalities and facilities were great learning opportunities for the team members who before now had not known the PT and CBR training landscape in Cameroon so well.



Director at Centre National pour les personnes handicapé

12.15. Inclusive fashion show

In March 2019, the SPO saw the need to co-organise and co –finance the event “Access2019” which was aimed at amplifying the voices of women and girls with a disability and increasing their visibility as viable members of the society. The activities included Radio and TV talks, workshop for women and girls with disability and an inclusive fashion Show. The event which took place at Djeuga Palace Hotel in Yaounde brought together over 200 participants including 50 women and girls with disability. The inclusive Fashion show was breathtakingly beautiful as you could see smiles on the faces of girls with disabilities as they paraded the accessible platform to showcase their beauty in different fashion designs.

It should be noted that majority of the girls with disabilities present were beneficiaries of the Liliane Foundation through the PO in Yaounde.



Access 2019: Inclusive Fashion Show with Women and Girls with Disabilities.

12.16. Planning, Monitoring, Evaluation and Learning (PMEL)

LF has remained committed to its strategy of not only identifying gaps at SPO organisations through organisations assessment (OA), but supporting the SPOs to bridge these gaps. Following the Organisational Assessment that was conducted in the CBCHS in 2015, one of the gaps identified being an integrated PMEL system, LF supported CBCHS in 2017 to identify ways of putting in place an integrated system and in 2019 the LF has again supported CBCHS to practically put the system in place. The system was piloted in the Littoral and plans are on the way to scale it out to the entire CBCHS.

12.17. Pilot of Complaint and Feedback Mechanism among the PO network

To further strengthen the capacity of partner organizations for participatory service delivery, a component of the Planning, Monitoring, Evaluation and Learning (PMEL) which is the complaint and feedback mechanism was piloted among 5 POs in the center region. This is in a bid to improve program planning and implementation based on feedback received at all levels of care. This mechanism enables the PO to capture feedback from field workers and for field workers to capture feedback from beneficiaries in order to design appropriate interventions based on felt needs. The SPO then verifies this information during monitoring visits which is then used to further inform planning both at the PO and SPO levels.

12.18. Innovative Projects

In order to build the capacity of POs on resource mobilization and enhance their motivation and ability to begin reflecting on attracting institutional funding, an innovative grant was introduced in the Network for POs and Parent Support Groups to compete for. A total of 16 POs submitted concept notes for this call. This showed the commitment and willingness of the POs to respond to opportunities that can enable them diversify their funding base. Due to limited funds budgeted, only 4 POs were finally selected. Implementation will continue in 2020 because the process was conducted at the last quarter of 2019.

12.19. Partnership with CBR African Network

In the last quarter of the year, the SPO got into partnership with the CBR African Network to train a cross section of CBR practitioners on good writing skills so as to enable them document success stories, lessons learnt & best practices resulting from CBR implementation in the African context. The SPO used the opportunity to train members of all Partner organizations & SPO staff. Over 40 participants from 8 regions took part in the workshop and the immediate outcome was the publication of 5 stories from partner organizations in the CAN newsletter in both French and English.

12.20. Child abuse Symposium

A grand symposium was organized in September presided over by the Minister of Social Affairs in September 2019 to present the findings of an action research conducted between 2017 and 2019 to identify factors contributing to abuse of children with disabilities and also put in place mechanisms to curb abuse. This symposium saw the participation of over 300 stakeholders drawn from various works of life including partner organizations. During the conference the minister and the participants took commitments in writing to support the fight against the abuse of children with disabilities. The symposium which has remained as one of the memorable events jointly organized by the ministry of social affairs and the CBCHS was characterized by a presentation of results of the research and panel discussions related to relevant laws in Cameroon protecting children when abused. The success recorded has further cemented CBCHS relationship with MINAS.

12.21. Celebration of the international Day of Persons with Disabilities in collaboration with MINAS

The CBC Health services partnered with the ministry of social affairs in the celebration of the international day of persons with disabilities on December 3rd, 2019. Week long activities started from 26th November to

3rd December 2019. Several committee meetings were held a month prior to the celebration to ensure success. The activities included wide media sensitizations on disability consciousness, free screening offered to persons with disabilities by the CBCHS in Ear Nose, Throat conditions, Eye, mental, non-communicable diseases – before and during the event. A total of 393 persons with disabilities were screened.

13. Malaria Control and Prevention Program

The CBC Health Services Malaria Control and Prevention Program started in 2017 and the main activities over the years have been monthly reporting of malaria activities in Hospitals, Health Centres and Primary Health Centres, cleaning of the Malaria Database for case management, and training workshops/seminars. The guiding principle has remained the promotion of safe, effective, good quality, affordable, accessible and acceptable malaria treatment, and at the same time encouraging rational drug use in order to minimize development of drug resistance.

The CBC Health Services joined the rest of the world for the third time in activities to commemorate the World Malaria Day in 2019, under the *theme*: “Zero Malaria begins with me”. The celebrations included Radio talk shows on CBC Radio Bamenda, screening of an animated film on Malaria prevention at the CBCHS Central Administration and in some hospitals

An effective malaria surveillance system enables the identification of facilities or population groups most affected by malaria; trends in cases and deaths that require additional intervention, and assess the impact of control measures. This year, the program designed, and updated new forms for monthly reporting of all aspects of malaria management from the Hospitals, Integrated Health Centres, and Primary Health Centres. The table below summarized data collected through the system that was set up.

INDICATORS	FREQUENCY (No.)	PERCENTAGE (%)
Suspected Cases		
Hospitals and HCs	65908	93.5
PHCs	4617	6.5
Total suspected cases	70525	100
Confirmed Cases		
=5 years	6505	9.2
>5 years	20623	29.2
<u>Pregnant women</u>	962	1.4
Total confirmed cases	28090	39.8
Treatment Status		
Total confirmed cases treated	27000	38.3
Total confirmed cases not treated	1090	1.6
Total Confirmed Cases	28090	39.8
Deaths		
• =5 years	20	0.03
• >5 years	18	0.02
Total deaths	38	0.05

NB: HCs, Health Centre; PHCs, Primary Healthcare Centers

Of the 70,525 suspected malaria cases, 39.8 % (N=28,090) were confirmed positive for malaria. This figure falls in line with trends from the National Malaria Control Program. Of those confirmed; 1.6 % (N=1090) were not treated within the facilities that tested them.



Participants at the training workshop in Allat, June 17, 2019

A training workshop for PHC Nurses was held at Allat and covered topics including signs and symptoms of simple and complicated malaria, conducting and interpreting Rapid Diagnostic Test (RDT) for malaria, referral pathway for patients with severe malaria, and follow up of patients with severe malaria.

The malaria focal point was invited by the National Malaria Control Programme (NMCP) in collaboration with the Ministry of Public Health to a National Committee meeting to validate Malaria Management Guidelines that had been worked on by a technical committee some months before in Mbalmayo. This two-day meeting held at the Mont Febe Monastery in Yaounde. On the second day the participants broke into working groups with the CBC Health Services being in the committee to review the provisions of the decree

on free treatment for children below five years and IPTp in pregnancy. There were heated discussions on the policy and how it could be implemented without constraints especially within the private sector.

This year the Education, Information and Communication aspect focused on the design of brochures and stickers with specific messages. The stickers were published on the CBC Health Services Facebook page. The brochures that are in English and French are used by LAP to reach communities.

This year, the program made the following strides in advocacy and mobilization:

- Followed up a letter of interest that was submitted to the USAID – Presidents Malaria Initiative that was written last year. The program continues to position itself for an eventual implementation of the program when it extends down south.
- A proposal was submitted to the Japanese embassy for the construction of a Reference Malaria Laboratory in Mutengene and the outcome is awaited.
- Based on the numerous applications to use our facilities as sample collection sites for malaria research by different research laboratories in Cameroon, the CBCHS is in communication with the Malaria Unit of the Biotechnology Centre of the University of Yaounde I and the Research Laboratory of the University of Dschang to develop proposals that will permit us take part fully in these research activities. This will also position us to submit proposals for research grants.

Challenges include the non-availability of long-lasting treated nets for distribution during routine ANC visits in many facilities, stock out of IPTp, difficulties in providing free treatment for children below 5 years especially in the context of the crisis and the inconsistent supply of the drugs from the District and reporting errors.

The malaria program made some important strides in 2019 thanks to the high level of cooperation from management and the field staff in the different facilities. While waiting for possible sponsorship from the proposals already submitted, we will be correcting the reporting lapses while effecting we move forward.

14. Non-Communicable Disease (NCD) Prevention and Control Program

The program's vision is to see her communities free from preventable NCDs and it has pioneered the establishment of two units within the 11 selected health facilities;

The Know Your Numbers (KYN) Unit: This unit focus on awareness creation, sensitization, and screening of apparently healthy individuals in the community and at the health facility for NCDs

The Diabetes and Hypertension (D&H) Unit: The unit is mainly concerned with the management of already diagnosed patients, offering daily one on one counseling to diabetes, hypertension and obese patients and encouraging them to adhere to their treatment and medication in order to prevent or delay complications.

This year, the program was able to ameliorate the quality of care given to NCD patients and clients visiting the health facilities. The WDF Project focused on the management and follow-up of diagnosed cases of hypertension, diabetes and obesity. The LINKS Project promoted heart health in Cameroon, by bringing together a panel of experts at the CBC Health Services Resource Center Mvan, Yaounde to who deliberated and resolved on the best way to improve patient management for hypertension.



Meeting of Stakeholder to deliberate on the Management of Hypertension

The “need” for a drug-and dose-specific protocol was clearly demonstrated with a presentation of an assessment of clinicians’ Use of Guidelines/Protocols for managing Hypertension by Dr. Epie Njume, General Supervisor, NCD Prevention and Control Program. Of the 68 respondents, only 60% accepted that a Hypertension Management Guideline/Protocol is present, and can be verified at the facility.

It was noted that about one in 10 patients are admitted without using any Hypertension Management Guideline/Protocol, but those who did, use about nine different guidelines/protocols. There was heterogeneity in the prescription patterns of the clinicians, of course, considering that many protocols are in use. Amongst those who were not using any Guidelines/Protocol, reasons included; available protocols are complex, confusing and impracticable, lack of commodities, and non-availability of protocols. The protocol has been developed and is currently being piloted in the 5 project sites.

The NCD Young Advocates for Prevention Program (NCD YAP) within the framework of NCD is aimed at creating an opportunity for 60 young people by training them for 6 months to be part of NCD Prevention and Control efforts in Cameroon. The NCD YAP was designed to involve young people, who are at greatest risk of exposure to NCDs and implement control efforts. A team was constituted and went through a strict selection criterion, retaining 60 trainees in August 2019 (22 males and 38 females) from the 187 applications deposited. In the YAP approach, selected youth were given information on the burden of NCDs

and risk factors, health promotion models, advocacy, communication, self-awareness, development project conception and writing.



YAP Advocacy visit to the Bamenda 1 Council

The Young Advocates paid a visit to the Bamenda 1 and 3 Councils to raise awareness on the harmful use of tobacco and to advocate for the creation of safe spaces within municipalities to enhance tobacco control. 54 trainees successfully went through the six months training and defended group projects. This was made possible thanks to support from AstraZeneca through its Young Health Initiative

The major challenges faced have been classified under the major program pillars as follows:

A total of 264 community sensitization campaigns were organized, with more than 122,000 persons effectively sensitized on NCDs. IEC materials such as brochures, information leaflets and posters, were also distributed as a means of continuous awareness creation. About 11,000 brochures and information



leaflets distributed, 2500 NCD posters displayed, 1500 pamphlets distributed, 2 Roll ups, 1 banner, 3 portraiture boards and placards carrying awareness messages on NCDs displayed at health facilities and in the community. Over 30 radio programs were broadcast and rebroadcast.



As a means to ensure program visibility, the program was very actively involved in the commemoration of National and International NCD related campaigns such as the enough NCDs campaign, commemoration of World Diabetes Day, World Heart's Day and Mental Health Day. The program equally: Participated in a Regional workshop organized by the Global NCD Alliance and signed the Dakar Declaration committing to join forces to fight NCDS

in francophone Africa and the 1st African Sickle Cell Congress in Nigeria.

The program collaborated with the Jordan Breast Cancer Program to scale up the treatment and management of Breast Cancer in particular and other cancers affecting women in Cameroon. The collaboration allowed for exchange visits and knowledge sharing during which the Non-Communicable

Disease Prevention and Control Program Manager and the Women's Health Program Supervisor of the CBCHS traveled to Jordan to learn from the country's experiences in managing Breast Cancer.

The program also published its accomplishment in 7 Newspapers, 5 TV stations, the social media, CBC Health Services website; Facebook and Twitter pages, to facilitating networking and enhancing program visibility.

As of the year 2019, 2110 diabetes patients were fully enrolled on treatment and registered the D&H units of NCD program sites and 470 hypertension patients registered.

To further enhance the management of diabetes and hypertension patients, 14 diabetes and hypertension peer to peer educators were trained to work with patients in the community, following up defaulters and lost to follow-up patients to encourage and link them back to treatment.



Diabetes Peer educators training, Yaounde.

Two major projects funded by Novartis and World Diabetes Foundation came to an end and new projects will be sourced in 2020.

15. AIDS Care and Prevention Program (ACP)

The CBCHS continued to implement several HIV interventions in 2019, with the goal of achieving epidemic control. Some of the HIV intervention programs were integrated into the routine services of CBCHS institutions while funded projects activities continued according to initial design.

The HIV Free Project funded by PEPFAR through CDC was supporting sites in the Center, Northwest and Southwest regions at the beginning of the year and by the end of the year, some rearrangements were done and it started supporting the West in favour of the Center region. The three regions (Northwest, Southwest and West) currently supported are under the appellation Zone 1. The project tested a total of 503,808 individuals, diagnosed 17,353 (3.4%) infected persons and placed 17,491 (100.8%) of them on ART. By the end of the year, the project was supporting 79 sites in Zone 1 with 81,143 patients on ART.

The Project worked hard and achieved very good retention (133%) by the end of the year but case identification is still sub optimal.

The Community Initiative AIDS Care and Prevention (CIACP) Program continued to raise awareness on HIV and other related health issues. The current project phase aims at increasing HIV case identification, linkages and retention in ART Care and Treatment services through integrated community HIV testing and counseling services. This year the project trained 87 community persons and staff on strategies of providing services in the community. Using this resource persons, a total of 5,058 individuals were tested and 86 (1.7%) diagnosed with HIV. Of those identified HIV positive, 80% were linked to ART services.

The ViiV Community project funded through Positive Action for Children Fund (PACF) started implementing activities in Tubah District in the Northwest region in the last quarter of 2019. The aim of the project is to generate demand for ANC services, ensure all pregnant women and their partners are tested and those found positive are initiated on treatment. The project also ensures that all HIV exposed infants receive all critical services required for their final diagnosis to be determined. Meanwhile the ViiV Technical Assistant Project continued to deliver services to four CBOs including ASRAFAID in the North Region, FIS and TOWOC in the Center Region and WACameroon in the Northwest region. The domains of intervention remained the same and were governance/ financial management, intervention, advocacy/networking and monitoring and evaluation. By the end of the year, two of the CBOs were graduated including ASRAFAID and FIS with satisfactory performances in the domains of interventions.

16. Chosen Children Program (CCP)

Since its inception in July 2001, the mission of the Chosen Children Program is to assist and support orphans to stay in their villages with “caregivers” who provide a safe and stable home environment with a productive outcome. The Program continuously provides spiritual, psychological, emotional, physical support to orphans and vulnerable children and enforces their rights to basic necessities such as education, apprenticeship, medical needs, food, shelter and clothing. All of these were done this year by spreading the love of God to them during outreach activities through office staff and field agents who are mostly Pastors and Christians who visit, interact, counsel and pray with the families. The program previously covered the whole of the North West Region, eight areas in the South West Region and one area in the West region. Because of the prevailing crisis, most of the children have moved to Francophone Regions with high

concentration in the West and Littoral Regions. A few are in Centre, East, South, Adamawa Regions as well.

The year ended with an enrolment of 2,223 children after recording 6 deaths, 352 children out in the bushes and not able to continue education and 450 lost to follow up, giving a total of 3,031 Children initially sponsored by the Program. About 125 children were sick and treated amounting to 5,540,067 Frs CFA, out of which 1.9 Million Francs CFA was used to treat a child shot by gunmen. During school fee disbursement and evangelistic outreaches, other donations such as didactic, Spiritual materials, used dresses (shoes, books) were also distributed. Majority of the children did well academically and have been promoted to upper classes while others who wrote the National final exams also succeeded. The Jesus film was projected to Chosen Children in Magba and Malande. 60 Children received Christ and 15 were baptized in the Churches at various areas. Many needy cases were assisted with status similar to outpatient cases without admission in the same way Jesus talked about compassion as demonstrated by the Good Samaritan, these are those assisted once and not enlisted on the permanent list.

The program has been maintained in partnership with people of goodwill, within and outside Cameroon, and benevolent organizations. Trinity Baptist Legacy Fund in Kelowna, Canada courtesy of Mr. Ernie Falk has been the main funder since 2012. Periodic reports are prepared and sent through the Program Director to these partners.

17. Burkitt Lymphoma/Childhood Cancer Services

The CBCHS Childhood Cancer service continues to operate in three Childhood Cancer Treatment Centres at Mbingo, Banzo, and Mutengene Baptist Hospitals. The cost of pathology, chemotherapy, management of comorbidities, laboratory investigations and surgery were largely funded by the Program. Food support and transport support is also provided to all patients. The program continued with long term follow-up of patients to establish the real outcome. Palliative Care is provided to terminal patients at home by a Children's Palliative Care Nurse expert.

In 2019, a total of 112 new patients were admitted. The main disease categories are Non-Hodgkin's lymphoma (mostly Burkitt Lymphoma (BL), Retinoblastoma (RB), Wilms Tumours (Nephroblastoma), and Acute Lymphoblastic Leukemia (ALL), which are all treated with adapted IRB approved local. The protocol for standard risk ALL was developed by medical leads of the Cameroon Paediatric Oncology Group with input of collaborators from Leeds Children's Hospital, UK and Stellenbosch University, South Africa. A

phase two randomized clinical trial began in June 2019 with the use of Rituximab for treatment of Burkitt Lymphoma.

A new Centre was set up at Mboppi Baptist Hospital Douala (MBHD), with a five-bed Ward space, a Treatment Room, Cancer Registry and Chemotherapy Reconstitution Room. Our pediatrician Dr Ngu Ernest and Nurse Practitioner Vera Njamnshi are leading the development of this Centre together with the management of MBHD and the CBCHS Oncology Medical Supervisor, Dr Kouya Francine. Our web conferencing capacity has been improved with the setting up of a premium Zoom account for the programme. This is used for weekly multidisciplinary team meetings between our Childhood Cancer Centres in Bango, Mbingo, Douala, and Mutengene. It also serves for monthly multidisciplinary team meetings with volunteer experts in Leeds Children's Hospital, UK and Stellenbosch University, South Africa.

The International Childhood Cancer Day, 2019 was celebrated with childhood cancer patients, survivors and hospital staff at Mbingo Baptist Hospital and Baptist Hospital Mutengene. The program participated in several advocacy activities of the Cameroon Paediatric Oncology Group (CPOG). Over 200 health care professionals in the Littoral region were trained on early warning signs of childhood cancers, necessary to identify and refer patients promptly for treatment. The second Annual National Paediatric Oncology Conference organized by CPOG in December 2019, focused on improving access to essential medicines for Children with Cancer. CPOG obtained official collaboration status with the Ministry of Public Health and the National committee for the Fight Against Cancer. Program staff attended the 51st Congress of the International Society of Paediatric Oncology in Lyon, France and presented 3 oral presentations and 2 posters.

A Multidisciplinary Paediatric Oncology Workshop was held at Mboppi Baptist Hospital, Douala in January 2019 with 30 program staff including Surgeons, Doctors, Nurses, Pharmacists.

17.1. Research. The African Collaborative Study for the treatment of WT continues to have good patient accrual at MBH. A supportive care baseline assessment has begun at Mbingo Baptist Hospital as part of a collaborative regional project dubbed SUCCOUR (Supportive Care for Children with Cancer in Africa). The program contributed to five journal articles, one book chapter and five presentations at international conferences.

17.2. Partnerships. The program continues to benefit from the support of the Beryl Thyer Memorial Africa Trust (BTMAT), World Child Cancer, U.K, and Stellenbosch University, South Africa; Leeds Children's Hospital; and the Wilms tumour Africa Collaborative project.

18. Chaplaincy Department

The Chaplaincy Department staff continued to meet the spiritual needs of patients and their Care givers who visited our institutions as well as the needs of staff serving. The word of God was shared through teaching, preaching and counseling to all those whom the opportunity presented. Chaplains had to take a lot of initiative to engage staff on a one-on-one interaction to get to know them more so as to minister to them appropriately. This approach which has gone on for a while has proven to be very fruitful as we have witnessed a marked improvement in the commitment and participation in church life as well as Christian activities among CBCHS staff. Chaplains ministered to clients who stay long in the kitchens (bills penders) at BBH and MBH as well as everyone in the mini market. We were able to organize our annual prayer Chain day in February 2019. During this occasion, staff signed up to pray for an hour each for a period of twenty-four hours. The prayer points for this exercise were constituted in a prayer list from the Central office of the CBCHS Chaplaincy Department. In addition to the Prayer chain day, the CBC organized forty days of prayers and fasting and our Chaplaincy Departments encouraged staff to participate in it.

Three Chaplains Rev. Chiambah Clement of Ekounou Baptist Hospital, Rev. Yangvun Markson of Bafoussam Baptist Hospital and Rev, Fongoh Godwin of the DHS office in Bamenda were ordained this year. The CBCHS is grateful to the churches that recommended these Chaplains for ordination and supported their ordination. They are of great assistance in administering the ordinances within the Local churches, Associations and fields where they are serving.

Many CBCHS staff enrolled for the TEE courses for self-spiritual improvement. This has influenced their functioning and services very positively. The staff of Baptist Hospital Banyo have benefited from this course for several years with Dr. James Smith bearing the cost. We appreciate this gesture and are thankful to Dr. James Smith for this.

Due to lockdown in the Northwest and Southwest regions all CBCHS institutions could not observe the Spiritual Emphasis and Medical Day of prayer week, at the scheduled time. Some centers shifted theirs to a later date. Inquirers Classes were organized for some bill- penders and staff who were not yet baptized when they came into the system. A total of eleven candidates were baptized along with other candidates in a nearby Church while six received baptism at MBH.

Apart from the regular weekly Bible studies for our staff, Mbingo Baptist Hospital Chaplaincy has daily Bible study for patients and caregivers. There is also Bible study for Doctors in BBH and for Administrative staff and Missionaries in MBH.

The Sunday worship service program for the Patients and their Caregivers in MBH and BBH is functioning very well. Every Sunday morning the Chaplains coordinate a worship service program in the Hospital Chapel. This service is organized with the context of patients in mind especially as it relates to the time span and their respective conditions. This has been highly appreciated by those who are not able to attend worship services when they are admitted in the Hospital.

With the intensification of the Socio-Political crisis in Cameroon, the Chaplaincy services were challenged to deal with a lot of grief and trauma cases. This was so challenging because they themselves were not spared from the trauma that most of the staff in hard hit communities faced. However, with courage and faith in God, they rallied the staff and encouraged them to be still in the face of all the challenges. Some Chaplains benefited from a trauma counseling training that was organized in Bafoussam by the CBC, sponsored by Bread for the World. This training has prepared those who received it with knowledge and skills to effectively deal with trauma cases in the context of the current Socio-Political crisis in the Northwest and Southwest regions.

The Staff of the Chaplaincy department did not only take care of the Spiritual needs of those who were affected in one way or the other by the crisis but also of the physical needs of these people. They worked with staff in their various institutions and collected gifts in cash and kind for the support of the people who were affected.

Some individuals of good will and institutions visited our facilities and supported our clients with gifts ranging from food items to settlement of bills. This was a great relief to the patients who benefited as well as the institutions.

Nine Chaplains from MBH and three from BBH were privileged to attend an international Conference for Mission Hospital Chaplains in Nairobi Kenya. This conference was organized by World Medical Missions, a Ministry of the Samaritan's Purse. It provided an opportunity for those who attended it to interact with Hospital Chaplains from other Missions Hospitals from thirty-three different countries across the world. The Chaplains were able to share ministry experiences with each other and to learn from three different facilitators on the theme, "Chaplains: A Heart and Heroes of Mission Hospitals, drawn from Matthew 26:36.

19. Center for Clinical Pastoral Education and Social Services (CECPES) and the Community Counseling Clinic (CCC)

CECPES and CCC are two of the Health Board programs that have to do with training and counselling. While CECPES takes care of capacity building as an educational program, CCC builds lives that are shattered by some realities, giving those lives hope again.

In 2019, CCC witnessed an increase in marriage and family problems. The Clinic also conducted the highest number of premarital counselling sessions. The good news is that there is a heightened awareness for premarital counselling giving us hope that future marriages will witness fewer and less damaging family conflicts. Most of those that come for enrichment counselling following marital discords did not receive any counselling. The clinic has received positive and encouraging feedback from couples with stable families who received counseling about seven years ago. The clinic provided trauma counselling for staffs who came face to face with traumatic situations or who have experienced it second hand in the course of their work.

One approach CCC has devised to educate the communities is through seminars. Through this approach we have been able to handle several issues of homogeneous nature. The seminars usually include Couples, singles, and widows. Unfortunately, due to the socio-political crisis affecting the Northwest and Southwest Regions, we could not carry out these seminars in 2019. We however substituted it with PREMARITAL and ENRICHMENT trainings which held at the Community Counselling Clinic with over 45 participants and included the CECPES 2019 Summer Unit and Social Work students as well as students from the Faculty of Education of the University of Bamenda. This training was aimed at equipping participants to be able to carry out premarital and couple counselling.

We also conducted a seminar on capacity building for Guidance Counsellors in the Northwest Region on trauma counselling. The seminar handled topics on Traumatic stress, manifestation of traumatic stress in adolescent's mental health etc. Over 75 school counsellors took part in this capacity building seminar.

A presentation on Psychological Trauma, Addiction and Child Protection was made at the CBC faith Baptist Church Mile 1, Bamenda Field. There were over 100 people in that service. The aim of the presentation was to create awareness on how the on-going crisis has affected or is affecting individual's mental health. Presentations were made on psychological trauma: what trauma is, its signs and symptoms, progression, how to handle both its acute and post symptoms as well as when medication is indicated.

A seminar for singles and couples was held at Bethel Baptist church, Yaounde. We dwelled on the importance of effective communication, trust, transparency within the relationship as a couple. On the part of the singles, we emphasized on the importance of pre-marital counselling, self-awareness and the role of health history before marriage. A total of 111 singles took part in this seminar with 92 couples making a total of 203 participants.

In April 2019, we ran a two-Session Anger Management seminar with the staff of Etoug-Ebe Baptist Hospital, Yaounde following an invitation from Management as they feared staff were becoming a little impatient with clients needing therapeutic communication. Staff were schooled on techniques to diffuse their own anger or that of others, especially in dealing with “difficult patients”

A three-day seminar on revitalized couple relationship through inspiring contextual devotions and case presentations in line with current issues affecting the singles or couples and/or daily lives was conducted at the Bafoussam Baptist Health Center.

This year witnessed an increase in counselling statistics with issues ranging from Mental Health related issues, adolescent issues, interpersonal and inter-professional issues, personality modification, marriage and family counselling to guidance in various areas of life. We also carried many debriefing sessions as well as trauma counselling for some of the students who were kidnapped. We have remained in touch by phone with those needing more time to heal from their trauma.

With some financial assistance from the **Canadian Funds for Local Initiatives**, the Community Counseling Clinic **Formed a Community of Practice** which increased access to Gender-Based Violence issues within and without the CBCHS. These funds enabled us to provide quality, compassionate and case management services to survivors of Gender Based Violence in the humanitarian context of the Northwest Region of Cameroon by setting up a functional network of complementary service providers in Bamenda which enhanced access, service delivery, referrals and information sharing. This Community of Practice included spiritual leaders of various denominations. Since then the CCC and organisations within this Community of Practice have experienced real team spirit in care of the vulnerable in the area of gender issues. Unique about this approach is the fact that not only the survivors were ministered to, but perpetrators who could be identified went through healing at the CCC as a total package of care. The integrative approach in assessing our clients saw several of them confessing Christ and many others strengthened in their resolve for God.

The CECPEs has continued to be a Training/practicum site for many young students aspiring to become professional Counsellors, Pastors or Social Workers. CECPEs has registered a good number of students from the Guidance and Counselling Program of the University of Bamenda and Professional Masters of Counseling Psychology from the University of Bamenda. A total of 15 students from the Bamenda University Faculty of Education specializing in Counseling Psychology went through practicum with us. For the first time we also received three students from the Higher Technical Teachers Training College, University of Bamenda for internship.

In 2019 CECPEs graduated a total of 24 students: 15 Social Workers and 9 Summer Unit students. The critical needs of this Department include more staff and practicum rooms.

20. Technical Services Department (TSD)

The Technical Services Department's Major focus and responsibilities is to ensure that facilities are properly designed, constructed, furnished, equipped, and maintained. This formed the basis of the Technical Services Department 2019 goals.

The main projects of TSD were Nkwen Maternity Block A, CBCHS Resource Centre Mvan, Rest House, Sign Language Block in MBH, among other minor projects. The Socio-Political crisis was a push for an urgent follow up of the completion and setting up of the Nkwen Maternity Block A, not only for its original services but for more surgical and specialized clinical services. This was among other projects listed below, some of which have been completed, some ongoing while some were suspended.

The completed project includes;

- Nkwen Maternity Block A: The building was completed though in phases
- Nkwen Biogas Projects was completed and put to use (pending the balloon to be installed and connected to user points).
- A new generator house and remodeling in Nkwen was completed and put to use.
- A multipurpose hall at the Integrated Sign Language School in Mbingo was completed
- Bonaberi Health Center, Douala waiting area and side walk project was completed.
- Kwighe Health Center extension and fence was done.
- VIP Toilet in Ngounso was built and put to use.

Projects that are ongoing include the BHM Trauma Centre, Mvan Rest House block, Nkwen Maternity Block B, MBH low cost apartments, Ngounso ward extension, Facility installations at the HIV Free office in

Bafoussam, Follow up of Bore holes and water network at the Baptist Center, where two bore holes were drilled pending piping and installations.

Suspended projects were BBH OR Extension and MBH Hydro – Electric Plant. The projects that were studied/designed are the Etoug –Ebe Hospital New Medical Block which was revised, the Ekounou Maternity Block, the Malaria Reference LAB: Funding applied for and waiting to hear from funders and the BVTC CAMPUS (proposed for SIFA grant application submitted)

Projects that were studied were the TSD Head Office, Banyo P.T. Block, Kumba second Medical/Pharmacy Block, Kumba Client Centre, Ndu Health Centre New Medical Block, MBH Client Centre, MBH Oncology Building, MBH Orthopedic/ PT Block, Bafoussam Rest house across property, HSC Housing Estate, Jikijem Surgical Ward and Mboppi Baptist Hospital, Douala second Medical Block.

The TSD organized a two-day seminar that brought together 37 senior staff of the Department from 11 stations. It was very successful and was highly appreciated by all for the impact they felt. Two staff; Foncha Elvis and Shey Silas received training in ophthalmic instrument maintenance in India this year.

The Baptist Vocational school accomplished the follow in 2019;

1. Recruited 29 new trainees into the Centre in addition to the ongoing batches that make up an enrolment of 82.
2. A total of 24 trainees have finished internship and will be writing an internal end of course examination, since external exams were not registered due to the crisis.
3. Tools donated from the Netherlands to the Centre were received and put to use
4. TSD started running a mini metal workshop beside the TSD Office.

The Biomedical unit carried out their annual maintenance and servicing of medical equipment in 17 stations. Besides the maintenance of equipment, they carried out solar installations in 6 stations, generator installations in 6 stations, participated in the setting up of Tibati Baptist Health Centre and Nkwen Baptist Health Centre Maternity.

C. HEALTH INFORMATION MANAGEMENT SYSTEMS (HMIS)

There are currently thirty-nine CBCHS Health Centers and Hospitals put together. The Ndebaya and Bafia Baptist Health Centers did not report throughout the year because they were closed as a result of the

socio-political environment that is prevailing in their communities. Compared with 2018, there was an increase by 2% in the outpatients' service uptake and a decrease by 3.6% in inpatients' service uptake in the CBCHS in 2019. The tables below summarize the key performances of 2018 compared to 2019.

Table 1 Summary performance of CBCHS institutions

INDICATOR/DEPARTMENT	BBH	MBH	BHM	BHB	MBHD	DBH	EBHY	NKWEN	BAFOUSSAM	EKOUNOU	KUMBA	SUPERVISED IHCs	Total
Bed Capacity	331	294	160	39	144	41	51	98	67	40	59	690	2,014
Staff Strength*	568	750	404	71	481	16	296	278	197	153	131	1,194	4,539
OPD attendance	44,168	41,882	91,671	9,091	223,538	2,631	143,549	147,880	70,161	64,365	72,653	214,157	1,125,746
Inpatient Attendance	2,669	5,165	5,430	1,306	10,388	419	264	1,589	3,036	1,336	1,823	18,379	51,804
Deliveries	485	297	677	201	3,494	63	-	385	780	679	531	3,505	11,097
Major Surgeries	800	2,591	1,290	190	2,120	-	-	214	512	24	100	158	7,999
Minor Surgeries	2,081	2,774	3,799	341	5,160	40	1,702	2,195	1,253	660	1,451	5,186	26,642
Deaths	183	347	157	43	177	9	5	16	58	6	14	223	1,238
Prescription served by pharmacy	34,988	34,318	75,693	8,540	175,555	2,274	102,181	59,438	45,351	39,651	51,016	175,877	804,882
Laboratory	24,464	20,619	29,464	5,683	99,058	1,357	50,364	42,415	30,100	29,207	33,742	412,476	778,949
Patients served by Doctors	9,125	19,095	74,700	1,091	106,522	-	22,709	39,570	10,990	13,274	12,384	29,714	339,174
Patients served by Screeners	8,778	21,287	16,988	5,671	117,012	1,841	60,590	68,219	18,020	14,581	32,373	133,462	498,822
Eye Department	4,427	5,348	14,139	475	26,170	-	21,445	12,849	11,766	7,360	3,331	14,033	121,343
Chaplaincy	8,361	8,571	4,291	1,057	2,967	309	616	8,073	4,589	1,397	643	7,422	48,296
Social Worker	2,557	3,317	3,116	-	3,774	-	2,280	3,765	1,355	1,460	1,218	4,933	27,775
Dental Department	2,138	1,189	2,629	582	7,790	-	11,834	9,648	5,068	4,890	1,217	3,523	50,508
Ultrasound Department	4,146	6,795	6,682	2,575	16,305	-	5,569	4,683	4,474	3,246	4,102	10,689	69,266
Physiotherapy Department	2,455	3,461	3,004	1,158	6,853	-	3,646	5,661	3,140	2,029	1,976	814	34,197
X - Ray Department	2,295	5,934	4,376	911	5,347	-	-	469	169	1,031	-	-	20,532
Nutrition	732	869	1,362	1,296	4,863	-	1,085	699	703	857	1,076	2,196	15,738
Cervical Cancer screening	764	1,474	825	24	2,678	-	1,062	2,556	749	400	783	622	11,937
ENT	561	3,327	1,757	-	8,219	-	7,004	-	725	2,296	-	11	23,900
Mental Health	1,564	2,080	-	-	1,189	144	40	2,228	676	266	-	759	8,946
Palliative Care	115	2,565	768	-	240	-	-	4	48	15	20	24	3,799
Know Your Numbers	804	540	1,131	437	1,093	-	1,770	1,618	2,123	167	214	532	10,429

*Staff of supervised IHCs includes those of LAP DHS OFFICE, HSC AND TSD

Table 2.1 Number of Beds distributed by Wards

S/N	WARD	JANUARY TO MAY		CHANGE IN NUMBERS	% CHANGE
		2018	2019		
1	Medical	749	789	40	5.3
2	Maternity	513	549	36	7
3	Pediatric	262	328	66	25.2
4	Surgical	278	348	70	25.2
	TOTAL	1802	2014	212	11.8

Table 2.2 – Distribution of beds by Hospitals and Health Centers

Hospital	Medical	Maternity	Pediatric	Surgical	Total	%
BBH	154	50	45	82	331	16.4
MBH	154	23	26	91	294	14.6
BHM	32	35	20	73	160	7.9
MBHD	28	53	38	25	144	7.1
BHB	17	8	7	7	39	1.9
DBH	24	17	0	0	41	2.0
EBH	22	-	29	-	51	2.5
NKWEN	-	40	22	36	98	4.9
BAFOUSSAM	19	23	19	6	67	3.3
EKOUNOU	19	21	-	-	40	2.0
KUMBA	25	18	8	8	59	2.9
Other Institutions	295	261	114	20	690	34.3
Total	789	549	328	348	2014	100.0

The number of beds in CBCHS institutions increased by 11.8% in 2019. This increase comes mostly from EBHY which started inpatient services and Nkwen that continues to expand from Maternity Ward to Pediatric Ward in 2019.

Table 3.1 staff strength by cadre

S/N	CADRE	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	DOCTORS	101	109	8	7.3
2	NURSES	1005	1104	99	9.0
3	AUXILLARY	608	689	81	11.8
4	PARAMEDICAL	480	518	38	7.3
5	ADMINISTRATORS	23	26	3	11.5
6	ADMINISTRATIVESTAFF	139	160	21	13.1
7	CHAPLAINS/SOCIALWORKERS	75	90	15	16.7
8	CLERICAL STAFF	338	411	73	17.8
9	NUTRITION COUNSELORS	31	5	-26	-520.0
10	OTHERS	1319	1427	108	7.6
	TOTAL	4119	4539	420	9.3

Table 3.2 Staff strength by institution and cadre

SN	STATION	DOCTORS	NURSES	AUXILLARY	PARAMEDICAL	ADMINISTRATORS	ADMINISTRATIVE STAFF	CHAPLAINS/ SOCIALWORKERS	CLERICAL STAFF	OTHERS	TOTAL
1	BBH	5	143	125	70	3	10	15	43	154	568
2	MBH	16	192	106	69	3	11	12	52	289	750
3	BHM	12	121	66	47	3	5	10	33	107	404
4	MBHD	25	140	53	59	3	13	7	50	131	481
5	BHB	1	10	18	11	1	1	1	6	22	71
6	DBH	0	4	3	1	0	0	1	1	6	16
7	ETOUUG EBE	13	63	36	42	1	18	5	43	75	296
8	NKWEN	6	74	33	37	2	3	6	31	86	278
9	BAFOUSSAM	5	53	28	28	2	7	4	19	51	197
10	EKOUNOU	8	44	19	23	1	1	3	14	40	153
11	KUMBA	2	27	24	10	0	2	3	13	50	131
	SUPERVISED IHCs	9	184	142	72	0	4	14	55	177	657
	*Other Institutions	7	50	37	49	9	85	9	51	240	537
	TOTAL	109	1105	690	518	28	160	90	411	1428	4539

*Other Institutions include those of LAP, DHS OFFICE, HSC and TSD

Table 3.3 Staff strength by Institution

SN	INSTITUTION	JANUARY TO NOVEMBER		CHANGE IN NUMBERS	% CHANGE
		2018	2019		
1	BBH	580	568	-12	-2.1
2	MBH	801	750	-51	-6.8
3	BHM	393	404	11	2.7
4	MBHD	482	481	-1	-0.2
5	BHB	60	71	11	15.5
6	DBH	16	16	0	0.0
7	EBHY	262	296	34	11.5
8	NKWEN	180	278	98	35.3
9	BAFOUSSAM	119	197	78	39.6
10	EKOUNOU	112	153	41	26.8
11	KUMBA	116	131	15	11.5
12	SUPERVISED HCs	549	657	108	16.4
13	OTHER INSTITUTIONS	449	537	88	16.4
	TOTAL	4,119	4,539	420	9.3

Comparing with 2018 there was an overall increase by 9.3% in the number of CBCHS staff in 2019. While BBH, MBH and MBHD witnessed a decrease in number of staff, the rest of the facilities and all the supervised Health Centers witnessed an increase in 2019.

Table 4.1 Outpatient Attendance

SN	INSTITUTION	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	BBH	77,915	44,168	(33,747)	-43.3
2	MBH	64,485	41,882	(22,603)	-35.1
3	BHM	101,059	91,671	(9,388)	-9.3
4	BHB	9,038	9,091	53	0.6
5	MBHD	232,574	223,538	(9,036)	-3.9
6	DBH	3,863	2,631	(1,232)	-31.9
7	EBH	154,127	143,549	(10,578)	-6.9
8	NKWEN	153,769	147,880	(5,889)	-3.8
9	BAFOUSSAM	47,677	70,161	22,484	47.2
10	EKOUNOU	46,714	64,365	17,651	37.8
11	KUMBA	52,641	72,653	20,012	38
12	Other Institutions (IHCs)	159,962	214,157	54,195	33.9
TOTAL		1,103,824	1,125,746	21,922	2

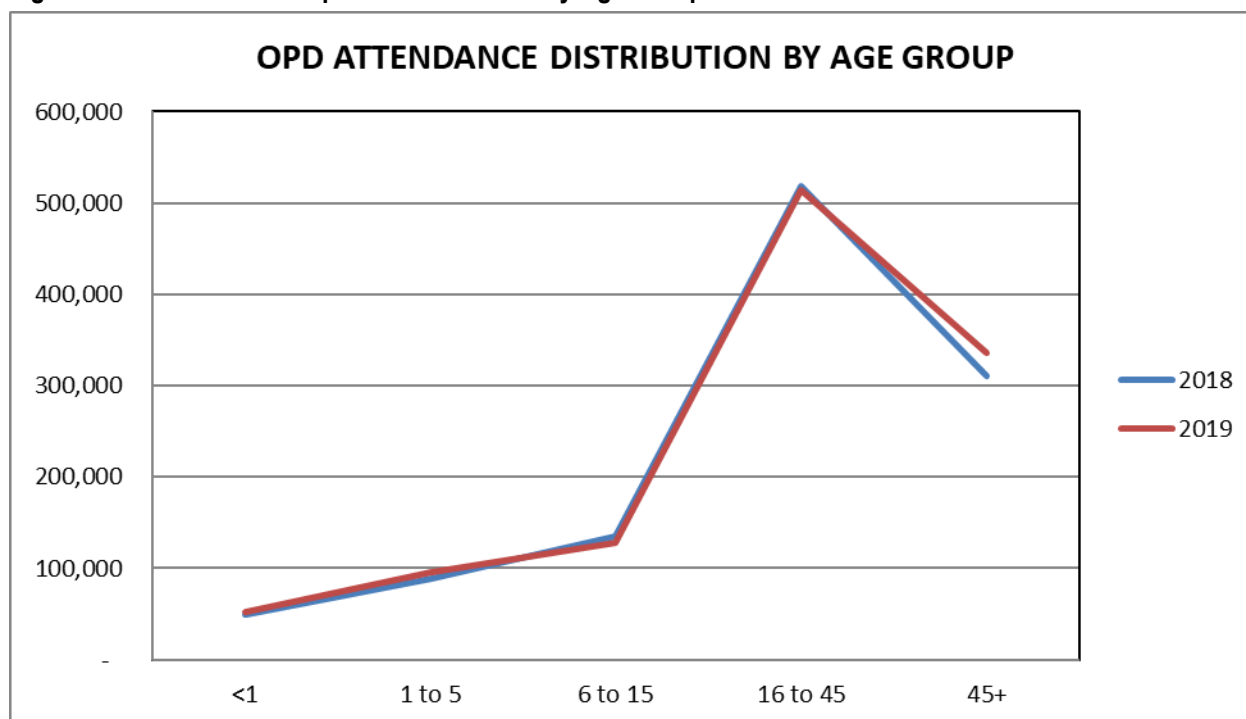
There was an increase by 2% in the outpatient attendance of CBCHS institutions in 2019. Bafoussam, Ekounou, Kumba and the Integrated Health Centers put together contributed greatly to this overall increase. The rest of the facilities witnessed a decrease significantly in BBH, MBH and DBH. The health centers put together witnessed an increase by 33.9%. The decrease at MBH, BBH, BHM and in some supervised integrated health centers in the Northwest and Southwest regions is influenced by the ongoing unstable political atmosphere.

Table 4.2 Distribution of Outpatients by Gender

SN	GENDER	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	Male	446,441	445,024	(1,417)	-0.3
2	Female	657,383	680,722	23,339	3.6
	TOTAL	1,103,824	1,125,746	21,922	2

Generally, more females utilized the services at CBCHS institutions than males in 2019. Comparing 2018 to 2019 the number of females who utilized the services at CBCHS institutions increased by 3.6% and males dropped by 0.3%.

Figure 1 Distribution of Outpatient Attendance by Age Group



There is a similar trend in the age group distribution of patients served on outpatient basis in 2018 and 2019

Table 5.1 Five Health Centers with Highest OPD Attendance

SN	2018		2019	
	Health Center	Attendance	Health Center	Attendance
1	NKWEN	153,769	NKWEN	147,880
2	KUMBA	52,641	KUMBA	72,653
3	BAFOUSSAM	47,677	BAFOUSSAM	70,161
4	EKOUNOU	46,714	EKOUNOU	64,365
5	NKOABANG	22,390	BONABERI	51,241

Bonaberi Baptist Health center replaced Nkoabang Baptist Health Center in list of top five facilities with the highest outpatient attendance in 2019 while the rest of the facilities were retained and maintaining their ordering.

Table 5.2 Five Health Centers with lowest OPD attendance

SN	2018		2019	
	Health Center	Attendance	Health Center	Attendance
1	NDEBAYA	781	KOUSSAM	1,825
2	ALLAT	1,546	NWAT	1,991
3	KOUSSAM	1,694	ALLAT	1,992
4	NGEPTANG	1,723	NGEPTANG	2,024
5	AKEH	1,852	AKEH	2,138

But for Ndebaya that did not report throughout 2019 influenced by the ongoing unstable political atmosphere, all the health centers that were on the list of five centers with the lowest outpatients' attendance still feature in 2019 with Nwat joining in. All of these Health Centres had a small increase in the uptake of services in 2019.

Table 6.1 – Admissions by institutions and by Wards

HOSPITAL	MATERNITY	PEDIATRIC	SURGICAL	MEDICAL	TOTAL	%
BBH	550	378	565	1,176	2,669	5.2
MBH	362	783	1,647	2,373	5,165	10.0
BHM	968	998	1,879	1,585	5,430	10.5
MBHD	3,734	2,606	1,862	2,186	10,388	20.1
BHB	213	333	158	602	1,306	2.5
DBH	66	5	-	348	419	0.8
EBH	-	29	-	235	264	0.5
NKWEN	424	179	424	562	1,589	3.1
BAFOUSSAM	876	623	273	1,264	3,036	5.9
EKOUNOU	367	26	48	895	1,336	2.6
KUMBA	571	508	129	613	1,821	3.5
Other Institutions (IHCs)	3,769	4,960	121	9,531	18,381	35.5
TOTAL	11,900	11,428	7,106	21,370	51,804	100.0

Table 6.2 Admissions

SN	UNIT	2018	2019	CHANGES IN NUMBERS	% CHANGE
1	Maternity	13,014	11,900	(1,114)	-8.6
2	Pediatric	10,379	11,428	1,049	10.1
3	Surgical	8,085	7,106	(979)	-12.1
4	Medical	22,241	21,370	(871)	-3.9
	Total	53,719	51,804	(1,915)	-3.6

Compared to 2018, there was a 3.6% decrease in admissions in the CBCHS institutions in 2019. Maternity, Surgical and Medical Wards have a decrease in service uptake while Pediatric experienced an increase of 10.1%.

Table 6.3 Bed occupancy rate

SN	INDICATOR	2018	2019	CHANGES IN NUMBERS	% CHANGE
1	Number of beds	1,802	2,044	242	13.4
2	Number of hospital days	225,850	199,669	(26,181)	-11.6
3	Average length of stay	4.2	3.9	(0)	-0.3
4	Bed occupancy rate	34.3	26.8	(8)	-7.5
5	Mortality rate	2.7	2.3	-0.4	-0.4

Table 6.3 Bed occupancy rate by Institution

SN	INDICATOR	BBH	MBH	BHM	BHB	MBHD	DBH	EBHY	NKWEN	BAFOUSSAM	EKOUNOU	KUMBA	Supervised IHCs	Total
1	Number of beds	331	294	160	39	144	41	51	98	67	40	59	690	2014
2	Number of admissions	2669	5165	5430	1306	10388	419	264	1589	3036	1336	1823	18379	51804
3	Number of hospital days	25178	25429	24898	5256	42608	1445	783	5007	9950	1336	4183	53596	199669
4	Average length of stay	9	5	5	4	4	3	3	3	3	1	2	3	4
5	Bed occupancy rate	20.8	23.7	42.6	36.9	81.1	9.7	4.2	14	40.7	9.2	19.4	21.3	27.2
6	Deaths	183	347	157	43	177	9	5	16	58	6	14	223	1238
7	Mortality rate	6.9	6.7	2.9	3.3	1.7	2.1	1.9	1.0	1.9	0.4	0.8	1.2	2.4

In 2019, the average length of stay at CBCHS institutions was 5 days. The average length of stay was much higher at BBH; influenced by the Surgical, Orthopedic and Ulcer Ward patients. The crude bed occupancy rate of 2019 in CBCHS institutions was 32.6%. There is a lot of underutilization of beds at DBH, EBHY and Ekounou. Clearly MBHD needs more bed space.

Table 7 Patients flow per Department

SN	DEPARTMENTS	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	Eye	119,024	121,343	2,319	1.9
2	X-Ray	23,365	20,532	(2,833)	-12.1
3	Physiotherapy	39,442	34,197	(5,245)	-13.3
4	Ultra-Sound	61,576	69,266	7,690	12.5
5	Dental	46,601	50,508	3,907	8.4
6	Laboratory	431,653	778,949	347,296	80.5
7	Pharmacy	835,526	804,882	(30,644)	-3.7
8	Chaplaincy	48,080	48,296	216	0.4
9	Social workers	25,730	27,775	2,045	7.9
10	Patients served by doctors	316,624	339,174	22,550	7.1
11	Patients served by screeners	507,201	498,822	(8,379)	-1.7
12	Nutrition	19,703	15,738	(3,965)	-20.1
13	Cervical Cancer	10,209	11,937	1,728	16.9
14	ENT	23,784	23,900	116	0.5
15	Mental Health	4,921	8,946	4,025	81.8
16	Palliative Care	5,571	3,799	(1,772)	-31.8
17	Know Your Numbers	14,655	10,429	(4,226)	-28.8

Compared to 2018 there was a remarkable increase in the number of patients seen in the Laboratory and Mental Health Departments in 2019. The Eye, Ultra-sound, Dental, Chaplaincy, Social workers, Doctors, ENT, and Cervical Cancer Departments saw a little more patients in 2019 than in 2018. There was a decrease in the workload of the rest of the departments.

Table 8 Departmental Patient Flow By Hospitals and IHCs

DEPARTMENT	BBH	MBH	BHM	BHB	DBH	MBHD	EBH	NKWEN	BAFOUSSAM	EKOUNOU	KUMBA	IHCs	TOTAL
Eye	4,427	5,348	14,139	475	-	26,170	21,445	12,849	11,766	7,360	3,331	14,033	121,343
X-ray	2,295	5,934	4,376	911	-	5,347	-	469	169	1,031	-	-	20,532
Physiotherapy	2,455	3,461	3,004	1,158	-	6,853	3,646	5,661	3,140	2,029	1,976	814	34,197
Ultra-sound	4,146	6,795	6,682	2,575	-	16,305	5,569	4,683	4,474	3,246	4,102	10,689	69,266
Dental	2,138	1,189	2,629	582	-	7,790	11,834	9,648	5,068	4,890	1,217	3,523	50,508
Laboratory	24,464	20,619	29,464	5,683	1,357	99,058	50,364	42,415	30,100	29,207	33,742	412,476	778,949
Pharmacy	34,988	34,318	75,693	8,540	2,274	175,555	102,181	59,438	45,351	39,651	51,016	175,877	804,882
Chaplaincy	8,361	8,571	4,291	1,057	309	2,967	616	8,073	4,589	1,397	643	7,422	48,296
social workers	2,557	3,317	3,116	-	-	3,774	2,280	3,765	1,355	1,460	1,218	4,933	27,775
Patients seen by doctors	9,125	19,095	74,700	1,091	-	106,522	22,709	39,570	10,990	13,274	12,384	29,714	339,174
Patients seen by screeners	8,778	21,287	16,988	5,671	1,841	117,012	60,590	68,219	18,020	14,581	32,373	133,462	498,822
Nutrition	732	869	1,362	1,296	-	4,863	1,085	699	703	857	1,076	2,196	15,738
Cervical Cancer	764	1,474	825	24	-	2,678	1,062	2,556	749	400	783	622	11,937
ENT	561	3,327	1,757	-	-	8,219	7,004	-	725	2,296	-	11	23,900
Mental Health	1,564	2,080	-	-	144	1,189	40	2,228	676	266	-	759	8,946
Palliative Care	115	2,565	768	-	-	240	-	4	48	15	20	24	3,799
Know Your Numbers	804	540	1,131	437	-	1,093	1,770	1,618	2,123	167	214	532	10,429

Table 9.1 Maternal and Child Health (MCH)

ACTIVITY	2018	2019	CHANGE IN NUMBERS	% CHANGE
Antenatal Clinic	75,400	77,438	2,038	2.7
Family Planning	11,561	12,699	1,138	9.8
Infant Welfare Clinic	54,059	55,320	1,261	2.3
Preschool Clinic	4,648	5,166	518	11.1
Total	145,668	150,623	4,955	3.4

There was a 3.4% increase in MCH activities. All MCH indicators witnessed an increase in 2019.

Table 9.2 Deliveries

DELIVERIES	2018	2019	CHANGE IN NUMBERS	% CHANGE
Total delivery	10,479	11,097	618	5.9
Live birth	10,160	10,873	713	7
Pre-term	430	400	(30)	-7
NEOD	72	99	27	37.5
BBA	72	79	7	9.7
SB	202	152	(50)	-24.8
AB	324	378	54	16.7

There was an increase in deliveries in 2019. There was an increase in the number of births before arrival, neonatal deaths and abortions. Still births and pre-term decreased.

Table 9.3 Abortions by category

SN	INSTITUTIONS	TOTAL ABORTIONS	SPONTANEOUS	INDUCED	CRIMINAL
1	BBH	19	17	2	0
2	MBH	9	9	0	0
3	BHM	14	10	2	2
4	DBH	4	4	0	0
5	MBHD	31	31	0	0
6	BANYO	5	5	0	0

7	EBHY	119	116	3	0
8	NKWEN	30	14	8	8
9	BAFOUSSAM	50	47	3	0
10	EKOUNOU	82	65	17	0
11	KUMBA	84	84	0	0
12	OTHER INSTITUTIONS	181	171	2	8
	TOTAL	628	573	37	18
	%	100	91	6	3

Most 91% of the reported abortions were spontaneous while 6% were induced abortions and 3% were criminal. Some clients are likely to provoke abortion before arrival at the facility and will not disclose detail information and so some criminal abortions will likely present as spontaneous.

Table 10 Immunizations

SN	VACCINE	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	MENINGITIS	1,567	1,299	-268	-17.1
2	BCG	10,173	10,755	582	5.7
3	DPT/PENTA	26,008	28,549	2541	9.8
4	POLIO	35,976	38,768	2792	7.8
5	TITANUS	20,550	21,410	860	4.2
6	MEASLES	7,473	8,068	595	8
7	PNEUMOCOCCAL VACCINE(PCV)	26,220	28,240	2020	7.7
8	ROTARIX	16,833	18,706	1873	11.1
9	IPV	7,194	8,299	1105	15.4
10	VIT A	18,700	20,890	2190	11.7
11	YELLOW FEVER	7,592	7,987	395	5.2
12	HPV	2,036	956	-1080	-53
13	HEPATITIS B	4,716	5,391	675	14.3
	TOTAL	180,322	193,927	13605	7.5

Compared with 2018, but for meningitis and HPV that recorded a decrease of 17.1 % and 53% respectively, all immunization activities witnessed an increase with an overall increase of 7.5% in the uptake of immunization activities in 2019.

Table 11 Surgeries

SN	SURGERY	2018	2019	CHANGE IN NUMBERS	% CHANGE
1	MINOR	28,650	26,642	(2,008)	-7
2	MAJOR	10,954	7,999	(2,955)	-27
	Total	39,604	34,641	(4,963)	-12.5

Both major surgeries and minor surgeries had a decrease in 2019.

Table 12 Distribution of Surgeries by Institution

Institution	Surgery Type		Total
	Minor	Major	
BBH	2,081	800	2,881
MBH	2,774	2,591	5,365
BHM	3,799	1,290	5,089

MBHD	5,160	2,120	7,280
BHB	341	190	531
DBH	40	-	40
EBHY	1,702	-	1,702
NKWEN	2,195	214	2,409
BAFOUSSAM	1,253	512	1,765
EKOUNOU	660	24	684
KUMBA	1,451	100	1,551
Other Institutions (IHCs)	5,186	158	5,344
TOTAL	26,642	7,999	34,641

MBHD closely followed by MBH, BHM and BBH are the Hospitals with the greatest number of surgeries conducted in 2019. Other supervised Health Centers put together conducted 158 major surgeries, with most of the major surgeries (128) carried out at Ngounso.

Table 13 Notifiable Diseases

DISEASES	2018	2019	CHANGE IN NUMBERS	% CHANGE
Neonatal tetanus	1	4	3	300
Leprosy	5	2	-3	-60
Yellow fever	3	0	-3	-100
Cerebrospinal meningitis	10	10	0	0
Human rabies	0	2	2	-
Tuberculosis	946	994	48	5.1
Cholera	0	0	0	-
Typhoid fever	3,198	6,424	3226	100.9
Poliomyelitis	0	0	0	-
Measles	10	4	-6	-60

Generally, there was a decrease in all the diseases of epidemic potentials in 2019. However there was an increase of Typhoid fever in 2019 mainly from Etoug-Ebe (1358), Bonaberi (1375), Nkoabang (1390), Ekounou (875) and Nkwen reported (705). Tuberculosis also witnessed an increase by 5.1%.

Table 14 HIV Prevalence

Type of Clients	2018		2019		Change
	# Screened	% HIV+	# Screened	% HIV+	
Blood donors	9422	1.0	11126	1.0	0.0
Patients	97235	4.2	97842	4.3	0.1
PMTCT	188,402	3.6	102356	4.6	2.0

Compared to 2018, PMTCT noticed a 0.7% decrease. There was a small increase (0.1%) of patients category and for blood donors though there was an increase in the number screened in 2019, % HIV+ remained the same.

Table 16 Deaths

Wards	2018	2019	CHANGE IN NUMBERS	% Change
Pediatric	302	297	-5	-1.7
Surgical	165	121	-44	-26.7
Maternal	9	13	4	44.4

Medical	954	800	-154	-16.1
Truama	16	7	-9	-56.3
TOTAL	1,446	1238	-208	-14.4

Other than maternal deaths that increased in 2019, the other categories of deaths decreased. These deaths occurred at MBH (3), BHB (1), BHM (3), MBHD (2), Ngounso (2) and Kumba (2)

Table 17 Ten Leading Diseases

2018		2019	
DISEASE	CASES	DISEASE	CASES
Malaria	69,131	Malaria	49,850
Hypertension	52,077	Hypertension	42,654
Conjunctivities	29,706	Conjunctivities	20,459
Diabetes Mellitus	22,613	Diabetes Mellitus	19,125
Gastritis/PUD	19,522	Gastritis/PUD	17,484
URTI/LRTI	18,061	URTI/LRTI	15,820
MSKP	15,609	Cystitis/UTI	15,489
Cystitis/UTI	15,257	MSKP	13,490
Glaucoma	14,787	Typhoid fever/ Enteric fever	11,245
HIV and AIDS	9,749	Decubitus ulcers/wounds	11,181

Eight of the ten diseases in 2018 were retained in 2019 with the first six in the same order but with decrease in the number of cases. Typhoid fever/ Enteric fever and Decubitus ulcers/wounds displaced Glaucoma and HIV and AIDS from the list of ten leading diseases in 2019.

Table 18 Ten leading causes of death

SN	2018		2019	
	DISEASE	CASES	DISEASE	CASES
1	Malaria	118	Septicaemia	124
2	Septicaemia	115	Malaria	101
3	Pneumonia	87	Congestive Heart Failure (CHF)	83
4	Congestive Heart Failure (CHF)	77	Pneumonia	75
5	HIV and AIDS	70	Anaemias	64
6	Anaemias	65	Meningitis	57
7	Meningitis	48	HIV and AIDS	54
8	Diabetes Mellitus	37	Tuberculosis	44
9	Tuberculosis	34	Hypertension	31
10	Hypertension	31	Diabetes Mellitus	31

In 2019, septicaemia displaced malaria from its top position in the list of leading killer diseases. All of the ten leading causes of death in 2018 were retained in 2019. Out of the ten leading causes of death, five had a decrease in the number of cases, four had an increase in the number of cases and one had the same number of cases in 2018 comparatively.

Table 19 HIV Care and Treatment Program Work load

SN	SITE	ART INITIATION		% CHANGE	CURRENT ON ART		% CHANGE
		2018	2019		2018	2019	
1	BBH	363	180	-50%	2127	2201	3%
2	MBH	276	183	-34%	1205	1367	13%
3	BHM	455	340	-25%	3340	3735	12%
4	NKWEN	346	318	-8%	3366	3794	13%
5	MBOPPI	888	692	-22%	3713	5002	35%
6	EBHY	351	338	-4%	2155	2252	5%
7	BAFFOUSSAM	80	112	40%	152	360	137%
8	KUMBA	343	304	-11%	334	710	113%
	TOTAL	3,102	2,467	-20%	16,392	19,421	18%

In 2019, a total of 2,467 HIV positive individuals were newly initiated on ART in the eight CBCHS Care and Treatment Centers, representing a decrease of 20% compared to the initiations of 2018. At the end of 2019, there were a total of 19,421 clients on ART. Compared to 2018, the number of clients on ART increased by 18%.

Table 20 Evolution of CBCHB PMTCT Activities

Indicator	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	TOTAL
Total # of women counseled	1,469	4,049	12,624	22,043	30,822	47,571	62,154	79,388	94,505	100,055	103,388	101,960	132,070	125,363	110,352	195,782	216,698	191,511	199,132	102490	1,933,426
Total # of women tested	1,391	3,849	11,536	20,537	27,641	42,125	58,031	76,132	91,270	97,643	100,555	101,960	131,640	125,406	108,601	180,498	206,700	183,314	190,210	102356	1,861,395
Total # of women who return for results	1,343	3,841	11,422	20,229	27,063	40,344	57,312	75,015	89,531	97,137	99,970	99,651	129,956	124,389	108,560	178,943	206,700	183,303	190,210	102356	1,847,275
Total # of women Positive	146	384	1,100	1,613	2,530	3,594	4,962	5,838	6,118	5,755	5,578	5,563	6,871	5,900	3,711	7,543	13,828	8,585	8,471	4686	102,776
Total # of women treated	55	143	456	531	1,004	2,577	3,903	5,356	4,969	5,349	8,530	8,172	6,656	4,837	3,317	6,625	12,036	8,325	8,192	4551	95,584
Total # of infants treated	55	145	434	548	913	1,411	2,203	2,551	3,124	3,554	3,912	3,728	5,297	4,898	4,007	6,967	4517	-	-	5194	53,458
% return for results	96.5	99.8	99	98.5	97.9	95.8	98.8	98.5	99	99.5	99.4	97.7	98.7	99.2	100.0	99	100.0	100.0	100.0	100.0	1,977
% HIV positive	10.5	10	9.5	7.9	9.2	8.5	8.6	7.7	6.3	5.9	5.5	5.5	5.2	4.7	3.4	4.2	6.7	4.7	4.5	1.0	9.9
% of women treated	37.7	37.2	41.5	32.9	39.7	71.7	78.7	77.4	88	92.9	73.9	70.2	96.9	82	89.4	88	87.0	97.0	96.7	94.1	92.9
% of infants treated	37.7	37.8	39.5	34	36.1	39.3	44.4	43.7	54	61.8	70.1	67	77.1	83	94	92	32.7	NA	NA	75.0	NA
% MTCT	-	-	-	-	17.8	-	-	-	-	-	13.3	14.6	11.6	6.7	6.5	NA	4.5	3.6	2.6	-	NA

The major funder of PMTCT services – CDC/PEPFAR further pivoted, dropping some low volume PMTCT sites. This year, we observed an increase in the positivity rate amongst pregnant women.

Table 21 CBCHS Tuberculosis activities

Indicators	2018	2019	CHANGE IN NUMBERS	% CHANGE
Total # of TB patients	1,122	1063	-59	-6%
Number screened for AFB	6,717	6589	-128	-2%
Number of pulmonary TB	867	871	4	0.50%
Number of Smear Positive	737	714	-23	-3%
Number of Smear Negative	130	157	27	17%
Number of Extra Pulmonary TB	255	192	-63	-33%
Number tested For HIV	112	1063	951	89%
Acceptance rate	99.8	100%	0.2	0.20%
Number tested HIV+	407	378	-29	-8%
% of Co-infection	36.3	35.60%	-0.7	-1%

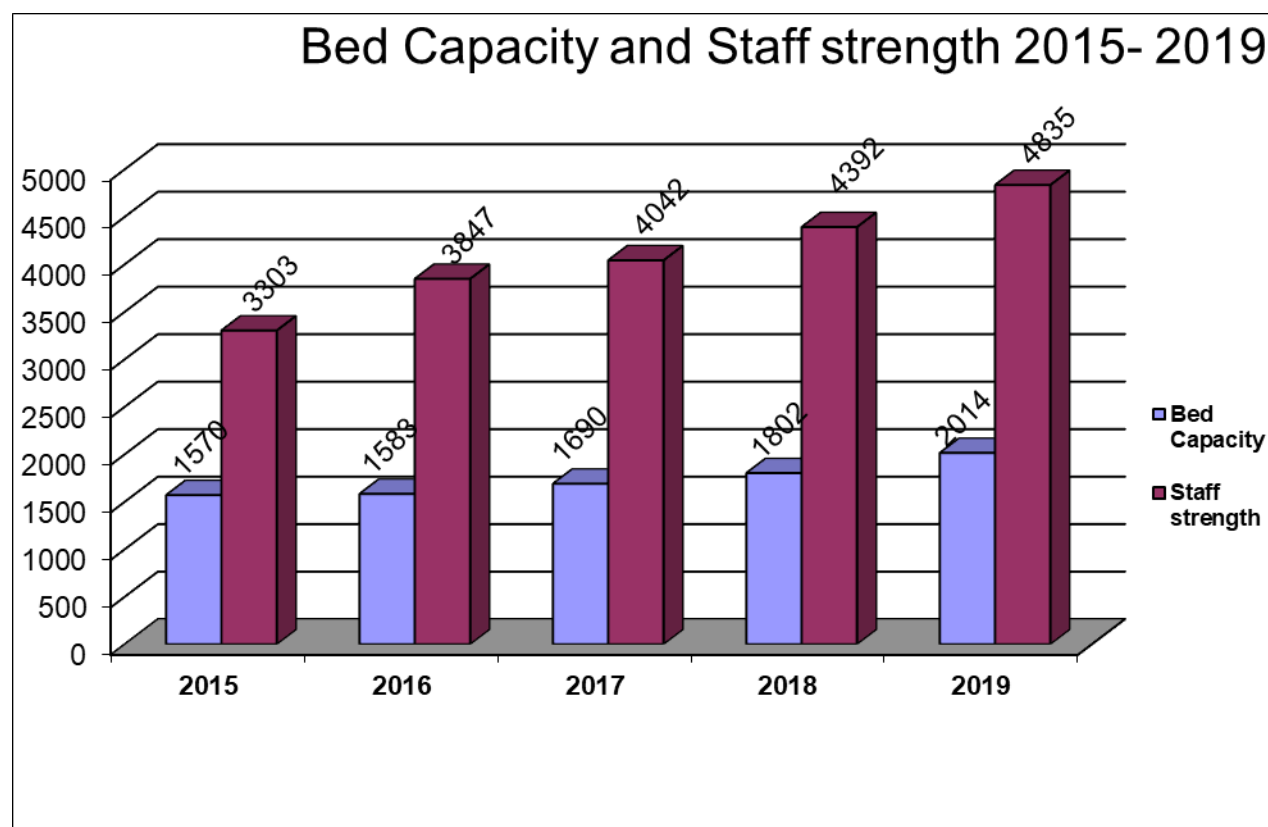
There was a decrease in the number of patients screened for TB in 2019. The TB/HIV co-infection rate decreased by 1%

Table 22 Evolution of Activities of Extended Forum of Care

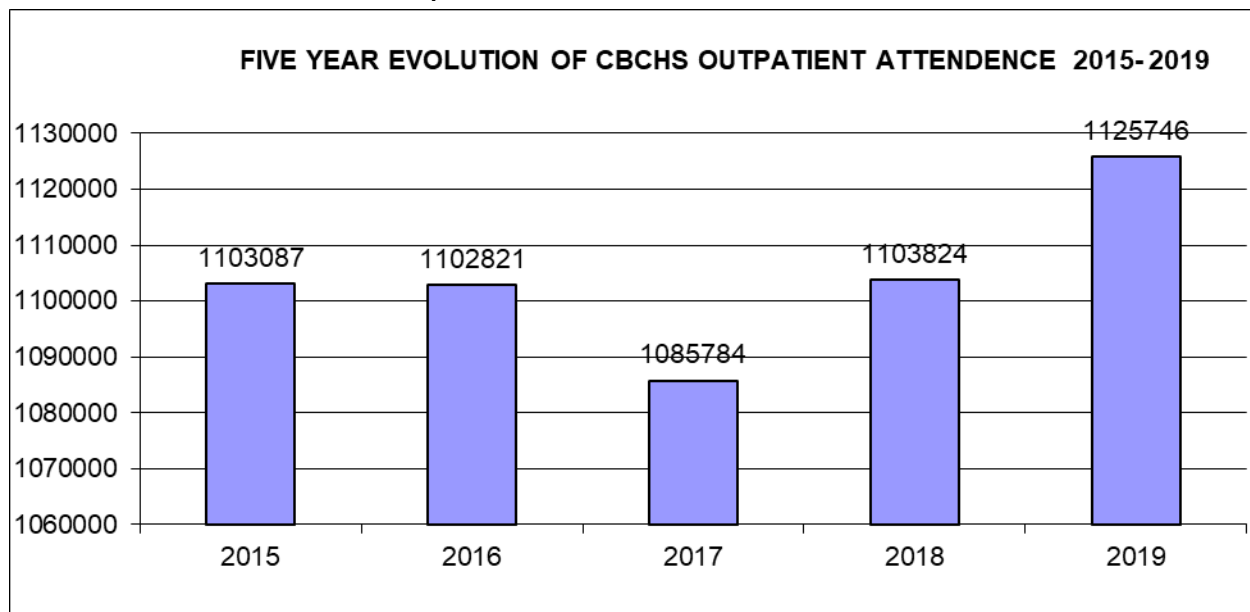
Indicator/Year	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	TOTAL	%
Index Persons	227	1,610	2,174	2,587	2,058	2,409	2,439	3,030	2,193	5,306	16,016	16,629	29,820	86,498	N/A
Contact Persons	278	1,701	2,384	2,812	2,476	3,041	2,710	3,283	2,372	6,352	21,319	20,763	47,439	116,930	135%
Contact Persons Notified	167	1,309	1,742	2,184	1,416	1,627	1,336	1,981	1,105	4,724	19,077	15,587	38,918	91,173	78%
Contact Persons Tested	110	1,004	1,477	1,681	808	1,139	863	1,339	781	4,065	16,191	11,097	33,022	73,577	81%
Contact Persons With HIV ⁺	55	557	688	969	446	588	470	592	399	1,578	3,413	460	3,547	13,762	19%
CPs Linked to Care & Treatment	-	37	90	633	302	587	473	591	399	1,423	3,105	363	1,138	9,141	66%

Annex – Five Years Evolution of CBCHS Key Activities

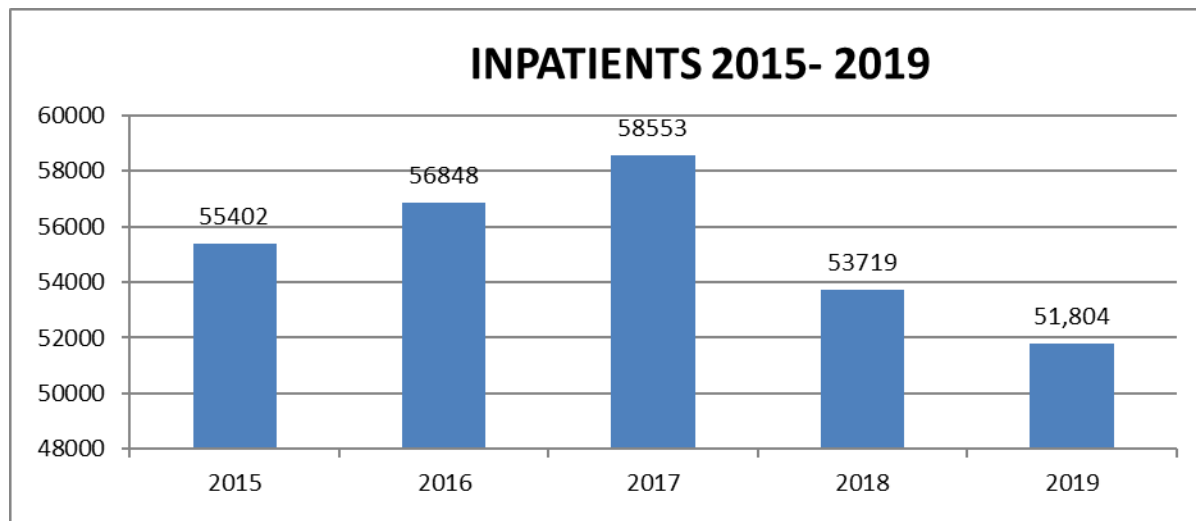
Annex 1a - Five Year Evolution of Number of Beds and Staff



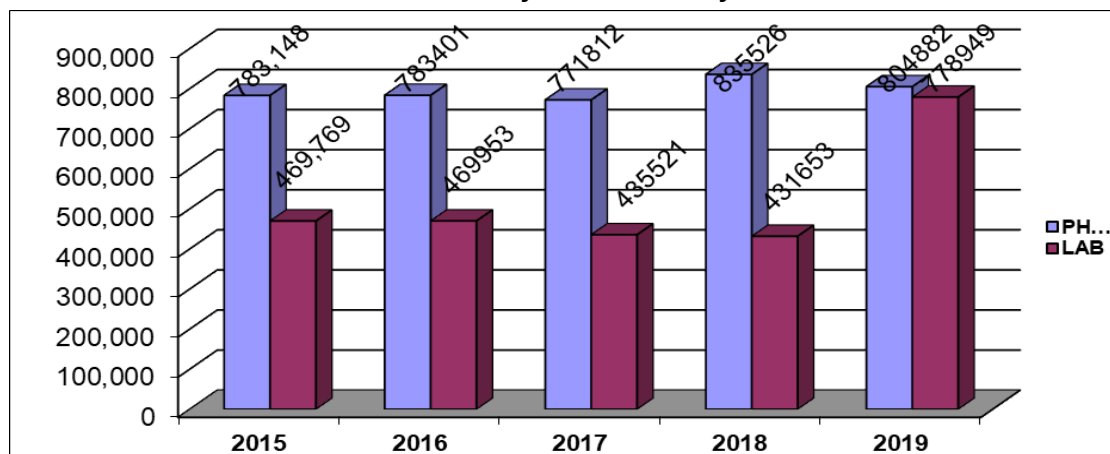
Annex 2 – Five Year Evolution of Outpatient Attendance



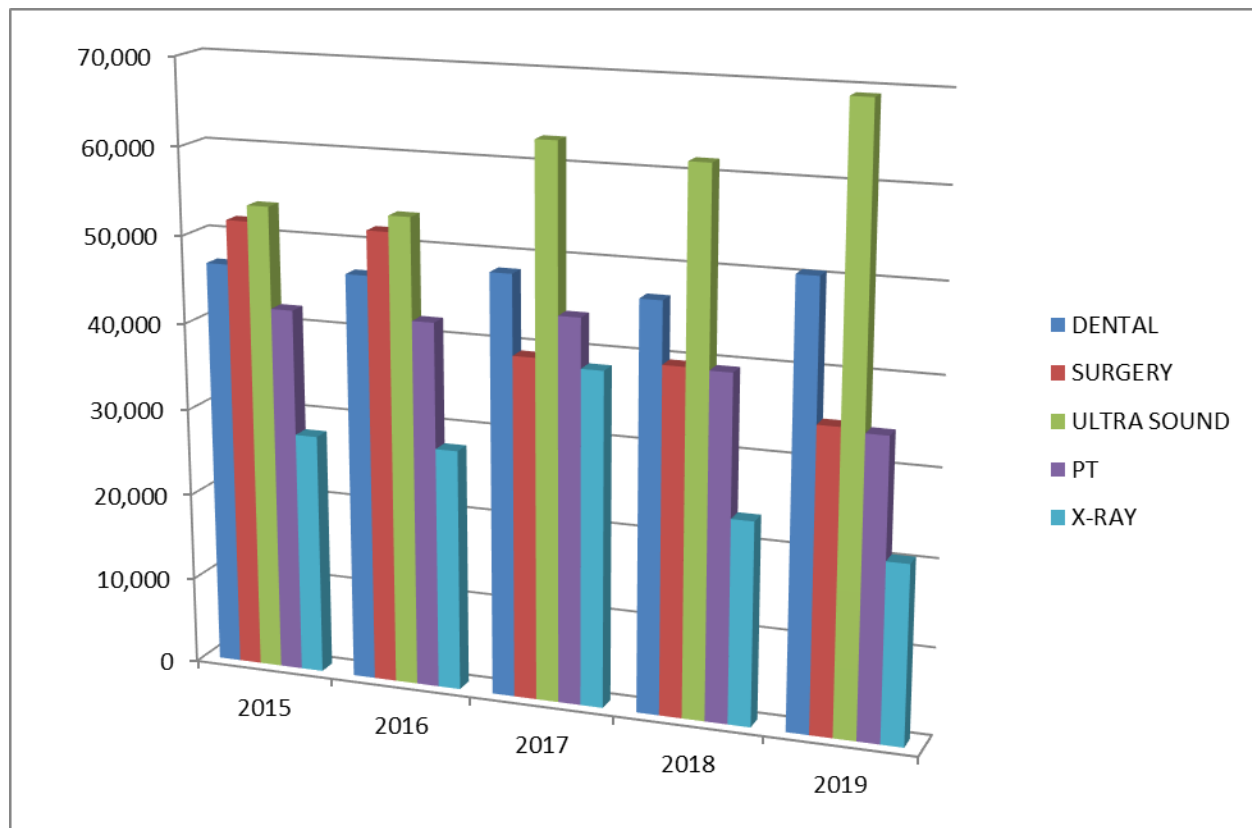
Annex 3- Five Year Evolution of Inpatients Attendance



Annex 4- Five Year Evolution of Pharmacy and Laboratory work load



Annex 5- Five Year Evolution of Department work load



Conclusion

The inpatient service uptake declined while the outpatient service uptake continues to increase. We are thankful to the Lord for sustaining our services. The staff worked happily delivering quality care to all with compassion. We are appreciative of the support of many national and international partners without which we could not have achieved all these results. The Board is thankful to all the staff of CBCHS for their commitment to its Mission Statement as evident in the accomplishments.

Appendix 1- Outpatient attendance

SN	NAME	OUTPATIENTS ATTENDANCE																
		NEW	OLD	% NEW	<1		1-5		6-15		16-45		>45		TOTAL		GRAND TOTAL	
					M	F	M	F	M	F	M	F	M	F	M	F		
		466063	649604	41.8	26382	25575	47632	47904	58629	69551	169887	343849	142494	193843	445024	680722	1125746	
1	BANSO BAPTIST HOSPITAL	12084	32084	27.4	460	341	847	677	1133	1061	6197	12287	9330	11835	17967	26201	44168	
2	BANGOLAN BAPTIST HEALTH CENTER	4111	1226	77	22	52	62	54	119	130	409	2967	437	987	1049	4190	5239	
3	JIKIJEM BAPTIST HEALTH CENTER	3170	3622	46.7	111	114	147	127	124	131	480	2693	901	1966	1763	5031	6794	
4	KOUHOUAT BAPTIST HEALTH CENTER	4296	3995	51.8	101	99	446	427	479	596	925	2055	1253	1824	3204	5001	8205	
5	KOUSSAM BAPTIST HEALTH CENTER	867	959	47.5	27	18	59	58	86	87	189	631	293	377	654	1171	1825	
6	LASSIN BAPTIST HEALTH CENTER	2748	1070	72	107	104	256	258	236	289	405	1090	386	702	1390	2443	3833	
7	DUNGER BAPTIST HOSPITAL-MBEM	1136	1506	43	43	40	69	76	75	98	274	764	444	748	905	1726	2631	
8	NDU BAPTIST HEALTH CENTER	4831	7811	38.2	133	148	284	286	299	220	1193	2731	2668	4679	4577	8064	12641	
9	NGEPTANG BAPTIST HEALTH CENTER	872	1213	41.8	27	50	41	80	39	124	140	830	224	469	471	1553	2024	
10	NGOUNSO BAPITIST HEALTH CENTER	8845	8394	51.3	382	373	705	634	895	850	2191	5950	2631	2763	6804	10570	17374	
11	NWAT BAPTIST HEALTH CENTER	995	1023	49.3	37	47	121	163	85	61	232	760	191	294	666	1325	1991	
12	ROMKONG BAPTIST HEALTH CENTER	1308	2333	35.9	55	70	67	76	82	79	457	1140	444	1153	1105	2518	3623	
13	MBINGO BAPTIST HOSPITAL	19897	21985	47.5	841	796	1092	1087	1985	2064	7455	8017	9180	9365	20553	21329	41882	
14	AKEH BAPTISH HEALTH CENTER	847	1290	39.6	45	67	96	77	86	88	375	565	275	464	877	1261	2138	
15	ASHONG BAPTIST HEALTH CENTER	3039	1873	61.9	73	54	183	167	237	209	715	1357	610	1307	1818	3094	4912	
16	BAFOUSSAM BAPTIST HEALTH CENTER	29153	41008	41.6	1461	1346	2288	1967	2963	3274	9103	20976	11439	15344	27254	42907	70161	
17	BAYANGAM BAPTIST HEALTH CENTER	810	1621	33.3	45	20	124	77	110	83	394	736	306	525	979	1441	2420	
18	BELO BAPTIST HEALTH CENTER	1660	2062	44.6	55	66	75	76	100	111	671	1344	480	1007	1381	2604	3985	
19	FINKWI BAPTIST HEALTH CENTER	3902	4005	49.3	198	230	342	566	676	618	1132	1484	1171	1530	3519	4428	7947	
20	KWIGHE BAPTIST HEALTH CENTER	1494	2508	37.3	65	68	158	148	121	136	607	1586	439	981	1390	2919	4309	
21	MAMFE BAPTIST HEALTH CENTER	2574	2154	54.4	49	49	209	163	147	157	638	914	1055	1340	2098	2623	4721	
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	#DIV/0!	0	0	0	0	0	0	0	0	0	0	0	0	0	
23	NKWEN BAPTIST HEALTH CENTER	50626	88526	36.4	6240	6426	10951	11365	14245	16300	19819	25400	16629	20505	67884	79996	147880	
24	SABGA BAPTIST HEALTH CENTER	1559	3632	30	52	47	118	112	124	102	649	1912	807	1235	1750	3408	5158	
25	BANYO BAPTIST HOSPITAL	4805	4292	52.8	99	90	307	310	519	501	1740	2987	1482	1056	4147	4944	9091	
26	ALLAT BAPTIST HEALTH CENTER	1086	899	54.7	22	24	99	83	78	90	416	795	207	178	822	1170	1992	
27	NYAMBOYA BAPTIST HEALTH CENTER	2146	1636	56.7	96	62	266	263	200	197	630	1408	340	310	1532	2240	3772	
28	SARKI BAKA BAPTIST HEALTH CENTER	1902	1674	53.2	62	60	213	201	193	165	553	1369	451	319	1472	2114	3586	
29	BAPTIST HOSPITAL MUTENGENE	47143	43701	51.9	1191	1005	2736	2377	3286	3589	15977	31214	11959	18337	35149	56522	91671	
30	BAFIA BAPTIST HEALTH CENTER	0	0	#DIV/0!	0	0	0	0	0	0	0	0	0	0	0	0	0	
31	EKONDOTITI BAPTIST HEALTH CENTER	1606	541	74.8	29	40	119	125	75	77	338	681	324	346	885	1269	2154	
32	KUMBA BAPTIST HEALTH CENTER	33650	39103	46.3	2726	2192	3452	3001	4214	4078	13903	18668	9580	10839	33875	38778	72653	
33	MBOPPI BAPTIST HOSPITAL	63944	159594	28.6	2812	3466	5194	6631	8145	10180	32588	85948	26937	41637	75676	147862	223538	
34	BAPTIST HEALTH CENTER BONABERI	22369	28874	43.7	1276	1188	2835	2836	2737	3042	7912	17824	4486	7105	19246	31995	51241	
35	KRIBI BAPTIST HEALTH CENTER	11056	12163	47.6	815	612	1321	1144	1163	1617	3614	8062	2218	2729	9131	14164	23295	
36	ETOUG-EBE BAPTISTHOSPITAL YDE	69211	74203	48.3	4313	3817	6926	7106	8394	12907	20249	45064	14903	19870	54785	88764	143549	
37	EKOUNOU BAPTIST HEALTH CENTER	33239	31138	51.6	1481	1564	3147	2859	3324	4023	12076	22053	6178	7660	26206	38159	64365	
38	NKOABANG BAPTIST HEALTH CENTER	9144	11736	43.8	512	552	1674	1599	1501	1773	4025	6214	1383	1670	9095	11808	20903	
39	VOUNDOU BAPTIST HEALTH CENTER	3938	4150	48.7	319	278	603	648	354	444	1216	3373	453	387	2945	5130	8075	
		466063	649604	41.8	26382	25575	47632	47904	58629	69551	169887	343849	142494	193843	445024	680722	1125746	

Appendix 2 - Maternity and Pediatric Admissions

SN	NAME	MATERNITY WARD												PEDIATRIC WARD													
		ADMISSIONS	HOSP DAYS	AV. STAY	<1		1-5		6-15		16-45		>45	ADMISSIONS	HOSP DAYS	AV. STAY	<1		1-5		6-15		16-45		>45		
					M	F	M	F	M	F	M	F					M	F	M	F	M	F	M	F		M	F
		11900	39406	3	211	215	1	1	0	37	0	11296	0	392	11428	40435	4	1335	1225	2822	2281	1838	1757	55	53	8	3
1	BANSO BAPTIST HOSPITAL	550	2275	4	1	1	0	0	0	7	0	539	0	2	378	2274	6	57	28	67	44	110	72	0	0	0	0
2	BANGOLAN BAPTIST HEALTH CENTER	150	542	4	0	0	0	0	0	0	0	150	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
3	JIKIJEM BAPTIST HEALTH CENTER	227	662	3	0	0	0	0	0	0	0	227	0	0	114	356	3	17	19	27	18	16	17	0	0	0	0
4	KOUHOUAT BAPTIST HEALTH CENTER	121	378	3	0	0	0	0	0	0	0	121	0	0	631	1759	3	33	43	191	179	99	84	0	0	0	0
5	KOUSSAM BAPTIST HEALTH CENTER	51	138	3	0	0	0	0	0	2	0	49	0	0	135	374	3	12	12	39	22	20	21	3	15	8	3
6	LASSIN BAPTIST HEALTH CENTER	86	179	2	0	3	0	0	0	0	0	82	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
7	DUNGER BAPTIST HOSPITAL-MBEM	66	202	3	0	4	0	0	0	0	0	62	0	0	5	15	3	0	0	3	2	0	0	0	0	0	0
8	NDU BAPTIST HEALTH CENTER	128	303	2	0	0	0	0	0	0	0	128	0	0	154	438	3	18	13	33	35	36	19	0	0	0	0
9	NGEPTANG BAPTIST HEALTH CENTER	79	262	3	0	0	0	0	0	0	0	79	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
10	NGOUNSO BAPTIST HEALTH CENTER	502	1632	3	0	0	0	0	0	1	0	501	0	0	989	3071	3	41	33	363	245	123	188	0	0	0	0
11	NWAT BAPTIST HEALTH CENTER	50	163	3	0	0	0	0	0	0	0	50	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
12	ROMKONG BAPTIST HEALTH CENTER	76	239	3	0	0	0	0	0	1	0	75	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
13	MBINGO BAPTIST HOSPITAL	362	1442	4	16	12	1	0	0	1	0	289	0	34	783	4790	6	115	75	161	132	158	142	0	0	0	0
14	AKEH BAPTISH HEALTH CENTER	85	170	2	3	6	0	0	0	0	0	85	0	0	100	205	2	3	7	20	25	21	24	0	0	0	0
15	ASHONG BAPTIST HEALTH CENTER	68	183	3	0	0	0	0	0	0	0	64	0	4	270	820	3	13	11	58	43	81	64	0	0	0	0
16	BAFOUSSAM BAPTIST HEALTH CENTER	876	2583	3	1	0	0	0	0	0	0	875	0	0	623	1869	3	40	33	159	138	140	113	0	0	0	0
17	BAYANGAM BAPTIST HEALTH CENTER	14	39	3	0	0	0	0	0	0	0	14	0	0	0	0	-	0	0	0	0	0	0	26	0	0	0
18	BELO BAPTIST HEALTH CENTER	155	602	4	26	19	0	0	0	0	0	167	0	0	70	261	4	0	3	13	13	14	27	0	0	0	0
19	FINKWI BAPTIST HEALTH CENTER	144	319	2	0	0	0	0	0	0	0	131	0	13	232	513	2	19	25	40	41	51	55	0	0	0	0
20	KWIGHE BAPTIST HEALTH CENTER	85	264	3	0	0	0	0	0	0	0	85	0	0	129	381	3	10	10	25	27	30	24	0	0	0	0
21	MAMFE BAPTIST HEALTH CENTER	10	30	3	0	0	0	0	0	0	0	10	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	424	1210	3	1	1	0	0	0	1	0	419	0	2	179	547	3	8	8	24	24	17	15	0	0	0	0
24	SABGA BAPTIST HEALTH CENTER	71	166	2	0	0	0	0	0	1	0	70	0	0	217	468	2	13	11	41	40	49	63	0	0	0	0
25	BANYO BAPTIST HOSPITAL	213	868	4	0	2	0	0	0	0	0	211	0	0	333	999	3	23	16	88	59	83	66	0	0	0	0
26	ALLAT BAPTIST HEALTH CENTER	68	160	2	0	0	0	0	0	7	0	61	0	0	171	489	3	8	9	42	54	30	28	0	0	0	0
27	NYAMBOYA BAPTIST HEALTH CENTER	157	254	2	0	0	0	0	0	7	0	150	0	0	496	1163	2	38	21	165	145	64	63	0	0	0	0
28	SARKI BAKA BAPTIST HEALTH CENTER	138	423	3	0	0	0	0	0	0	0	138	0	0	375	1125	3	19	18	117	91	72	61	0	0	0	0
29	BAPTIST HOSPITAL MUTENGNE	968	3819	4	15	12	0	0	0	0	0	941	0	0	998	3426	3	97	99	239	207	183	160	0	0	0	0
30	BAFIA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	48	132	3	0	0	0	0	0	0	0	48	0	0	171	246	1	14	14	50	51	14	29	0	0	0	0
32	KUMBA BAPTIST HEALTH CENTER	571	1431	3	0	0	0	0	0	2	0	569	0	0	508	1051	2	50	65	162	116	49	61	0	0	0	0
33	MBOPPI BAPTIST HOSPITAL	3734	14330	4	12	6	0	0	0	0	0	3417	0	275	2606	10733	4	621	581	516	402	252	234	0	0	0	0
34	BAPTIST HEALTH CENTER BONABERI	662	2481	4	8	11	0	0	0	0	0	640	0	3	662	2472	4	58	66	150	112	104	110	26	36	0	0
35	KRIBI BAPTIST HEALTH CENTER	256	512	2	1	3	0	0	0	0	0	229	0	0	44	176	4	6	3	8	6	9	10	0	2	0	0
36	ETOUG-EBE BAPTISTHOSPITAL YDE	0	0	-	0	0	0	0	0	0	0	0	0	0	29	352	-	1	2	10	4	9	3	0	0	0	0
37	EKOUNOU BAPTIST HEALTH CENTER	367	599	2	1	1	0	1	0	0	0	214	0	59	26	62	2	1	0	11	6	4	4	0	0	0	0
38	NKOABANG BAPTIST HEALTH CENTER	182	90	-	126	134	0	0	0	0	0	257	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
39	VOUNDOU BAPTIST HEALTH CENTER	156	324	2	0	0	0	0	0	7	0	149	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0
		11900	39406	3	211	215	1	1	0	37	0	11296	0	392	11428	40435	4	1335	1225	2822	2281	1838	1757	55	53	8	3

Appendix 3 – Surgical and Medical Admissions

SN	NAME	SURGICAL WARD												MEDICAL WARD															
		ADMISSIONS	HOSP DAYS	AV. STAY	<1		1-5		6-15		16-45		>45		ADMISSIONS	HOSP DAYS	AV. STAY	<1		1-5		6-15		16-45		>45			
					M	F	M	F	M	F	M	F	M	F				M	F	M	F	M	F	M	F	M	F	M	F
		7106	39747	6	39	24	104	90	228	195	1718	1617	1722	1393	21370	80081	4	251	250	626	572	565	704	4457	6925	3531	4794		
1	BANSO BAPTIST HOSPITAL	565	7620	13	0	0	0	0	0	0	171	103	234	133	1176	13009	11	0	0	0	0	0	0	292	311	333	353		
2	BANGOLAN BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	687	1828	3	17	13	66	69	79	90	52	136	45	93		
3	JIKIJEM BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	323	1005	3	0	0	0	0	1	2	71	103	59	108		
4	KOUHOUAT BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	532	1566	3	0	0	0	0	0	0	95	189	109	132		
5	KOUSSAM BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	107	382	4	0	0	1	1	0	3	11	46	17	29		
6	LASSIN BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	551	1184	2	11	8	93	84	58	87	39	86	23	62		
7	DUNGER BAPTIST HOSPITAL-MBEM	0	0	-	0	0	0	0	0	0	0	0	0	0	348	1355	4	10	5	27	26	26	31	51	100	27	45		
8	NDU BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	552	1640	3	0	0	0	0	0	0	105	148	123	176		
9	NGEPTANG BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	316	837	3	5	13	18	34	20	49	37	187	41	80		
10	NGOUNSO BAPITIST HEALTH CENTER	76	722	10	0	0	1	0	2	2	14	30	16	11	1135	3856	3	0	0	0	0	0	0	286	428	203	221		
11	NWAT BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	170	508	3	8	10	29	35	17	8	11	36	6	12		
12	ROMKONG BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	352	1206	3	7	13	13	21	13	17	65	100	39	70		
13	MBINGO BAPTIST HOSPITAL	1647	7406	4	21	13	11	20	33	22	358	352	519	298	2373	11791	5	21	8	12	20	59	59	608	514	578	495		
14	AKEH BAPTISH HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	135	295	2	0	0	0	0	0	0	26	71	16	22		
15	ASHONG BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	528	1570	3	0	0	0	0	13	26	97	206	64	132		
16	BAFOUSSAM BAPTIST HEALTH CENTER	273	1017	4	1	0	6	6	16	10	59	81	51	43	1264	4481	4	0	0	0	0	0	0	303	374	256	591		
17	BAYANGAM BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	130	281	2	2	0	9	9	10	15	15	25	18	27		
18	BELO BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	245	993	4	0	0	0	0	0	0	46	88	33	72		
19	FINKWI BAPTIST HEALTH CENTER	45	100	2	0	0	0	0	0	0	0	0	0	0	456	988	2	0	0	0	0	0	0	86	200	56	104		
20	KWIGHE BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	385	1119	3	0	0	0	0	0	0	102	173	47	63		
21	MAMFE BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	506	1274	3	17	14	62	39	30	31	67	100	40	40		
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0		
23	NKWEN BAPTIST HEALTH CENTER	424	1231	3	11	3	13	2	19	4	157	44	129	34	562	2019	4	9	10	52	33	57	61	31	168	18	122		
24	SABGA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	439	959	2	0	0	0	0	0	0	100	172	76	144		
25	BANYO BAPTIST HOSPITAL	158	1227	8	1	0	4	4	13	18	42	38	30	8	602	2162	4	0	0	0	0	0	0	148	250	110	94		
26	ALLAT BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	187	478	3	0	0	0	0	0	0	45	75	28	38		
27	NYAMBOYA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	428	1035	2	0	0	0	0	0	0	80	240	59	55		
28	SARKI BAKA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	427	1281	3	0	0	0	0	0	0	78	203	65	87		
29	BAPTIST HOSPITAL MUTENGENE	1879	11325	6	2	6	43	30	111	65	482	408	367	366	1585	6328	4	0	0	0	0	0	0	412	480	325	368		
30	BAFIA BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0		
31	EKONDOTITI BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	295	405	1	0	0	3	6	3	2	65	195	23	32		
32	KUMBA BAPTIST HEALTH CENTER	129	463	4	3	2	0	0	2	8	8	78	10	18	613	1238	2	0	0	0	0	0	0	155	193	126	146		
33	MBOPPI BAPTIST HOSPITAL	1862	8564	5	0	0	26	28	31	64	425	463	363	462	2186	8981	4	0	0	0	0	0	0	564	565	463	594		
34	BAPTIST HEALTH CENTER BONABERI	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0		
35	KRIBI BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	444	613	1	11	11	58	50	22	39	44	93	19	15		
36	ETOUG-EBE BAPTISTHOSPITAL YDE	0	0	-	0	0	0	0	0	0	0	0	0	0	235	691	3	11	4	47	19	26	30	52	127	26	48		
37	EKOOUNOU BAPTIST HEALTH CENTER	48	72	2	0	0	0	0	1	2	2	20	3	20	895	2248	3	14	18	66	55	71	80	102	322	34	64		
38	NKOABANG BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	201	475	2	108	123	70	71	60	74	116	221	26	60		
39	VOUNDOU BAPTIST HEALTH CENTER	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0		
		7106	39747	6	39	24	104	90	228	195	1718	1617	1722	1393	21370	80081	4	251	250	626	572	565	704	4457	6925	3531	4794		

Appendix 4- Departments

SN	NAME	EYE	X-RAY	PT	ULTRA SOUND	DENTAL	LABORATORY	PHARMACY	CHAPLAINS	DOCTORS	SCREENERS	SOCIAL WORKERS	NUTRITION	CERVICAL CANCER SREENING	ENT	MENTAL HEALTH	PALLIATIVE CARE	KNOW YOUR NUMBERS
		121343	20532	34197	69266	50508	778949	804882	48296	339174	498822	27775	15738	11937	23900	8946	3799	10429
1	BANSO BAPTIST HOSPITAL	4427	2295	2455	4146	2138	24464	34988	8361	9125	8778	2557	732	764	561	1564	115	804
2	BANGOLAN BAPTIST HEALTH CENTER	11	0	0	45	0	2674	3345	1015	350	4044	0	218	0	0	0	0	1
3	JIKIJEM BAPTIST HEALTH CENTER	1615	0	49	522	614	291124	4594	275	918	2103	0	0	0	0	25	0	0
4	KOUHOUAT BAPTIST HEALTH CENTER	194	0	0	92	0	6390	7325	479	127	5996	0	0	0	0	0	0	0
5	KOUSSAM BAPTIST HEALTH CENTER	0	0	0	0	0	1179	1745	0	66	620	0	0	0	0	0	0	0
6	LASSIN BAPTIST HEALTH CENTER	0	0	0	0	0	2609	3248	0	233	2798	243	0	0	0	67	0	0
7	DUNGER BAPTIST HOSPITAL-MBEM	0	0	0	0	0	1357	2274	309	0	1841	0	0	0	0	144	0	0
8	NDU BAPTIST HEALTH CENTER	1017	0	0	0	0	4849	10737	1123	164	8230	0	557	0	0	332	24	368
9	NGEPTANG BAPTIST HEALTH CENTER	0	0	0	0	0	1341	2114	0	0	1846	0	0	0	0	0	0	0
10	NGOUNSO BAPITIST HEALTH CENTER	825	0	646	1974	0	13747	14165	1321	2817	13956	1044	873	0	0	0	0	0
11	NWAT BAPTIST HEALTH CENTER	0	0	0	0	0	1059	1672	0	0	1420	0	0	0	0	0	0	0
12	ROMKONG BAPTIST HEALTH CENTER	0	0	0	0	0	1855	2839	0	0	2695	0	0	0	0	0	0	0
13	MBINGO BAPTIST HOSPITAL	5348	5934	3461	6795	1189	20619	34318	8571	19095	21287	3317	869	1474	3327	2080	2565	540
14	AKEH BAPTISH HEALTH CENTER	0	0	0	0	0	934	1891	0	0	1718	352	0	0	0	59	0	0
15	ASHONG BAPTIST HEALTH CENTER	0	0	0	0	0	2354	3967	548	402	2813	0	0	0	0	0	0	0
16	BAFOUSSAM BAPTIST HEALTH CENTER	11766	169	3140	4474	5068	30100	45351	4589	10990	18020	1355	703	749	725	676	48	2123
17	BAYANGAM BAPTIST HEALTH CENTER	0	0	0	0	0	889	1751	0	0	1653	0	0	0	0	0	0	0
18	BELO BAPTIST HEALTH CENTER	0	0	0	0	0	2319	4255	0	0	3778	0	144	0	0	168	0	0
19	FINKWI BAPTIST HEALTH CENTER	354	0	0	0	0	3968	6757	0	405	5791	0	0	0	0	0	0	0
20	KWIGHE BAPTIST HEALTH CENTER	0	0	0	0	0	1556	2896	0	0	4009	0	0	0	0	105	0	0
21	MAMFE BAPTIST HEALTH CENTER	0	0	0	0	0	2745	5204	408	0	4188	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	12849	469	5661	4683	9648	42415	59438	8073	39570	68219	3765	699	2556	0	2228	4	1618
24	SABGA BAPTIST HEALTH CENTER	0	0	0	1154	0	3115	8463	584	0	4687	430	0	0	0	0	0	96
25	BANYO BAPTIST HOSPISTAL	475	911	1158	2575	582	5683	8540	1057	1091	5671	0	1296	24	0	0	0	437
26	ALLAT BAPTIST HEALTH CENTER	0	0	0	0	0	1300	1357	0	0	1482	0	0	0	0	0	0	0
27	NYAMBOYA BAPTIST HEALTH CENTER	0	0	0	0	0	2934	3658	0	0	2859	0	0	1	0	0	0	0
28	SARKI BAKA BAPTIST HEALTH CENTER	0	0	0	0	0	2563	3259	0	0	3576	0	0	0	0	0	0	0
29	BAPTIST HOSPITAL MUTENGENE	14139	4376	3004	6682	2629	29464	75693	4291	74700	16988	3116	1362	825	1757	0	768	1131
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	36	0	0	1	92	1347	1971	0	0	1702	190	0	3	11	3	0	19
32	KUMBA BAPTIST HEALTH CENTER	3331	0	1976	4102	1217	33742	51016	643	12384	32373	1218	1076	783	0	0	20	214
33	MBOPPI BAPTIST HOSPITAL	26170	5347	6853	16305	7790	99058	175555	2967	106522	117012	3774	4863	2678	8219	1189	240	1093
34	BAPTIST HEALTH CENTER BONABERI	5389	0	119	4303	2207	28724	42384	552	15681	31216	475	0	188	0	0	0	0
35	KRIBI BAPTIST HEALTH CENTER	2367	0	0	1670	610	12148	16018	280	2933	8951	1668	0	430	0	0	0	48
36	ETOUG-EBE BAPTISTHOSPITAL YDE	21445	0	3646	5569	11834	50364	102181	616	22709	60590	2280	1085	1062	7004	40	0	1770
37	EKOUNOU BAPTIST HEALTH CENTER	7360	1031	2029	3246	4890	29207	39651	1397	13274	14581	1460	857	400	2296	266	15	167
38	NKOABANG BAPTIST HEALTH CENTER	2225	0	0	928	0	12934	13691	837	5618	5529	531	0	0	0	0	0	0
39	VOUNDOU BAPTIST HEALTH CENTER	0	0	0	0	0	5819	6571	0	0	5802	0	404	0	0	0	0	0
		121343	20532	34197	69266	50508	778949	804882	48296	339174	498822	27775	15738	11937	23900	8946	3799	10429

Appendix 5 – MCH

SN	NAME	ANC			INFANT WELFARE			PRE-SCHOOL CLINIC			FAMILY PLANNING			TOTAL DELIVERIES	LIVE BIRTH	PRE-TERM	NEOD	BBA	SB	AB	TOTAL ABORTIONS	SPONTANEOUS	INDUCED	CRIMINAL
		NEW	OLD	TOTAL	NEW	OLD	TOTAL	NEW	OLD	TOTAL	NEW	OLD	TOTAL											
		16286	61152	77438	15477	39843	55320	2075	3091	5166	6647	6052	12699	11097	10873	400	99	79	152	378	628	573	37	18
1	BANSO BAPTIST HOSPITAL	398	1726	2124	262	704	966	220	754	974	259	312	571	485	457	54	10	0	29	19	19	17	2	0
2	BANGOLAN BAPTIST HEALTH CENTER	151	467	618	204	1333	1537	99	17	116	29	35	64	149	149	2	0	1	0	8	8	8	0	0
3	JIKIJEM BAPTIST HEALTH CENTER	273	1557	1830	274	1705	1979	8	198	206	95	179	274	227	226	1	0	1	1	4	4	4	0	0
4	KOUHOUAT BAPTIST HEALTH CENTER	258	640	898	153	413	566	59	36	95	63	51	114	121	121	0	0	0	0	6	6	6	0	0
5	KOUSSAM BAPTIST HEALTH CENTER	65	79	144	41	150	191	0	0	0	12	9	21	46	47	2	0	2	0	0	0	0	0	0
6	LASSIN BAPTIST HEALTH CENTER	98	240	338	102	617	719	407	34	441	49	59	108	84	83	2	1	2	1	6	6	6	0	0
7	DUNGER BAPTIST HOSPITAL-MBEM	71	286	357	55	517	572	0	0	0	21	5	26	63	62	0	0	4	1	3	3	3	0	0
8	NDU BAPTIST HEALTH CENTER	138	963	1101	121	718	839	0	0	0	115	226	341	128	125	2	1	2	2	4	4	4	0	0
9	NGEPTANG BAPTIST HEALTH CENTER	84	245	329	186	132	318	151	160	311	54	17	71	77	79	0	0	6	0	3	3	3	0	0
10	NGOUNSO BAPITIST HEALTH CENTER	568	1689	2257	243	350	593	0	0	0	137	103	240	370	355	6	0	8	15	10	10	10	0	0
11	NWAT BAPTIST HEALTH CENTER	64	96	160	59	150	209	49	119	168	64	52	116	50	50	2	1	2	1	2	2	2	0	0
12	ROMKONG BAPTIST HEALTH CENTER	88	380	468	92	478	570	47	20	67	60	46	106	76	76	1	0	1	0	3	4	4	0	0
13	MBINGO BAPTIST HOSPITAL	168	711	879	121	560	681	15	72	87	189	272	461	297	283	25	8	2	10	2	9	9	0	0
14	AKEH BAPTIST HEALTH CENTER	83	353	436	66	218	284	0	0	0	23	24	47	76	76	0	0	1	0	0	0	0	0	0
15	ASHONG BAPTIST HEALTH CENTER	97	193	290	71	146	217	14	20	34	33	46	79	71	60	1	2	0	1	1	6	1	0	5
16	BAFOUSSAM BAPTIST HEALTH CENTER	972	4678	5650	636	1860	2496	127	330	457	271	288	559	780	773	8	1	2	5	25	50	47	3	0
17	BAYANGAM BAPTIST HEALTH CENTER	25	66	91	14	76	90	0	0	0	0	11	11	12	12	0	0	0	0	0	4	3	0	1
18	BELO BAPTIST HEALTH CENTER	171	659	830	236	709	945	89	168	257	63	84	147	155	154	1	0	1	2	0	2	2	0	0
19	FINKWI BAPTIST HEALTH CENTER	183	409	592	169	467	636	12	16	28	86	100	186	144	142	2	0	4	2	6	5	4	1	0
20	KWIGHE BAPTIST HEALTH CENTER	64	146	210	23	97	120	0	0	0	47	45	92	87	80	1	0	1	0	3	6	6	0	0
21	MAMFE BAPTIST HEALTH CENTER	10	12	22	0	1	1	0	0	0	12	10	22	7	4	0	0	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	1081	3542	4623	1781	2799	4580	352	369	721	567	652	1219	385	381	1	0	1	4	12	30	14	8	8
24	SABGA BAPTIST HEALTH CENTER	88	282	370	64	237	301	0	0	0	94	39	133	67	66	0	0	0	1	14	15	14	0	1
25	BANYO BAPTIST HOSPITAL	136	456	592	237	401	638	126	199	325	140	103	243	201	185	0	4	5	5	6	5	5	0	0
26	ALLAT BAPTIST HEALTH CENTER	142	228	370	232	692	924	37	64	101	105	28	133	68	66	1	0	0	2	4	4	3	0	1
27	NYAMBOYA BAPTIST HEALTH CENTER	243	370	613	447	1115	1562	8	43	51	93	43	136	152	133	0	0	2	3	4	4	4	0	0
28	SARKI BAKA BAPTIST HEALTH CENTER	165	231	396	6	10	16	0	0	0	107	17	124	138	130	0	2	2	8	5	8	8	0	0
29	BAPTIST HOSPITAL MUTENGENE	728	3581	4309	587	1505	2092	0	0	0	267	248	515	677	660	11	8	4	9	14	14	10	2	2
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	54	105	159	70	105	175	45	64	109	13	7	20	42	42	0	0	0	0	0	0	0	0	0
32	KUMBA BAPTIST HEALTH CENTER	1050	2697	3747	872	1594	2466	129	267	396	379	304	683	531	526	6	2	8	4	73	84	84	0	0
33	MBOPPI BAPTIST HOSPITAL	3066	14621	17687	5093	6672	11765	0	0	0	1524	1149	2673	3494	3462	223	56	7	32	28	31	31	0	0
34	BAPTIST HEALTH CENTER BONABERI	1544	5290	6834	544	1813	2357	0	0	0	361	59	420	460	459	0	0	2	1	47	50	49	1	0
35	KRIBI BAPTIST HEALTH CENTER	504	1689	2193	376	1003	1379	0	0	0	112	70	182	255	255	6	0	3	0	17	20	20	0	0
36	ETOUG-EBE BAPTISTHOSPITAL YDE	1876	7019	8895	783	6014	6797	0	0	0	597	654	1251	0	0	0	0	0	0	119	116	3	0	0
37	EKOUNOU BAPTIST HEALTH CENTER	898	2935	3833	779	2391	3170	51	141	192	401	530	931	679	673	26	1	2	6	37	82	65	17	0
38	NKOABANG BAPTIST HEALTH CENTER	406	1769	2175	351	1462	1813	30	0	30	99	42	141	290	283	2	2	3	6	12	8	8	0	0
39	VOUNDOU BAPTIST HEALTH CENTER	276	742	1018	127	629	756	0	0	0	106	133	239	153	138	14	0	0	1	0	3	3	0	0
		16286	61152	77438	15477	39843	55320	2075	3091	5166	6647	6052	12699	11097	10873	400	99	79	152	378	628	573	37	18

Appendix 6 – Immunization

SN	NAME	MENINGITIS			BCG			ORAL POLIO 0			PENTA 1			PENTA 2			PENTA 3			PCV13 1		
		AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL
		1299	0	1299	10160	595	10755	10086	535	10621	9468	632	10100	8779	611	9390	8475	584	9059	9382	604	9986
1	BANSO BAPTIST HOSPITAL	0	0	0	303	0	303	352	0	352	302	0	302	245	0	245	230	0	230	265	0	265
2	BANGOLAN BAPTIST HEALTH CENTER	0	0	0	169	0	169	169	0	169	160	11	171	145	13	158	127	10	137	161	9	170
3	JIKIJEM BAPTIST HEALTH CENTER	0	0	0	210	0	210	195	0	195	242	0	242	247	0	247	261	0	261	242	0	242
4	KOUHOUAT BAPTIST HEALTH CENTER	0	0	0	120	0	120	120	0	120	120	0	120	112	0	112	92	0	92	120	0	120
5	KOUSSAM BAPTIST HEALTH CENTER	0	0	0	39	0	39	39	0	39	44	0	44	41	0	41	27	0	27	41	0	41
6	LASSIN BAPTIST HEALTH CENTER	0	0	0	100	0	100	100	0	100	82	0	82	96	0	96	103	0	103	82	0	82
7	DUNGER BAPTIST HOSPITAL-MBEM	0	0	0	54	0	54	61	0	61	71	0	71	78	0	78	85	0	85	66	0	66
8	NDU BAPTIST HEALTH CENTER	0	0	0	137	0	137	137	0	137	154	0	154	148	0	148	166	0	166	147	0	147
9	NGEPTANG BAPTIST HEALTH CENTER	0	0	0	134	33	167	134	37	171	85	48	133	86	71	157	90	67	157	85	48	133
10	NGOUNSO BAPTIST HEALTH CENTER	10	0	10	223	0	223	166	0	166	219	0	219	158	0	158	144	0	144	209	0	209
11	NWAT BAPTIST HEALTH CENTER	0	0	0	50	8	58	26	8	34	41	9	50	36	4	40	30	8	38	41	10	51
12	ROMKONG BAPTIST HEALTH CENTER	0	0	0	90	0	90	92	0	92	76	29	105	81	50	131	87	34	121	76	29	105
13	MBINGO BAPTIST HOSPITAL	0	0	0	121	0	121	261	0	261	136	0	136	111	0	111	127	0	127	136	0	136
14	AKEH BAPTIST HEALTH CENTER	0	0	0	76	0	76	76	0	76	70	0	70	59	0	59	49	0	49	70	0	70
15	ASHONG BAPTIST HEALTH CENTER	0	0	0	52	0	52	48	0	48	38	0	38	41	0	41	27	0	27	38	0	38
16	BAFOUSSAM BAPTIST HEALTH CENTER	208	0	208	528	0	528	488	0	488	448	0	448	394	0	394	374	0	374	442	0	442
17	BAYANGAM BAPTIST HEALTH CENTER	0	0	0	17	0	17	21	0	21	20	0	20	27	0	27	23	0	23	21	0	21
18	BELO BAPTIST HEALTH CENTER	0	0	0	167	0	167	150	0	150	124	0	124	136	0	136	154	0	154	124	0	124
19	FINKWI BAPTIST HEALTH CENTER	0	0	0	137	0	137	116	0	116	150	0	150	142	0	142	149	0	149	150	0	150
20	KWIGHE BAPTIST HEALTH CENTER	0	0	0	83	13	96	83	13	96	79	22	101	70	10	80	51	11	62	79	23	102
21	MAMFE BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	100	0	100	365	0	365	360	0	360	494	0	494	486	0	486	490	0	490	494	0	494
24	SABGA BAPTIST HEALTH CENTER	0	0	0	51	0	51	53	0	53	48	3	51	53	9	62	52	2	54	48	3	51
25	BANYO BAPTIST HOSPITAL	0	0	0	145	10	155	153	5	158	131	11	142	127	8	135	129	4	133	136	11	147
26	ALLAT BAPTIST HEALTH CENTER	0	0	0	114	382	496	94	395	489	58	358	416	76	297	373	54	307	361	32	261	293
27	NYAMBOYA BAPTIST HEALTH CENTER	0	0	0	246	53	299	151	40	191	240	55	295	251	66	317	195	59	254	240	55	295
28	SARKI BAKA BAPTIST HEALTH CENTER	0	0	0	45	96	141	56	37	93	44	86	130	40	83	123	36	82	118	44	86	130
29	BAPTIST HOSPITAL MUTENGNE	310	0	310	587	0	587	587	0	587	413	0	413	384	0	384	407	0	407	413	0	413
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	0	0	0	53	0	53	48	0	48	36	0	36	29	0	29	29	0	29	37	0	37
32	KUMBA BAPTIST HEALTH CENTER	0	0	0	637	0	637	637	0	637	589	0	589	502	0	502	421	0	421	589	0	589
33	MBOPPI BAPTIST HOSPITAL	309	0	309	2795	0	2795	2795	0	2795	1872	0	1872	1597	0	1597	1539	0	1539	1872	0	1872
34	BAPTIST HEALTH CENTER BONABERI	131	0	131	534	0	534	534	0	534	689	0	689	505	0	505	450	0	450	689	69	758
35	KRIBI BAPTIST HEALTH CENTER	0	0	0	231	0	231	231	0	231	248	0	248	250	0	250	253	0	253	248	0	248
36	ETOUG-EBE BAPTIST HOSPITAL YDE	200	0	200	559	0	559	559	0	559	884	0	884	999	0	999	1040	0	1040	884	0	884
37	EKOUNOU BAPTIST HEALTH CENTER	31	0	31	571	0	571	571	0	571	572	0	572	557	0	557	521	0	521	572	0	572
38	NKOABANG BAPTIST HEALTH CENTER	0	0	0	245	0	245	251	0	251	311	0	311	321	0	321	313	0	313	311	0	311
39	VOUNDOU BAPTIST HEALTH CENTER	0	0	0	172	0	172	172	0	172	178	0	178	149	0	149	150	0	150	178	0	178
		1299	0	1299	10160	595	10755	10086	535	10621	9468	632	10100	8779	611	9390	8475	584	9059	9382	604	9986

SN	NAME	PCV13 2			PCV13 3			ROTARIX 1			ROTARIX 2			ORAL POLIO 1			ORAL POLIO 2			ORAL POLIO 3		
		AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL
		8737	553	9290	8455	509	8964	9103	528	9631	8617	458	9075	9264	618	9882	8739	570	9309	8434	522	8956
1	BANSO BAPTIST HOSPITAL	246	0	246	243	0	243	259	0	259	239	0	239	260	0	260	245	0	245	228	0	228
2	BANGOLAN BAPTIST HEALTH CENTER	144	10	154	128	10	138	161	8	169	145	10	155	158	10	168	145	11	156	123	11	134
3	JIKIJEM BAPTIST HEALTH CENTER	247	0	247	261	0	261	242	0	242	246	0	246	242	0	242	255	0	255	261	0	261
4	KOUHOUAT BAPTIST HEALTH CENTER	112	0	112	92	0	92	118	0	118	116	0	116	120	0	120	112	0	112	92	0	92
5	KOUSSAM BAPTIST HEALTH CENTER	38	0	38	26	0	26	44	0	44	41	0	41	44	0	44	41	0	41	36	0	36
6	LASSIN BAPTIST HEALTH CENTER	94	0	94	103	0	103	82	0	82	78	0	78	82	0	82	96	0	96	103	0	103
7	DUNGER BAPTIST HOSPITAL-MBEM	70	0	70	78	0	78	60	0	60	65	0	65	70	0	70	78	0	78	74	0	74
8	NDU BAPTIST HEALTH CENTER	144	0	144	163	0	163	147	0	147	144	0	144	154	0	154	148	0	148	166	0	166
9	NGEPTANG BAPTIST HEALTH CENTER	86	71	157	79	66	145	93	37	130	80	69	149	78	48	126	83	66	149	79	63	142
10	NGOUNSO BAPITIST HEALTH CENTER	158	0	158	144	0	144	224	0	224	152	0	152	200	0	200	167	0	167	144	0	144
11	NWAT BAPTIST HEALTH CENTER	36	5	41	30	6	36	41	10	51	36	5	41	35	10	45	36	5	41	30	6	36
12	ROMKONG BAPTIST HEALTH CENTER	81	50	131	87	34	121	75	29	104	84	50	134	69	32	101	80	47	127	89	34	123
13	MBINGO BAPTIST HOSPITAL	109	0	109	131	0	131	126	0	126	109	0	109	125	0	125	102	0	102	127	0	127
14	AKEH BAPTISH HEALTH CENTER	59	0	59	55	0	55	70	0	70	62	0	62	70	0	70	59	0	59	49	0	49
15	ASHONG BAPTIST HEALTH CENTER	41	0	41	27	0	27	34	0	34	35	0	35	38	0	38	30	0	30	31	0	31
16	BAFOUSSAM BAPTIST HEALTH CENTER	394	0	394	374	0	374	393	0	393	394	0	394	438	0	438	394	0	394	376	0	376
17	BAYANGAM BAPTIST HEALTH CENTER	27	0	27	22	0	22	19	0	19	30	0	30	20	0	20	26	0	26	19	0	19
18	BELO BAPTIST HEALTH CENTER	136	0	136	154	0	154	107	0	107	128	0	128	124	10	134	137	0	137	157	0	157
19	FINKWI BAPTIST HEALTH CENTER	142	0	142	149	0	149	141	0	141	146	0	146	140	0	140	124	0	124	152	0	152
20	KWIGHE BAPTIST HEALTH CENTER	70	9	79	51	11	62	79	23	102	70	4	74	79	9	88	64	9	73	52	11	63
21	MAMFE BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	486	0	486	480	0	480	466	0	466	480	0	480	470	0	470	468	0	468	469	0	469
24	SABGA BAPTIST HEALTH CENTER	53	9	62	52	2	54	51	3	54	53	9	62	46	7	53	53	10	63	52	12	64
25	BANYO BAPTIST HOSPITAL	121	8	129	129	4	133	126	12	138	107	7	114	117	11	128	131	7	138	126	4	130
26	ALLAT BAPTIST HEALTH CENTER	60	232	292	38	233	271	48	281	329	55	168	223	47	327	374	67	256	323	41	238	279
27	NYAMBOYA BAPTIST HEALTH CENTER	251	66	317	195	61	256	219	38	257	214	40	254	240	55	295	251	66	317	195	61	256
28	SARKI BAKA BAPTIST HEALTH CENTER	40	93	133	36	82	118	44	86	130	41	93	134	44	86	130	40	93	133	36	82	118
29	BAPTIST HOSPITAL MUTENGENE	384	0	384	407	0	407	413	0	413	384	0	384	413	0	413	384	0	384	407	0	407
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	29	0	29	31	0	31	39	1	40	24	3	27	36	1	37	29	0	29	37	0	37
32	KUMBA BAPTIST HEALTH CENTER	502	0	502	421	0	421	589	0	589	502	0	502	589	0	589	502	0	502	421	0	421
33	MBOPPI BAPTIST HOSPITAL	1596	0	1596	1542	0	1542	1740	0	1740	1602	0	1602	1872	0	1872	1599	0	1599	1539	0	1539
34	BAPTIST HEALTH CENTER BONABERI	505	0	505	450	0	450	689	0	689	505	0	505	689	0	689	505	0	505	450	0	450
35	KRIBI BAPTIST HEALTH CENTER	250	0	250	253	0	253	248	0	248	250	0	250	248	0	248	250	0	250	253	0	253
36	ETOUG-EBE BAPTISTHOSPITAL YDE	999	0	999	1040	0	1040	884	0	884	1004	0	1004	882	0	882	1002	0	1002	1040	0	1040
37	EKOUNOU BAPTIST HEALTH CENTER	557	0	557	521	0	521	572	0	572	557	0	557	572	0	572	554	0	554	522	0	522
38	NKOABANG BAPTIST HEALTH CENTER	321	0	321	313	0	313	283	0	283	295	0	295	295	0	295	321	0	321	313	0	313
39	VOUNDOU BAPTIST HEALTH CENTER	149	0	149	150	0	150	177	0	177	144	0	144	158	12	170	161	0	161	145	0	145
		8737	553	9290	8455	509	8964	9103	528	9631	8617	458	9075	9264	618	9882	8739	570	9309	8434	522	8956

SN	NAME	IPV			VIT A 6 to 11			VIT A 12+++			VIT A 12 POST PARTUM			MEASELS			YELLOW FEVER			TT1		
		AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL
		7950	349	8299	7156	214	7370	4831	159	4990	8472	58	8530	7551	517	8068	7507	480	7987	9336	176	9512
1	BANSO BAPTIST HOSPITAL	218	0	218	166	0	166	90	0	90	337	0	337	260	0	260	260	0	260	159	0	159
2	BANGOLAN BAPTIST HEALTH CENTER	128	11	139	93	10	103	13	4	17	149	0	149	80	9	89	80	9	89	164	0	164
3	JIKIJEM BAPTIST HEALTH CENTER	253	0	253	233	0	233	147	0	147	236	0	236	230	0	230	199	0	199	121	0	121
4	KOUHOUAT BAPTIST HEALTH CENTER	89	0	89	67	0	67	4	0	4	10	0	10	71	0	71	71	0	71	103	0	103
5	KOUSSAM BAPTIST HEALTH CENTER	25	0	25	29	0	29	10	0	10	23	0	23	23	0	23	29	0	29	58	0	58
6	LASSIN BAPTIST HEALTH CENTER	103	0	103	83	0	83	107	0	107	82	0	82	97	0	97	97	0	97	63	0	63
7	DUNGER BAPTIST HOSPITAL-MBEM	66	0	66	69	0	69	9	0	9	6	0	6	71	0	71	71	0	71	54	0	54
8	NDU BAPTIST HEALTH CENTER	167	0	167	137	0	137	85	0	85	133	0	133	189	0	189	168	0	168	72	0	72
9	NGEPTANG BAPTIST HEALTH CENTER	71	59	130	9	0	9	4	0	4	8	0	8	81	51	132	81	51	132	16	4	20
10	NGOUNSO BAPITIST HEALTH CENTER	100	0	100	61	0	61	2	0	2	0	0	0	97	0	97	97	0	97	268	0	268
11	NWAT BAPTIST HEALTH CENTER	30	5	35	20	0	20	0	0	0	38	0	38	31	0	31	39	0	39	61	2	63
12	ROMKONG BAPTIST HEALTH CENTER	83	34	117	62	15	77	29	10	39	76	6	82	57	53	110	55	52	107	52	0	52
13	MBINGO BAPTIST HOSPITAL	127	0	127	28	0	28	19	0	19	169	0	169	109	0	109	109	0	109	61	0	61
14	AKEH BAPTISH HEALTH CENTER	49	0	49	14	0	14	8	0	8	99	0	99	37	0	37	36	0	36	30	0	30
15	ASHONG BAPTIST HEALTH CENTER	22	0	22	28	0	28	3	0	3	53	0	53	33	0	33	29	0	29	151	10	161
16	BAFOUSSAM BAPTIST HEALTH CENTER	276	0	276	249	0	249	136	0	136	529	0	529	218	0	218	214	0	214	378	0	378
17	BAYANGAM BAPTIST HEALTH CENTER	17	0	17	23	0	23	4	0	4	13	0	13	12	0	12	12	0	12	16	0	16
18	BELO BAPTIST HEALTH CENTER	100	0	100	115	0	115	76	0	76	148	0	148	136	0	136	130	0	130	160	0	160
19	FINKWI BAPTIST HEALTH CENTER	54	0	54	80	0	80	67	0	67	134	0	134	107	0	107	115	0	115	90	0	90
20	KWIGHE BAPTIST HEALTH CENTER	54	11	65	30	2	32	26	1	27	86	0	86	52	10	62	57	10	67	24	2	26
21	MAMFE BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	449	0	449	479	0	479	447	0	447	226	0	226	575	0	575	575	0	575	609	0	609
24	SABGA BAPTIST HEALTH CENTER	36	0	36	9	4	13	11	0	11	9	0	9	66	3	69	61	3	64	62	0	62
25	BANYO BAPTIST HOSPITAL	100	0	100	91	2	93	24	27	51	166	0	166	65	0	65	65	0	65	65	0	65
26	ALLAT BAPTIST HEALTH CENTER	55	170	225	28	67	95	14	25	39	31	32	63	71	285	356	47	250	297	40	141	181
27	NYAMBOYA BAPTIST HEALTH CENTER	183	59	242	186	49	235	1	23	24	147	0	147	160	32	192	160	32	192	134	0	134
28	SARKI BAKA BAPTIST HEALTH CENTER	0	0	0	38	65	103	24	69	93	138	20	158	58	74	132	58	73	131	131	17	148
29	BAPTIST HOSPITAL MUTENGENE	407	0	407	365	0	365	354	0	354	662	0	662	303	0	303	303	0	303	376	0	376
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	34	0	34	27	0	27	11	0	11	28	0	28	10	0	10	12	0	12	50	0	50
32	KUMBA BAPTIST HEALTH CENTER	421	0	421	444	0	444	623	0	623	522	0	522	395	0	395	395	0	395	929	0	929
33	MBOPPI BAPTIST HOSPITAL	1593	0	1593	1470	0	1470	1386	0	1386	3171	0	3171	1496	0	1496	1524	0	1524	1513	0	1513
34	BAPTIST HEALTH CENTER BONABERI	427	0	427	323	0	323	79	0	79	370	0	370	102	0	102	102	0	102	981	0	981
35	KRIBI BAPTIST HEALTH CENTER	253	0	253	195	0	195	74	0	74	230	0	230	156	0	156	156	0	156	381	0	381
36	ETOUG-EBE BAPTISTHOSPITAL YDE	970	0	970	1052	0	1052	682	0	682	27	0	27	1258	0	1258	1258	0	1258	1045	0	1045
37	EKOUNOU BAPTIST HEALTH CENTER	521	0	521	465	0	465	131	0	131	294	0	294	414	0	414	405	0	405	553	0	553
38	NKOABANG BAPTIST HEALTH CENTER	308	0	308	299	0	299	89	0	89	122	0	122	311	0	311	307	0	307	205	0	205
39	VOUNDOU BAPTIST HEALTH CENTER	161	0	161	89	0	89	42	0	42	0	0	0	120	0	120	130	0	130	161	0	161
		7950	349	8299	7156	214	7370	4831	159	4990	8472	58	8530	7551	517	8068	7507	480	7987	9336	176	9512

NAME	TT2			TT3			TT4			TT5			HPV			HEPATITIS B			TOTAL VACCINS
	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	AT FACILITY	OUTREACH	TOTAL	
	7263	89	7352	2774	19	2793	1088	8	1096	656	1	657	639	317	956	5391	0	5391	199318
BANSO BAPTIST HOSPITAL	296	0	296	45	0	45	7	0	7	8	0	8	0	0	0	84	0	84	5347
BANGOLAN BAPTIST HEALTH CENTER	129	0	129	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2927
JIKIJEM BAPTIST HEALTH CENTER	92	0	92	32	0	32	17	0	17	8	0	8	0	0	0	0	0	0	4719
KOUHOUAT BAPTIST HEALTH CENTER	60	0	60	85	0	85	10	0	10	6	0	6	0	0	0	0	0	0	2022
KOUSSAM BAPTIST HEALTH CENTER	42	0	42	6	0	6	0	0	0	0	0	0	0	0	0	0	0	0	746
LASSIN BAPTIST HEALTH CENTER	67	0	67	39	0	39	7	0	7	7	0	7	0	0	0	2	0	2	1955
DUNGER BAPTIST HOSPITAL-MBEM	70	0	70	2	0	2	0	0	0	0	0	0	0	0	0	2	0	2	1330
NDU BAPTIST HEALTH CENTER	50	0	50	17	0	17	3	0	3	3	0	3	2	0	2	5	0	5	2986
NGEPTANG BAPTIST HEALTH CENTER	10	11	21	9	0	9	1	1	2	1	0	1	4	0	4	6	0	6	2394
NGOUNSO BAPITIST HEALTH CENTER	101	0	101	17	0	17	6	0	6	1	0	1	9	0	9	55	0	55	3132
NWAT BAPTIST HEALTH CENTER	31	4	35	2	0	2	0	0	0	0	0	0	0	0	0	2	0	2	827
ROMKONG BAPTIST HEALTH CENTER	40	0	40	22	0	22	1	0	1	1	0	1	0	0	0	0	0	0	2133
MBINGO BAPTIST HOSPITAL	47	0	47	34	0	34	39	0	39	31	0	31	0	0	0	0	0	0	2494
AKEH BAPTISH HEALTH CENTER	14	0	14	3	0	3	0	0	0	0	0	0	0	0	0	8	0	8	1122
ASHONG BAPTIST HEALTH CENTER	46	6	52	2	0	2	3	0	3	2	0	2	0	0	0	8	0	8	876
BAFOUSSAM BAPTIST HEALTH CENTER	309	0	309	96	0	96	6	0	6	1	0	1	56	3	59	170	0	170	8286
BAYANGAM BAPTIST HEALTH CENTER	14	0	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	403
BELO BAPTIST HEALTH CENTER	133	0	133	66	0	66	0	0	0	14	0	14	29	0	29	85	0	85	3000
FINKWI BAPTIST HEALTH CENTER	49	0	49	8	0	8	4	0	4	1	0	1	2	0	2	3	0	3	2552
KWIGHE BAPTIST HEALTH CENTER	10	2	12	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	1457
MAMFE BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NKWEN BAPTIST HEALTH CENTER	470	0	470	199	0	199	94	0	94	95	0	95	59	0	59	671	0	671	11056
SABGA BAPTIST HEALTH CENTER	39	1	40	15	0	15	1	0	1	5	0	5	3	0	3	4	0	4	1066
BANYO BAPTIST HOSPITAL	91	0	91	10	0	10	2	0	2	2	0	2	9	0	9	29	0	29	2528
ALLAT BAPTIST HEALTH CENTER	23	48	71	0	12	12	0	6	6	0	1	1	30	314	344	0	0	0	6209
NYAMBOYA BAPTIST HEALTH CENTER	87	0	87	48	0	48	22	0	22	3	0	3	0	0	0	14	0	14	4943
SARKI BAKA BAPTIST HEALTH CENTER	81	17	98	11	5	16	7	1	8	6	0	6	0	0	0	0	0	0	2524
BAPTIST HOSPITAL MUTENGNE	303	0	303	157	0	157	104	0	104	52	0	52	0	0	0	503	0	503	9782
BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
EKONDOTITI BAPTIST HEALTH CENTER	32	0	32	5	0	5	2	0	2	1	0	1	0	0	0	32	0	32	706
KUMBA BAPTIST HEALTH CENTER	469	0	469	123	0	123	17	0	17	14	0	14	0	0	0	17	0	17	11270
MBOPPI BAPTIST HOSPITAL	1564	0	1564	942	0	942	516	0	516	260	0	260	210	0	210	1443	0	1443	41357
BAPTIST HEALTH CENTER BONABERI	700	0	700	176	0	176	71	0	71	44	0	44	0	0	0	353	0	353	11122
KRIBI BAPTIST HEALTH CENTER	252	0	252	144	0	144	14	0	14	7	0	7	11	0	11	27	0	27	5113
ETOUG-EBE BAPTISTHOSPITAL YDE	1027	0	1027	352	0	352	125	0	125	69	0	69	149	0	149	1222	0	1222	21212
EKOUNOU BAPTIST HEALTH CENTER	317	0	317	66	0	66	1	0	1	1	0	1	66	0	66	551	0	551	11035
NKOABANG BAPTIST HEALTH CENTER	130	0	130	30	0	30	8	0	8	13	0	13	0	0	0	85	0	85	5800
VOUNDOU BAPTIST HEALTH CENTER	68	0	68	11	0	11	0	0	0	0	0	0	0	0	0	10	0	10	2887
	7263	89	7352	2774	19	2793	1088	8	1096	656	1	657	639	317	956	5391	0	5391	199318

Appendix 7 – Surgeries and Notifiable Diseases

SN	NAME	MINOR	MAJOR	TOTAL	NEONATAL TETANUS	LEPROSY	YELLOW FEVER	CEREBROSPINAL MENINGITIS	HUMAN RABIES	TUBERCULOSIS	CHOLERA	TYPHOID FEVER	POLIOMYELITIS	MEASLES
		26642	7999	34641	4	2	0	10	2	994	0	6424	0	4
1	BANSO BAPTIST HOSPITAL	2081	800	2881	0	0	0	0	2	87	0	25	0	0
2	BANGOLAN BAPTIST HEALTH CENTER	570	0	570	0	0	0	0	0	1	0	20	0	0
3	JIJIJEM BAPTIST HEALTH CENTER	431	3	434	0	0	0	1	0	1	0	40	0	0
4	KOUHOUAT BAPTIST HEALTH CENTER	205	0	205	0	0	0	0	0	3	0	0	0	0
5	KOUSSAM BAPTIST HEALTH CENTER	55	0	55	0	0	0	0	0	0	0	18	0	0
6	LASSIN BAPTIST HEALTH CENTER	265	0	265	4	0	0	0	0	0	0	0	0	0
7	DUNGER BAPTIST HOSPITAL-MBEM	40	0	40	0	0	0	0	0	0	0	0	0	0
8	NDU BAPTIST HEALTH CENTER	185	0	185	0	0	0	0	0	4	0	0	0	0
9	NGEPTANG BAPTIST HEALTH CENTER	132	3	135	0	0	0	0	0	0	0	4	0	0
10	NGOUNSO BAPTIST HEALTH CENTER	428	128	556	0	0	0	0	0	3	0	71	0	0
11	NWAT BAPTIST HEALTH CENTER	96	0	96	0	0	0	0	0	0	0	0	0	0
12	ROMKONG BAPTIST HEALTH CENTER	465	0	465	0	0	0	0	0	2	0	9	0	0
13	MBINGO BAPTIST HOSPITAL	2774	2591	5365	0	2	0	6	0	265	0	32	0	0
14	AKEH BAPTIST HEALTH CENTER	47	0	47	0	0	0	0	0	0	0	0	0	0
15	ASHONG BAPTIST HEALTH CENTER	165	0	165	0	0	0	0	0	1	0	59	0	0
16	BAFOUSSAM BAPTIST HEALTH CENTER	1253	512	1765	0	0	0	0	0	1	0	0	0	0
17	BAYANGAM BAPTIST HEALTH CENTER	17	0	17	0	0	0	0	0	0	0	0	0	0
18	BELO BAPTIST HEALTH CENTER	300	0	300	0	0	0	0	0	0	0	0	0	0
19	FINKWI BAPTIST HEALTH CENTER	298	0	298	0	0	0	0	0	0	0	14	0	0
20	KWIGHE BAPTIST HEALTH CENTER	206	0	206	0	0	0	0	0	0	0	0	0	0
21	MAMFE BAPTIST HEALTH CENTER	71	0	71	0	0	0	0	0	0	0	6	0	0
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0
23	NKWEN BAPTIST HEALTH CENTER	2195	214	2409	0	0	0	3	0	80	0	705	0	1
24	SABGA BAPTIST HEALTH CENTER	287	0	287	0	0	0	0	0	0	0	0	0	0
25	BANYO BAPTIST HOSPITAL	341	190	531	0	0	0	0	0	9	0	51	0	1
26	ALLAT BAPTIST HEALTH CENTER	65	0	65	0	0	0	0	0	0	0	20	0	0
27	NYAMBOYA BAPTIST HEALTH CENTER	148	0	148	0	0	0	0	0	1	0	0	0	0
28	SARKI BAKA BAPTIST HEALTH CENTER	66	0	66	0	0	0	0	0	0	0	83	0	1
29	BAPTIST HOSPITAL MUTENGNE	3799	1290	5089	0	0	0	0	0	177	0	65	0	0
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0
31	EKONDOTITI BAPTIST HEALTH CENTER	17	0	17	0	0	0	0	0	0	0	80	0	0
32	KUMBA BAPTIST HEALTH CENTER	1451	100	1551	0	0	0	0	0	48	0	0	0	0
33	MBOPPI BAPTIST HOSPITAL	5160	2120	7280	0	0	0	0	0	240	0	0	0	0
34	BAPTIST HEALTH CENTER BONABERI	205	0	205	0	0	0	0	0	5	0	1375	0	1
35	KRIBI BAPTIST HEALTH CENTER	156	0	156	0	0	0	0	0	1	0	105	0	0
36	ETOUG-EBE BAPTIST HOSPITAL YDE	1702	0	1702	0	0	0	0	0	57	0	1358	0	0
37	EKOUNOU BAPTIST HEALTH CENTER	660	24	684	0	0	0	0	0	3	0	875	0	0
38	NKOABANG BAPTIST HEALTH CENTER	226	24	250	0	0	0	0	0	2	0	1390	0	0
39	VOUNDOU BAPTIST HEALTH CENTER	80	0	80	0	0	0	0	0	3	0	19	0	0
		26642	7999	34641	4	2	0	10	2	994	0	6424	0	4

Appendix 8 – HIV Tests

SN	NAME	BLOOD DONORS		PATIENTS		AGE GROUP/SEX OF POSITIVE CASES OF HIV														TOTAL HIV+
						<1		1-5		6-15		16-45		>45		TOTAL				
		HIV+	HIV-	HIV+	HIV-	M	F	M	F	M	F	M	F	M	F	M	F			
		106	11020	4181	93661	15	11	29	35	54	88	1021	1900	403	447	1522	2481	4003		
1	BANSO BAPTIST HOSPITAL	6	640	177	12469	2	3	4	5	2	5	59	69	17	18	84	100	184		
2	BANGOLAN BAPTIST HEALTH CENTER	0	27	51	2462	0	0	0	0	1	1	16	21	9	3	26	25	51		
3	JIKIJEM BAPTIST HEALTH CENTER	0	24	15	647	0	1	0	0	0	1	0	6	2	5	2	13	15		
4	KOUHOUAT BAPTIST HEALTH CENTER	18	80	76	498	0	0	0	0	0	0	7	7	3	3	10	10	20		
5	KOUSSAM BAPTIST HEALTH CENTER	0	14	2	175	0	0	0	0	0	0	1	0	1	0	2	0	2		
6	LASSIN BAPTIST HEALTH CENTER	0	35	14	241	3	0	0	0	0	2	0	4	3	2	6	8	14		
7	DUNGER BAPTIST HOSPITAL-MBEM	0	19	7	71	0	0	0	0	0	0	0	3	3	1	3	4	7		
8	NDU BAPTIST HEALTH CENTER	3	31	106	759	0	0	1	0	0	6	7	17	1	3	9	26	35		
9	NGEPTANG BAPTIST HEALTH CENTER	0	9	7	453	0	0	0	0	0	0	2	2	0	3	2	5	7		
10	NGOUNSO BAPITIST HEALTH CENTER	23	527	74	774	0	0	0	0	0	0	26	41	14	5	40	46	86		
11	NWAT BAPTIST HEALTH CENTER	0	26	10	121	0	0	0	0	0	0	3	7	0	0	3	7	10		
12	ROMKONG BAPTIST HEALTH CENTER	0	0	9	537	0	0	0	0	0	0	7	2	0	0	7	2	9		
13	MBINGO BAPTIST HOSPITAL	7	1915	511	9966	0	0	0	1	0	1	49	57	27	31	76	90	166		
14	AKEH BAPTISH HEALTH CENTER	0	7	12	183	0	0	0	0	0	2	0	3	1	5	1	10	11		
15	ASHONG BAPTIST HEALTH CENTER	0	16	29	331	0	0	1	0	0	0	7	7	9	5	17	12	29		
16	BAFOUSSAM BAPTIST HEALTH CENTER	1	236	141	2240	1	0	1	1	9	10	34	48	28	22	73	81	154		
17	BAYANGAM BAPTIST HEALTH CENTER	0	1	7	256	0	0	0	0	0	1	4	2	0	0	4	3	7		
18	BELO BAPTIST HEALTH CENTER	0	6	39	928	0	0	0	0	0	0	14	16	3	3	17	19	36		
19	FINKWI BAPTIST HEALTH CENTER	0	25	38	1055	0	0	2	2	0	0	6	12	7	4	15	18	33		
20	KWIGHE BAPTIST HEALTH CENTER	0	2	12	950	0	0	0	0	0	0	5	6	1	0	6	6	12		
21	MAMFE BAPTIST HEALTH CENTER	0	7	9	269	0	0	0	0	1	0	1	5	2	0	4	5	9		
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
23	NKWEN BAPTIST HEALTH CENTER	3	140	293	4770	0	0	1	4	6	21	66	146	25	25	98	196	294		
24	SABGA BAPTIST HEALTH CENTER	0	9	17	726	0	0	0	1	0	1	3	8	4	3	7	13	20		
25	BANYO BAPTIST HOSPITAL	2	156	45	429	0	0	1	0	0	0	10	19	8	7	19	26	45		
26	ALLAT BAPTIST HEALTH CENTER	1	45	17	596	0	0	0	0	0	0	8	7	1	2	9	9	18		
27	NYAMBOYA BAPTIST HEALTH CENTER	0	187	12	647	0	0	0	0	0	0	3	7	0	2	3	9	12		
28	SARKI BAKA BAPTIST HEALTH CENTER	0	25	18	236	0	0	0	0	0	1	3	9	5	0	8	10	18		
29	BAPTIST HOSPITAL MUTENGENE	22	4000	370	4681	1	1	2	4	4	3	113	176	37	43	157	227	384		
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
31	EKONDOTITI BAPTIST HEALTH CENTER	0	17	20	135	0	0	0	0	0	0	5	15	0	0	5	15	20		
32	KUMBA BAPTIST HEALTH CENTER	1	255	388	8627	2	0	3	3	4	8	84	208	36	52	129	271	400		
33	MBOPPI BAPTIST HOSPITAL	9	1877	636	17620	0	0	3	0	7	3	168	294	64	106	242	403	645		
34	BAPTIST HEALTH CENTER BONABERI	0	1	187	3238	0	1	0	2	3	6	33	106	16	20	52	135	187		
35	KRIBI BAPTIST HEALTH CENTER	0	64	105	1372	0	1	0	0	1	1	28	55	5	7	34	64	98		
36	ETOUG-EBE BAPTISTHOSPITAL YDE	0	0	335	8066	1	2	1	2	3	7	75	194	26	21	106	226	332		
37	EKOUNOU BAPTIST HEALTH CENTER	1	96	202	3728	5	2	9	7	13	4	123	236	31	29	181	278	459		
38	NKOABANG BAPTIST HEALTH CENTER	9	322	134	2404	0	0	0	1	0	3	37	61	7	9	44	74	118		
39	VOUNDOU BAPTIST HEALTH CENTER	0	179	56	1001	0	0	0	2	0	1	14	24	7	8	21	35	56		
		106	11020	4181	93661	15	11	29	35	54	88	1021	1900	403	447	1522	2481	4003		

[illegible]

Appendix 10 - Diabetes

SN	NAME	ABETES BY NEW AND OLD				TYPE		DRUG			AGE GROUP/SEX DISTRIBUTION													
						ONE	TWO	ORA	INJ	DIET	<1	1-5	6-15		16-45		>45		TOTAL					
		NEW		OLD									M	F	M	F	M	F	M	F	M	F	M	F
		M	F	M	F																			
		984	1282	8241	13489	2772	17327	16915	3160	6946	0	0	5	1	38	30	1911	2858	7189	11138	9143	14027		
1	BANSO BAPTIST HOSPITAL	3	7	215	590	18	242	335	150	241	0	0	0	0	0	2	43	62	174	581	217	645		
2	BANGOLAN BAPTIST HEALTH CENTER	20	28	47	89	40	139	133	47	4	0	0	0	0	1	0	20	52	48	61	69	113		
3	JIKIJEM BAPTIST HEALTH CENTER	10	12	119	154	0	159	93	30	0	0	0	0	0	0	0	17	10	112	141	129	151		
4	KOUHOUAT BAPTIST HEALTH CENTER	60	61	254	346	128	597	567	42	0	0	0	0	0	0	0	56	60	256	351	312	411		
5	KOUSSAM BAPTIST HEALTH CENTER	10	6	19	39	3	72	65	13	8	0	0	0	0	0	0	5	9	22	40	27	49		
6	LASSIN BAPTIST HEALTH CENTER	2	1	14	36	10	33	30	17	0	0	0	0	0	0	1	9	13	7	22	16	36		
7	DUNGER BAPTIST HOSPITAL-MBEM	1	0	3	21	8	3	14	0	0	0	0	0	0	0	0	0	3	4	18	4	21		
8	NDU BAPTIST HEALTH CENTER	10	17	275	415	50	635	471	30	0	0	0	0	0	0	0	3	17	283	418	286	435		
9	NGEPTANG BAPTIST HEALTH CENTER	0	6	31	80	0	12	80	37	17	0	0	0	0	0	0	3	12	29	64	32	76		
10	NGOUNSO BAPITIST HEALTH CENTER	69	57	72	123	0	20	256	36	0	0	0	1	0	15	10	71	57	88	122	175	189		
11	NWAT BAPTIST HEALTH CENTER	1	0	39	40	6	73	73	7	0	0	0	0	0	0	1	3	6	37	33	40	40		
12	ROMKONG BAPTIST HEALTH CENTER	20	30	67	146	26	236	162	38	24	0	0	0	0	0	0	12	11	70	154	82	165		
13	MBINGO BAPTIST HOSPITAL	21	17	138	154	0	350	335	37	328	0	0	0	0	0	0	23	43	136	148	159	191		
14	AKEH BAPTISH HEALTH CENTER	1	3	8	24	0	31	26	0	6	0	0	0	0	0	0	0	0	9	22	9	22		
15	ASHONG BAPTIST HEALTH CENTER	2	2	22	45	8	43	59	4	50	0	0	0	0	0	3	5	23	20	27	25	53		
16	BAFOUSSAM BAPTIST HEALTH CENTER	143	177	667	1563	0	127	127	0	127	0	0	0	0	1	0	159	168	703	882	863	1050		
17	BAYANGAM BAPTIST HEALTH CENTER	7	11	59	104	0	83	161	23	106	0	0	0	0	0	0	5	24	61	99	66	123		
18	BELO BAPTIST HEALTH CENTER	21	32	59	92	0	123	94	0	77	0	0	0	0	0	0	7	5	72	129	79	134		
19	FINKWI BAPTIST HEALTH CENTER	11	20	60	88	0	23	0	0	74	0	0	0	0	0	0	3	11	77	86	80	97		
20	KWIGHE BAPTIST HEALTH CENTER	7	6	25	55	1	72	42	5	32	0	0	0	0	0	0	15	11	15	40	30	51		
21	MAMFE BAPTIST HEALTH CENTER	0	0	106	130	0	159	46	0	128	0	0	0	0	0	0	4	13	89	104	93	117		
22	NDEMBAYA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
23	NKWEN BAPTIST HEALTH CENTER	105	133	529	692	0	1459	884	435	575	0	0	0	0	0	0	185	260	460	552	645	812		
24	SABGA BAPTIST HEALTH CENTER	0	0	113	198	1	280	266	1	109	0	0	0	0	1	0	14	24	98	174	113	198		
25	BANYO BAPTIST HOSPISTAL	7	4	288	158	42	415	437	15	6	0	0	0	0	0	0	52	42	242	122	294	164		
26	ALLAT BAPTIST HEALTH CENTER	4	0	11	26	7	34	33	8	0	0	0	0	0	0	0	2	6	12	21	14	27		
27	NYAMBOYA BAPTIST HEALTH CENTER	2	2	81	46	11	120	120	11	0	0	0	0	0	0	0	38	13	43	37	81	50		
28	SARKI BAKA BAPTIST HEALTH CENTER	5	4	38	14	0	61	61	0	0	0	0	0	0	0	0	11	4	32	14	43	18		
29	BAPTIST HOSPITAL MUTENGNE	13	17	863	1341	298	1938	1938	298	0	0	0	2	0	3	0	175	308	700	1065	880	1373		
30	BAFIA BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
31	EKONDOTITI BAPTIST HEALTH CENTER	22	38	26	25	0	103	97	8	0	0	0	0	0	0	0	14	13	32	49	46	62		
32	KUMBA BAPTIST HEALTH CENTER	25	43	643	1202	421	1424	1424	421	0	0	0	0	0	0	0	128	190	515	1012	643	1202		
33	MBOPPI BAPTIST HOSPITAL	45	42	897	1543	834	1783	2056	561	2617	0	0	0	0	0	0	259	401	692	1265	951	1666		
34	BAPTIST HEALTH CENTER BONABERI	141	263	344	646	163	1231	1155	183	1303	0	0	2	1	3	9	92	215	363	629	460	854		
35	KRIBI BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	8	23	55	28	63		
36	ETOUG-EBE BAPTISTHOSPITAL YDE	171	220	1266	2215	386	3556	3556	386	1110	0	0	0	0	0	0	344	540	1026	1816	1370	2356		
37	EKOUNOU BAPTIST HEALTH CENTER	12	11	728	949	281	1489	1516	280	4	0	0	0	0	0	0	85	183	567	702	652	885		
38	NKOABANG BAPTIST HEALTH CENTER	13	12	115	100	30	202	203	37	0	0	0	0	0	14	4	44	41	72	83	130	128		
39	VOUNDOU BAPTIST HEALTH CENTER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		984	1282	8241	13489	2772	17327	16915	3160	6946	0	0	5	1	38	30	1911	2858	7189	11138	9143	14027		