

"Striving to deliver accessible and high-quality healthcare services for all, with the goal of transitioning into a zonal hospital as we mark a century of dedicated service to the communities in the southern part of Tanzania."



### **VISION**

# Quality health services accessible to all. MISSION

To respond to Christ command in proclaiming the gospel and healing the sick.

### **CORE VALUES**

We are
Driven By
Our
Values

- To respect, protect and promote life from conception to natural death.
- To attend all patients equally regardless of race, tribe, religion, gender and socio-economic status.
- To value commitment, dedication, discipline, love and respect to all patients and other stake holders.
  - To uphold the spiritual and moral principles of the gospel

# **List of Acronyms and Abbreviations**

ABD	Average Bed Days	
ALOS	Average length of stay	
BOR	Bed Occupancy Rate	
BOT	Board of trustees	
CT- scan	Computer Tomography Scan	
CXR	Chest x-ray	
EHMS	Electronic Health Management System	
HMT	Hospital management team	
ICT	Information and technology	
ICU	Intensive care unit	
IPD	Inpatient Department	
IPV	Inactivated Polio Vaccine	
MR	Measles and Rubella	
NHIF	National health insurance	
NICU	Neonatal intensive care unit	
OBD	Occupied Bed Days	
OPD	Outpatient department	
OPV	Oral Polio Vaccine	
OSB	Order of St. Benedict	
PCV	Packed Cell Volume	
PMORALG	Prime Minister's Offices Regional	
RCH	Administration & Local Government  Reproductive and Child Healthcare	
	,	

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#### **Foreword**

Esteemed Colleagues and Stakeholders,

With great honour I extend my greetings to you in this prelude to our Annual Report 2024. As we approach the dawn of the next chapter in our collective journey, we remain steadfast in our dedication to excellence and the provision of quality health care service accessible to all.

Since 05<sup>th</sup> May 1927, our hospital has been at the forefront of delivering exceptional care to our community, despite of experiencing many challenges and the transformation from being a dispensary to a regional referral hospital.

This annual report is a testament to our dedication to continuous improvement and a proactive approach to the evolving landscape of healthcare provision with ambition of being a zonal hospital by the time we will celebrate 100 years since the establishment of the hospital.

We extend our gratitude to all who have contributed to shaping this comprehensive annual report, to our dedicated staff, to the hospital management team, government and invaluable partners. Your commitment has been instrumental in crafting a roadmap that ensures the sustained growth and success of our hospital.

In the spirit of collaboration, let us continue to bring this facility to life, fostering a culture of excellent service delivery, respect, equality, commitment, dedication, love and discipline in upholding the spiritual and moral principles to respond to Christ's command in proclaiming the gospel by healing the sick.

Br. Dr. Jesaja Michael Sienz OSB Medical Officer in Charge

Fr. Damian Peter Msisiri OSB Hospital Administrator

### Introduction

St. Benedict Ndanda Referral Hospital is a faith-based nonprofit Mission hospital (FBO) owned by the Benedictine Abbey Ndanda, and is part of the network of Catholic Health institutions in Tanzania under the overall supervision of Tanzania Episcopal Conference (TEC)

The hospital is registered by the government of Tanzania through the private hospital Act of 1977 through the Ministry of health Tanzania (As a voluntary Agency Hospital (VAH) under the category of nonprofit service providers with a registration number 093001 of 06.09.1997. The hospital later upgraded and become a Regional Referral Hospital in 2010 as per government gazette notice no. 828 of November 2010. Currently the hospital is run by the Registered Board of Trustees of St. Benedictine Ndanda Referral Hospital as one among the institutions under the Monastery of Benedictine Abbey Ndanda Mtwara. The hospital is run using cost sharing (income from medical service), Government of Tanzania support and grants aids from donors and other stakeholder.

The impressive growth and development of the hospital was contributed to a large extent by its founder the late **Sr. Dr. Thekla Stinnesbeck OSB**, through her mission, passion and entire commitment to strengthen health care delivery in this area. Historically St. Benedict Ndanda Referral Hospital has its history back since 1927, where it was founded by German Missionary Benedictines of the Congregation of St. Ottilien.

This congregation was founded in 1884 and later assigned by the Propaganda Fide (Vatican) to extent its missionary activities to the southern part of Tanganyika, among other missionary's activities established included a small dispensary and later it was expanded to a fully functioning hospital in the 1930s.

### **History since 2010**

2010 The Hospital was accredited by the Ministry of Health and Social Welfare to be among 3 faith-based health facilities to train newly graduated Doctors during their one-year internship period in the hospital.

2011: Handing over of Administration from Mr. Pitty from Holland to Mr. Charles Laizer (first African hospital administrator).

2012: Appointment of Deputy Medical Officer in Charge Dr. Berno Mwambe (Specialist in Gynaecologist and obstetrics) to assist MOI Dr. Crispin Sapuli.

2014: Full Indicators of financial crisis of the hospital noticed from members of the Benedictine congregation.

- 2014: Deputy Doctor Incharge Dr. Berno Mwambe resigned.
- 2015- 2016: Economic crisis and retrenchment process shocked the hospital.
- 2015: MOI Dr. Crispin Sapuli reached retirement age after 15 years of serving as MOI. However, it was renewed as a retired Dr (MOI)
- 2015: Administrator Mr. Charles Laizer went for further studies and resigned; Mr. Kihongwe, who was a health secretary, took over as an administrator of the Hospital.
- 2016: Mr. Kihongwe Plan for retirement age as administrator and hospital Health secretary.
- 2017: Another Change of Administration and management team: Administrator from Mr.

  Kihongwe to Fr. Damian Msisiri OSB. Dr. Sapuli renewed for one year as a Hospital

  MOI and Dr. Wambyakale Stanslaous as Deputy Doctor Incharge
- 2018: Inauguration of Main Hospital strategic plan (2018 2023)
- 2018: Major plan for hospital infrastructure renovations: sewages, rain water systems, corridors
- 2018: Change of MOI from Dr. C. Sapuli to Dr. Stanislaus Wambyakale
- 2019: Renovation of hospital underground water system and sewage was done.
- 2019: Addition of Paediatrics specialist offices and ward renovation.
- 2019: The world was shocked by COVID 19 wave.
- 2020: Major change in management team: MOI: Br. Dr. Jesaja took over from Dr. Wambyakale as a MOI, Dr. Onesmo (MD) as deputy Dr. i/c.
- 2019/2020: New hospital canteen was built part of nursing school garden was occupied.
- 2020: Accomplishing the Main Laboratory building, first floor.
- 2020: Renovation and painting of paediatric ward.
- 2020: Demolishing first hospital wards and New Dialysis, ICU and NICU unit was built.
- 2020: Renovation of TB old ward and establishing of endoscopy unit in the same building.
- 2020: Construction of Dialysis, ICU and NICU unit (newly inaugurated 2020).
- 2020/2021: Oxygen Plant was installed and inaugurated. Oxygen pipelines to theatre, maternity, ICU and NICU were installed.
- 2021: New Private Ward was built and inaugurated by Abbot Christian 2022.
- 2022: Renovation of surgical ward and toilets (ward 2).
- 2022: Terrazo was applied to the corridor between the wards and theatre for smooth transport of patients.
- 2022: Theatre renovation with installation of EPOXY was done in all four theatre

- 2022: Renovation of prosthesis and orthosis department + physiotherapy unit; new machines were installed.
- 2021/22: Renovation of RADIOLOGY unit and installation of CT scan machine.
- 2022: Renovation of RCH and hospital kitchen.
- 2022/2023: Extension of Ndanda COHAS with main hall, refectory, library and computer laboratory.
- 2022: Temporary OPD was prepared and new emergence building was constructed.
- 2023: Inauguration of the new EMD and OPD + administration wing.
- 2023: Renovation of Ward 3 and Ward 4.
- 2023: Renovation of old missionary ward (the first building of the Hospital).
- 2023/24: Renovation of Dental and Eye clinic.
- 2023/24: Renovation of Ward 5.
- 2023/24: Construction of Main hospital entrance canopy and fence, main hospital gate and ambulance parking.

#### Hospital strategic plan of 2023-2024

In order to achieve its **goal of becoming a zonal hospital**, the hospital has set the following priorities areas: Strengthening health services delivery in the southern part of Tanzania, investment in hospital infrastructure, expansion and technological development, quality improvement and customer services, establishing a research center, promotion of environmental care and conservation, financial stewardship, strengthening external relationships and human resource management.

### Location, Accessibility and Status of the Hospital

The hospital is located 38KM from Masasi Town and 160KM from Mtwara region and 560KM from Dar es Salaam. The hospital bed capacity is **300** beds serving an average of more than **99,094** outpatients (OPD) annually and more than **9,219** inpatients (IPD) from different ethnic backgrounds covering three regions of Mtwara, Lindi, Ruvuma with more than 10 districts, with the catchment population of more than **314,778** people and the large service population

of **3,241,029** million people according to 2022 national census, the hospital also serve people from the northern part of Mozambique. The actual bed-capacity is **300** beds now (2024 year).

- The main tribes are: Wamwera, Wamakonde, Yao people, Wanyasa and Wamakua.

  Other tribes are indigenous but emigrated from other regions of the country.
- The main religions in the area are Christian and Muslim.
- The main cash crops in the area are: Cashew Nuts, maize, Pease, beans, Groundnuts, and wheat. Ufuta and Millet,
- The staple food in the area is: maize, cassava, beans, wheat, rice and some millet.

#### Summary

Generally, the hospital is a non-profit, faith-based institution with the target to prevent, cure and to rehabilitate human frailty as a mission of the church in cooperation with the government.

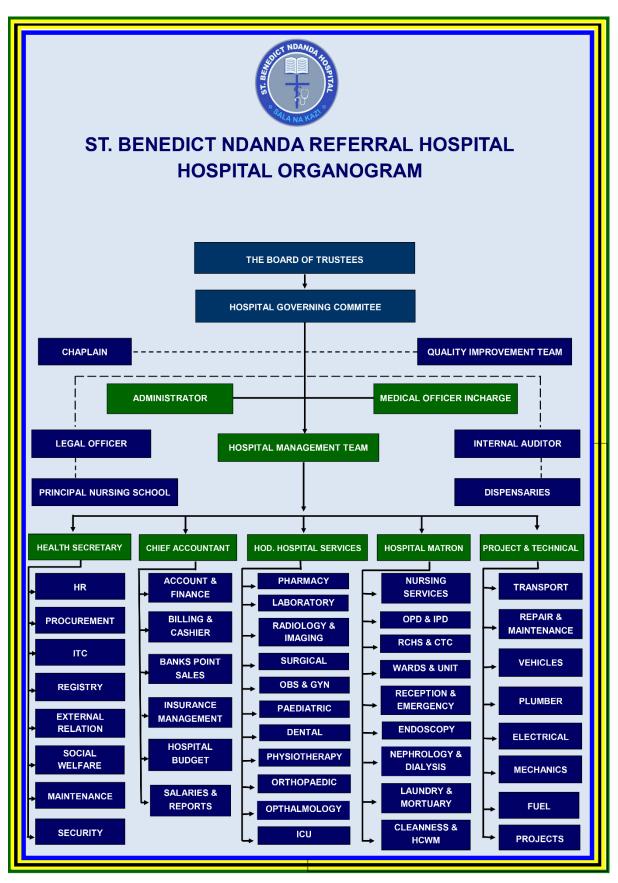
The priority areas of our facility are: Strengthening health services delivery in the southern part of Tanzania, investment in hospital infrastructure and equipment, quality improvement and customer services, development of a training centre for medical professions in southern Tanzania, establishing a research center, promotion of environmental care and conservation, financial stewardship, strengthening external relationships and human resource management.

The hospital also runs its own College (Ndanda COHAS) with a capacity of 300 - 350 study places acquiring a diploma in general nursing care and midwifery, medical laboratory and clinical medicine to be on board by academic year 2024/25.

In 2027 the hospital shall be celebrating 100 years of existence. The Hospital is targeting towards specialized health care services, high-level diagnostic services and therapy programs that are not available in the southern part of the country. One of the strategies is to cooperate with national and zonal hospitals in order to achieve this mission within the next 5 years.

We humbly ask our partners, volunteers, and the Government of Tanzania to keep supporting our efforts and projects.

### **Hospital Organogram**



## **Hospital Governance**

### **Hospital Management Team (HMT) Members**

NAMES	DESIGNATION
Dr. Br. Jesaja Michael Sienz OSB	Doctor in Charge
Fr. Damian Peter Msisiri OSB	Administrator
Joseph Ndukusi Saibulu	Health Secretary
Dr. Hussein Mjaliwa	Director of Hospital Services
Evarist Peter	Human Resource Officer
Andrew Baro	Patron
Victor Kyara	Chief Accountant



Hospital Management Team.

### **Staffing Levels**

The management of St. Benedict Ndanda Referral Hospital has employed qualified, dedicated and well-motivated employees, who are ready to offer quality health care services to every patient regardless of ethnicity, faith or socio-economic status. The total number of employees is 353.

#### 1. STAFFING LEVEL ACCORDING TO CADRES BY END OF 2024

Department	Position	Number
Administration and Support	Administrative Supportive Staff	35
	Office Assistant	9
	Information Technology Officer	3
Doctors and Health Specialists	Medical Doctor	21
	Medical Specialists	8
	Assistant Medical Officer	2
	Clinical Officer	8
Nursing	Assistant Nursing Officer	97
	Nursing Officer	8
	Nurse II	10
Laboratory and Medical	Health Laboratory Scientist	9
Technology	Laboratory Technologist	9
	Assistant Laboratory Technologist	1
	Biomedical Technologist	2
Pharmacy	Pharmacist	2
	Pharmacy Technologist	9
Dental and Alternative	Dental Therapist	1
Medicine	Dental Technologist	1
Rehabilitation and Specialized	Orthosis and Prosthesis Scientists	1
Therapy	Physiotherapist	2
	Optometrist	2

	Radiographer Technologist	1
Other Health Services	Medical Attendant	28
	Nutrition Officer	1
	Mortuary Attendant	2
Total	Total	261

**Of note:** Volunteers and interns are not included

#### 2. EMPLOYEE MANING TABLE

NO	EMPLOYEES	NUMBER	PERCENTAGE (%)
1	SBNRH	221	63
2	PAY 1	34	10
3	SECONDED	6	2
4	VOLUNTEERS	46	13
5	INTERNS	47	13
	TOTAL	353	100

#### 3. GENDER DISTRIBUTION

GENDER	NUMBER OF EMPLOYEES	PERCENTAGES (%)
MALE	139	53
FEMALE	122	47
TOTAL	261	100

Of note: Volunteers and interns are not included

#### 4. AGE DISTRIBUTION

AGE (YEARS)	NUMBER OF EMPLOYEES	PERCENTAGES (%)
17-24	7	3
25-49	218	84
> 50	36	14

TOTAL 261 100
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### **5. EMPLOYMENT STATUS**

EMPLOYMENT TYPE	NUMBER OF EMPLOYEES	PERCENTAGES (%)
Permanent Employees	74	21
Contract Employees	187	53
TOTAL	261	100

### **Long Term Training of Staff**

By end of 2024, the following training programs are being sponsored by our facility:

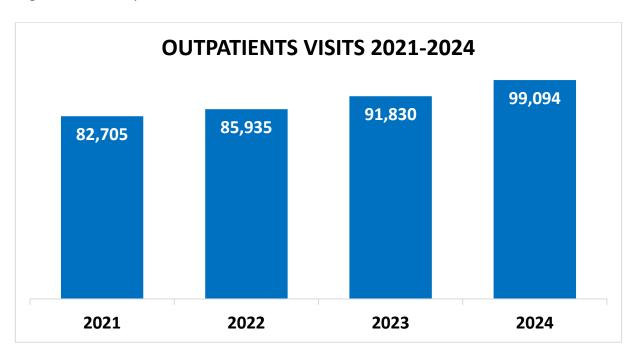
Training Program	University /Collage
MMED Internal Medicine	MUHAS
MMED Internal Medicine	UDOM
MMED Internal Medicine	CUHAS (Bugando)
MMED Internal Medicine	GERMANY
MMED Internal Medicine	GERMANY
MMED Orthopedics	MUHAS
MMED General Surgery	CUHAS
MMED ENT	MUHAS
MMED Oral and Maxillofacial Surgery	MUHAS
Master of Critical Care and Emergency	MUHAS
Bachelor of Pharmaceutical science	KAMPALA UNIVERSITY
Bachelor of science in Nursing and Midwifery	ST JOHN University
Bachelor of science in Nursing and Midwifery	ST JOHN University
Bachelor of science in Nursing and Midwifery	MUHAS
Bachelor of science in Nursing Education	CUHAS (Bugando)
Bachelor of science in Human Nutrition	OUT (Open University)

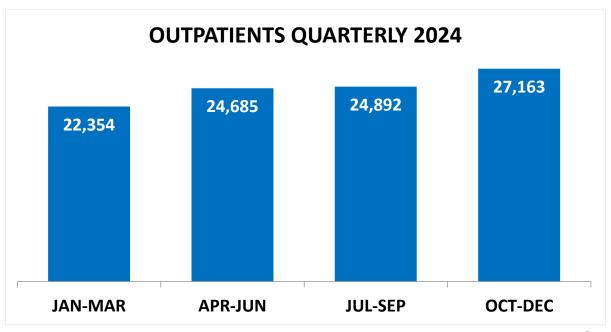
TOTAL	18
Diploma in Radiology	MUHAS
Diploma in Nursing (upgrade course)	NDANDA COHAS

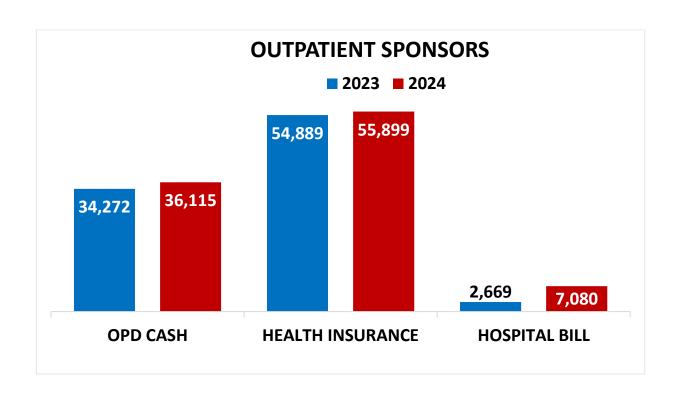
### **HEALTH CARE**

### **Outpatient Department (OPD)**

The following charts indicate the numbers of outpatients, who have registered at our general OPD. The figures also comprise the number of inpatients, because on arrival inpatients are registered like outpatients until the doctor admits them.

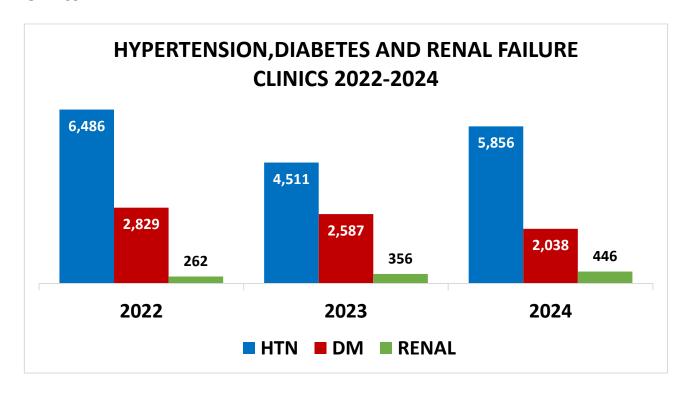


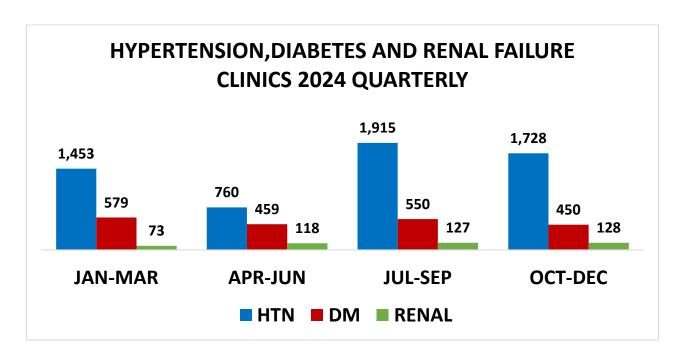




HOSPITAL OUTPATIENTS TOP 10 DIAGNOSIS 2024			
Disease name	Number of cases	Proportion (%)	
Essential Hypertension	15,369	16	
Polyneuropathy	4,678	5	
Lower back pain	3,943	4	
Spondylosis	3,656	4	
Chronic kidney diseases, stage 5	3,450	3	
Acute nasopharyngitis	2,334	2	
Peptic ulcer	2,239	2	
Iron deficiency anaemia	2,131	2	
Disorders of lacrimal gland	2,001	2	
Urinary Tract Infection (UTI)	1,848	2	

### **Clinics**

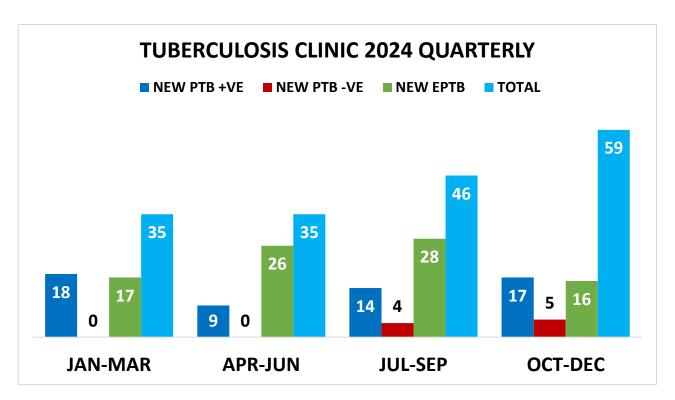


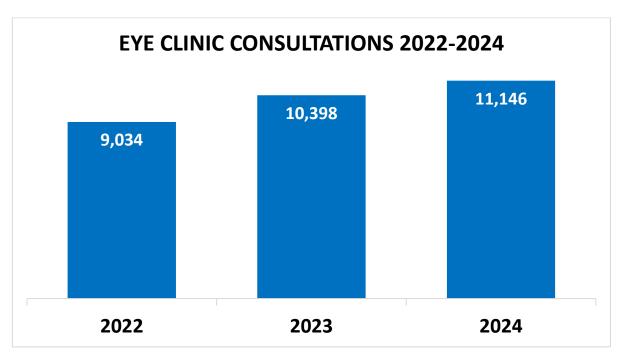


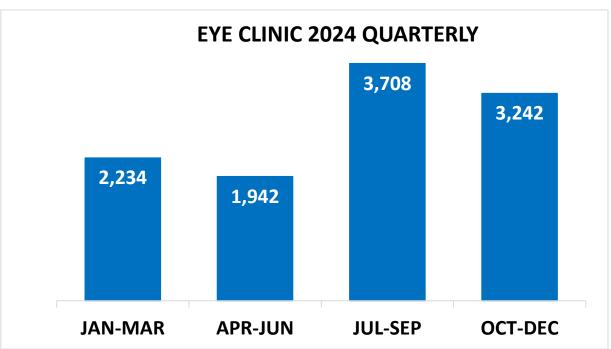
**Comment:** A nephrologist is visiting us from Dar Es Salaam once per month.

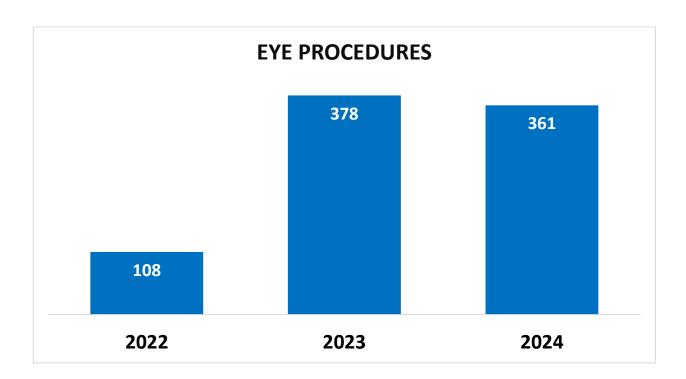


**Comment:** An ENT surgeon and dental surgeon are visiting us regularly from Muhimbili National Hospital.

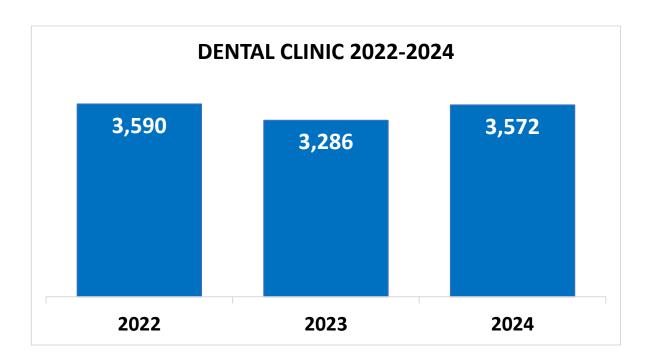


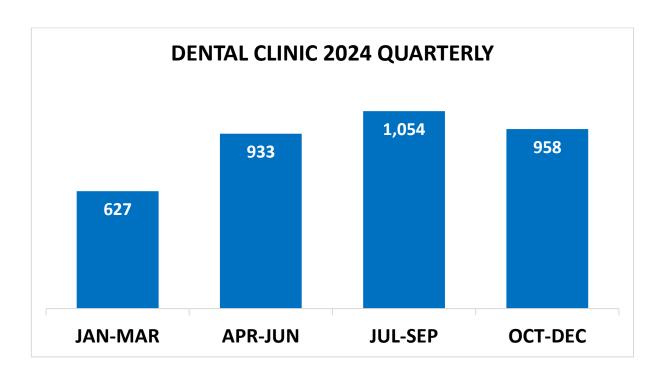






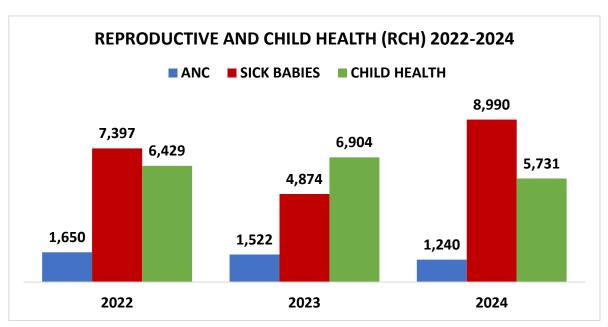
**Comment:** By end of the year 2022, Dr. Hussein Mjaliwa has finished his specialization for ophthalmology at Muhimbili National Hospital, Dar es Salaam. Since January 2023, he is working at our eye clinic, where he is providing specialist consultations and performing procedures like cataract operations.

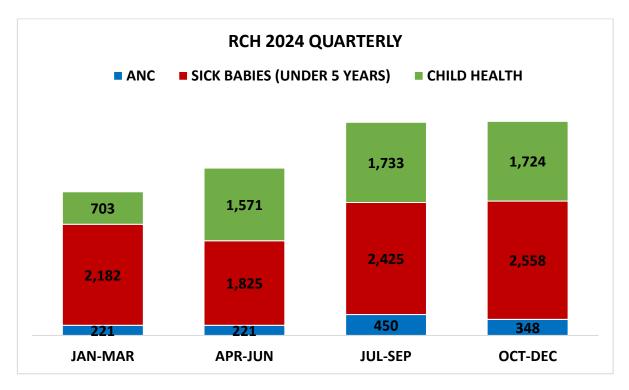




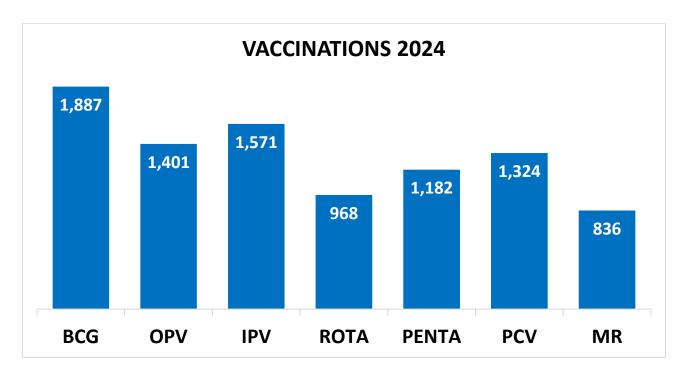
Comment: Our dental surgeon Dr. Romanus Mkepule went for further studies (Masters in Oro-Maxillo-Facial surgery) in October 2024. Fortunately, by that time we have managed to employ a new dental surgeon.

### Reproductive and Child Health Care (RCH)





**Note:** Children who report for Child Health come for malnutrition assessment. This service is free of charge for our patients. The data of the Child Health program is not reflected in our electronic patient management system and therefore not included in the number of attendances at our OPD.

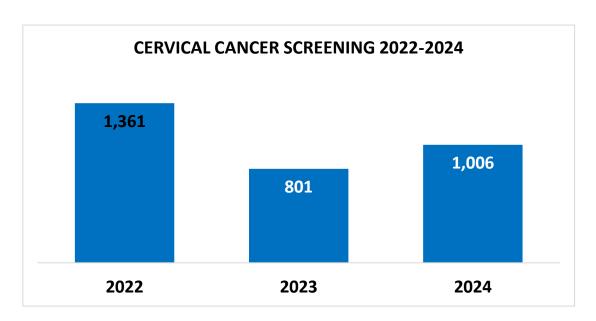


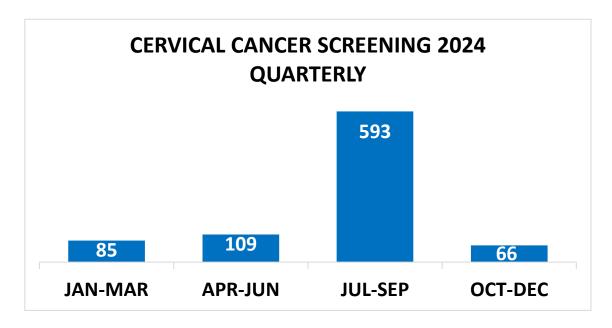
**Abbreviations:** BCG = Vaccination against Tuberculosis, OPV = Oral Polio Vaccine, IPV = Inactivated Polio Vaccine, ROTA = Vaccination against Rota virus, PENTA = Vaccination against

Tetanus, Diphtheria, Pertussis, Hepatitis B, Haemophilus influenza Type B, MR = Vaccination against Measles and Rubella

**Comment:** Vaccinations are provided at our facility in Ndanda (RCH) and at our mobile clinics. Vaccinations are provided free of charge to our clients.

### **Cervical Cancer Screening**

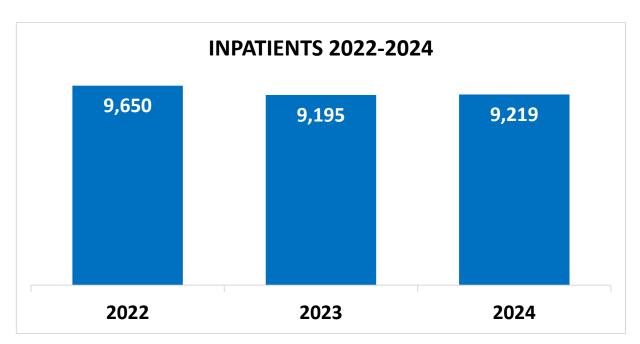


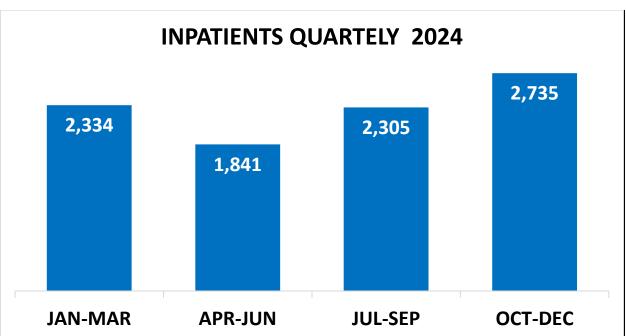


#### Comment:

During the year 2022, we have sent 2 nurses for training of cervical cancer screening to Ocean Road Cancer Institute, Dar Es Salaam. Also, there was a project of outreach to the villages during that year, which was sponsored by US Aid and our own sources. In July 2024 the program was advertised during our St. Benedict Week, also an outreach to 4 villages was performed. Therefore, the number of patients has increased during the 3<sup>rd</sup> quarter of the year 2024.

### **Inpatient Department (IPD)**





### IPD Data 2024

Hospital Bed Capacity	300
Total Admissions	9,219
Total Discharge	7,952
Occupied Bed Days (OBD)	46,986
Average Bed Days (ABD)	82,125
Bed Occupancy Rate (BOR)	57%
Total Death	521
Death Rates (%) per 100 admissions population	5%
Average New Admission per day	25
Average New Admission per month	297
Average Length of Stay (ALOS)	11 days

### **Top Ten Diagnosis of Inpatients 2024**

SN	DISEASE	TOTAL	% of inpatients
1	Surgical Conditions Diseases	534	19 %
2	Road Traffic Accident	465	17%
3	Fracture	444	16%
4	Hypertension Diseases	378	14%
5	Gynecological Diseases	233	9%
6	Diabetes Mellitus	216	8%
7	Renal Failure	138	5%
8	Eye Diseases, non-Infection	118	4%
9	Severe Anaemia	117	4%
10	Cardivascular Disorder	113	4%

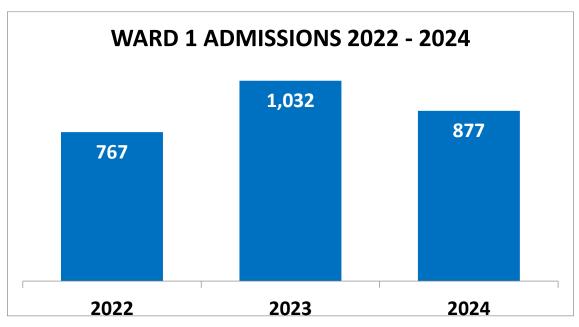
### **Wards Statistics**

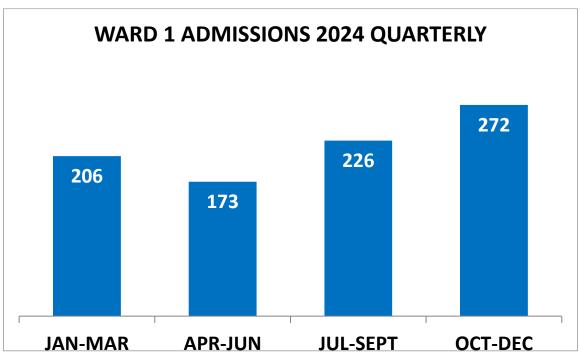
	Ward 1 male surgical	W2 male orthopedi cs	W3 female medic al	W4 male medical		W6 female surgical
Bed occupancy Rate	64%	59%	38%	38%	51%	61%
Ward bed capacity	25	26	18	20	20	22
Admissions	877	435	737	1,078	968	827
Average Admission per month	73	36	61	90	81	69
Death Statistics	84	6	89	111	5	9
Death Rates (%)	3%	1%	11%	13%	1%	2%

Wards	W7 postnatal	W8 Labor&Delive ries	W10 pediatric	W12 private	NICU	ICU
Bed	97%	13%	58%	29%	84%	60%
Occupancy Rate						
Ward Bed capacity	23	11	29	10	17	4
Admission	1,058	1,037	1,087	337	497	337
Average Admission per month	88	86	91	23	41	28
Death Statistics	5	17	54	4	79	58
Death Rates (%)	0.37%	0.37%	0.37%	0.37%	0.37%	0.37%

### Ward 1: Male Surgical Ward

Ward 1 is responsible to admit all male patients above 12 years with general surgical conditions.

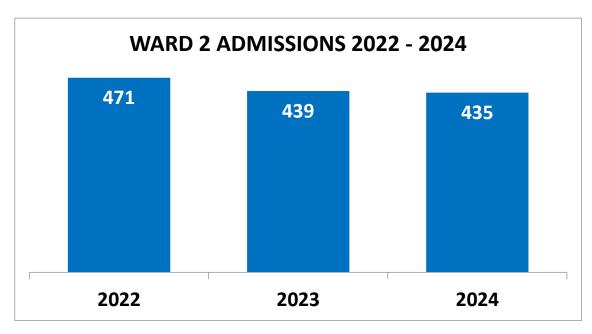


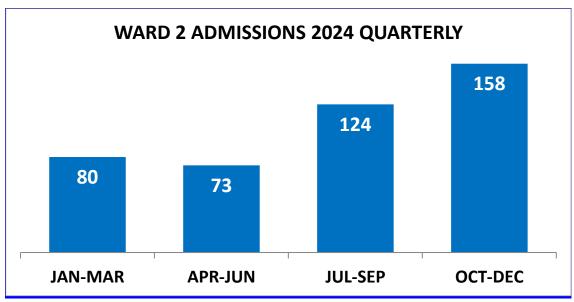


S/N	WARD 1 TOP 5 DISEASES	Cases No
1	Surgical condition diseaese	318
2	Road Traffic Accident	136
3	Hypertension diseases	58
4	Intestinal obstruction	56
5	Hernia	5

### Ward 2: Male Orthopedic Ward

Ward 2 is responsible to admit all male patients above 12 years with surgical orthopedic conditions.

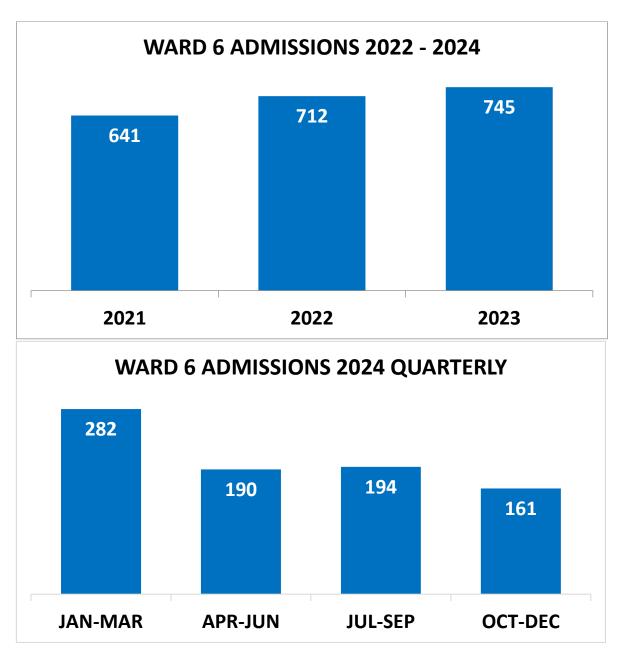




S/N	WARD 2 TOP 5 DISEASES	Cases No
1	Fracture	241
2	Road Traffic Accident	234
3	Surgical Condition	33
4	Osteomyelitis	15
5	Dislocation	8

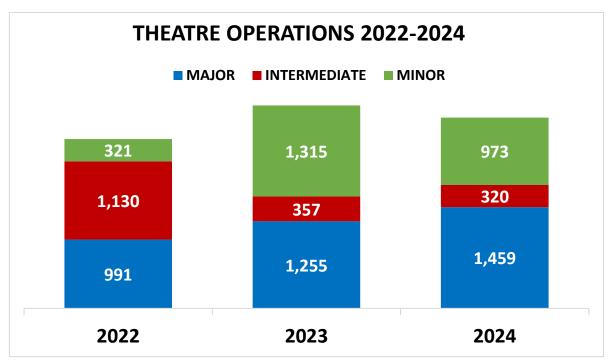
### **Ward 6: Female Surgical Ward**

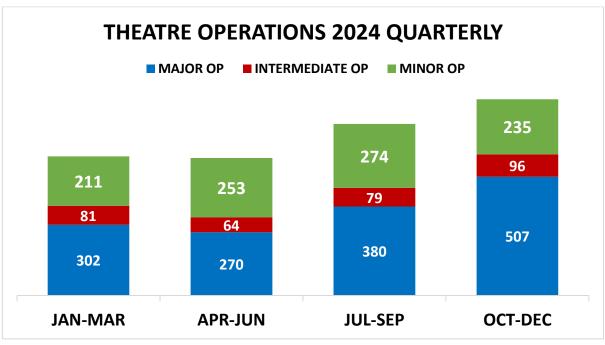
This ward is responsible for admission of female patients above 12 years with surgical conditions (orthopedic and general surgical).



S/N	WARD 6 TOP 5 DISEASES	No
1	Surgical Condition	157
2	Fracture	121
3	Intestinal Obstruction	53
4	Eye diseases non-infections	31
5	Malignant neoplasm of breast	21

#### **Theatre**



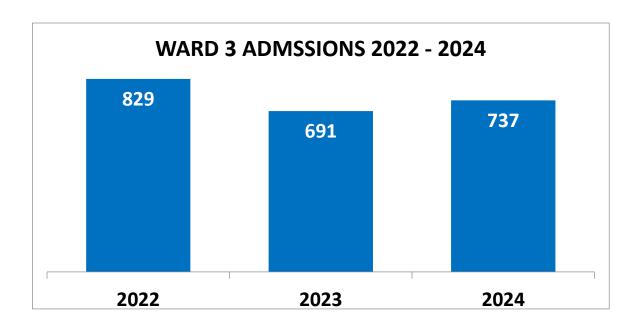


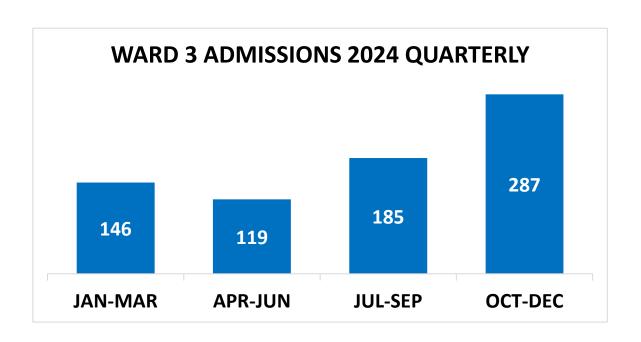
PROCEDURE	NUMBER OF PROCEDURES
General Surgery	1,205

Plating And Screw	178
Kirschner Wiring	51
Intra Medulla Nailing	52
Rush Pin	101
Skeletal Traction	39
Amputation	91
Pop	385
Exploratory Laparotomy Findings	98
Urology	269
Gynecological And Obstetrics	199
Ent	57
Foreign Body Removal	7
Vascular Surgery	20
Total number of surgeries performed	2,752

#### **Ward 3: Female Medical Ward**

Ward 3 is responsible for admission of female patients above 12 years with medical conditions and female patients after ophthalmologist procedures.

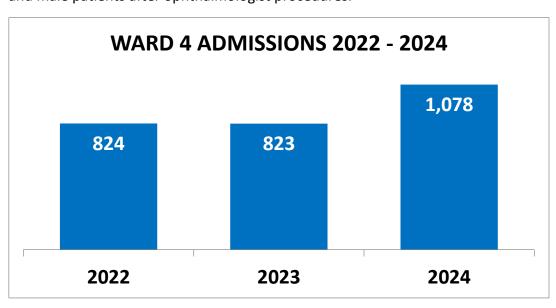


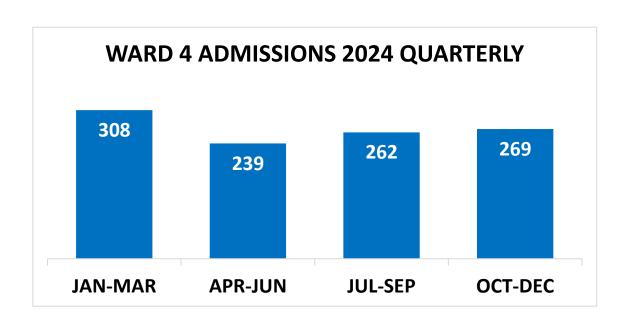


S/N	WARD 3 TOP 5 DISEASES	Cases No
1	Hypertensive urgency/emergency	235
2	Diabetes Mellitus	113
3	Severe Anaemia	78
4	Renal Failure	62
5	HIV/AIDS	54

Ward 4: Male Medical Ward

Ward 4 is responsible for admission of male patients above 12 years with medical conditions and male patients after ophthalmologist procedures.

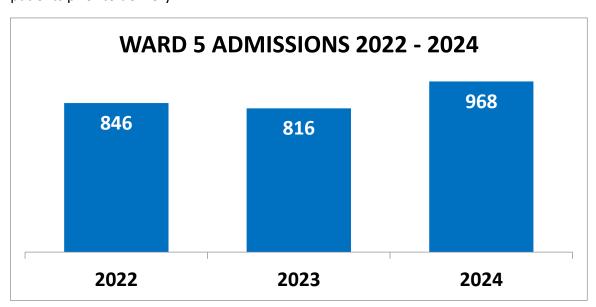


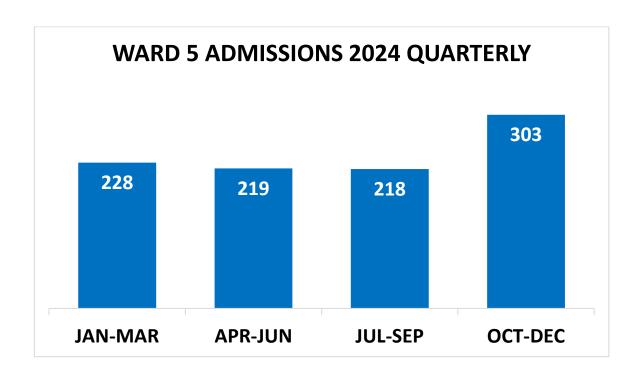


S/N	WARD 4 TOP 5 DISEASES	Cases No
1	Eye diseases, non-infection	118
2	Hypertension diseases	104
3	Cardiovascular Disorder	93
4	Diabetes Mellitus	85
5	Renal Failure Diseases	76

### Ward 5: Gynecological and Ante-Natal ward

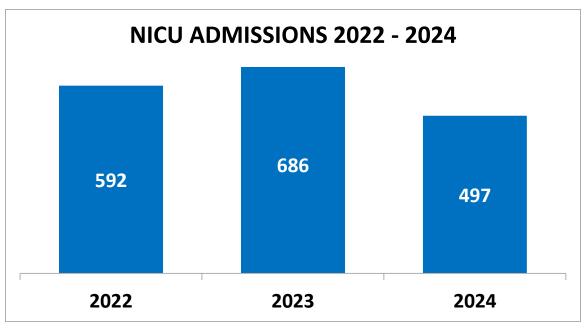
Ward 5 is responsible for admission of female patients with gynecological conditions and for patients prior to delivery.

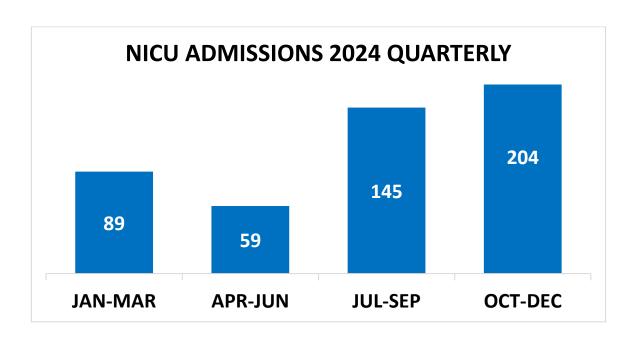




S/N	WARD 5 TOP 5 DISEASES	Cases No
1	Gynecological disease	182
2	Abortion with complication	71
3	Severe Anaemia	26
4	Severe Hypertension	21
5	Malignant Neoplasm of Female Genital Organs	17

# **Neonatal Intensive Care Unit (NICU)**

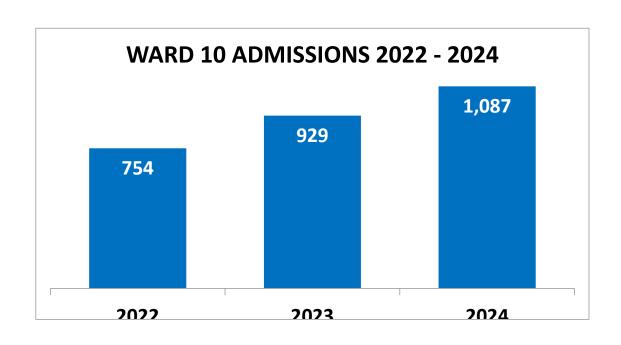


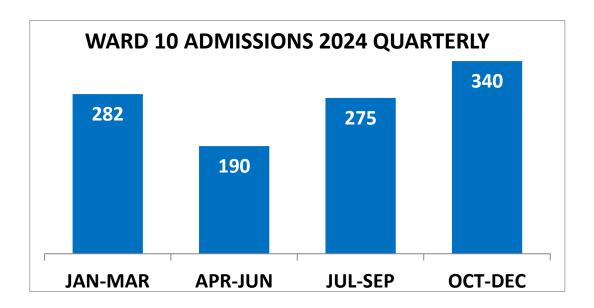


S/N	NICU TOP 5 DISEASES	Cases No
1	Low birth weight and premature complications	195
2	Birth Asphyxia	77
3	Neonatal Septicaemia	54
4	Congenital disorders	33
5	Pneumonia	17

#### Ward 10: Paediatric Ward

Ward 10 is responsible for admission of all children up to 12 years with medical or surgical conditions.

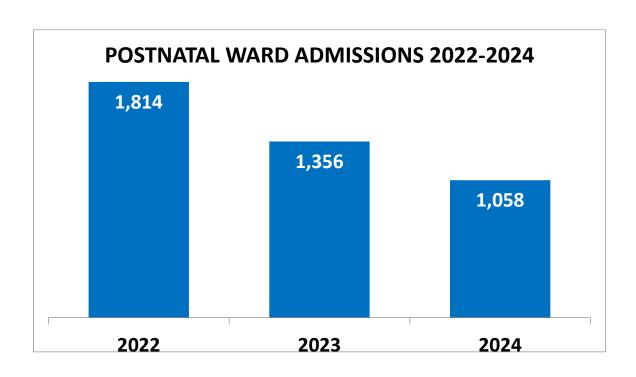


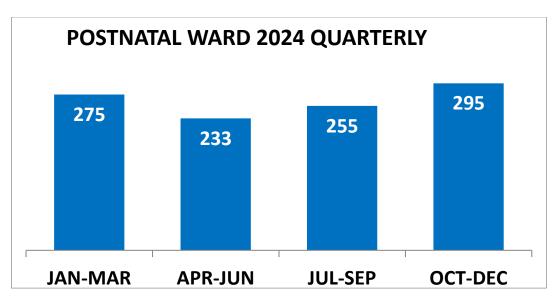


S/N	Pediatric TOP 5 DISEASES	Cases No
1	Acute Diarrhoea	132
2	Severe Pneumonia	97
3	Fracture	73
4	Malaria	64
5	Upper Respiratory Infections	61

Ward 7: Postnatal Ward

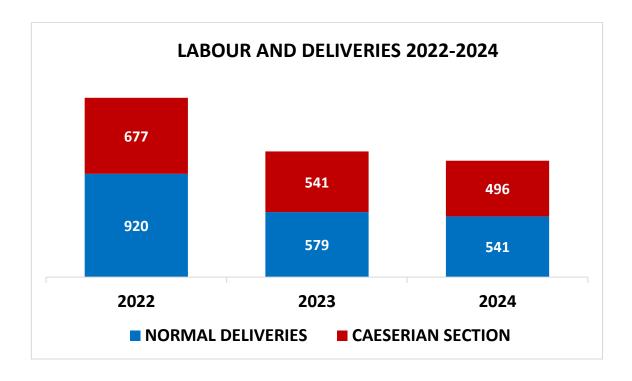
Ward 7 is responsible for patients after delivery.

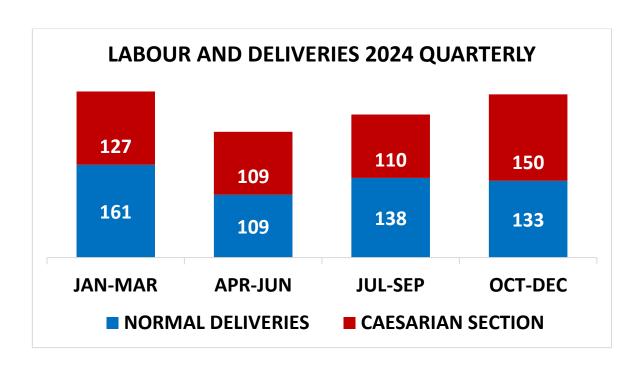




S/N	WARD 7 TOP 5 CASES	Cases No
1	Postnatal care of mothers with HIV	53
2	Anemia (HB <8.5 g/dl)	50
3	Complications after delivery	6
4	Mothers after tubal ligation (BTL)	7
5	Mothers who gave birth before reaching a health facility (BBA)	3

Ward 8: Labour Ward

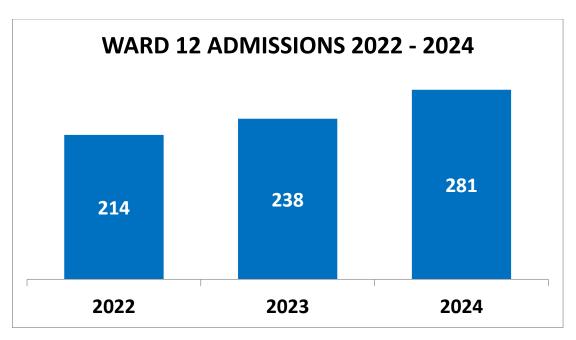


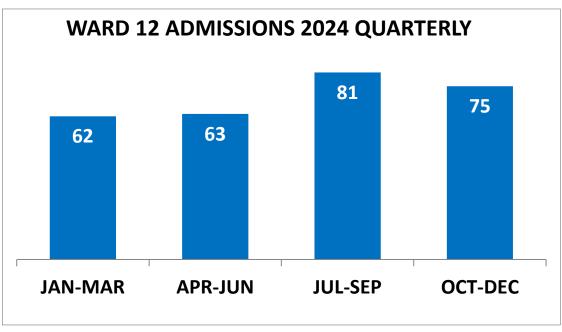


**Comment:** The reason for the decreased number of patients during the years 2023 and 2024 was, that deliveries were provided free of charge at Nyangao Hospital, while at our institute patients had to contribute about 80.000 TSh (equal to about 30 €) for admission and investigations.

Since the end of the year 2024, deliveries are charged again at Nyangao Hospital. Therefore, we expect the number of patients to increase again in 2025.

Ward 12: Private Ward

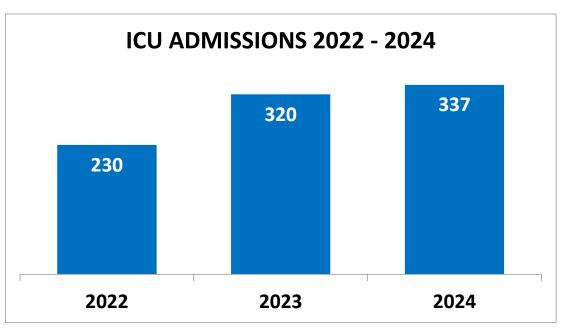


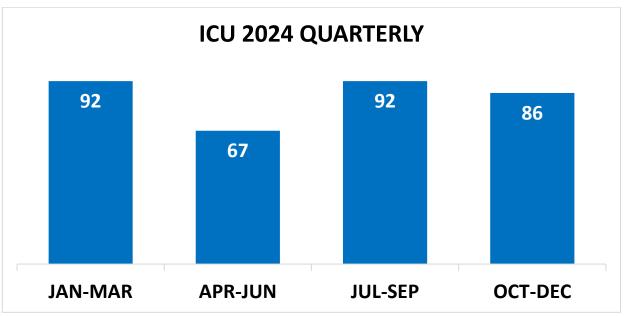


S/N	Private ward TOP 5 DISEASES	Cases No
1	Gynecological Diseases	28

2	Surgical condition	26
3	Severe Hypertension	18
4	Severe Anaemia	13
5	Fracture	9

# **Intensive Care Unit (ICU)**

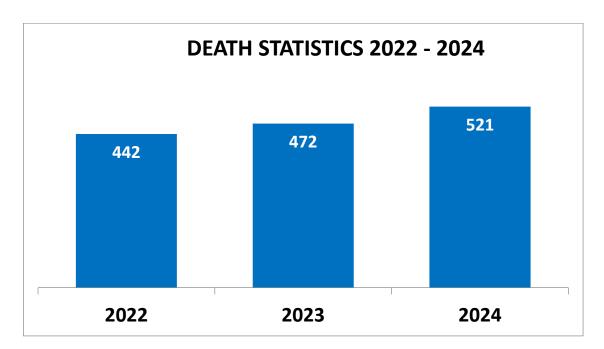


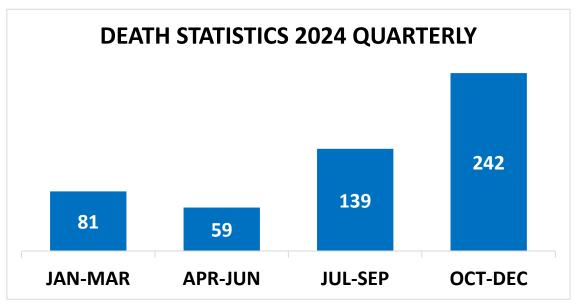


S/N	ICU TOP 5 DISEASES	Cases No
1	Road Traffic Accident	50
2	Surgical condition	45

3	Gynecological Diseases	23
4	Cardiovascular disorders	20
5	Diabetes Mellitus	18

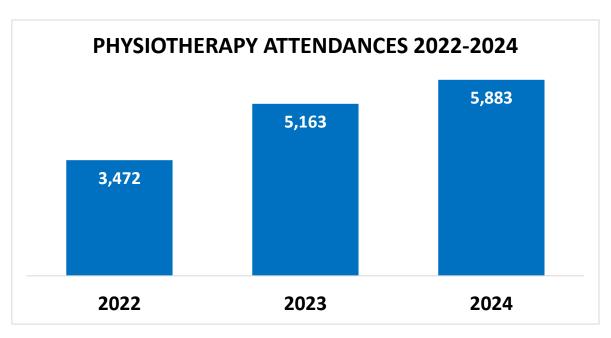
#### **Death Statistics**



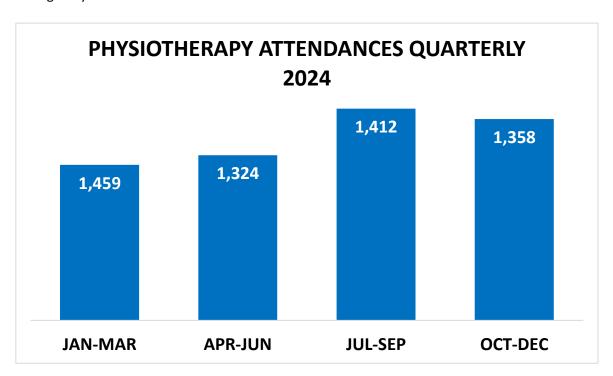


# **Other Supporting Departments**

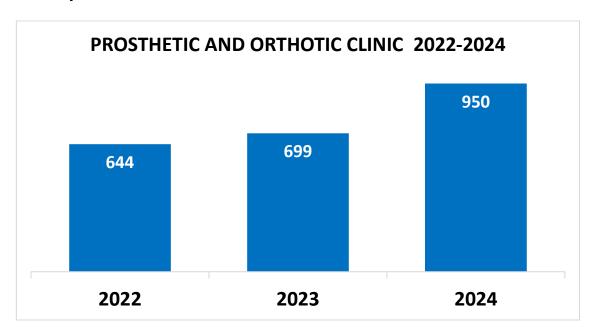
# **Physiotherapy**

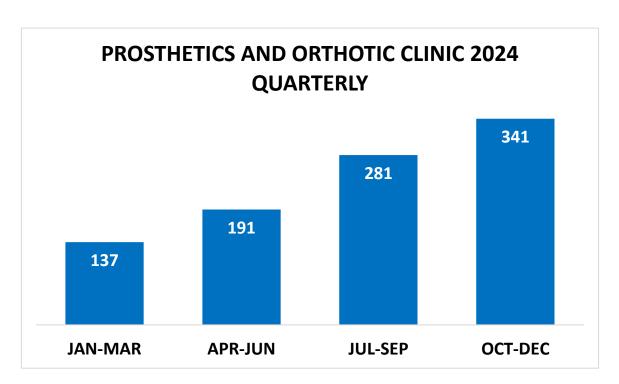


**Comment:** Due to the high demand for these services, we have employed a second physiotherapist during the year 2023.



## **Orthopaedics Unit**



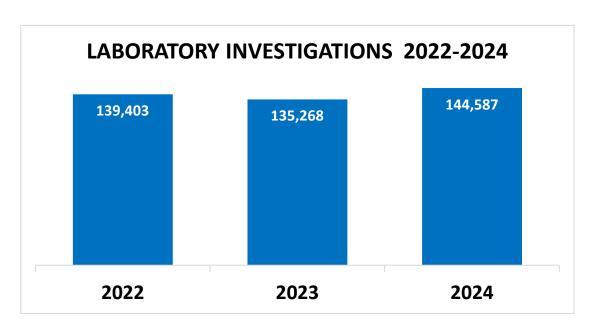


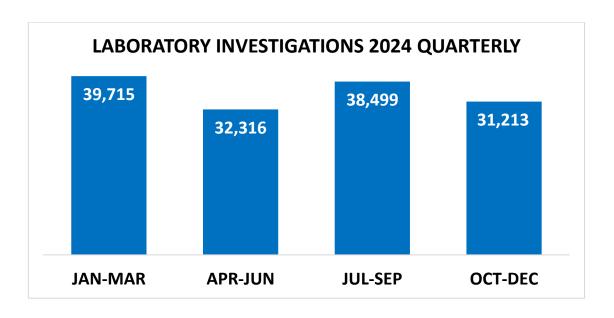
**Comment:** The service of Orthotics and prosthesis is unique in the southern part of Tanzania and the demand is high.

In April 2024 we have managed to employ a new orthotist/prosthetist with a bachelor degree and large experience in the field. Therefore, the capacity of the department and the scope of work have increased together with the number of patients, who received the services.

### Laboratory

St. Benedict Ndanda Referral Hospital Laboratory (SBNRHL) has 6 sections, namely Haematology, Blood Transfusion, Parasitological, Clinical chemistry, Serology and Microbiology.

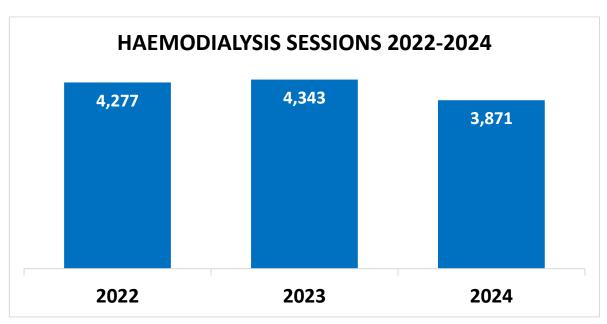


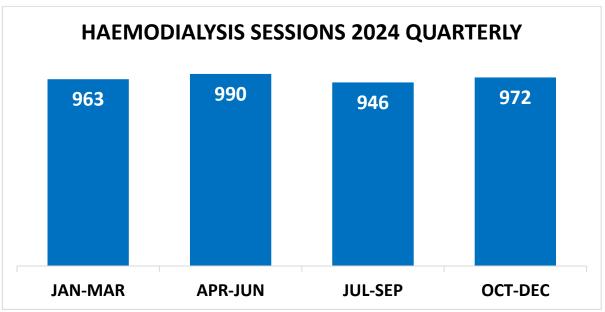


Laboratory Services	Total number of tests
Parasitology	45,122

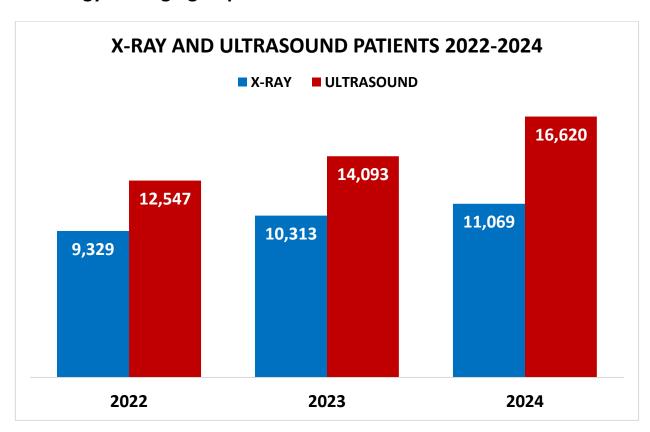
Blood Transfusion	6,555
Hematology	29,074
Clinical Chemistry	45,060
Serology	9,431
Microbiology	3,747
Grand Total	144,587
Blood Donation Activities	
Blood Transfusion	2,009
Blood Donation	1,718
FFP	41

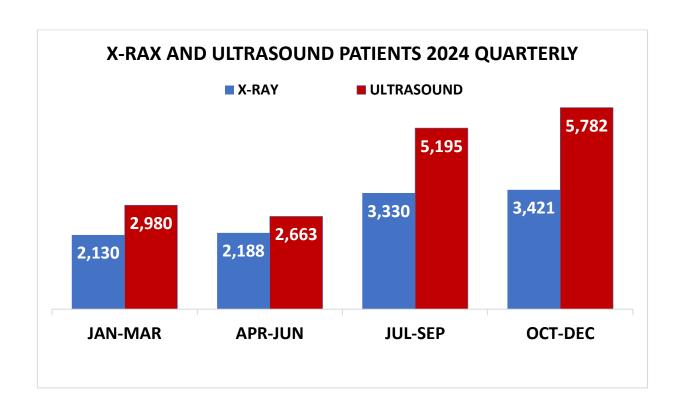
# **Dialysis Unit**

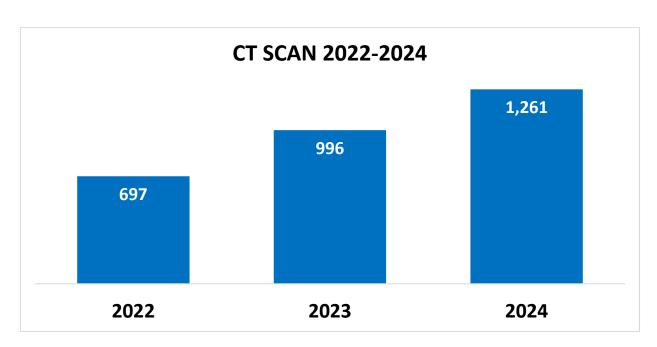


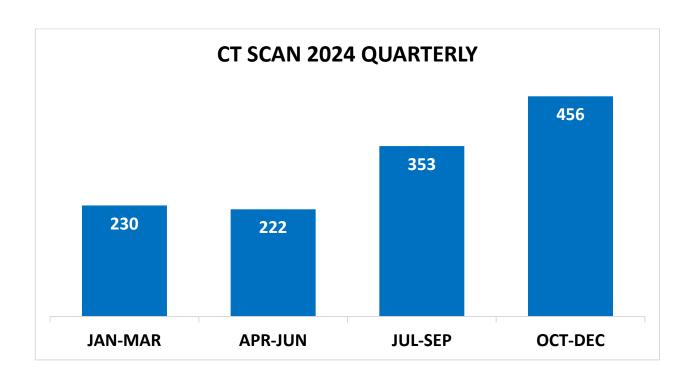


# **Radiology & Imaging Department**







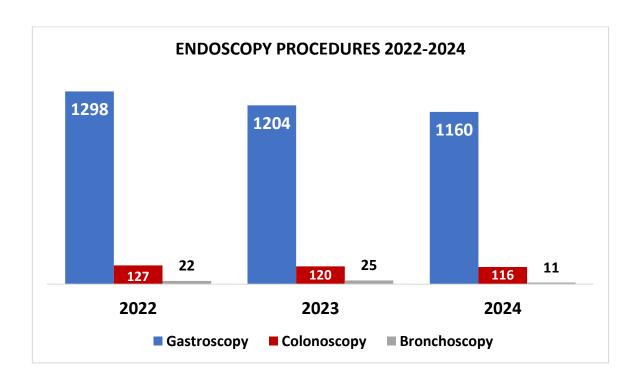


UTRASOUND INVESTIGATIONS 2024	NUMBER
OBSTETRICS US	1,714
GYNAECOLOGICAL US	3,008
UROLOGICAL US	1,629
ABDOMINAL US	6,205
ECHOCARDIOGRAM US	28,88
SMALL PARTS US	644
DOPPLER US	532
TOTAL	16,620
X-RAY INVESTIGATIONS 2024	NUMBER
SKULL	146
SPINE	2,014
AXR & INV	407
PXR & HIP	594
HSG.IVP	165
BARIUMs	16
CXR	3,571

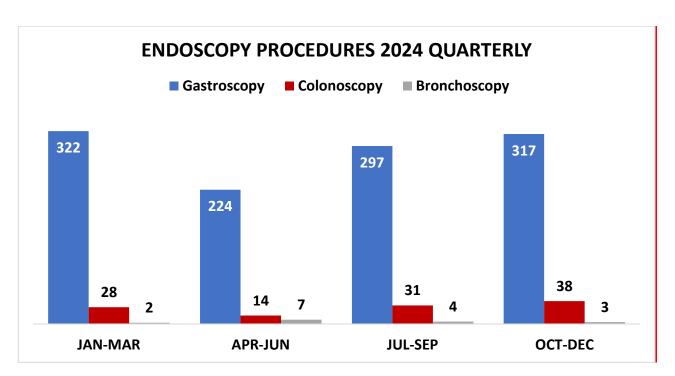
EXTREMITES	4,848
TOTAL	11,761
Male	6078
Female	4,991
TOTAL	11,069
TOTAL Films	11,665
	CT-SCAN
BRAIN	1,027
ABDOMINAL PELVIS	140
THORAX	68
SPINE	21
ELBOW	2
PNS	2
SHOULDER	1
TOTAL CT-SCAN	1,261

## **Endoscopy Department**

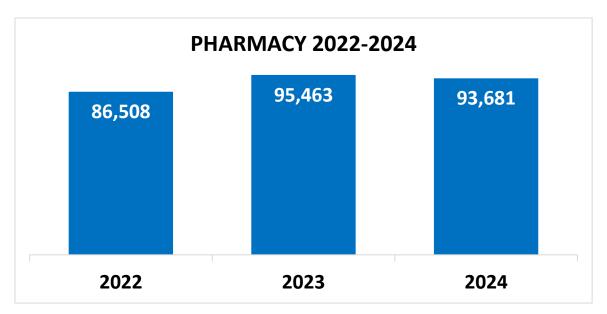
At our endoscopy department we are performing gastroscopy, colonoscopy and bronchoscopy. For gastroscopy, a flexible tube (endoscope) is inserted into the oesophagus, stomach and duodenum. For colonoscopy, the tube is entered into the rectum, sigmoid colon and colon and for bronchoscopy, the endoscope is entered into the trachea and bronchi.



We also do procedures like removal of foreign body from the oesophagus or trachea (24 cases), banding of oesophageal varices (9 cases), implantation of percutaneous gastric tube (11 cases) and polypectomy of colon polyps.

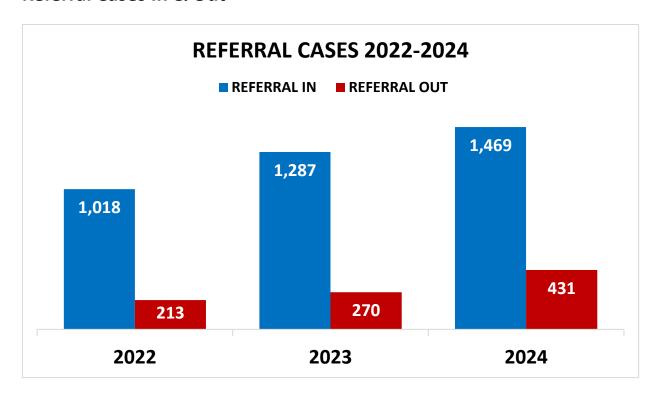


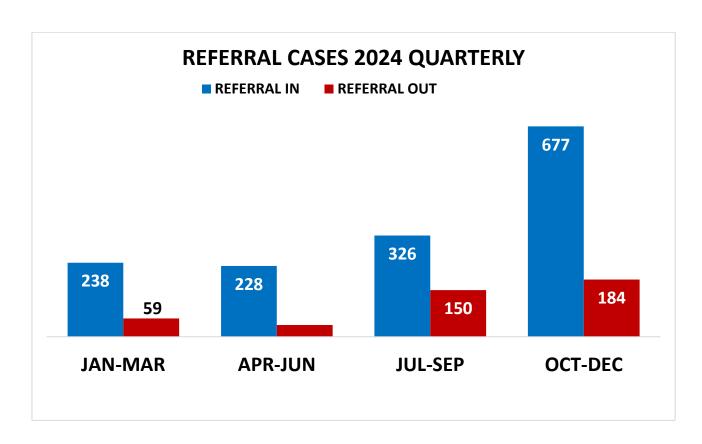
# **Pharmacy**





#### **Referral Cases In & Out**





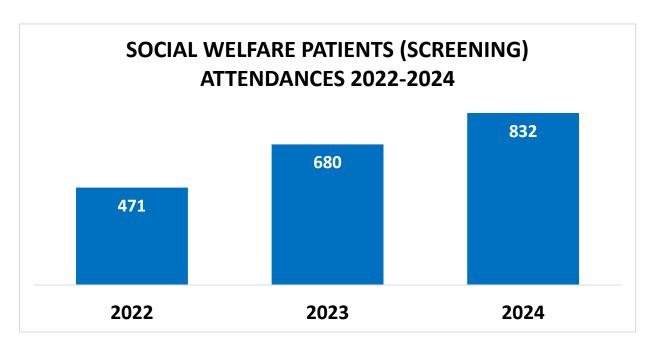
**Comment:** The number of referral in cases has increased since 2022, probably because of our new emergency department, which has been inaugurated in April 2023.

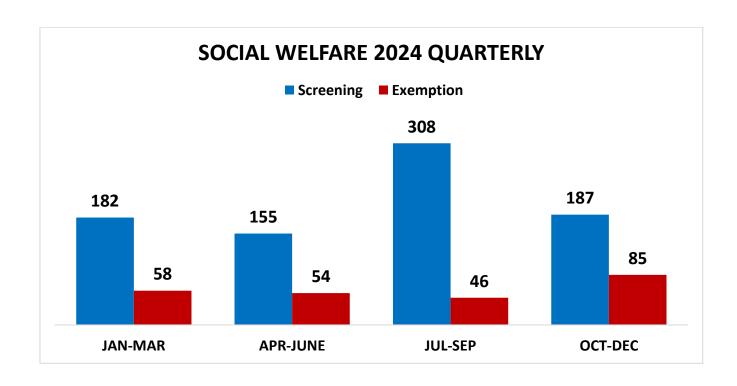
During the first and the second quarter 2024, the number of patients in general and referrals in particular was limited due to heavy rainfalls, which have damaged the roads.

The hospitals with the largest numbers of referrals to Ndanda were Mkomaindo District Hospital (Masasi), Newala District Hospital, Mbuyuni District Hospital, Nachingwea District Hospital and St. Walburga Hospital Nyangao.

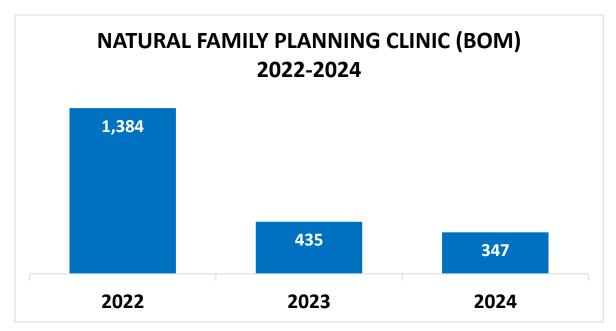
Referral out cases in 2024 were directed to Muhimbili National Hospital, Ocean Road Cancer Institute, CCBRT, Jakaya Cardiac Institute and Good Samaritan Cancer Hospital at Ifakara.

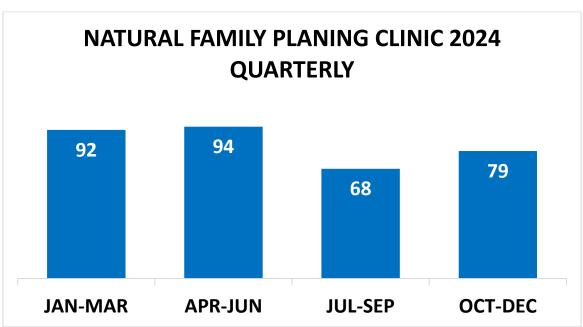
#### **Social Welfare**



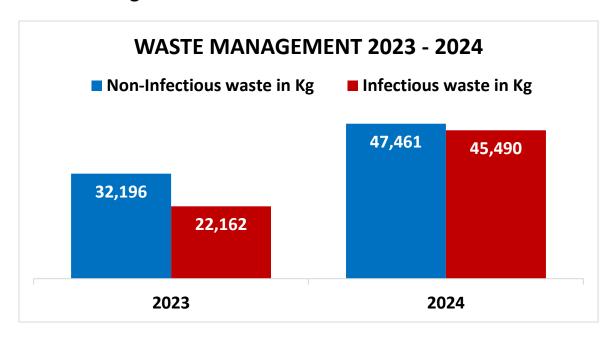


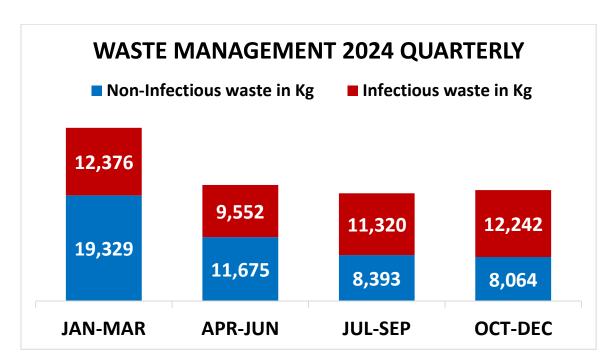
# **Natural Family Planning Clinic Unit**





### **Waste Management**





**Comment:** In our facility, infectious waste is burnt in the incinerator. Non-infections waste is deposited on our dumping ground.

# NDANDA COLLEGE OF HEALTH AND ALLIED SCIENCES (NDANDA COHAS)

#### INTRODUCTION

St. Benedict Ndanda Referral Hospital and Ndanda College of Health and Allied Sciences (Ndanda COHAS) share a strong partnership, with the hospital serving as a teaching facility for the college. This collaboration provides an ideal setting for students to gain practical, hands-on experience in a clinical environment while pursuing their academic studies. The hospital, as a regional referral center, not only offers healthcare services to the community but also plays a crucial role in the training of healthcare professionals.

Ndanda COHAS, which is part of St. Benedict Ndanda Referral Hospital, is dedicated to providing quality education in health and allied sciences. The college supports the hospital by contributing to healthcare development through the training of new professionals, while the hospital offers real-world opportunities for students to apply their knowledge. Additionally, the college has permanent staff members who oversee student health matters, ensuring the well-being of students during their studies.

The history of Ndanda College of Health and Allied Sciences dates back to September 22, 1930, when it was established by Dr. Sr. Theckla Stinnesbeck OSB. Initially offering a four-year course for dispensers, the college faced challenges during the Second World War, leading to a temporary closure in 1939. Today, Ndanda COHAS continues to thrive under the ownership of the Benedictine Abbey Ndanda, with a focus on training healthcare professionals and contributing to the broader healthcare system.

#### PROGRAMMES OFFERED

The college offers the following courses

- a) Ordinary diploma in Nursing and Midwifery (Pre-services and in service)
- b) Ordinary Diploma in Medical Laboratory Sciences (Pre-services and in service)
- c) Ordinary Diploma in Clinical Medicine (Pre-service)



Nursing students



Medical Laboratory students

#### **ENROLMENT CAPACITY**

The school capacity is 100 students per annum for nursing course, 120 students for clinical medicine and 60 students for Medical Laboratory course, currently we have a total number of 283 students.

Table 1. Number of students in Academic year 2024/2025

NURSING AND MIDWIFERY				MEDICAL LABORATORY SCIENCES				CLINICAL MEDICINE			
NTA	NUMBER OF STUDENTS			NTA	NUMBER OF STUDENTS			NTA	NUMBER OF		
LEVEL				LEVEL				LEVEL	STUDENTS		
	BOYS	GIRLS	TOTAL		BOYS	GIRLS	TOTAL		BOYS	GIRLS	TOTA
											L
NTA L4	7	41	48	NTA L4	17	10	27	NTA L4	54	34	88
NTA L5	14	40	54	NTA L5	7	5	12	NTA L5	0	0	0
NTA L6	20	23	43	NTA L6	8	3	11	NTA L6	0	0	0
TOTAL	41	104	145	TOTAL	32	18	50	TOTAL	54	34	88

#### **FUTURE PLANS**

The college has short- and long-term planning. Currently we have the following planning;

- 1. To send tutors for short courses on teaching methodology
- 2. To purchase a college bus that can facilitate transport activities during field works
- 3. To send tutors for master's degree
- 4. To construct a strong fence around the college premises
- 5. To introduce new courses, such as Radiology, pharmacy
- 6. To renovate the old buildings
- 7. To introduce short courses that could be the source of income for the college

#### FINANCE DEPARTMENT

Financial health is the shock absorbed for any organization/institution survival. It is the fundamental function of the financial department to manage, sustainably with highest degree of precautionary measure to see and oversee the trend of the Hospital fund on a daily basis.

However, the financial stewardship and accountability needs integrity and care from the team work but mainly under the leading sub group of financial team and management team.

It is a fact that, challenges or success in financial department is related to management and governance style of organization. The fall and rise as well depends on the integrity of the management to focus on budget and budget control as well as risk management, evaluation and monitoring. Finance and financial management, being bit of an individual or organization needs more discipline that Knowledge of accounting systems and management/leadership. Never the less all are important for check and balance.

Our hospital operates on a financial year that begins on July 1st and ends on June 30th each year. For a long period, the facility has been operating at a deficit. However, in recent years, we have observed a consistent reduction in the size of this deficit. Specifically, during the 2022/2023 financial year, the deficit stood at 774,108,497 million, while in 2023/2024 it was reduced to 463,724,921 million, as reflected in the audited financial statement below.

This significant improvement is encouraging and strengthens our optimism for the upcoming financial year. Although reaching profitability remains a challenge due to the nature of our hospital's operations, management remains committed to this goal and will continue working diligently toward achieving it. Below is the audited financial statement comparing the 2023/2024 and 2022/2023 financial years.

# STATEMENT OF FINANCIAL PERFORMANCE FOR THE YEAR ENDED 30 JUNE 2024

	NOTE	30.06.2024 TZS	30.06.2023 TZS
REVENUE FROM EXCHANGE TRANSACTION			
Hospital Services Income	. 11.1	7,535,832,466	7,582,945,665
Supportive Services Income	11.2	510,137,600	451,778,000
Miscellaneous Income	11.3	10,868,821	52,927,193
Refunds & Claims Adjustments	11.4	(122,114,262)	(194,962,980)
Total Revenue from Exchange Transaction		7,934,724,625	7,892,687,878
REVENUE FROM NON EXCHANGE TRANSACTION			
Government Grants	11.5	1,360,673,783	1,313,203,359
Grants and Donation	11.6	2,014,385,706	1,182,289,652
Total Revenue from Non Exchange Transaction		3,375,059,489	2,495,493,011
TOTAL REVENUE		11,309,784,115	10,388,180,890
LESS: EXPENSES			
Cost of Consumables & Supplies Purchased	12	2,379,119,066	2,893,005,779
Administrative Expenses	13	2,924,717,654	2,720,805,710
Staff Costs	14	4,414,395,260	4,369,698,462
Finance Charges	15	40,130,241	35,906,267
Depreciation & Amortization	16	559,038,055	560,570,916
Project Expenses	17	289,230,760	156,049,784
Government Subsidies Expenses	18	1,166,878,000	426,252,469
TOTAL EXPENDITURE		11,773,509,036	11,162,289,387
Deficit for the Year		(463,724,921)	(774,108,497)

# **Major Events and Projects 2024**

## Hand-over of guest hostel

After almost one year of construction, our new guest hostel was handed over by the contractor on February 19th, 2024.

This has solved our long-standing challenge of limited accommodation for visitors, e.g. specialists, who visit us from outside.

Located across the main road from our hospital premises, the newly constructed hostel provides 10 self-contained rooms, a reception area, kitchen, dining area, courtyard and a laundry.

We express profound gratitude to our generous benefactors, who made this project possible. Also, to our architect for providing a functional and beautiful design and to the contractor for perfect execution of the construction.



# **Restoration and Upgrade of IT Infrastructure**

On 18th March, 2024, the IT infrastructure of the hospital was severely damaged by a lightning strike in the immediate vicinity of the server room of our facility. The strike resulted in extensive damage to our servers, data storage systems, and network equipment, disrupting our ability to deliver medical services through the paperless patient electronic management system and maintain patient records.

Thanks to generous support through our congregation, a foundation in Switzerland and the "Liebeswerk vom Hl. Benedikt", we managed to restore and upgrade our IT infrastructure within reasonable time. On June, 1st, 2024, the system was operational again and we resumed the paperless documentation in our electronic patient management system.

## Hand-over of hospital fence and main entrance

On 15/05/2024, the hospital fence and main entrance canopy, which had been under construction since October 2023, were officially handed over by the contractor. It is the last component of our project of renovation of OPD and construction of Emergency Department. Our architect has prepared a functional and



Group photo of handover of main entrance

appealing design that provides official inlet and outlet gates for ambulances with a drop off point close to the emergency department, ambulance parking area and a small garden in front of the hospital administration block. For pedestrians there are in and outlet gates under a canopy close to the OPD reception.

# Renovation of Ante-Natal ward (Ward 5)

Our wards were constructed between 1965 and 1970.
Since long time, they did not meet with current standards and renovations were urgently needed.
During the years 2022 and 2023, we have already managed to renovate our male medical ward (ward 4), female medical ward (ward



Hand-over of Ante-Natal ward

3) and male surgical ward (ward 1).

The renovation of our Ante-natal Ward (Ward 5) started in November, 2023 and on 15<sup>th</sup> May, 2024, it was handed over by the contractor.

The architectural design is identical with that of the previously renovated wards. Privacy for the patients has been achieved through installation of partitions and curtains. Close monitoring of the patients is available through a nurse call system and thanks to the central position of the nurse base in the room. Each bed is equipped with access to oxygen. New windows have been installed and modern LED lights provide adequate illumination. One room has been prepared as an isolation room for infections patients. A tea room for the nurses, doctor's room, an office for the nurse in charge, utility rooms and store are also available.

The newly renovated ward is highly appreciated by our patients and employees.

## **Eye Care Outreach Camp**

From July 1st to 4th 2024, an ophthalmologist from Germany (Dr. Raimund Balmes) organized an eye camp at Newala District Hospital – 70 km from Ndanda – in cooperation with our ophthalmology department in Ndanda. The team also included another



Group picture with patients who received the treatment

German ophthalmologist (Dr. Gesine Kiefer), two local ophthalmologists, 6 nurses, and 2 opticians.

A total of 622 patients were examined. 80 operations were performed, 75 of them for patients with cataract and 5 for patients with pterygium. The visual acuity of 267 patients was measured (refraction). 67 patients received reading glasses and 100 patients received sunglasses. Cataract operations allowed patients with impaired vision and patients who were already completely blind to regain full sight. The project was financed by the Eyesight Foundation ("Stiftung Augenlicht"). All treatments were offered free of charge to the patients.

#### Renovation of theatre

The hospital's operating theatre was built in 2004 and no longer meets current standards regarding structure, functionality, and route guidance. The number of operating rooms is no longer sufficient due to increasing demand and additional specialists, who are visiting us regularly.



Renovation of the existing structure

of the operating theatre is therefore urgently needed.

During the year 2023, our architect has prepared plans for the construction measures.

In June 2024, we were able to start with construction for the renovation of the area of the "lower" theatre and the sterilization department. One septic theatre and two theatre rooms for general surgery will be installed here. The sterilization department will be relocated to the area between the "upper" and "lower" operating tracts.

Once the first phase of renovation is finished, the newly renovated rooms can be utilized and renovation of the "upper" theatre can start, where 2 theatre rooms are to be provided for orthopedic surgery, one for ophthalmology and one for various purposes.

This is planned to be done during the year 2025.

## **Clubfoot Camp**

From 14th to 26th April 2024, Dr. Ute Terheggen and her team visited us in Ndanda. They are specialized in surgery of neglected clubfoot. Children with clubfoot can be treated conservatively with casts, if treatment starts early during the first days or weeks of life. Those who report too late for this conservative method have to be treated with specialized surgical procedures. Public advertisement for this camp was done through posters, radio announcements and YouTube clips. More than 130 patients from all over the country reported and all were screened and counselled by the specialists. 4 senior orthopaedic surgeons, 2

anaesthetists and 2 theatre nurses from Germany collaborated with our local staff. They managed to perform operations in 50 patients successfully without any complications. After some time of rehabilitation, the patients will be able to walk normally.

The project is sponsored by the charity organization "Pro Interplast" and all operations are performed free of charge, including admission and food for patients.



Clubfoot team with patients.

## **Gastroschisis Training**

From March 11th to
12th 2024, our hospital
in partnership with
Muhimbili National
Hospital and a German
NGO, conducted
training on
Gastroschisis.
Gastroschisis is a birth
defect in which the
baby's intestines
extend outside of the



Gastroschisis supervisors training other doctors and Nurses.

abdomen through a hole next to the belly button. Without adequate treatment, babies with gastroschisis usually die within a few days or weeks after birth. Conservative treatment is possible with so-called silo bags. This procedure has been demonstrated by a pediatric surgeon from Muhimbili National Hospital and a stock of these life-saving materials has been provided to our facility.

37 participants, comprising doctors and nurses from various healthcare facilities of Mtwara and Lindi regions, including our staff, attended the training. Thus, we are now able to rescue these babies, who previously had to be transported to Dar Es Salaam, while others died even before getting access to treatment.

Surrounding healthcare institutes will refer patients with this congenital disease to our institute for specialized care.

#### St. Benedict Health Week

On the occasion of the feast day of our hospital patron saint, we decided to benefit the surrounding community by introducing St. Benedict Health Week this year. The one-week event started on July 7th until July 12th, 2024, with the theme "Better Health, Happy Life".

During St. Benedict Health

Week, we provided free health



Group picture with government leaders during opening ceremony

services to the public, including screenings, treatments, and specialist consultations. St. Benedict Health Week had a significant impact, with 2,114 clients (1,600 female, 514 male) being screened and treated free of charge.

The expenses for this event were covered with internal fundraising with contributions received from our suppliers, banks and various business companies of the region.

## **Blount's Disease Camp**

From July 15th to 25th, a team of experts from Germany visited our hospital for our first-ever Blount's disease camp.

Blount's disease is a growth disorder of the tibia, which causes the lower leg to angle inwards. The camp featured a dedicated team of specialists from Germany, including two foot surgeons, two



Blount's Disease team with patients.

anaesthesiologists, and three orthopedic nurses, who were assisted by our local orthopedic surgeon, physiotherapists, and nurses. A total of 44 patients were screened and 20 were operated. Additionally, 24 other patients were diagnosed with Rickets, i.e. a softening and weakening of bones in children, caused by vitamin D deficiency. It is treated with Vitamin D and Calcium supplements. The camp was a crucial step in enhancing orthopedic care at our hospital. Admission, operation, and food were provided for free to our patients.

Many thanks to the team leader Dr. Fritjof Schmidt-Hoensdorf and to Pro Interplast Germany, the charity that funded the camp.

## **Endoscopy Camp**

From October, 28<sup>th</sup> until November, 5<sup>th</sup> 2024, the gastroenterologist
Prof. Dr. Markus Menges from
Germany visited our hospital for
consultation and treatment of
patients as well as training for our
local doctors in the areas of
gastroenterology with a special
focus on endoscopy.



Endoscopy Camp 2024

During the camp, 53 patients came

for counselling by the gastroenterologist and 55 patients for endoscopy procedures. These included diagnostic gastroscopy (44 patients) and colonoscopy (5 patients), as well as interventions like banding of oesophageal varices (1 patient), clipping of bleeding gastric ulcer (1 patient), polypectomy (1 patient) and foreign body removal (2 patients). All procedures were done by the gastroenterologist in cooperation with our local endoscopy team.

Prof. Dr. Markus Menges has also managed to launch a project with Gastroenterology Foundation, which is supported by Else Kröner Fresenius Foundation.

This has enabled us to procure various materials for our endoscopy department and to train one of our MD's for specialization in gastroenterology.

## **Laparoscopy Camp**

From November 4th to November 24th 2024, our facility hosted a camp for gynecological laparoscopy led by Dr. Marita Anwander, an experienced gynaecologist from Germany. This 20-day camp focused on providing advanced gynecological care through minimally invasive surgery, while also training our



Laparoscopy Camp 2024

local medical team in these cutting-edge techniques. During the camp, 5 laparoscopic-assisted vaginal hysterectomies were performed for conditions such as uterine fibroids, heavy menstrual bleeding, and pelvic pain. Additionally, 2 laparoscopic cystectomies were conducted for ovarian cysts and endometriomas, and 7 diagnostic laparoscopic procedures addressed cases of unexplained pelvic pain and infertility. In addition to that, more than 30 routine gynecological surgeries were carried out.

We are so grateful to our Senior Expert gynaecologist Dr. Marita, who has sacrificed her free time for this assignment in order to improve women's health care in the region around Ndanda.

#### Aids for the Disabled

Thanks to the partnership between the districts of Landsberg am Lech (Germany) and Newala, we were able to host a project focused on supporting people of Newala District with disability aids.

33 patients with disabilities were provided with wheelchairs, tricycles, crutches, and white canes. Hand-over was done during an event on 10/12/2024 at Newala, presided by the



Aids for the disabled 2024

Newala District Commissioner. The event directly supported 33 beneficiaries while drawing a total attendance of 312, including family members and caregivers. Attendees also benefited from health screenings for hemoglobin and blood sugar levels, as well as nutritional counselling. St. Benedict Hospital remains committed to scaling up such initiatives by strengthening donor collaborations, empowering individuals through economic programs, and advocating for community sensitization to reduce stigma and foster inclusion.

We thank all donors and partners for their continuing support of St. Benedict Ndanda Referral Hospital!