



ST. BENEDICT NDANDA REFERRAL  
HOSPITAL

# ANNUAL REPORT 2025



## VISION MISSION AND CORE VALUES

### VISION

Quality health services accessible to all.

### OUR MISSION

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

### Core 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 ACRONYM AND ABBREVIATIONS

ABD	Available Bed days
ANC	Antenatal care
BOR	Bed occupancy rate
CT-SCAN	Computer tomography scan
COHAS	College of Health and Allied Science
EPTB	Extra-pulmonary tuberculosis
HMT	Hospital management team
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
RCH	Reproductive and Child Healthcare
FFP	Fresh Frozen Blood

PTB

Pulmonary tuberculosis

OSB

Order of St. Benedict

## FOREWORD

Esteemed Colleagues and Stakeholders,

It is with profound gratitude and a shared sense of purpose that I welcome you to our Annual Report 2025. As we reflect on the past year, we find ourselves standing at an inspiring threshold the dawn of our final chapter leading toward a century of service. Throughout this journey, our heartbeat has remained the same: an unwavering dedication to excellence and the provision of compassionate, quality healthcare for all.

Since our humble beginnings as a dispensary on May 5th, 1927, this hospital has been a pillar of hope for our community. We have navigated decades of change, transforming from a small clinic into a vital regional referral hospital. This report serves as a testament to that evolution, showcasing our proactive response to the modern healthcare landscape and our steadfast ambition to achieve zonal hospital status by our 100-year jubilee in 2027.

We extend our deepest appreciation to everyone who has played a role in shaping this year's progress. To our tireless staff, the management team, our government partners, and our faithful stakeholders: your commitment has been the architect of the road map we follow today. It is your hard work that ensures the sustained growth and vitality of our institution.

In the spirit of true collaboration, let us continue to breathe life into this facility. May we foster a culture rooted in respect, equality, discipline, and love—upholding the moral and spiritual principles that guide us. Together, we remain committed to Christ's command, proclaiming the Gospel through the sacred work of healing the sick.



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Br. Jesaja Michael Sienz OSB

Hospital General Director

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## **1. 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 Tanzania Ministry of health as a voluntary Agency Hospital (VAH) under the category of non-profit service providers with a registration number 093001 in 06<sup>th</sup> Sept 1997. The hospital later upgraded and become a Regional Referral Hospital in 2010 as per government gazette notice no. 828 in 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 the 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. Theckla Stinnesbeck OSB, through her mission, passion and entire commitment to strengthen health care delivery in this area. Historically St. Benedict 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.

### **1.1 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).

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

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.

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.

2017: Another Change of Administration and management team: Administrator from Mr. Kihongwe to Fr. Damian Msisiri OSB.

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 Pediatrics' 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.

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 pediatrics 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: Terrazzo 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 Orthotic 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.

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.

2024/25: Renovation and extension of main operating theatre building

2025: Renovation of Pediatric ward

2025: Construction of mother and child one stop center building in collaboration with government through Ministry of health and social welfare.

2025: Major change of hospital organogram to directorate system

2025: Hospital Board of trustee appoints Dr. Br. Jesaja as a first Hospital Director General

## **2. HOSPITAL STRATEGIC PLAN OF 2023-2028**

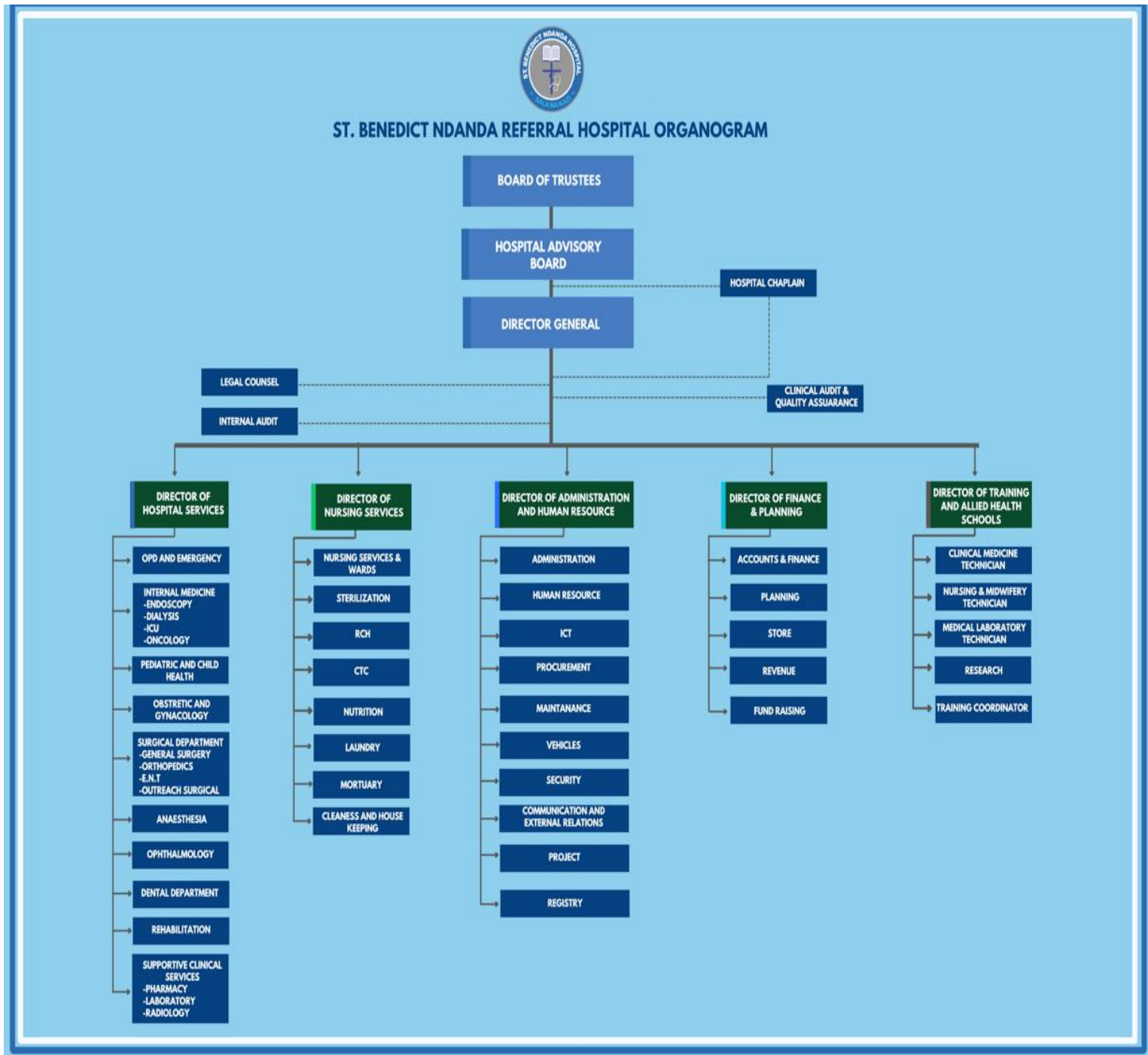
In order to achieve its goal of becoming a zonal hospital, the hospital has set the following priorities areas: Strengthening health services delivery in the southern part of Tanzania, investment in hospital infrastructure, expansion and technological development, quality improvement and customer services,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

## **3. 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 100,000 outpatients (OPD) annually and more than 8000 inpatients (IPD) from different ethnic backgrounds covering three regions of Mtwara, Lindi, and 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 main tribes are: Wamwera, Wamakonde, Yao, 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.

## 4. HOSPITAL ORGANOGRAM



## 5. HOSPITAL GOVERNANCE

### Hospital Management Team (HMT) Members

<b>NAMES</b>	<b>DESIGNATION</b>
Dr. Br. Jesaja Michael Sienz OSB (Germany)	Hospital General Director
Dr. Husseni J Mjaliwa	Director of Hospital Services
Mr. Joseph Ndukusi Saibulu	Director of Administration and Human Resource
Mr. Andrew Baro	Director of Nursing Services
Fr. Alphonse Holela	Director of Finance and Planning
Mr. Frank Shemhande	Director of training and allied science

## 6. 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 388.

### 6.1 Staffing level according to cadres by end of 2025

<b>Department</b>	<b>Position</b>	<b>Number</b>
Administration and Support	Administrative Supportive Staff	30
	Office Assistant	10
	Information Technology Officer	4
Doctors and Health Specialists	Medical Doctor	25
	Medical Specialists	10
	Assistant Medical Officer	1
	Clinical Officer	9
Nursing	Assistant Nursing Officer	103
	Nursing Officer	10
	Nurse II	3
Laboratory and Medical Technology	Health Laboratory Scientist	11
	Laboratory Technologist	10
	Assistant Laboratory Technologist	1
	Biomedical Technologist	3
Pharmacy	Pharmacist	2
	Pharmacy Technologist	10
Dental and Alternative Medicine	Dental Therapist	1
	Dental Technologist	2
Rehabilitation and Specialized Therapy	Orthotic and Prosthesis Scientists	1
	Physiotherapist	3

	Optometrist	2
	Radiographer Technologist	1
Other Health Services	Medical Attendant	33
	Nutrition Officer	1
	Mortuary Attendant	2
<b>Total</b>	<b>Total</b>	<b>288</b>

*Of note:* Volunteers and interns are not included

### 6.2 Employee maning table

NO	EMPLOYEES	NUMBER	PERCENTAGE (%)
1	SBNRH	248	64
2	PAY 1	34	9
3	SECONDED	6	2
4	VOLUNTEERS	41	11
5	INTERNS	59	15
	<b>TOTAL</b>	<b>388</b>	<b>100</b>

### 6.3 Gender distribution

GENDER	NUMBER OF EMPLOYEES	PERCENTAGES (%)
MALE	156	54
FEMALE	132	46
<b>TOTAL</b>	<b>288</b>	<b>100</b>

*Of note:* Volunteers and interns are not included

#### 6.4 Age distribution

<b>AGE (YEARS)</b>	<b>NUMBER OF EMPLOYEES</b>	<b>PERCENTAGES (%)</b>
17-24	16	6
25-49	233	81
> 50	39	14
<b>TOTAL</b>	<b>288</b>	<b>100</b>

#### 6.5 Employment status

<b>EMPLOYMENT TYPE</b>	<b>NUMBER OF EMPLOYEES</b>	<b>PERCENTAGES (%)</b>
Permanent Employees	72	25
Contract Employees	216	75
<b>TOTAL</b>	<b>288</b>	<b>100</b>

## 6.6 Long Term Training of Staff

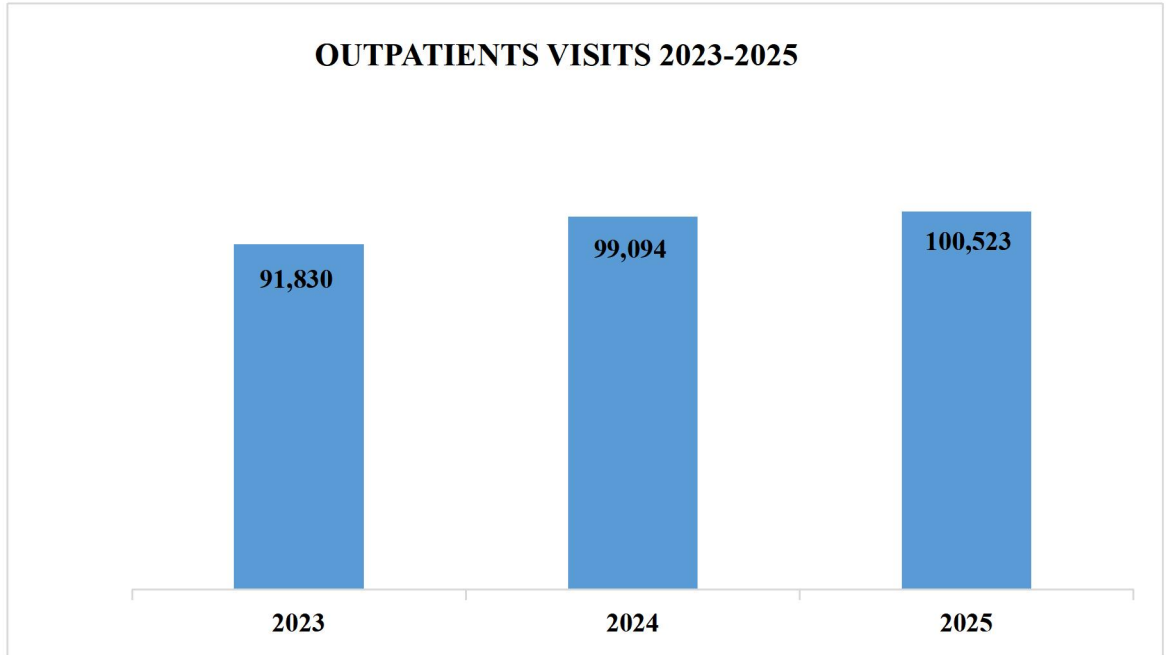
By end of 2025, the following training programs are being sponsored by our facility:

<b>Names</b>	<b>Training Program</b>	<b>University /Collage</b>
Dr. Nelson Francis	MMED Internal Medicine	GERMANY
Dr. Samwel Msangi	MMED Internal Medicine	GERMANY
Baraka Gonzalue	BSC nursing & Midwifery	ST. JOHN
Michael Zacharia	Bachelor of Pharmaceutical science	KAMPALA
Filex Kiowi	BSC nursing & Midwifery	MUHAS
Nehemia Baynit	BSC nursing & Midwifery	ST.JOHN
Patrice Mniko	Anaesthesia course	KCMC
Rose Thadei	Diploma In Radiology	MUHAS
Christina Ngambeki	BSC in Human Nutrition	OUT ( Open university)
Dr. Awazi Mswadiki	MMED general surgery	CUHAS
Dr. Damas Machio	MMED Ear Nose and Throat (ENT)	MUHAS
Dr. Zengo Kashindye	MMED Internal medicine	UDOM
Dr. Romanus Mkepule	MMED Maxillofacial	MUHAS
Greyson Kyando	Master of critical care and Emergency	MUHAS
Dr. Vasco Mbwago	MMED Internal Medicine	CUHAS
Grace Shayo	Master of Midwifery	MUHAS
Dr. James Yohana	MMED Urology	MUHAS
	<b>TOTAL</b>	<b>17</b>

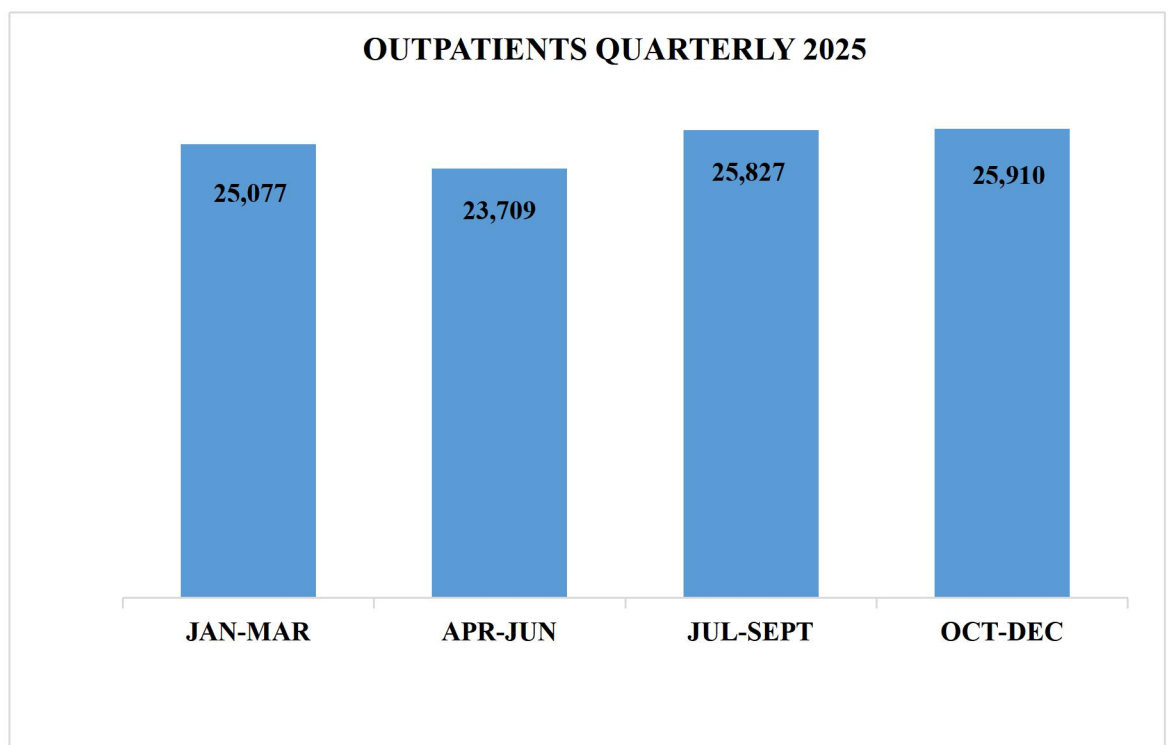
## 7. HEALTH CARE

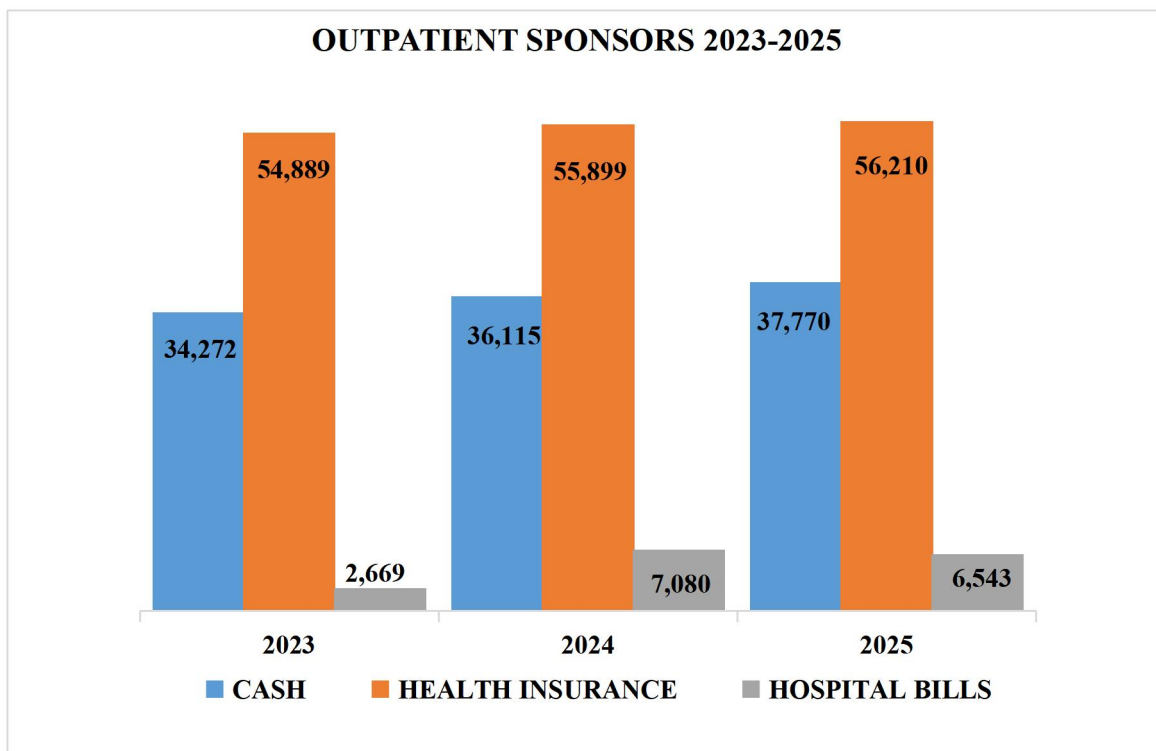
### 7.1 Outpatient Department (OPD)

Total OPD Registrations (2023–2025): Figures include all patients processed through the outpatient department, encompassing those later transitioned to inpatient status.



Comment: Annual Outpatient Registration Trends (2023–2025). The data illustrates a steady upward trajectory in patient seeking-behavior, culminating in a record 100,523 visits in 2025, reflecting the hospital's growing role in community health.

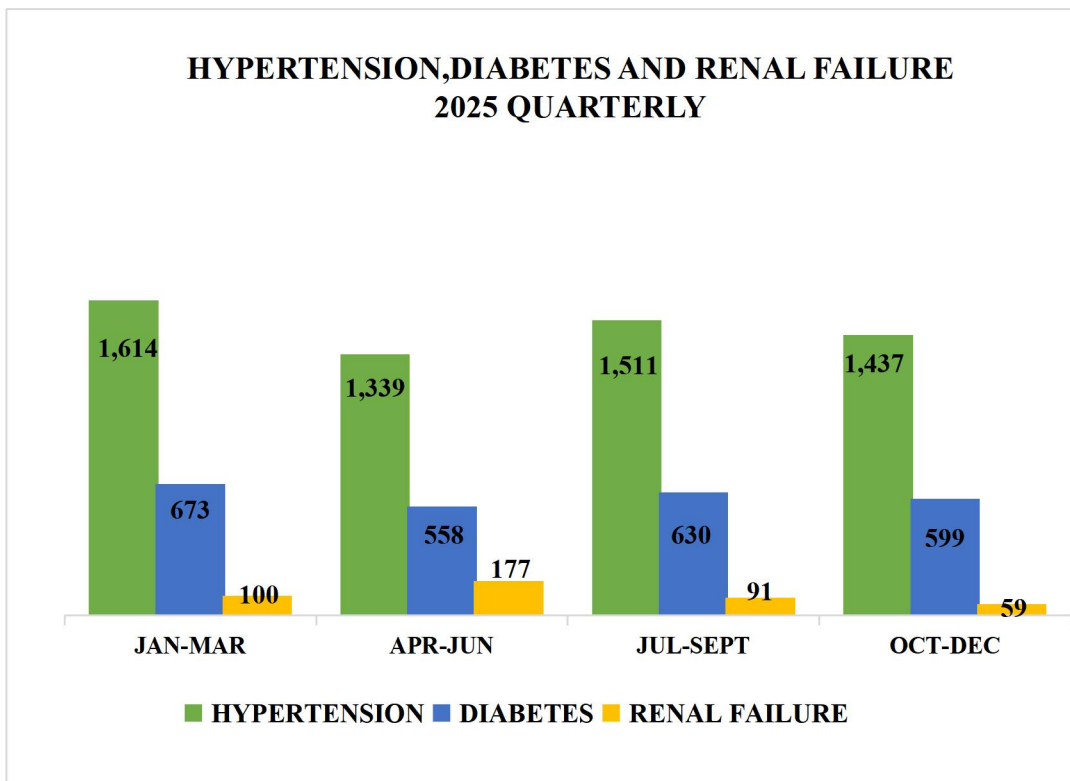
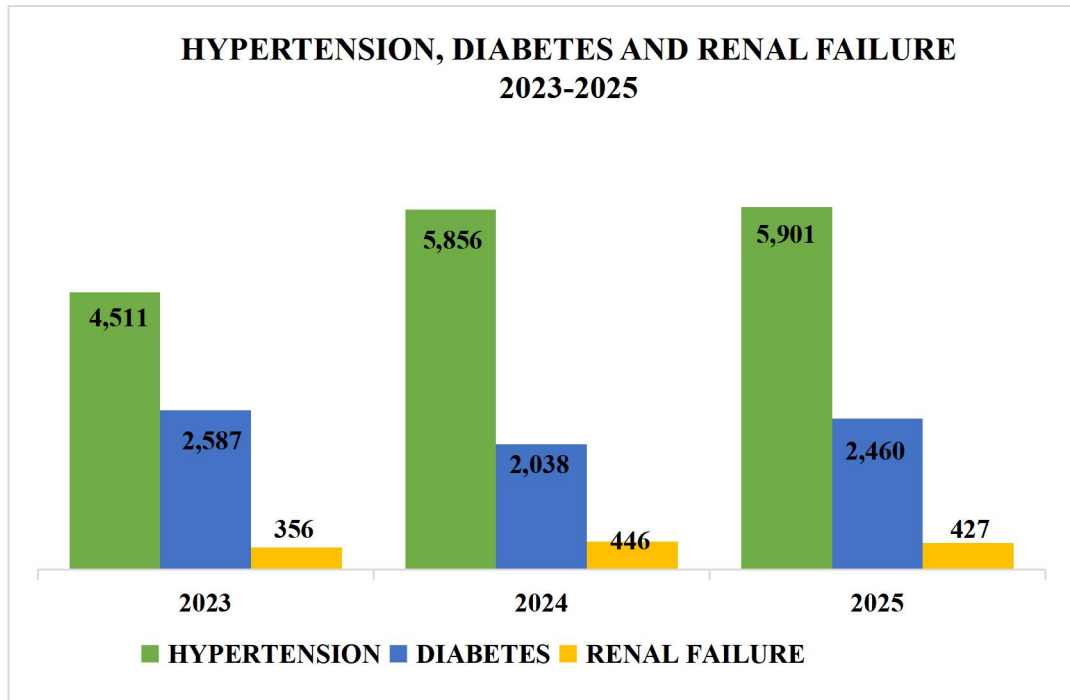


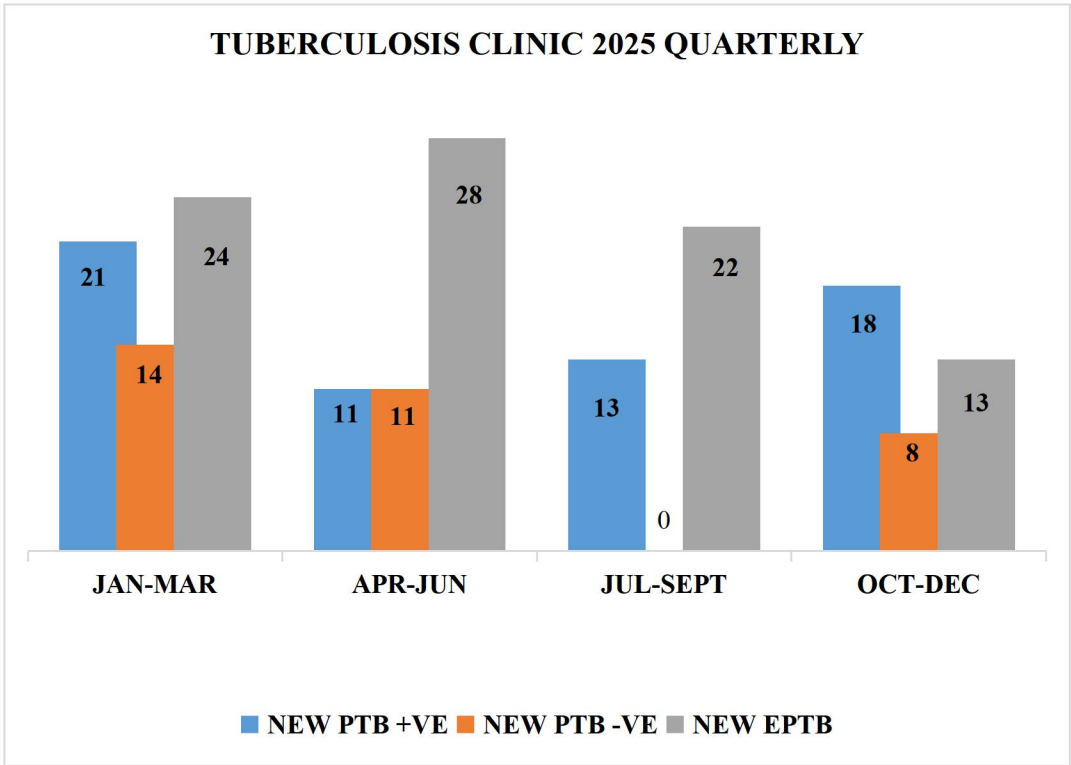
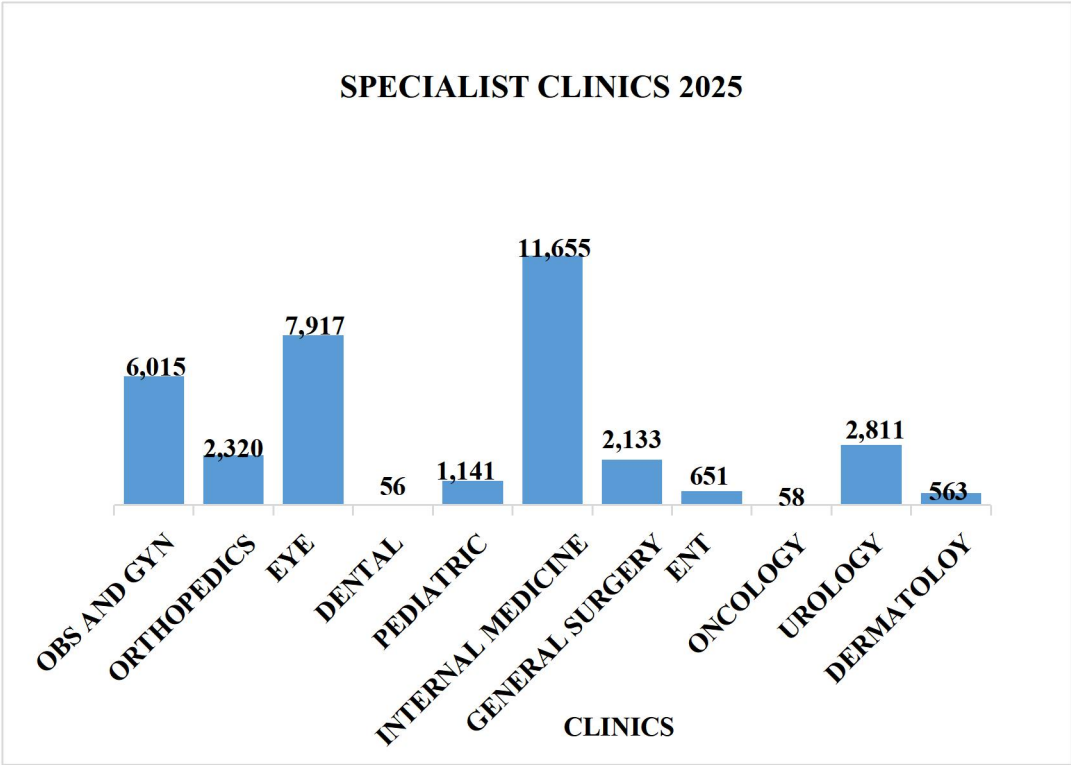


## 7.2 Hospital outpatients top 10 diagnosis 2025

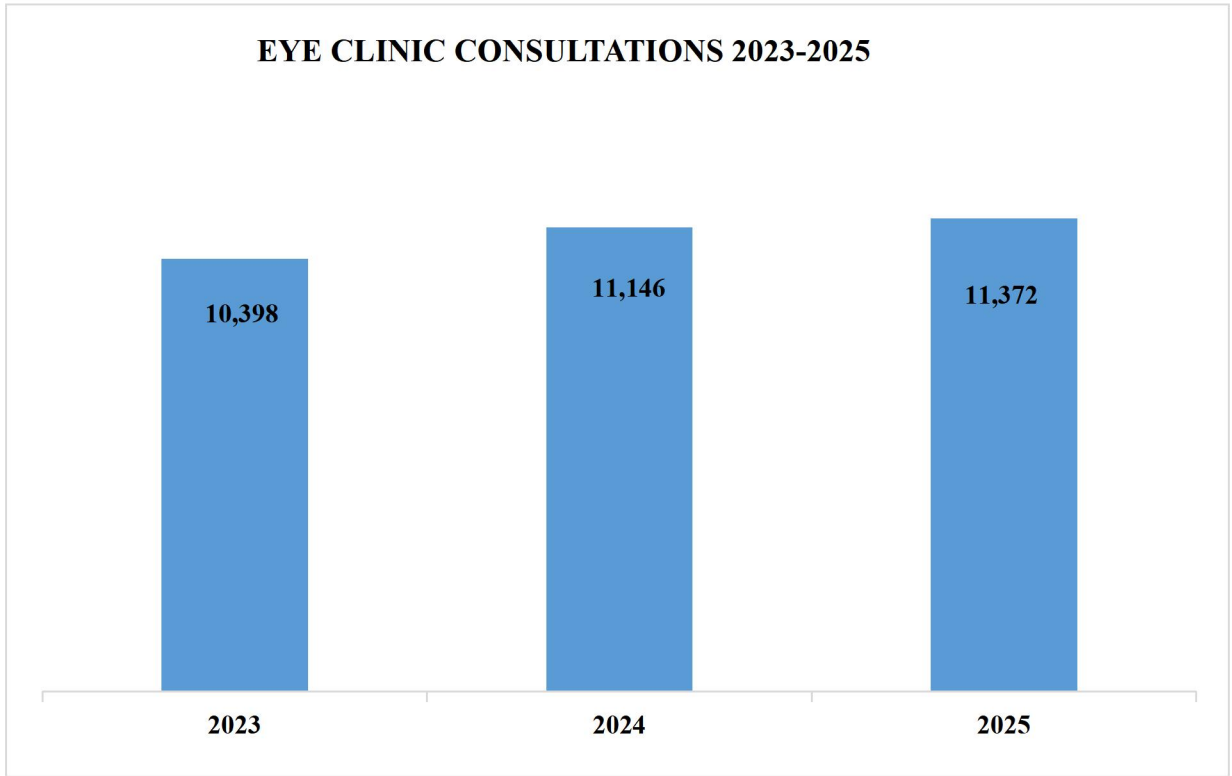
Diagnosis	MALE	FEMALE	TOTAL
Essential (primary) hypertension	8,163	12,421	20,584
Polyneuropathies	1,506	2,949	4,455
Spondylosis	1,319	2,915	4,234
Chronic kidney disease, stage 5	2,469	1,654	4,123
Upper respiratory tract infection	1,789	2,028	3,817
Dry eye disease	1,348	2,362	3,710
Peptic ulcer,	1,163	2,470	3,633
Low back pain	1,520	2,071	3,591
Iron deficiency anaemia	1,803	1,767	3,570
Type 2 diabetes mellitus	1,702	1,852	3,554

### 7.3 Clinics trends

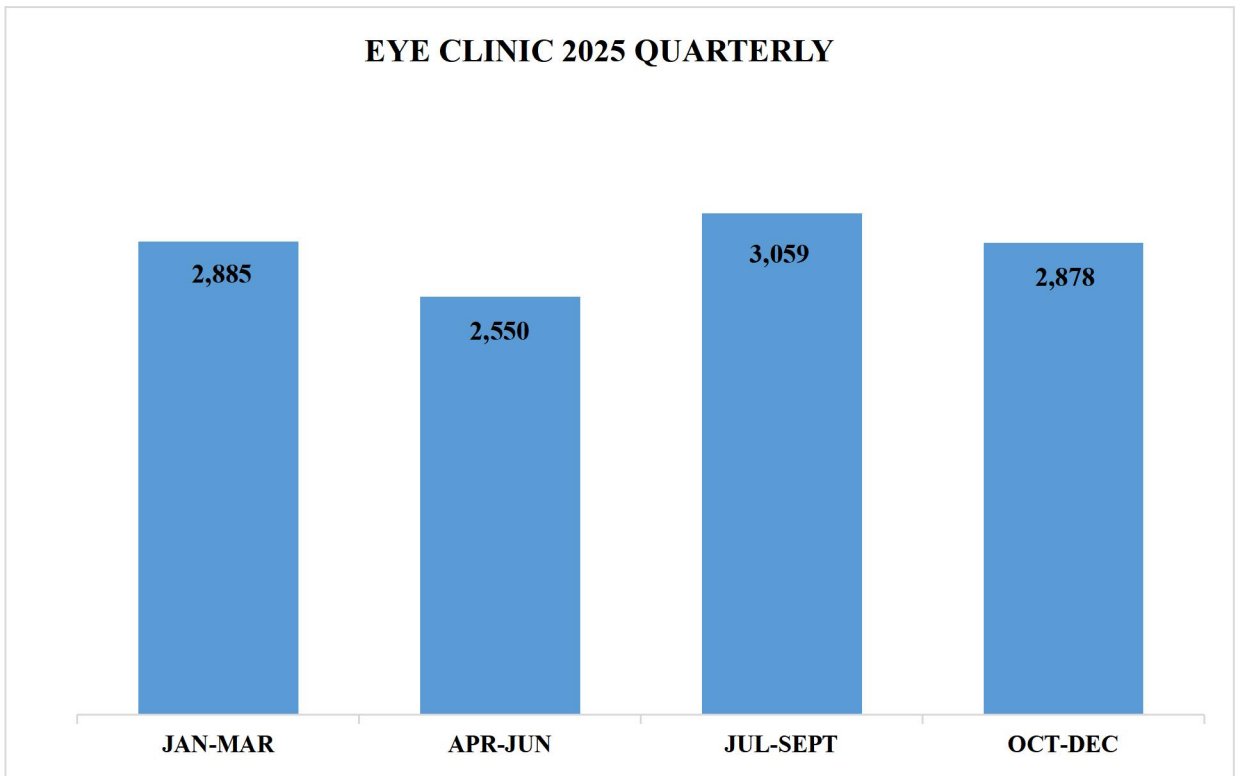




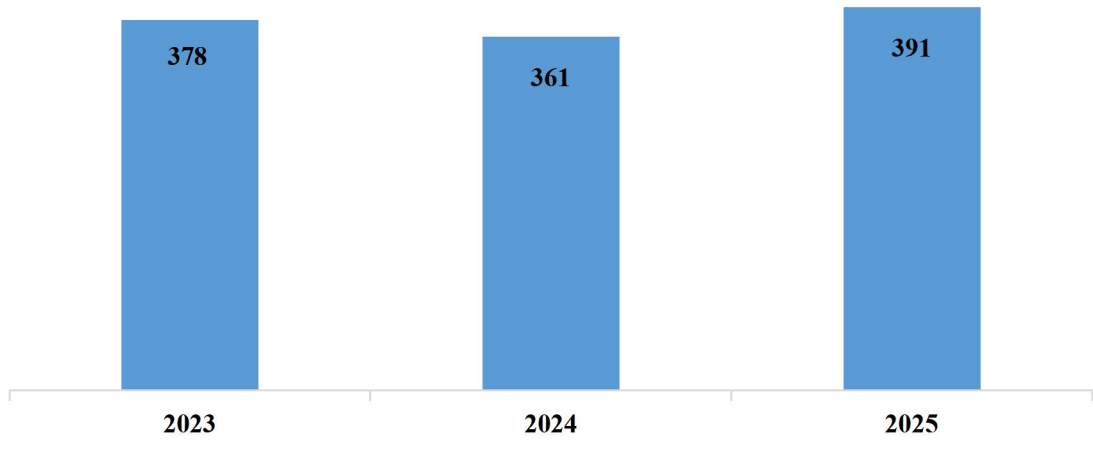
### EYE CLINIC CONSULTATIONS 2023-2025



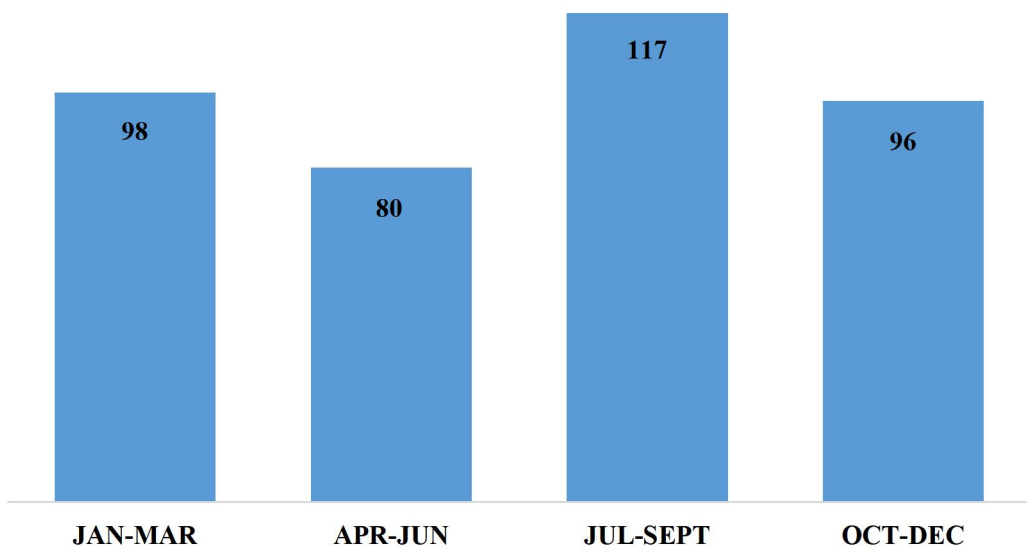
### EYE CLINIC 2025 QUARTERLY

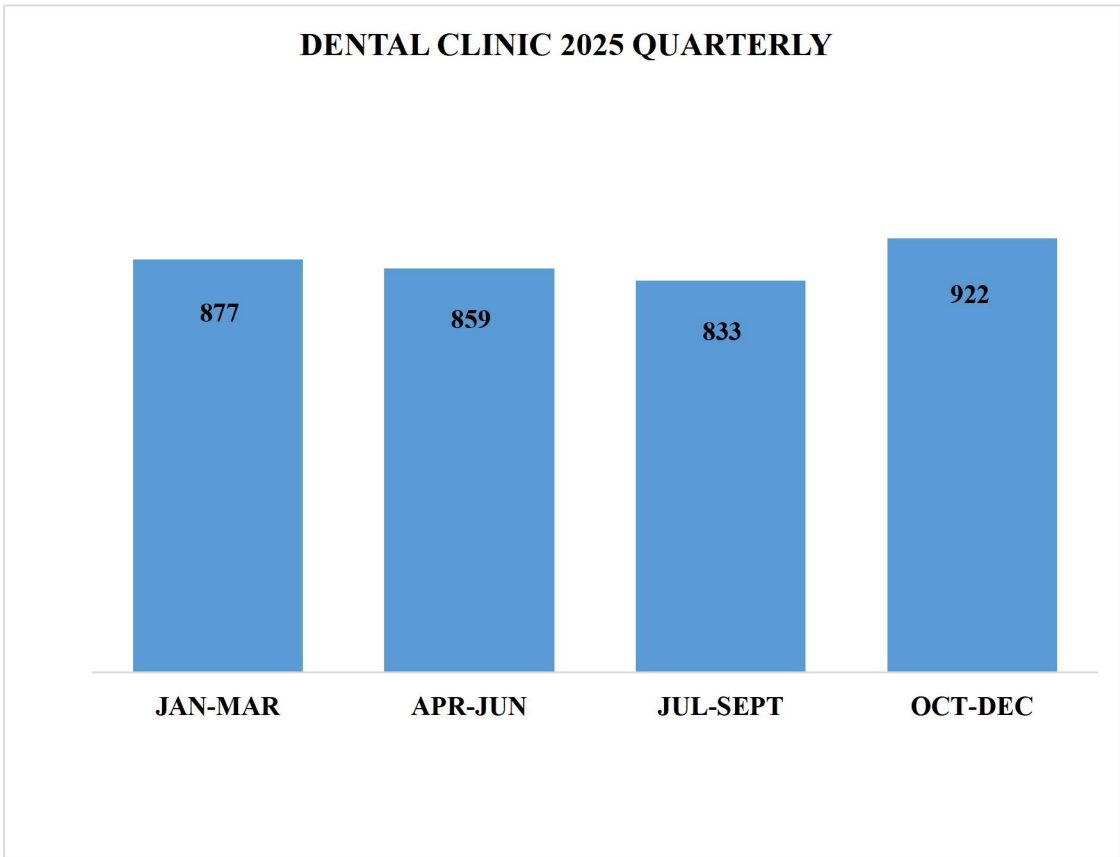
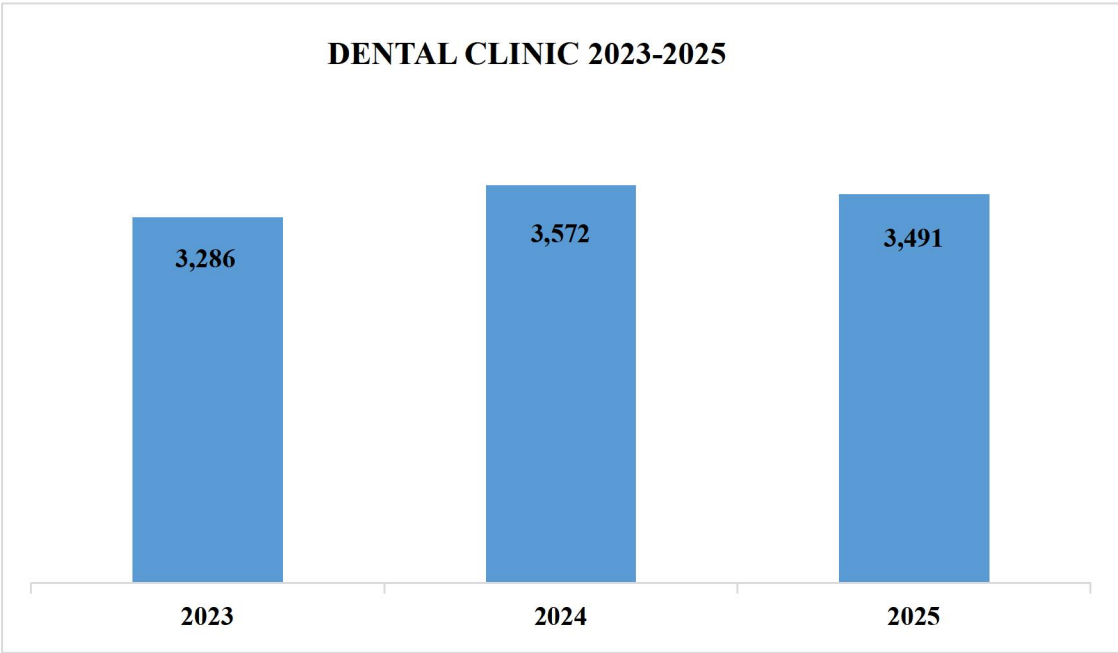


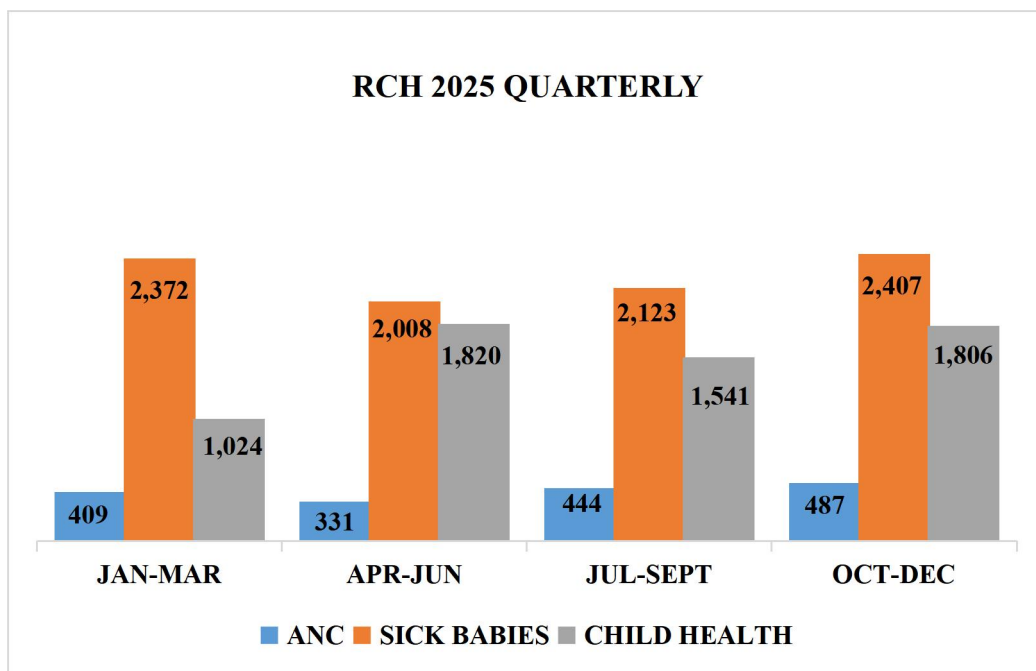
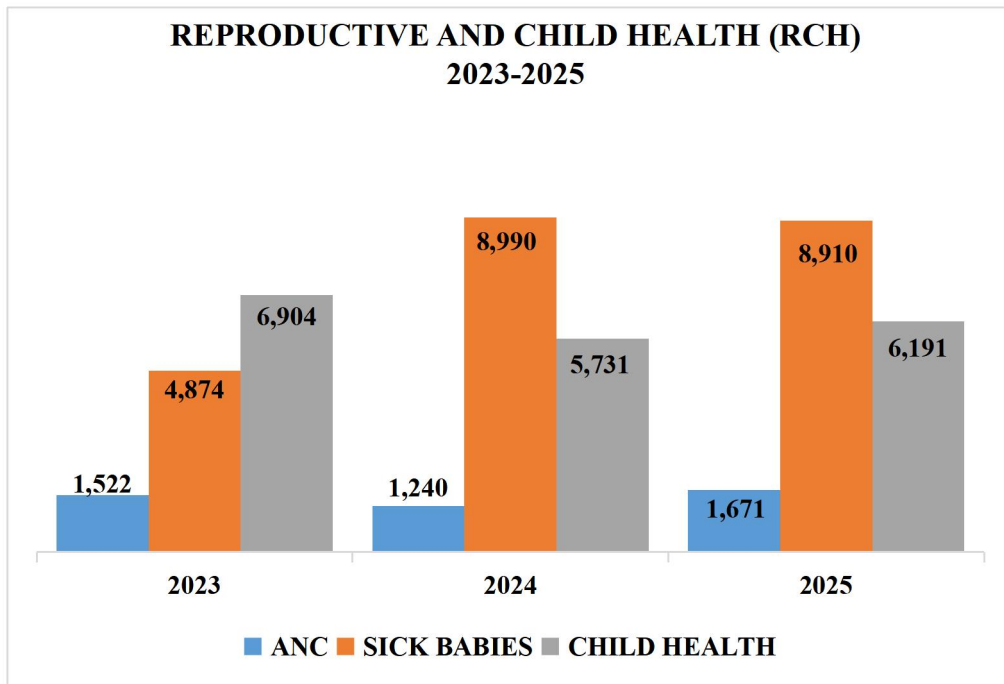
### EYE PROCEDURES 2023-2025



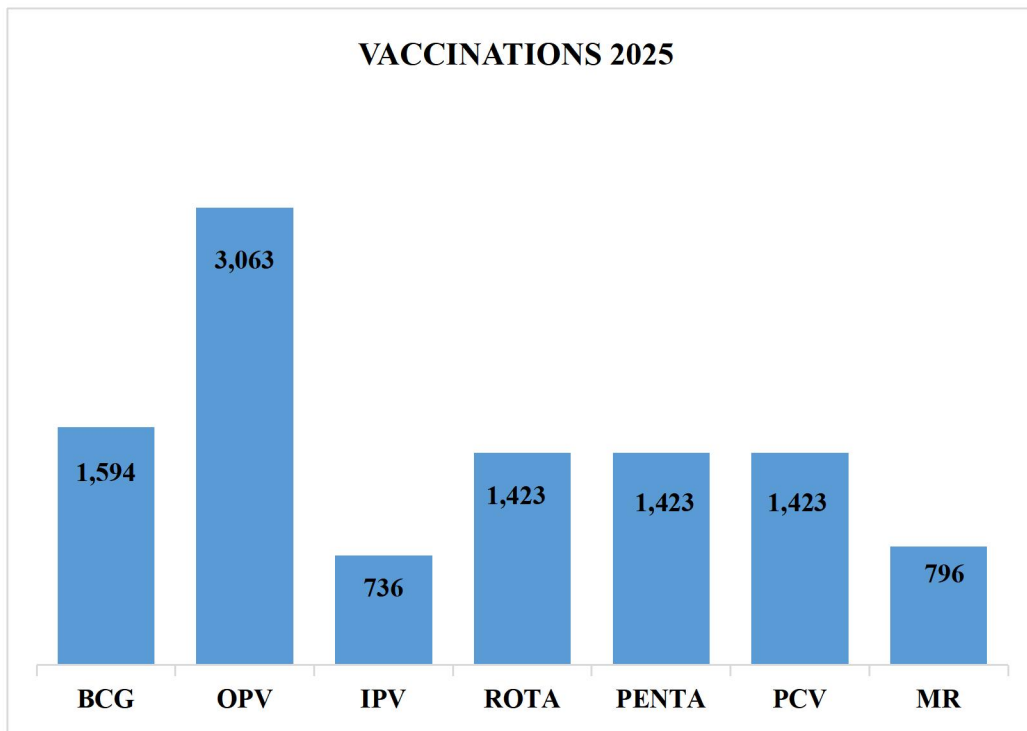
### EYE PROCEDURES 2025 QUARTERLY





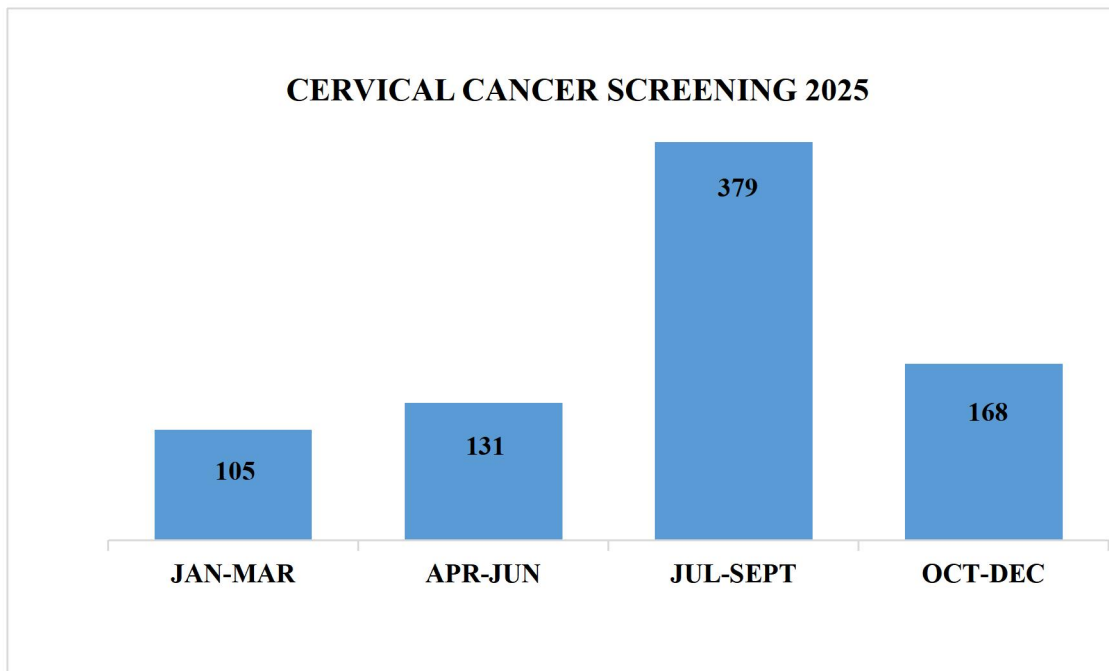
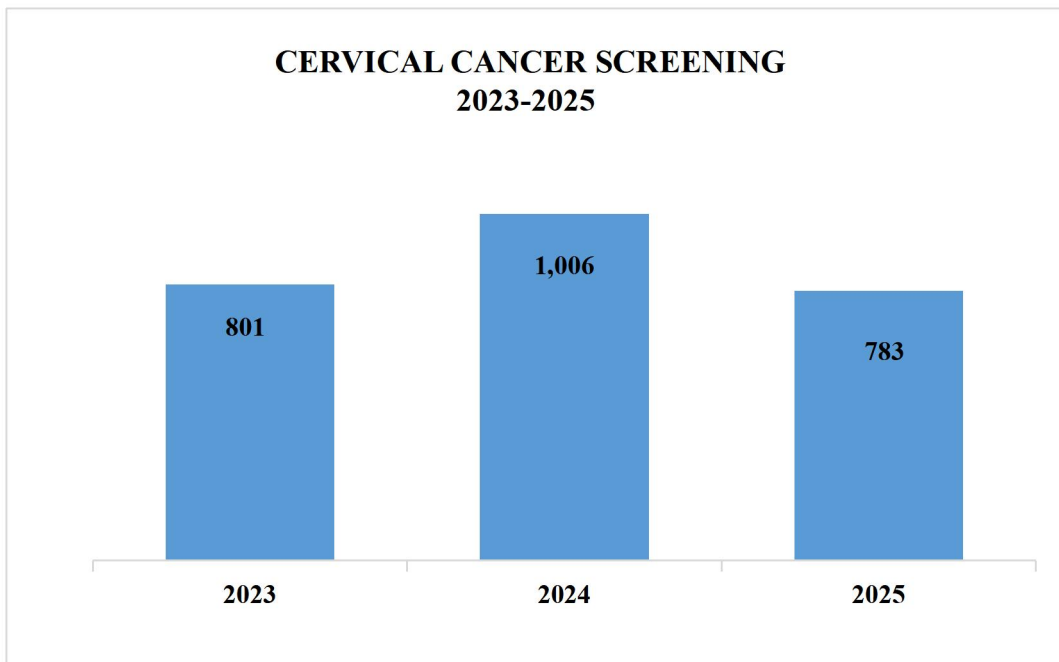


**Comment:** Children who report for Child Health come for malnutrition assessment. This service is free of charge for our patients. The data of the Child Health program is not reflected in our electronic patient management system and therefore not included in the number of attendances at our OPD.

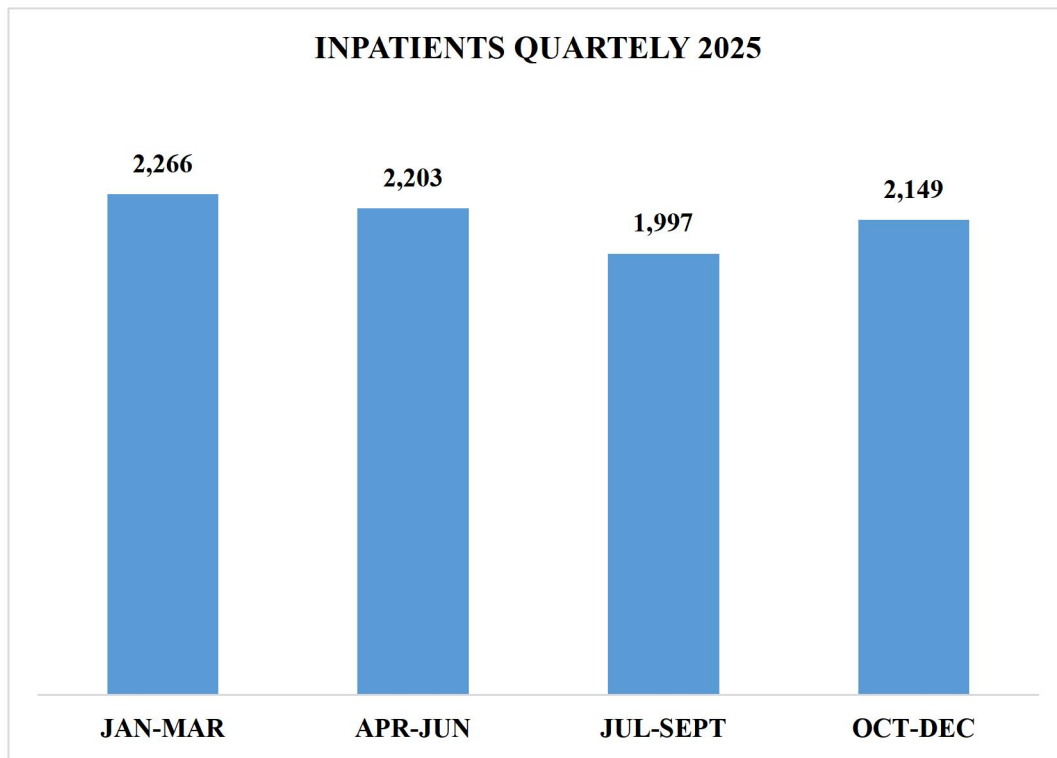
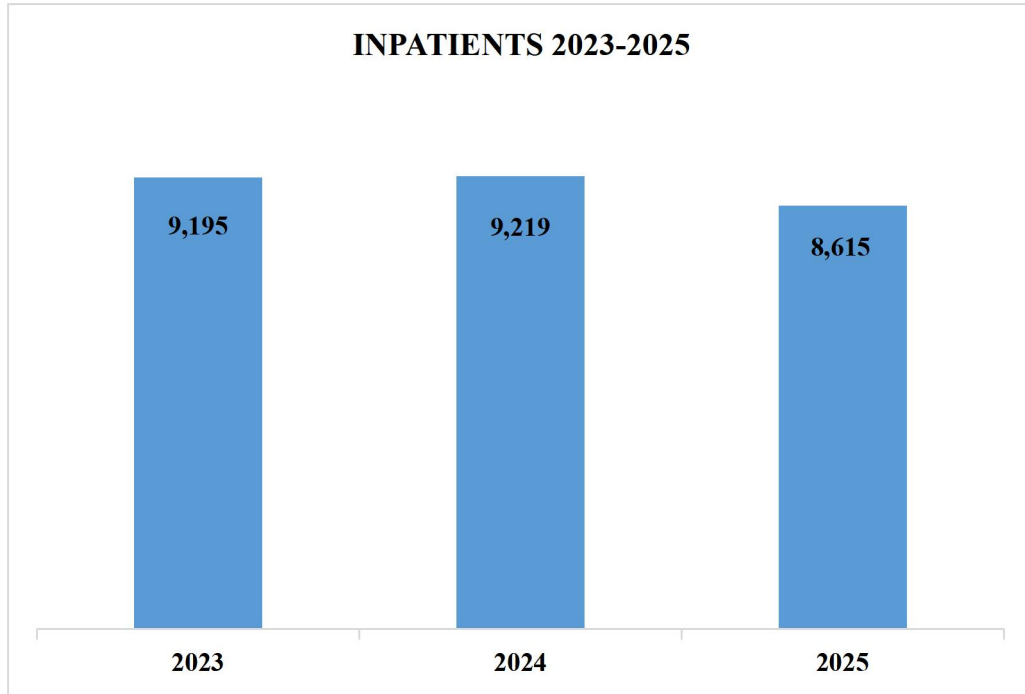


**Abbreviations:** BCG = Vaccination against Tuberculosis, OPV = Oral Polio Vaccine, IPV = Inactivated Polio Vaccine, ROTA = Vaccination against Rota virus, PENTA = Vaccination against Tetanus, Diphtheria, Pertussis, Hepatitis B, Haemophilus influenza Type B, MR = Vaccination against Measles and Rubella

**Comment:** Vaccinations are provided at our facility in Ndanda (RCH) and at our mobile clinics. Vaccinations are provided free of charge through Tanzania government Immunization program.



## 8. INPATIENT DEPARTMENT (IPD)



## 8.1 IPD DATA 2025

Hospital Beds	205
Total Admissions	8,615
Average New admissions per day	24
Total Discharge	8,160
Total Death	705
Death (%) per admission	8%
Occupied Bed days (OBD)/ Inpatient days	47,586
Average Occupied bed per day	130
Available bed days (ABD)	74,825
Bed occupancy Rate (BOR)	64%
Average Length of Stay (ALOS)	6 Days

## 8.2 TOP TEN DIAGNOSIS OF INPATIENTS 2025

SN	DISEASE	TOTAL
1	Fracture	1,452
2	Essential (primary) hypertension	898
3	Iron deficiency anaemia	896
4	Septicaemia	540
5	Renal Failure	445
6	Diabetes mellitus	417
7	Hyperplasia of prostate	384
8	Stroke	347
9	Intracranial injury	314
10	Urinary tract infection	281

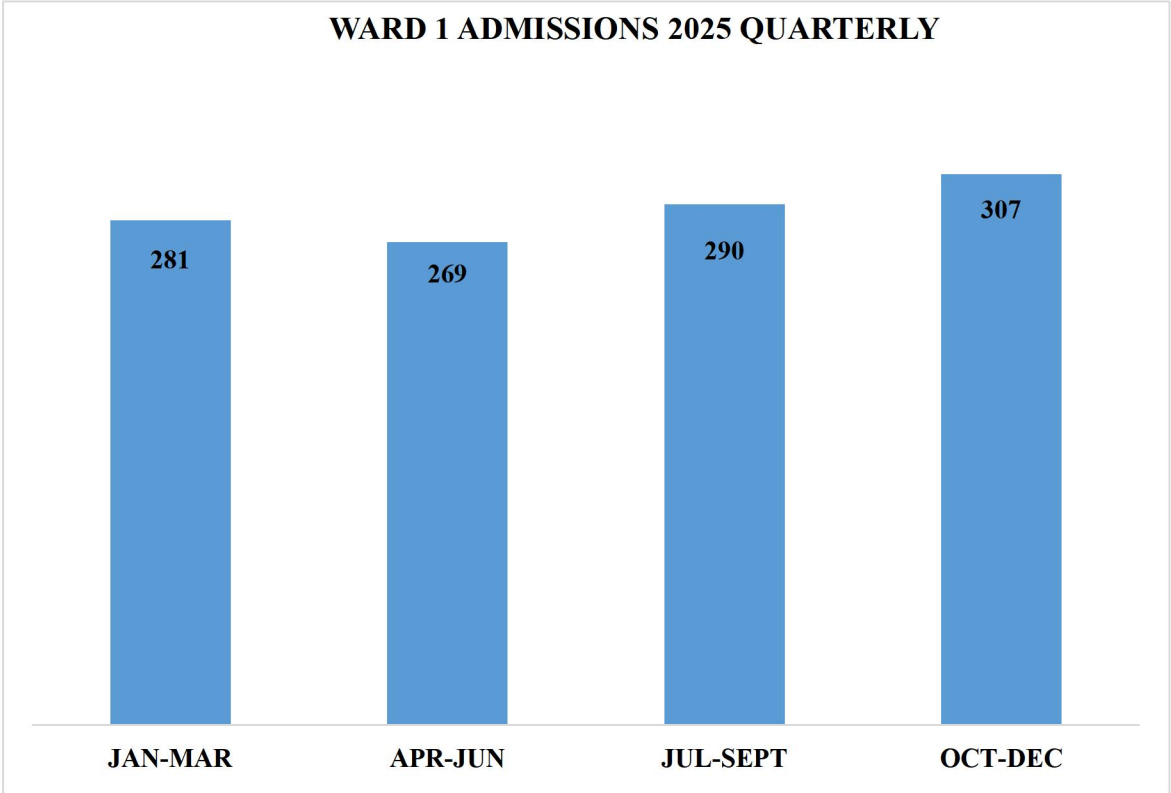
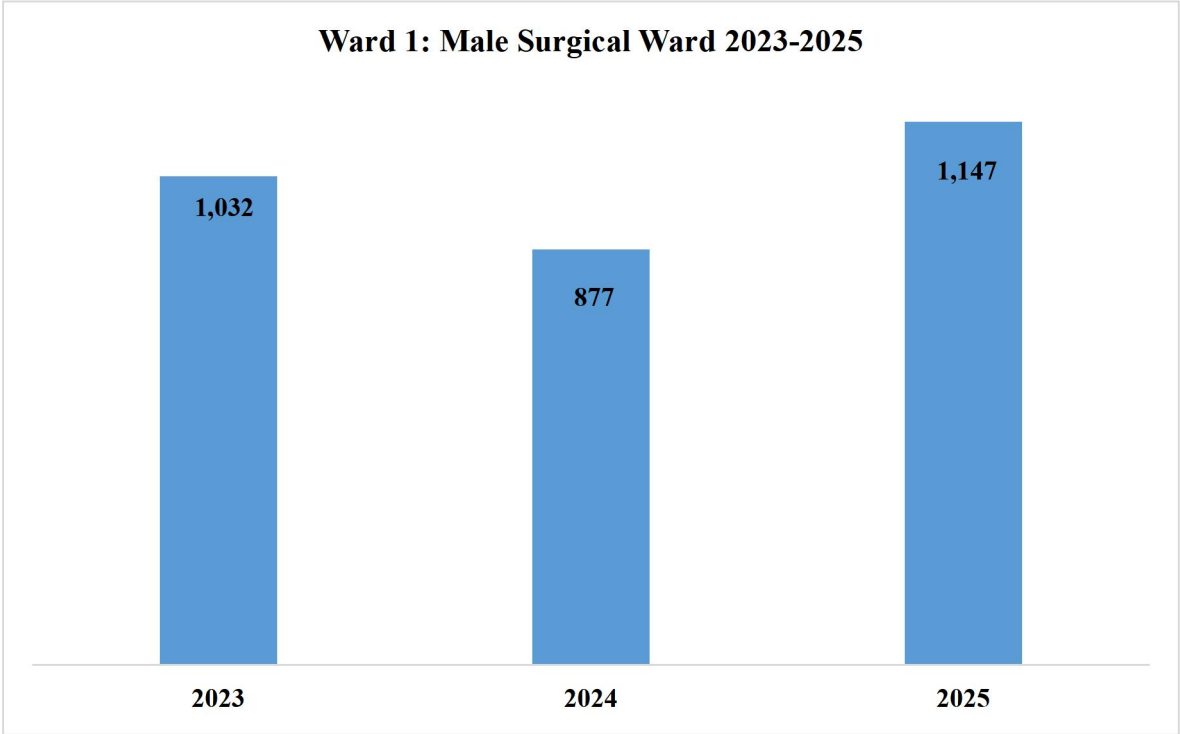
### 8.3 WARD STATISTICS

WARDS	W 1 MALE SURGICAL	W2 MALE ORTHOPE DICS	W3 FEMAL E MEDIC AL	W4 MALE MEDICAL	W5 ANTENAT AL	W6 FEMALE SURGICAL
Ward Available Beds.	24	27	21	19	9	13
Total Admission	1147	473	1016	1041	846	620
Average Admission per day	3	1	3	3	2	2
Total Death	62	25	119	156	14	26
Death (%) per admission	5.4%	5.3%	11.7%	15.0%	1.7%	4.2%
Bed occupancy Rate (BOR) in %	85%	57%	44%	53%	112%	78%
Average Length of Stay (ALOS)	7 Days	12 Days	3 Days	3 Days	6 Days	6 Days

WARDS	W7 POSTNATA L	W10 PEDIATRIC	W12 PRIVATE	NICU	ICU
Ward Available Beds.	34	22	13	18	5
Total Admission	1189	1042	268	641	332
Average Admission per day	3	3	1	2	1
Total Death	0	78	5	148	72
Death (%) per admission	0.0%	7.5%	1.9%	23.4%	21.7%
Bed occupancy Rate (BOR) in %	52%	75%	33%	75%	61%
Average Length of Stay	6 Days	6 Days	5 Days	7 Days	8 Days

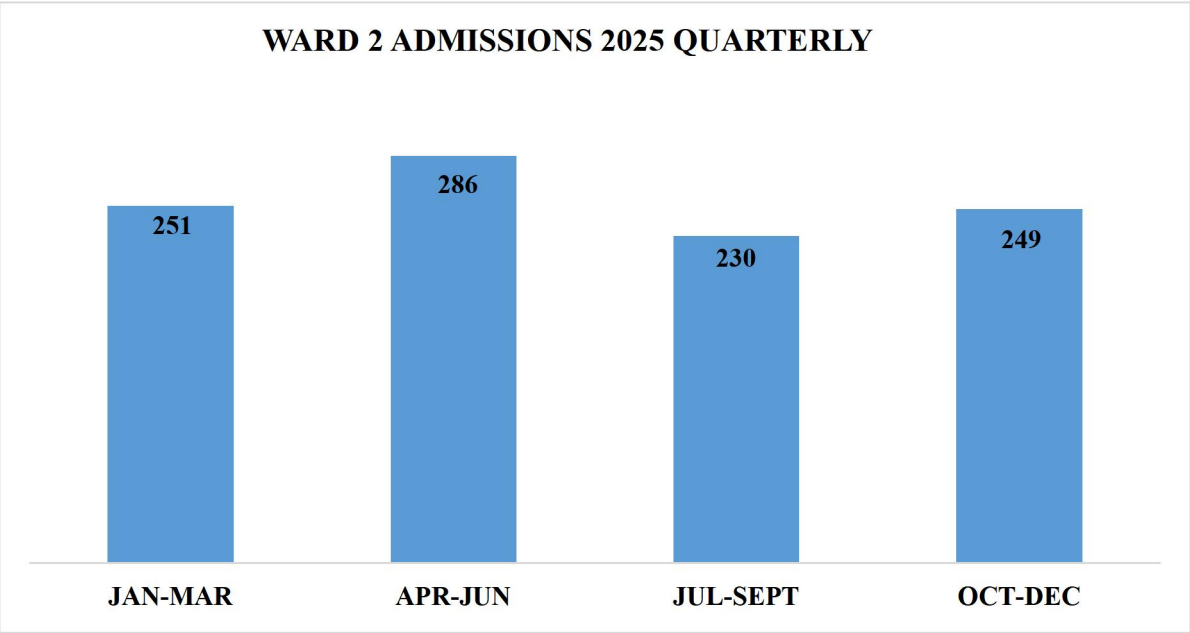
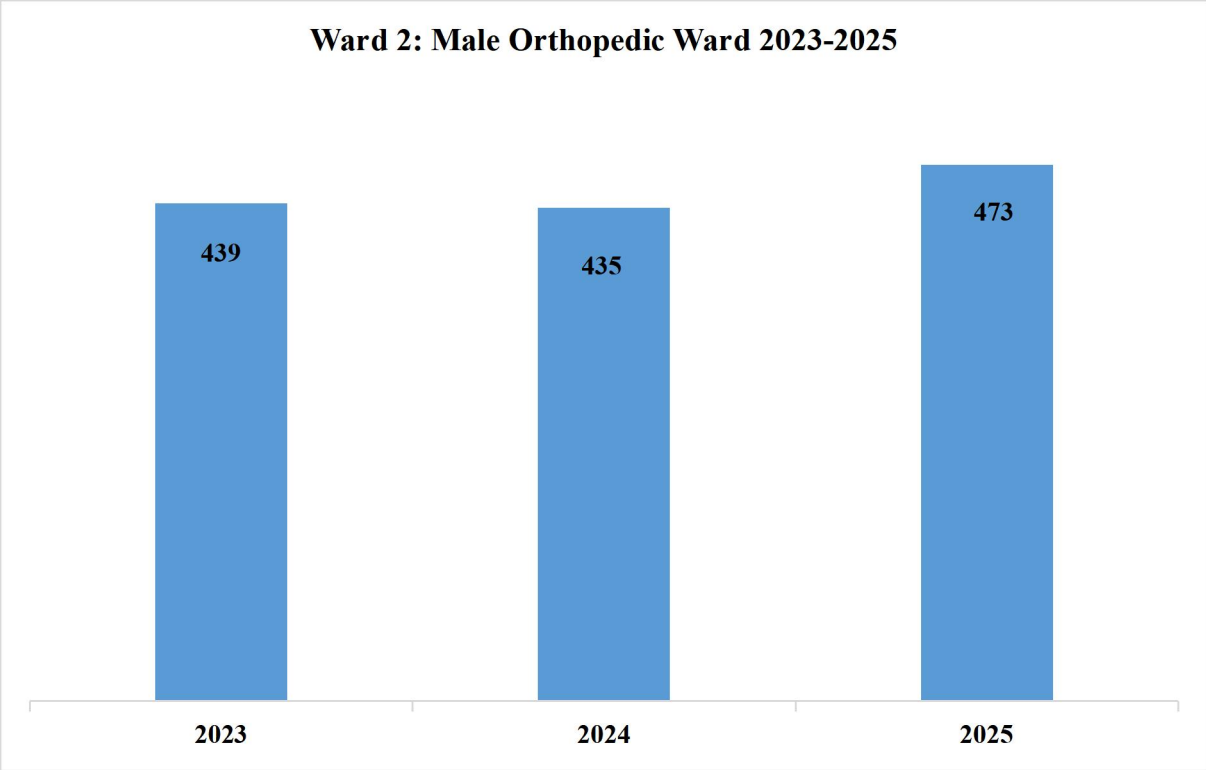
**8.3.1 Ward 1: Male Surgical Ward**

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



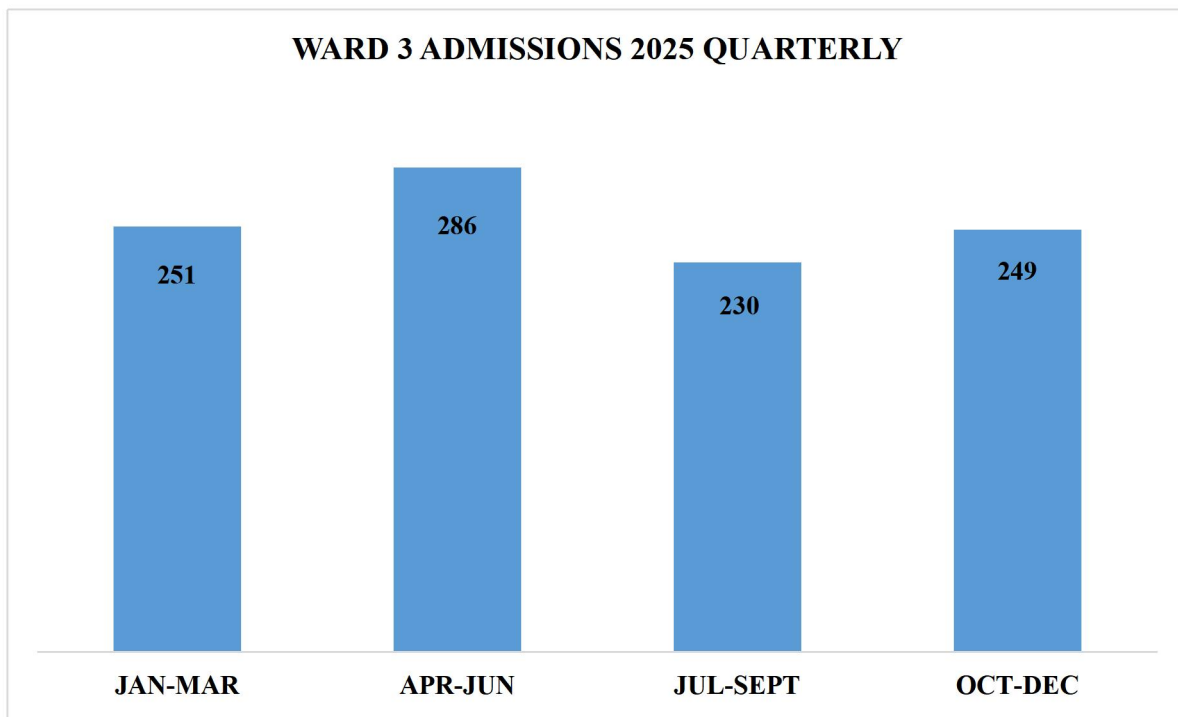
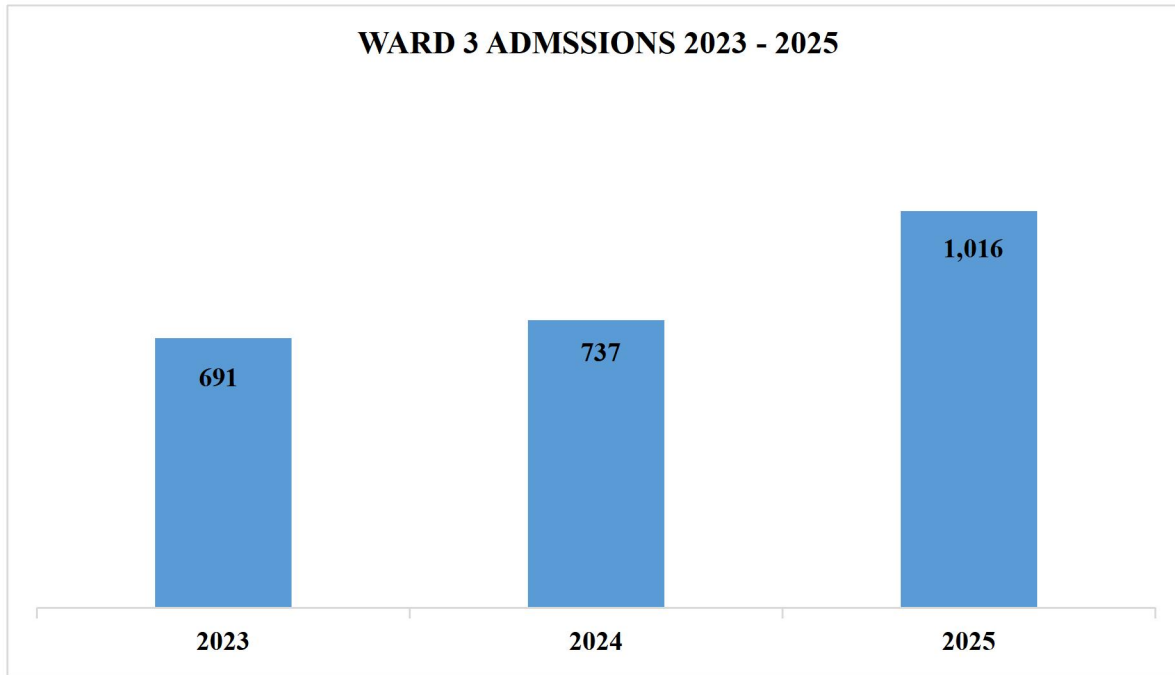
**8.3.2 Ward 2: Male Orthopedic Ward**

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



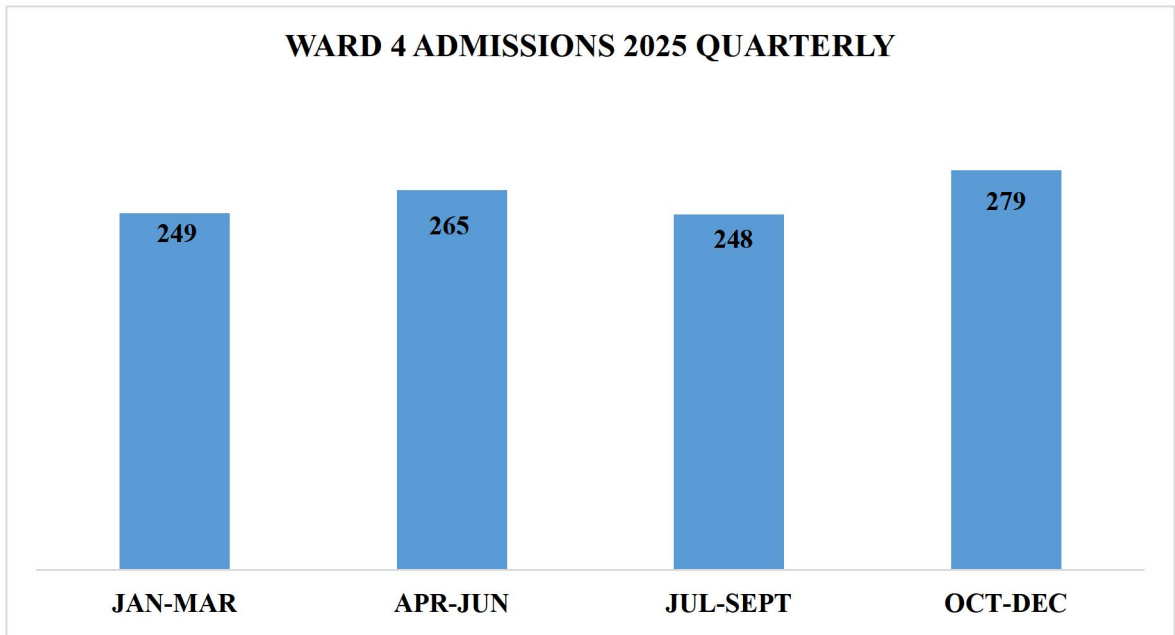
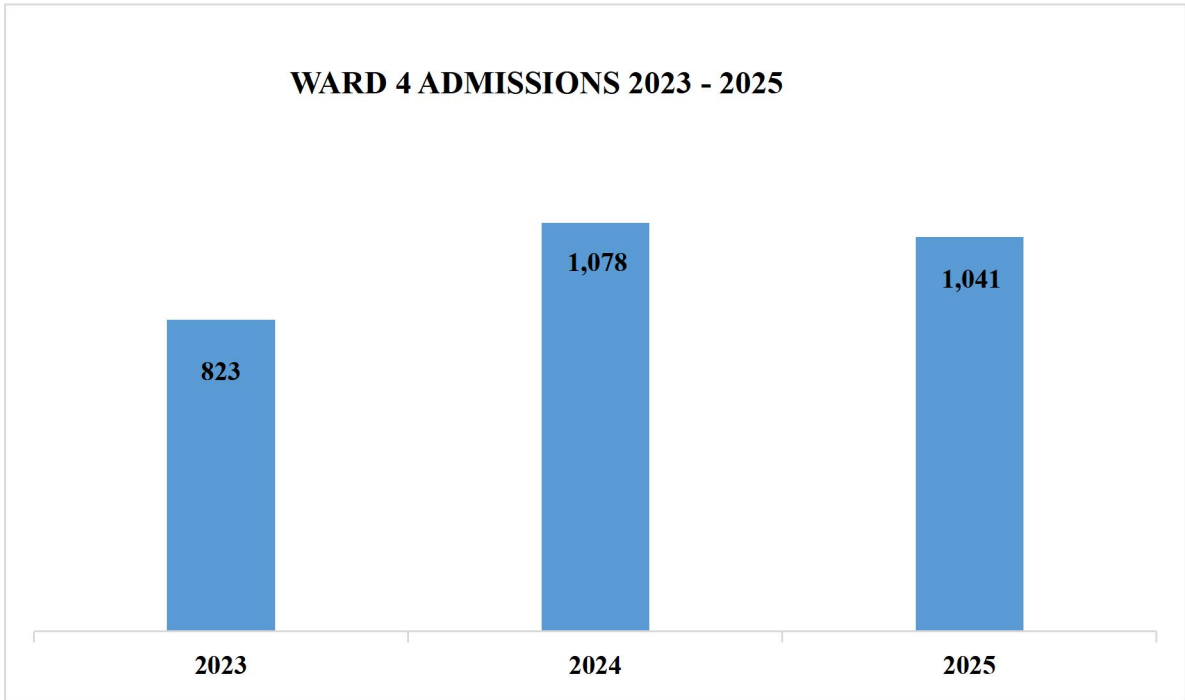
### 8.3.3 Ward 3: Female Medical Ward.

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



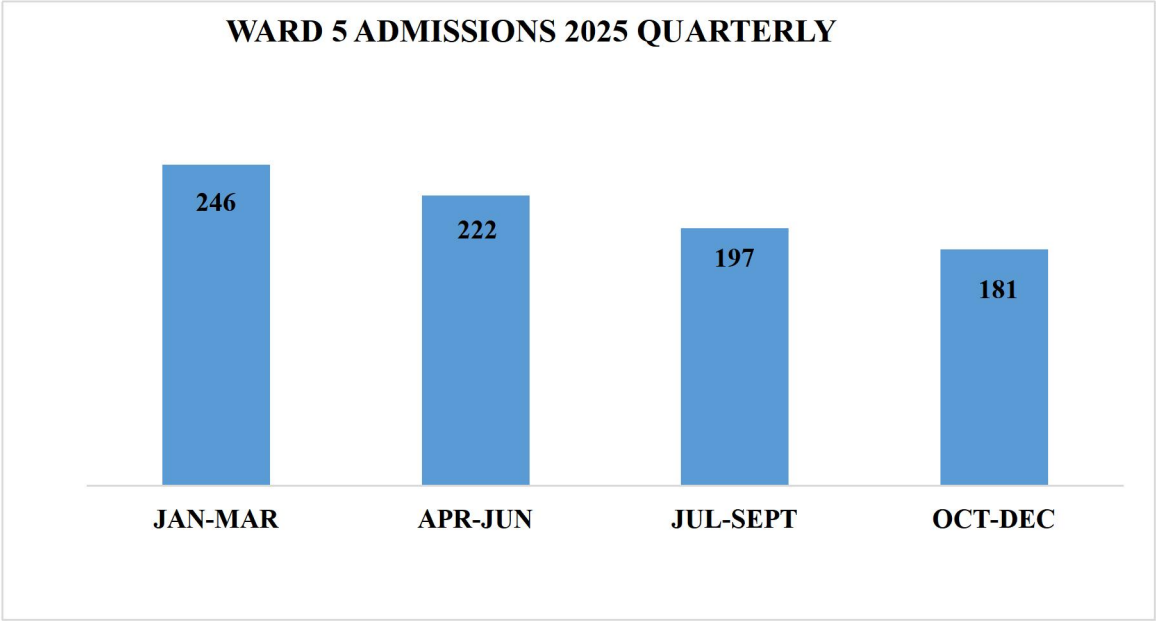
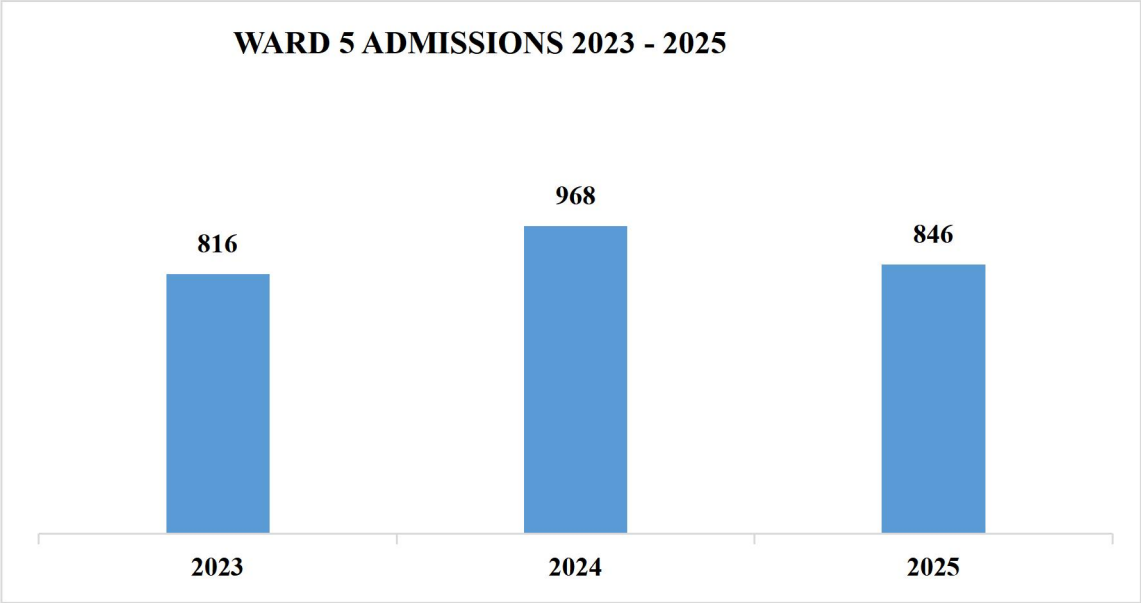
### 8.3.4 Ward 4: Male Medical Ward

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



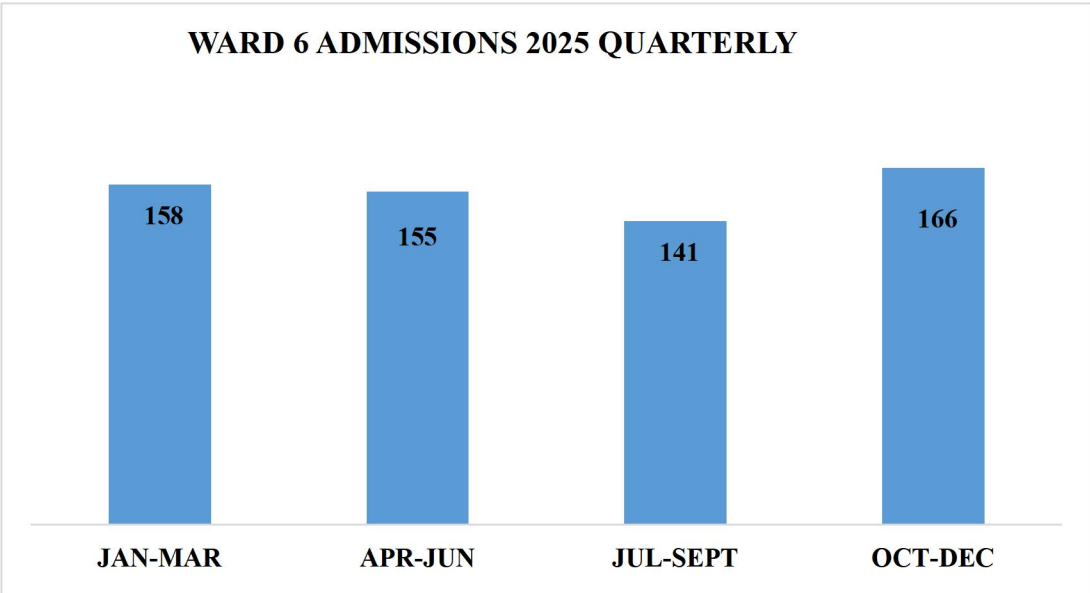
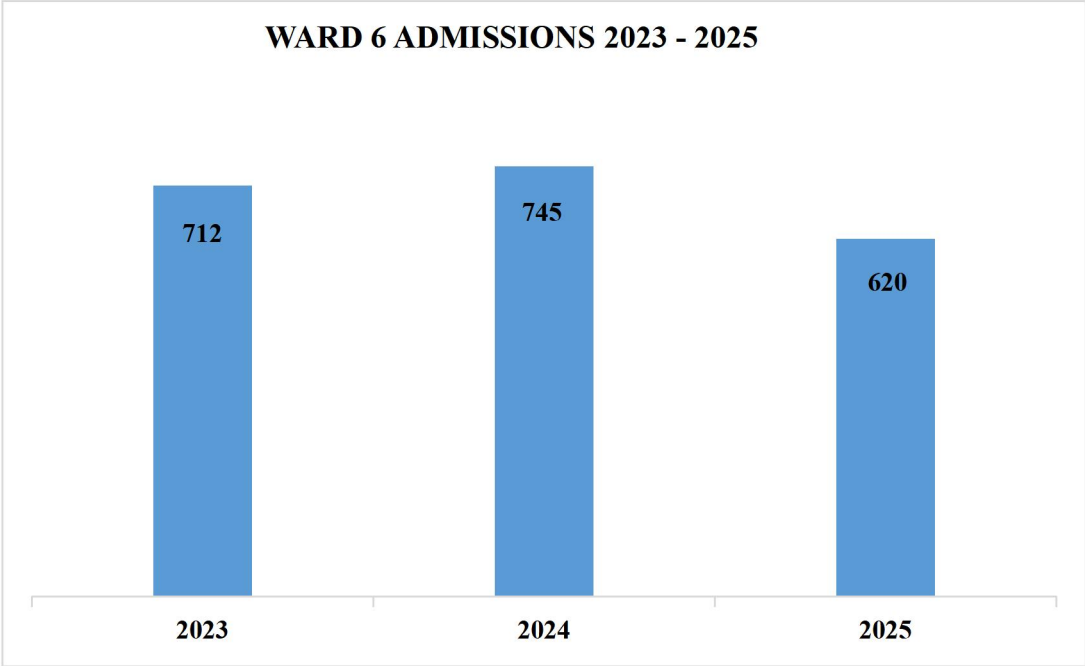
**8.3.5 Ward 5: Gynecological and Ante-Natal ward**

Ward 5 is responsible for admission of pre natal mothers and gynecological conditions.



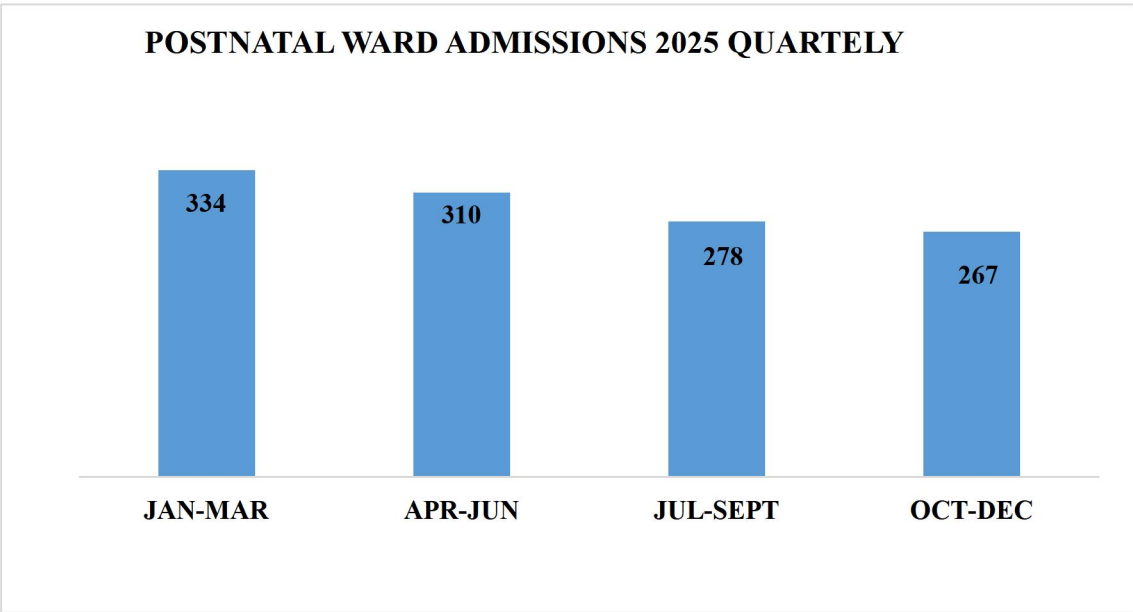
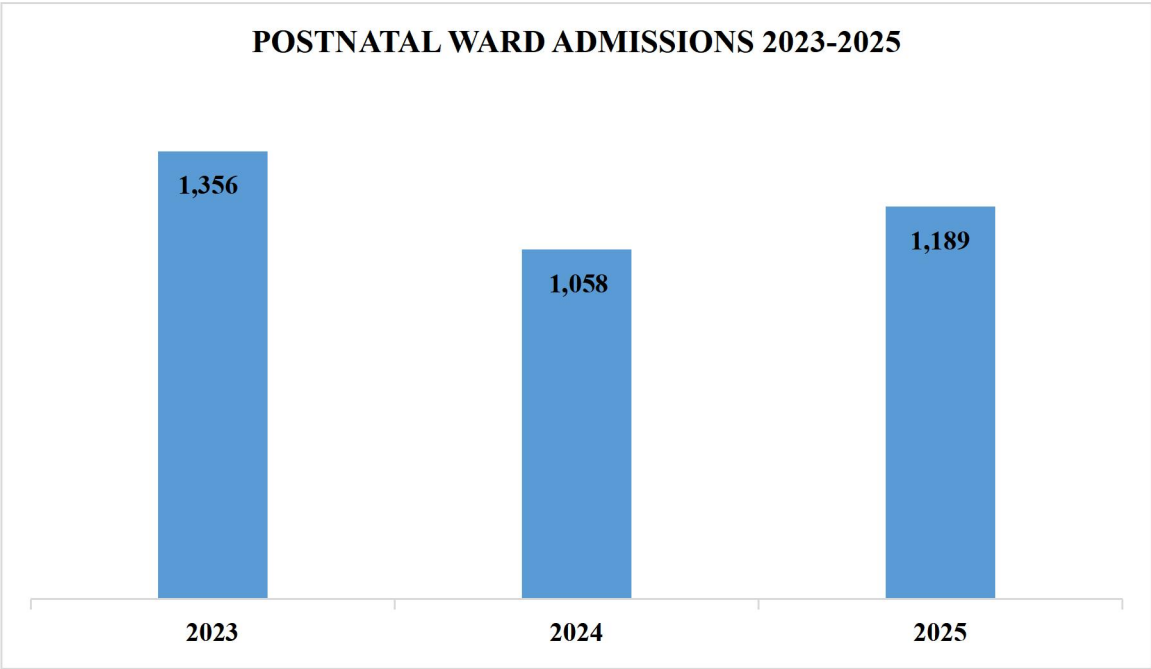
**8.3.6 Ward 6: Female Surgical Ward**

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

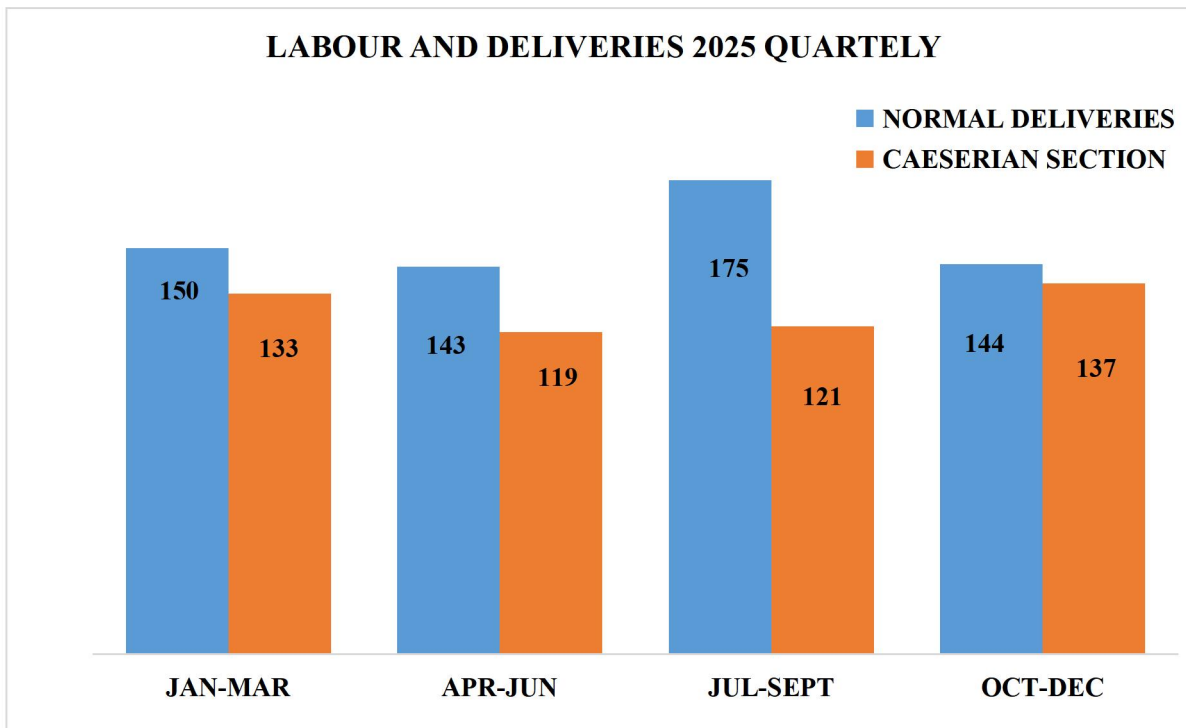
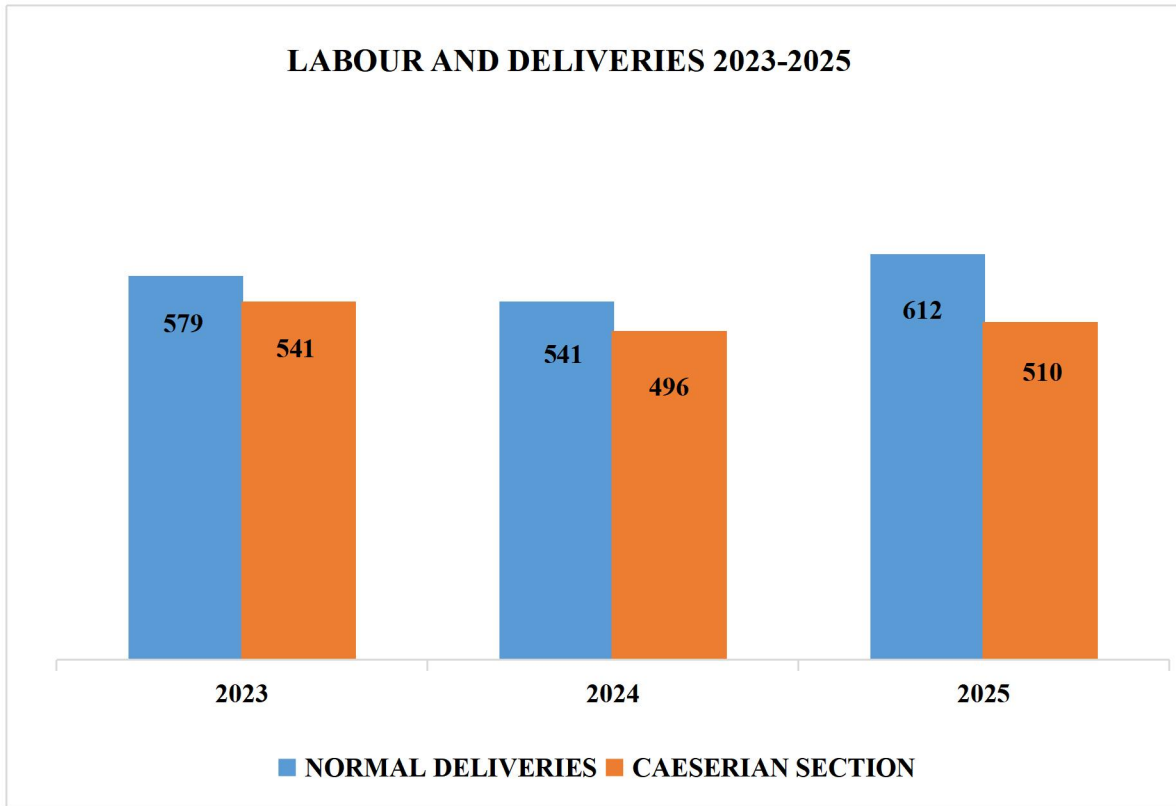


**8.3.7 Ward 7: Postnatal Ward**

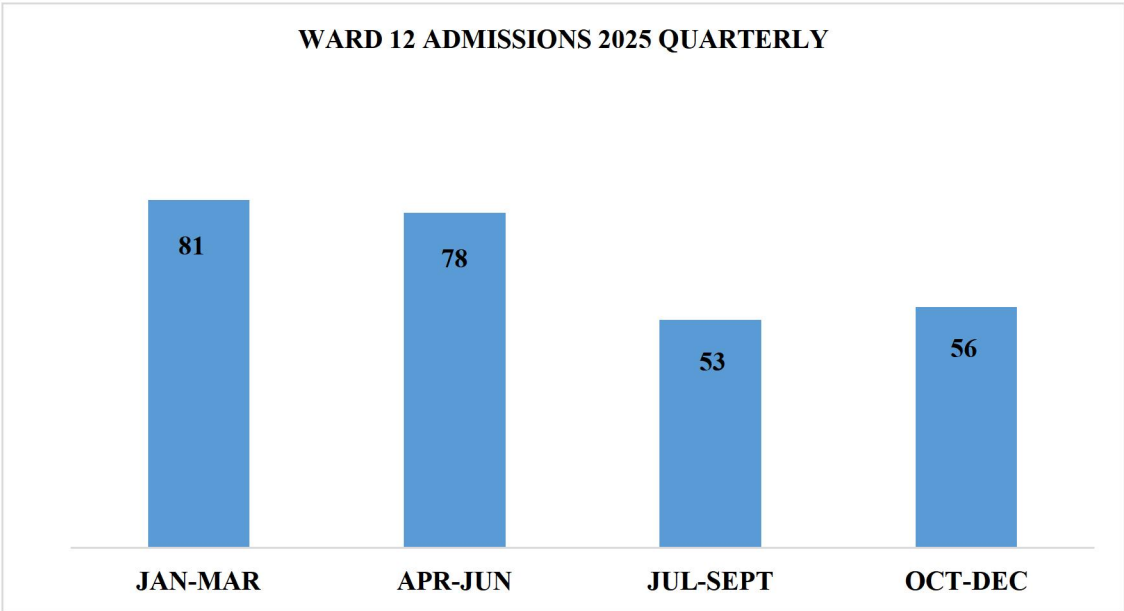
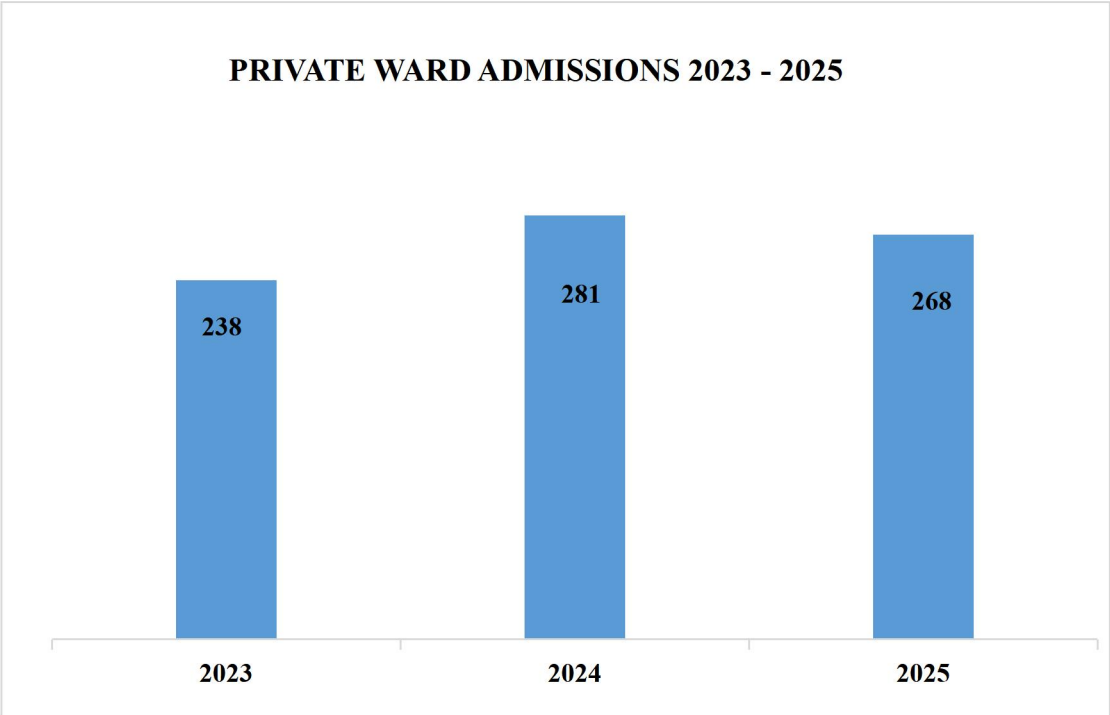
Ward 7 is responsible for patients after delivery.



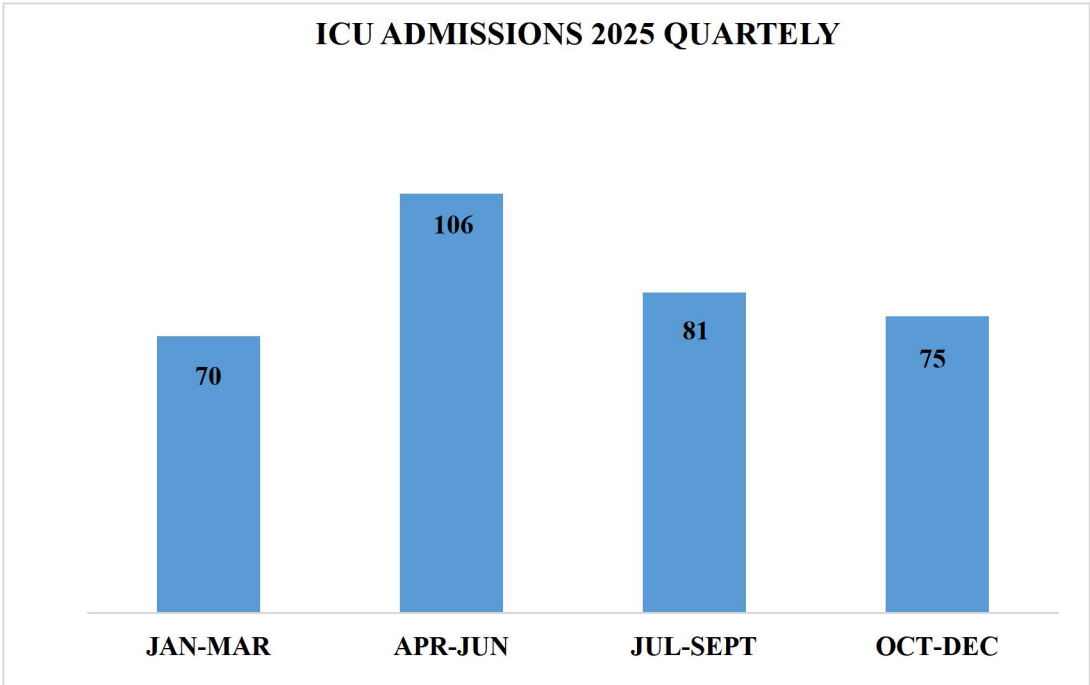
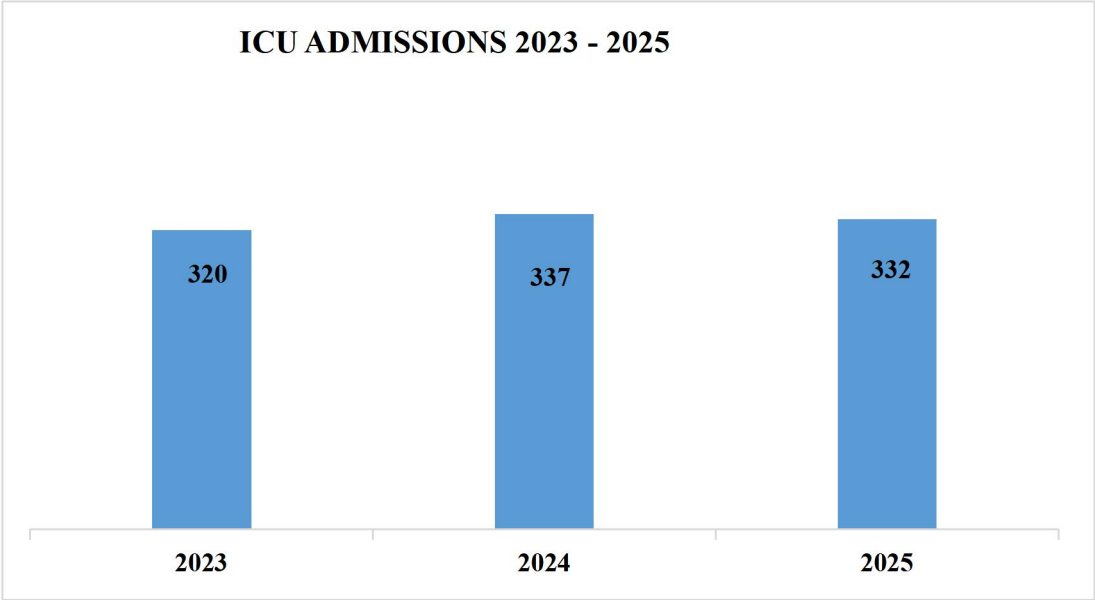
### 8.3.8 Ward 8: Labour Ward



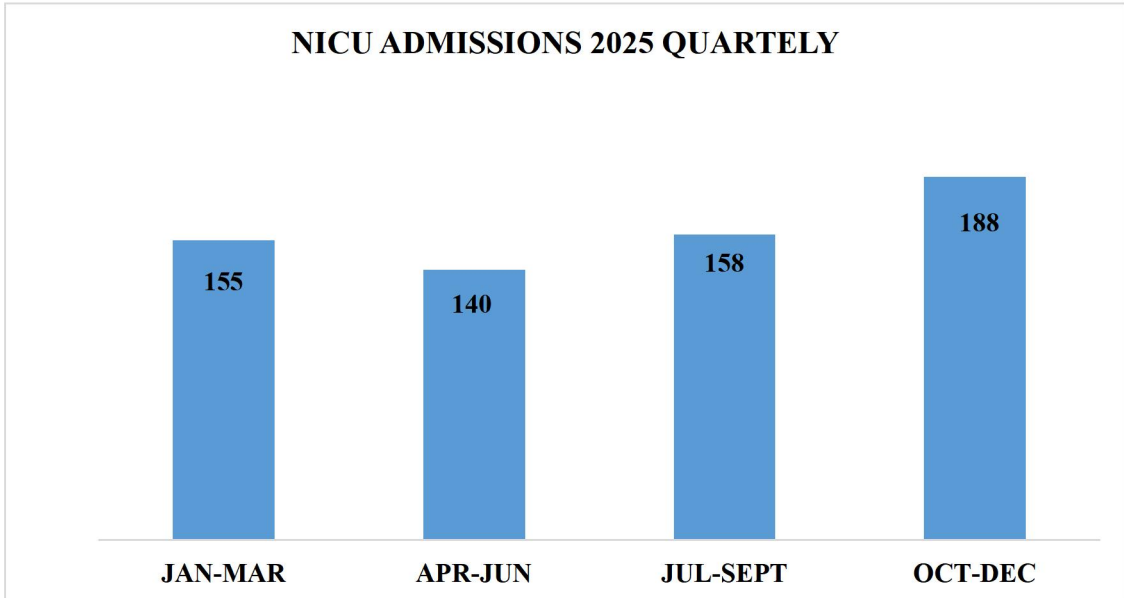
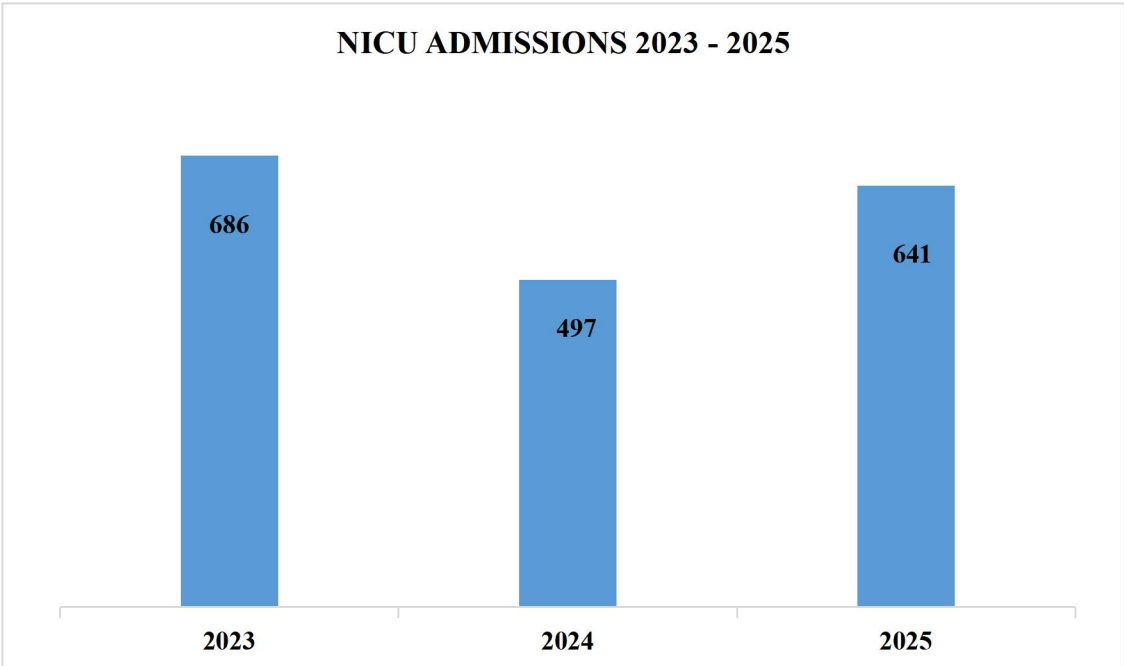
**8.3.9 Ward 12: Private Ward**



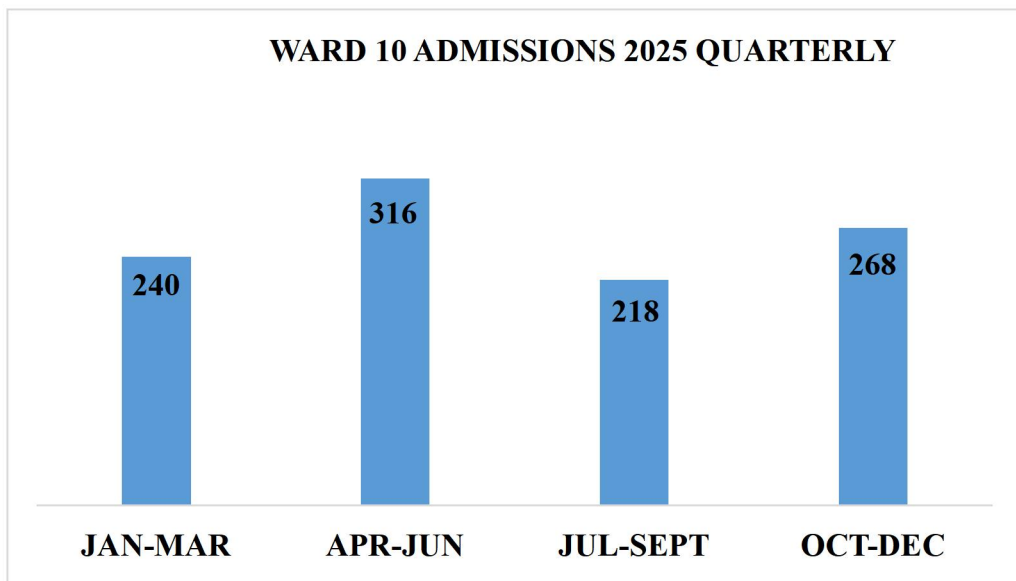
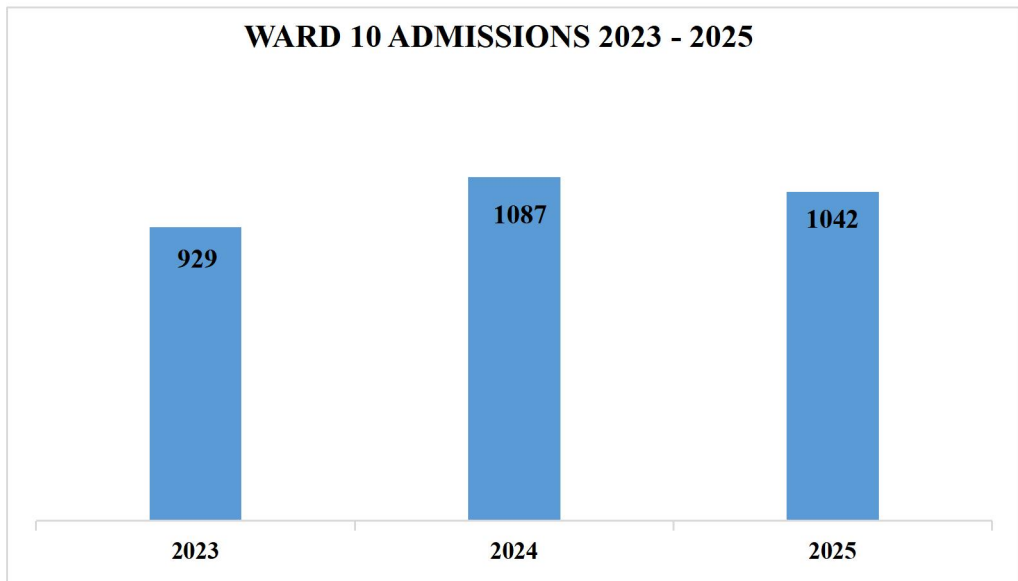
**8.3.10 Intensive Care Unit (ICU)**



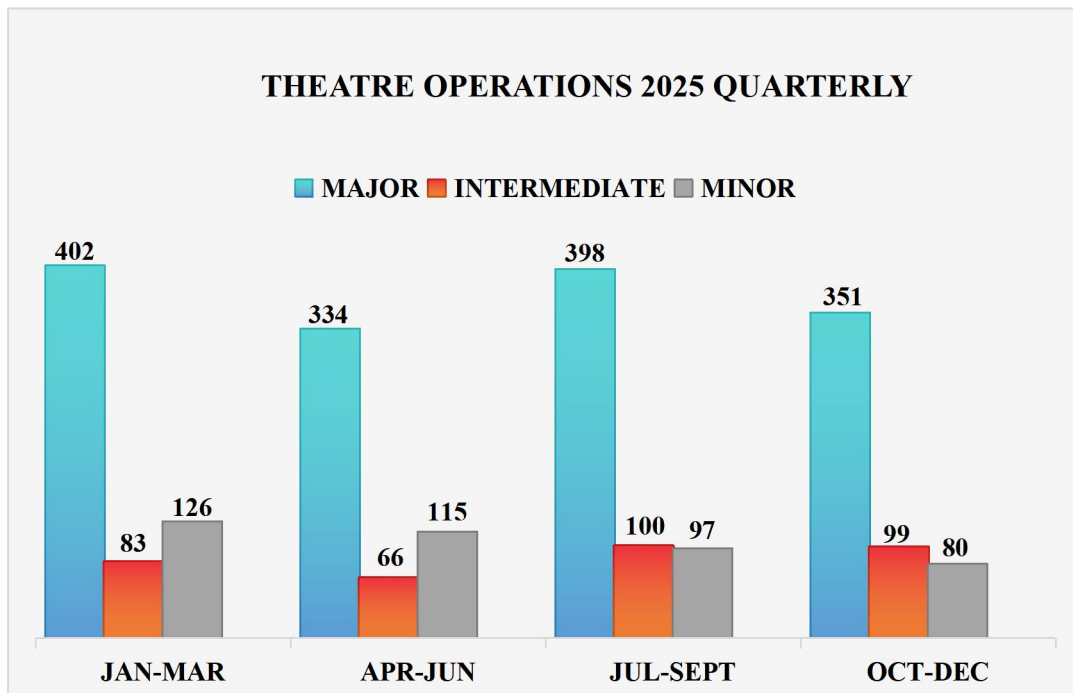
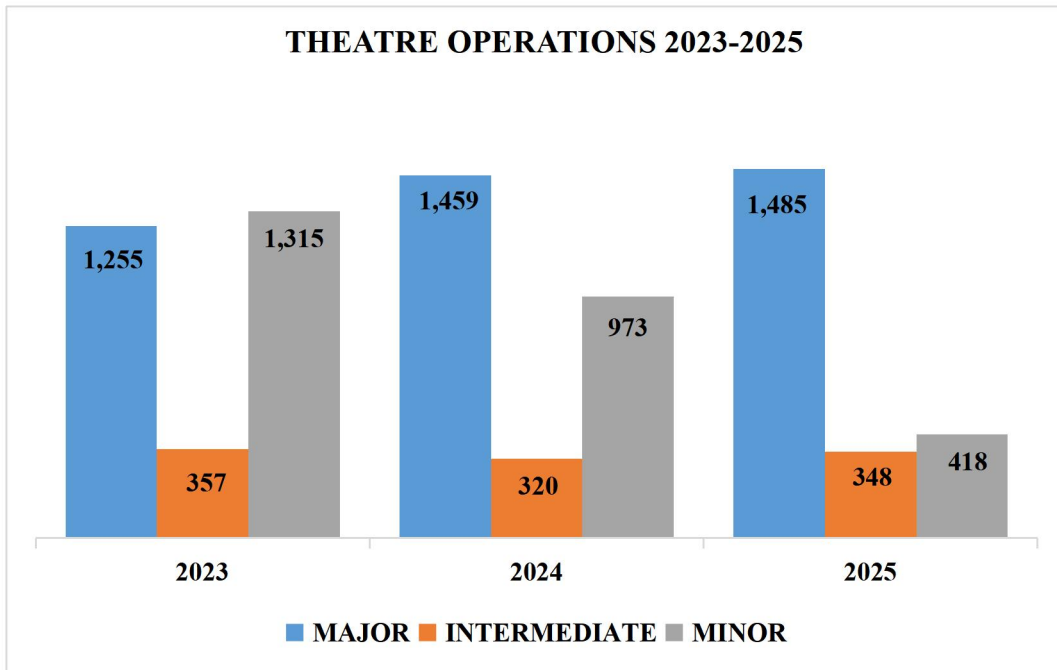
**8.3.11 Neonatal Intensive Care Unit (NICU)**



**8.3.12 Ward 10: Paediatric ward**

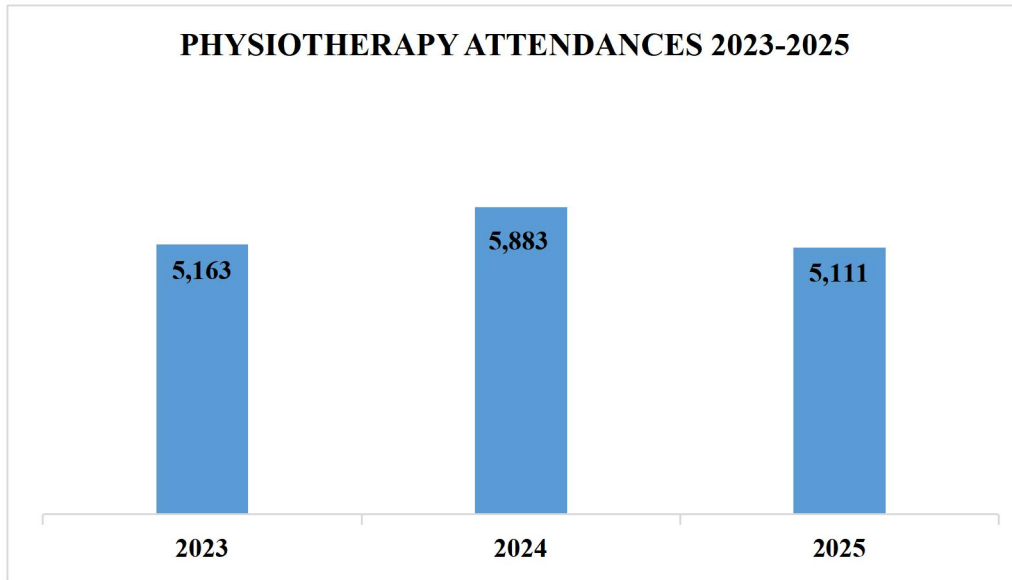


## 9. THEATRE

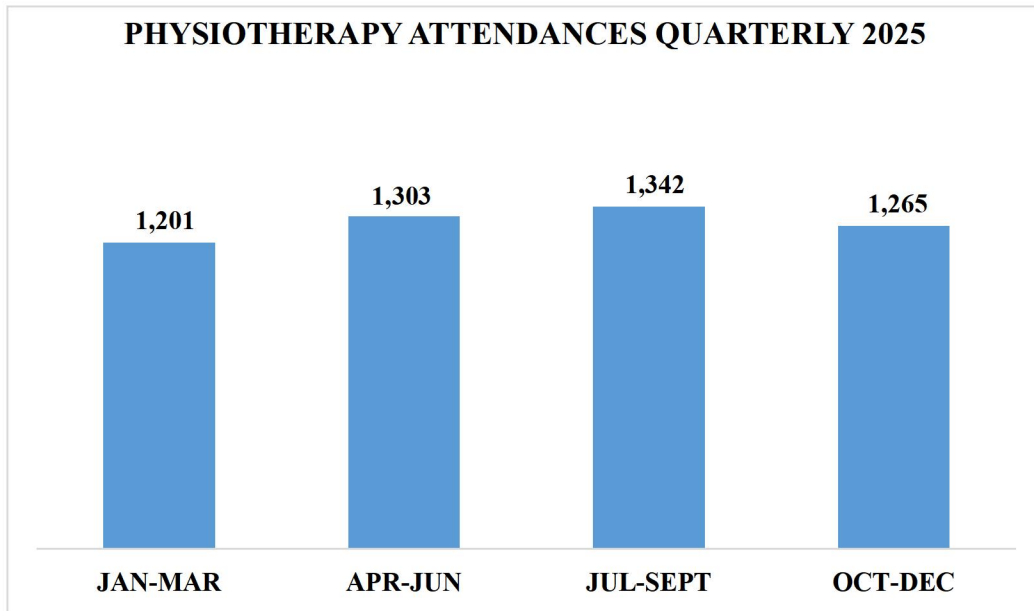


## 10. OTHER SUPPORTING DEPARTMENTS

### 10.1 Physiotherapy

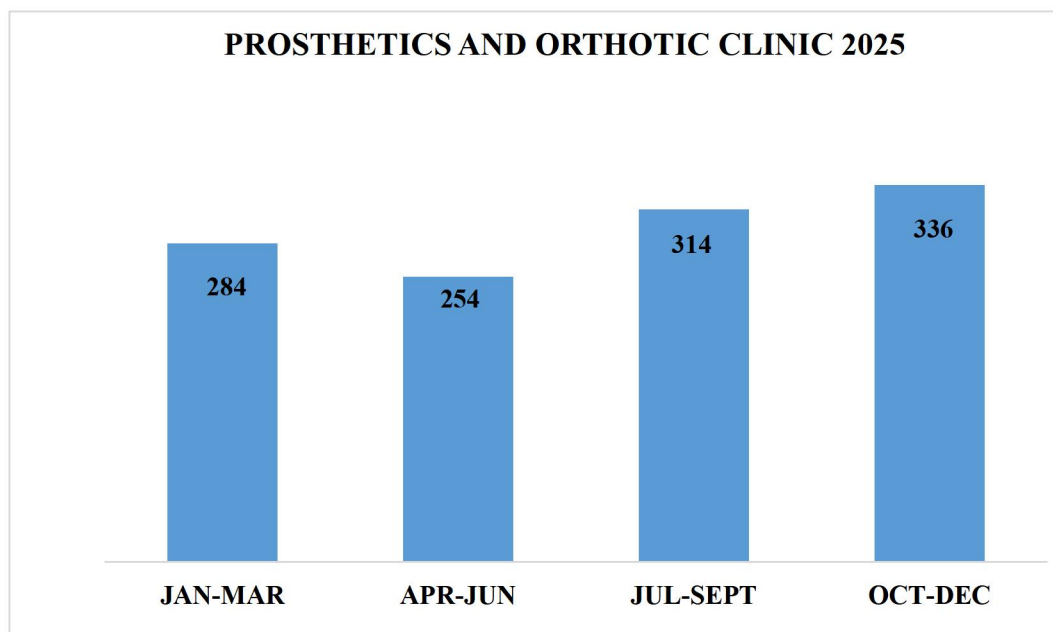
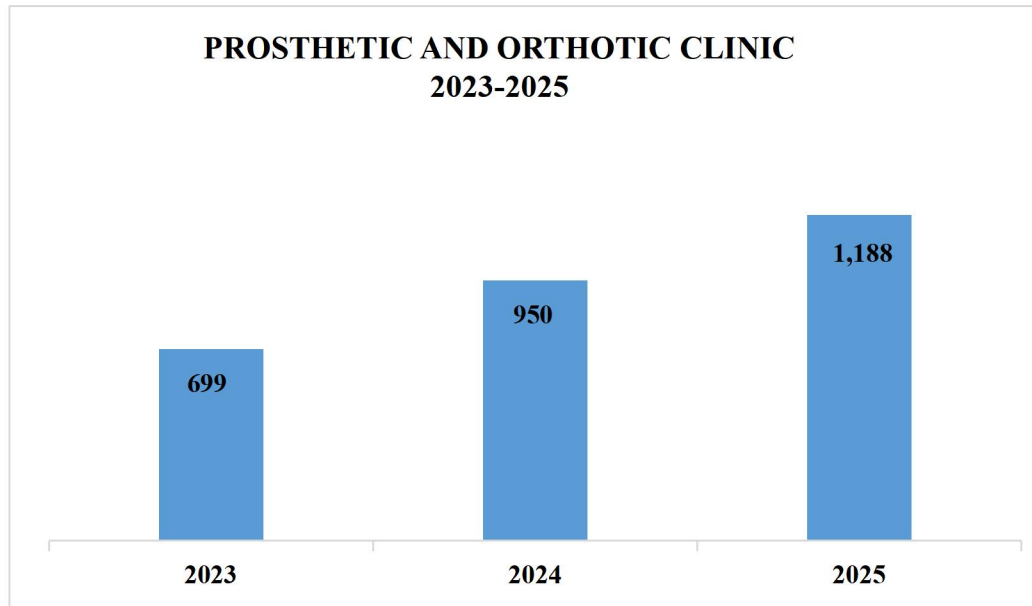


**Comment:** Due to the high demand for these services, we have employed a third physiotherapist during the year 2025



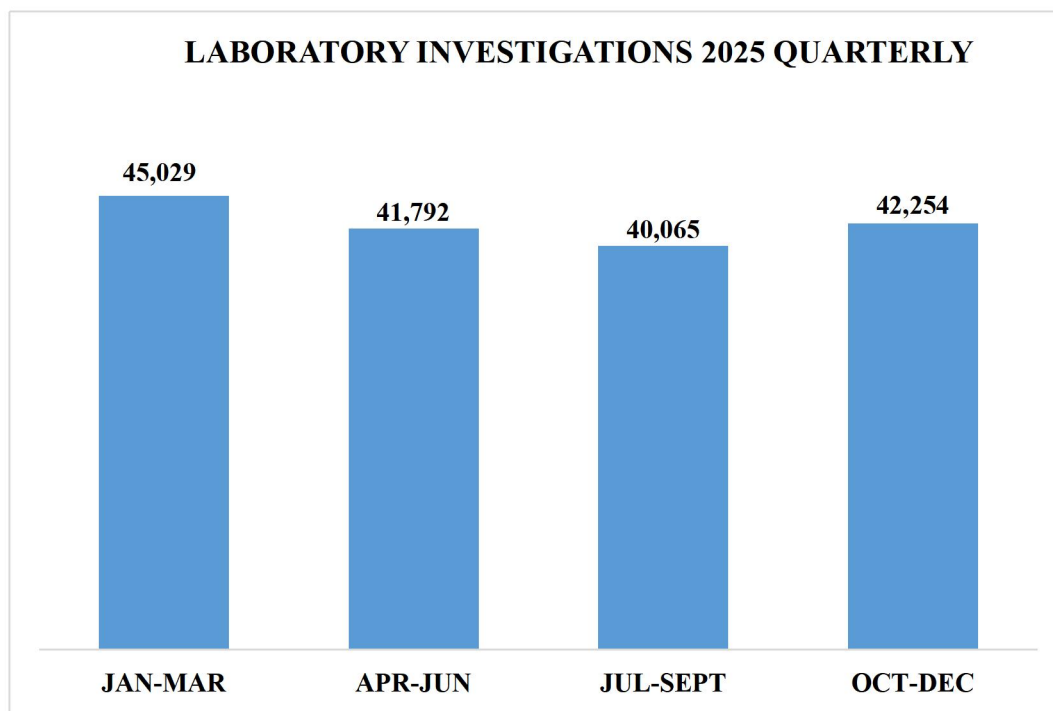
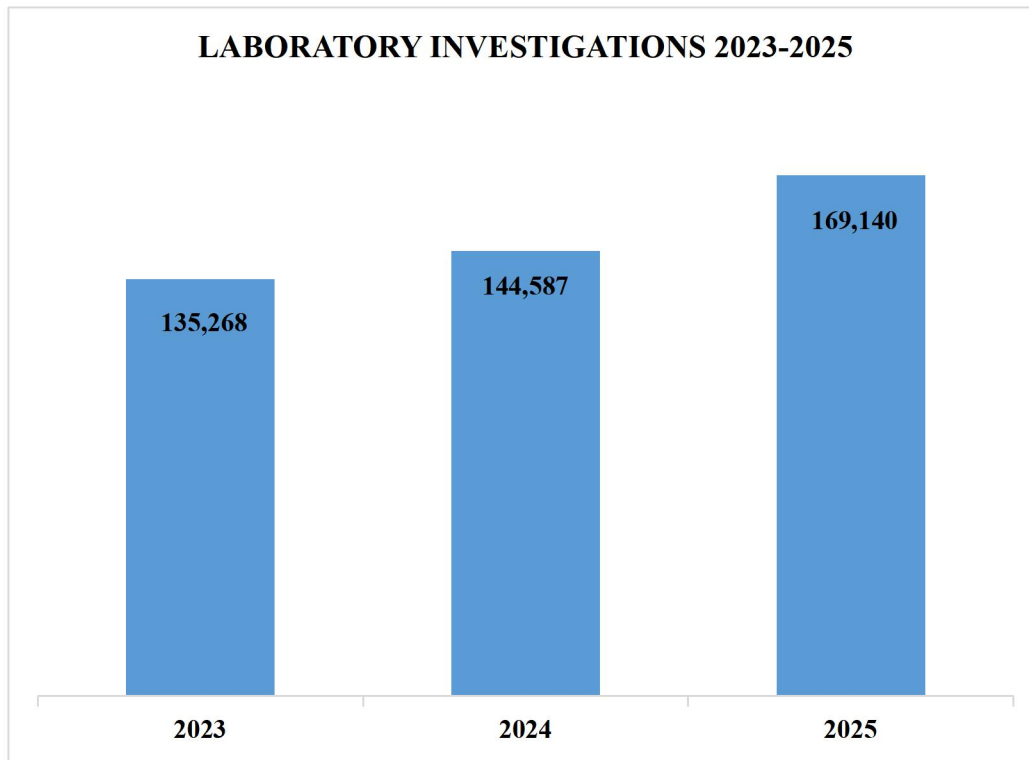
## 10.2 Prosthetic and Orthotic Unit

Prosthetic and Orthotic unit, this is among of the special unit used to produce a different prosthetic parts of the body and train patient on how to use those prosthesis .Hospital has invested a lot to help the people of southern part of Tanzania to easy and affordable prosthetics.



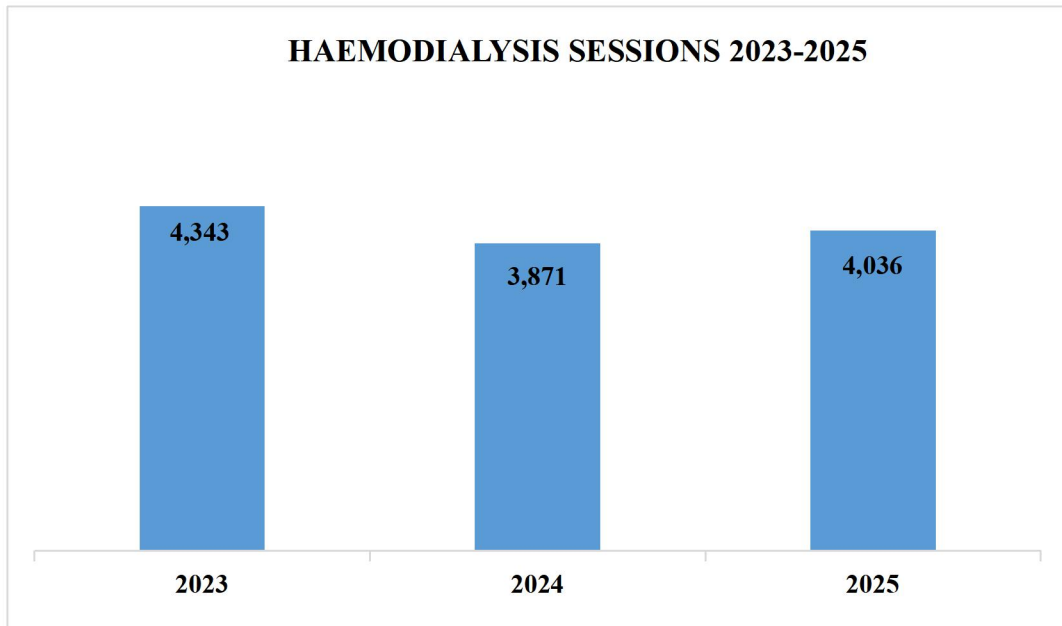
### 10.3 Laboratory

St. Benedict Ndanda referral Hospital Laboratory (SBNRHL) has 6 sections, namely Hematology, Blood Transfusion, and Parasitological, clinical chemistry, serology and Microbiology.

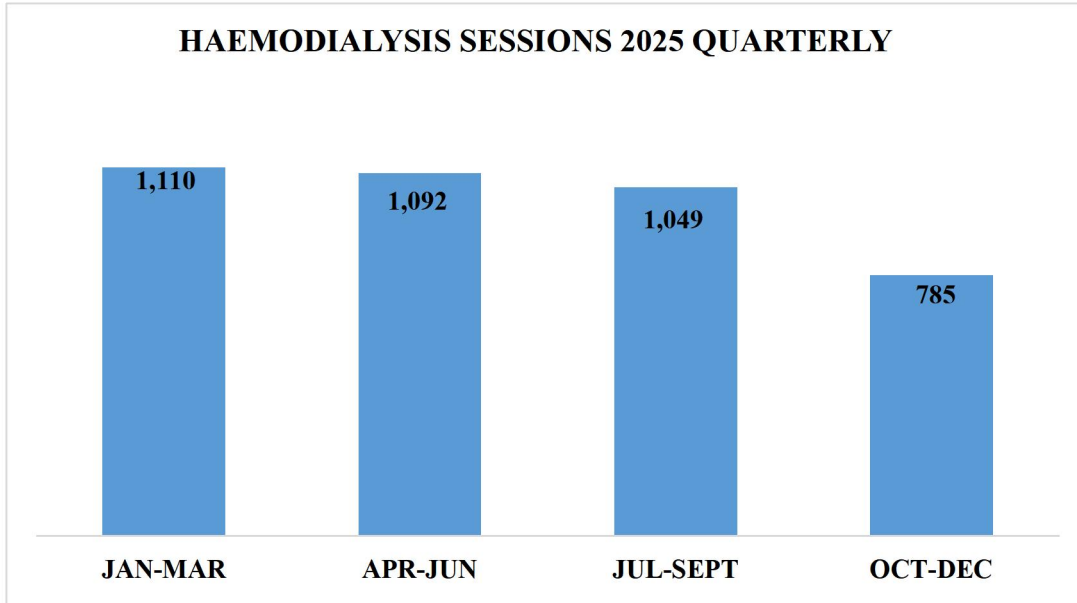


<b>Laboratory Services</b>	<b>Total number of tests</b>
Parasitology	51,890
Blood Transfusion	8,154
Hematology	30,015
Clinical Chemistry	59,917
Serology	14,566
Microbiology	4,598
<b>Grand Total</b>	<b>169,140</b>
<b>Blood Donation Activities</b>	
Blood Transfusion	2,686
BLOOD Donation	1,789
FFP	102

#### 10.4 Dialysis Unit

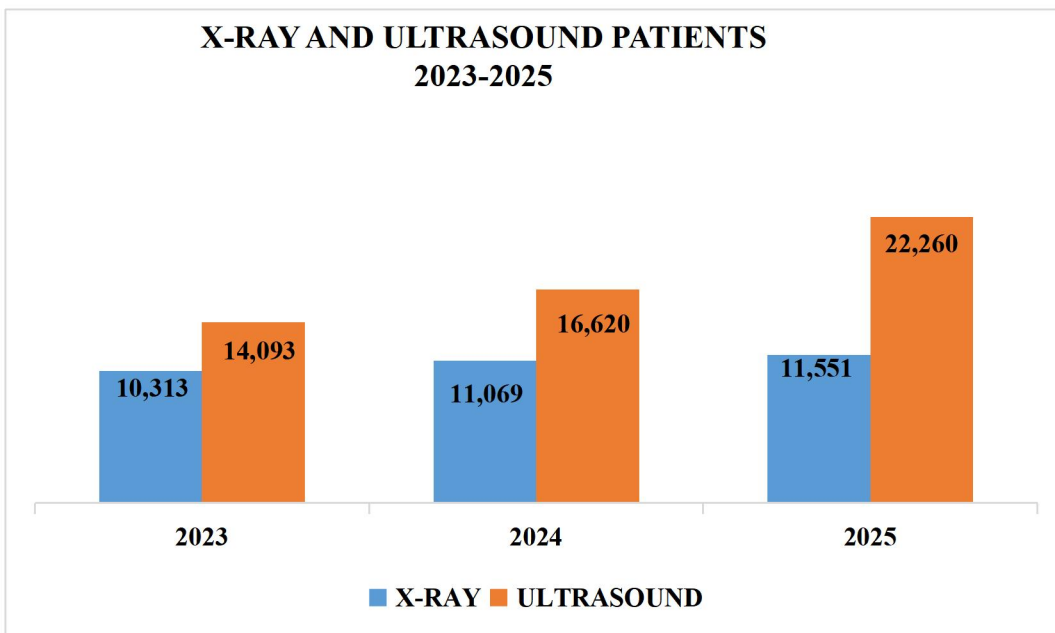


### HAEMODIALYSIS SESSIONS 2025 QUARTERLY

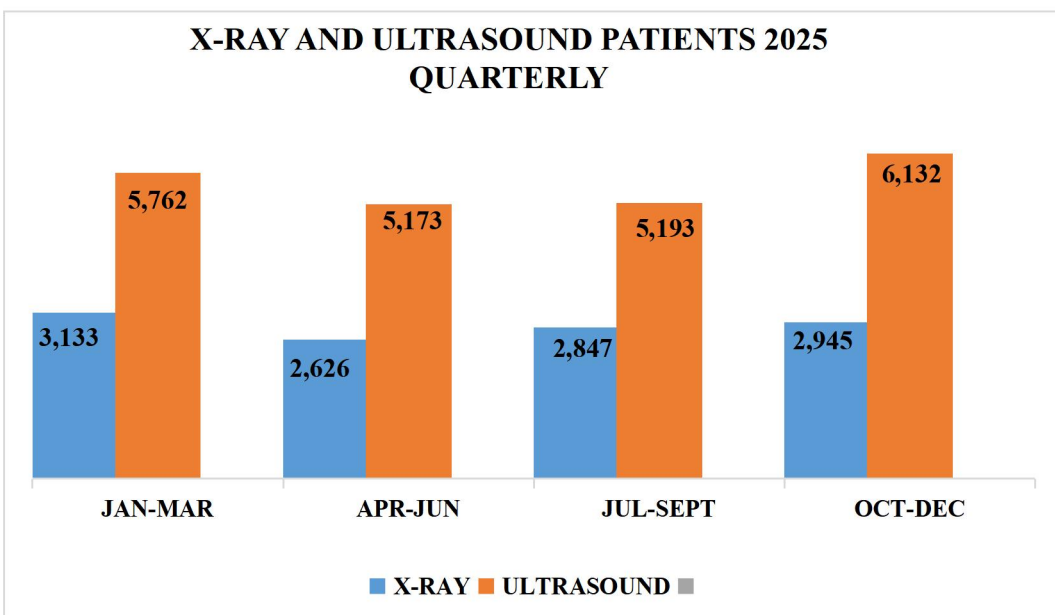


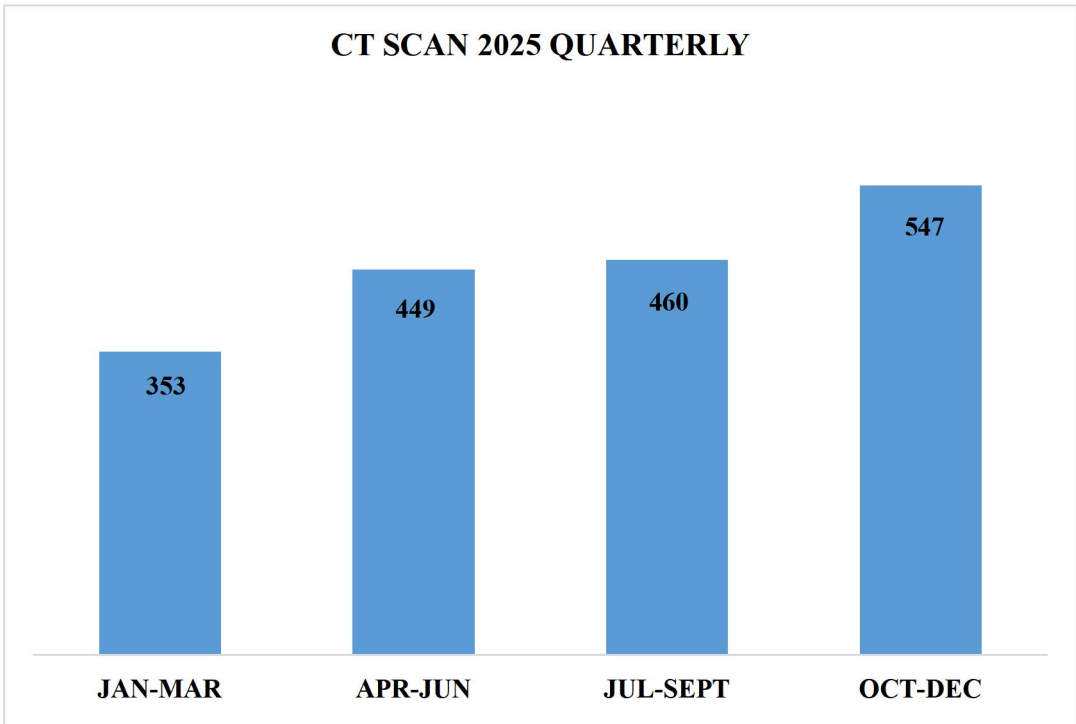
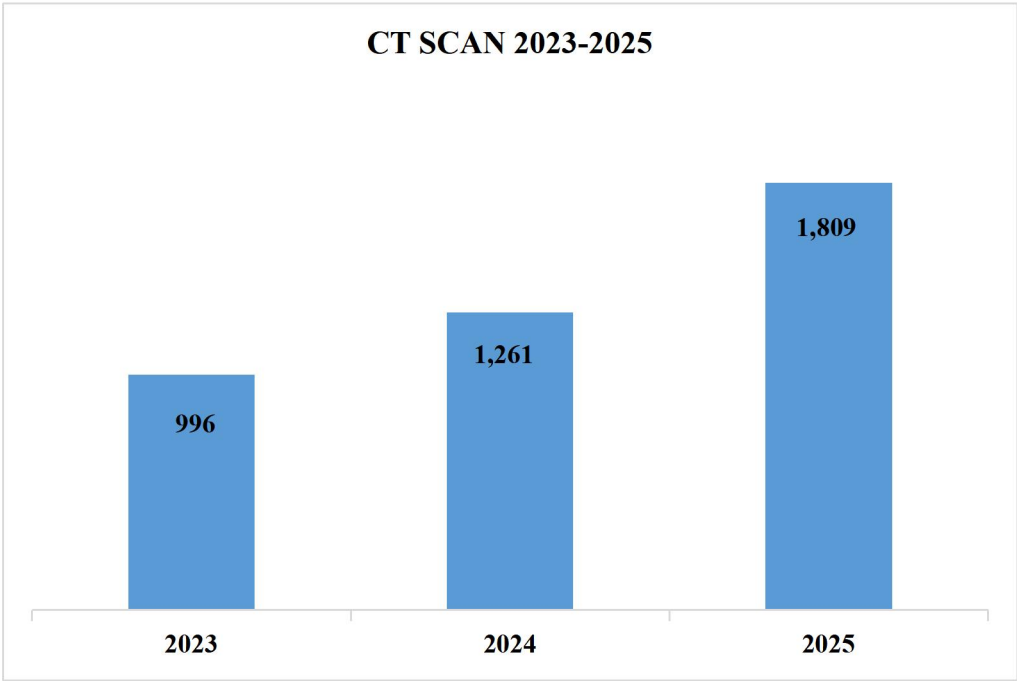
### 10.5 Radiology & Imaging Department

#### X-RAY AND ULTRASOUND PATIENTS 2023-2025



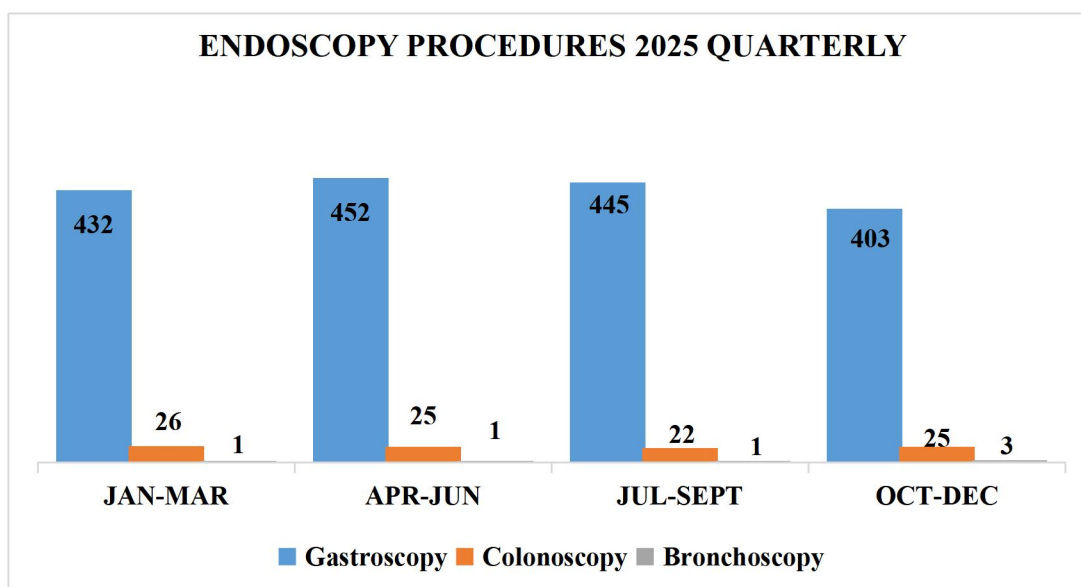
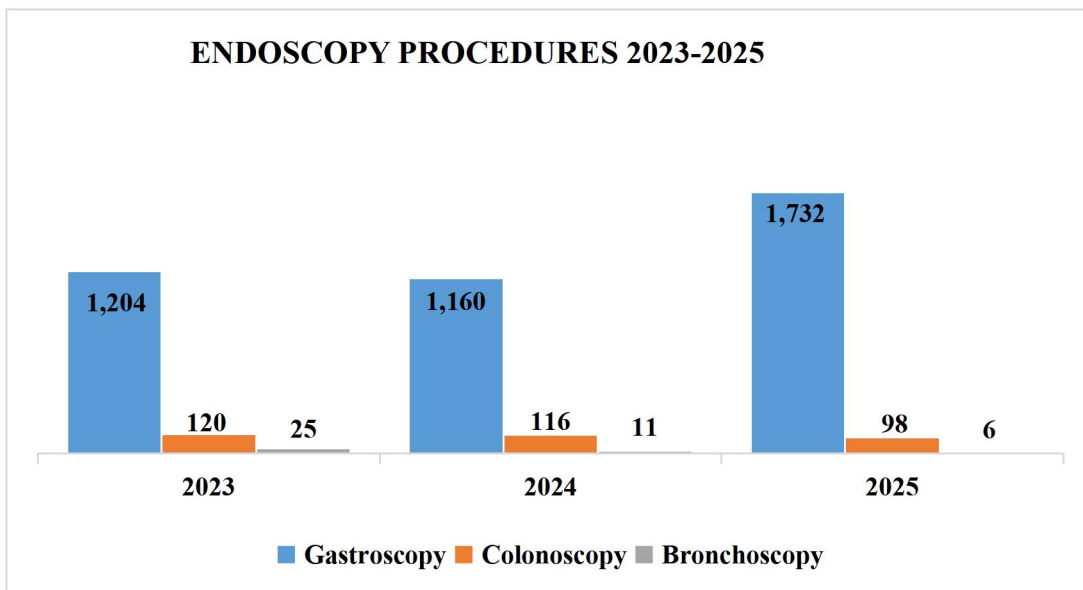
#### X-RAY AND ULTRASOUND PATIENTS 2025 QUARTERLY



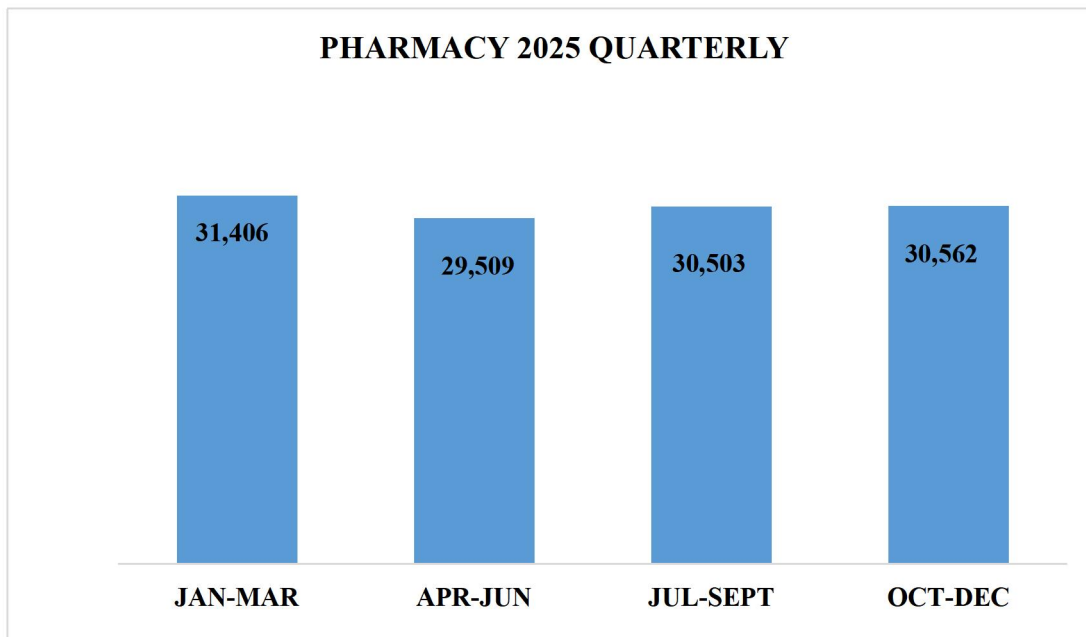
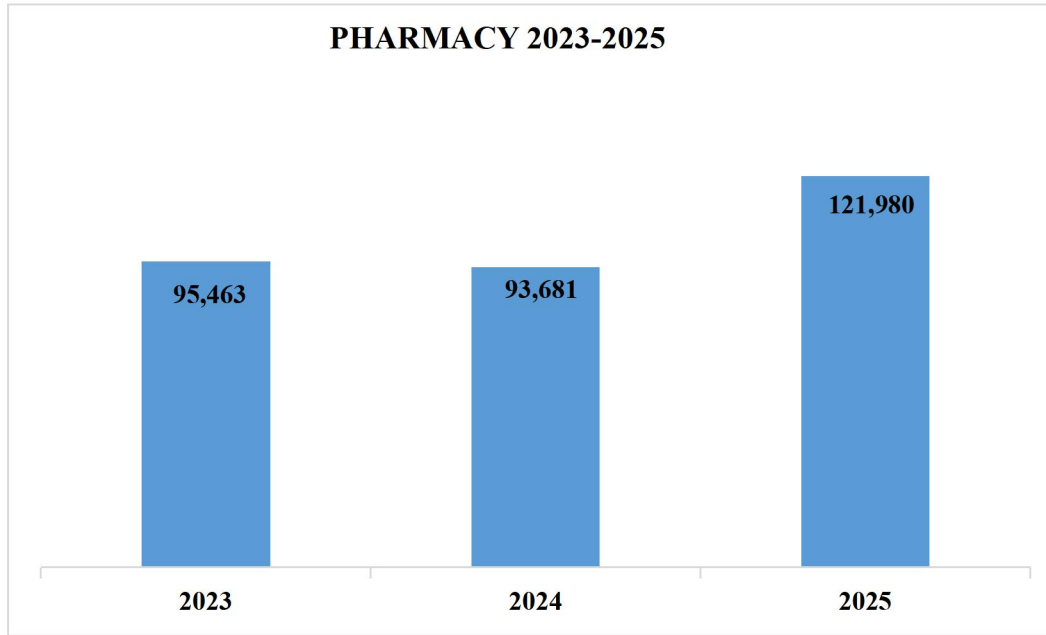


## 10.6 Endoscopy Department

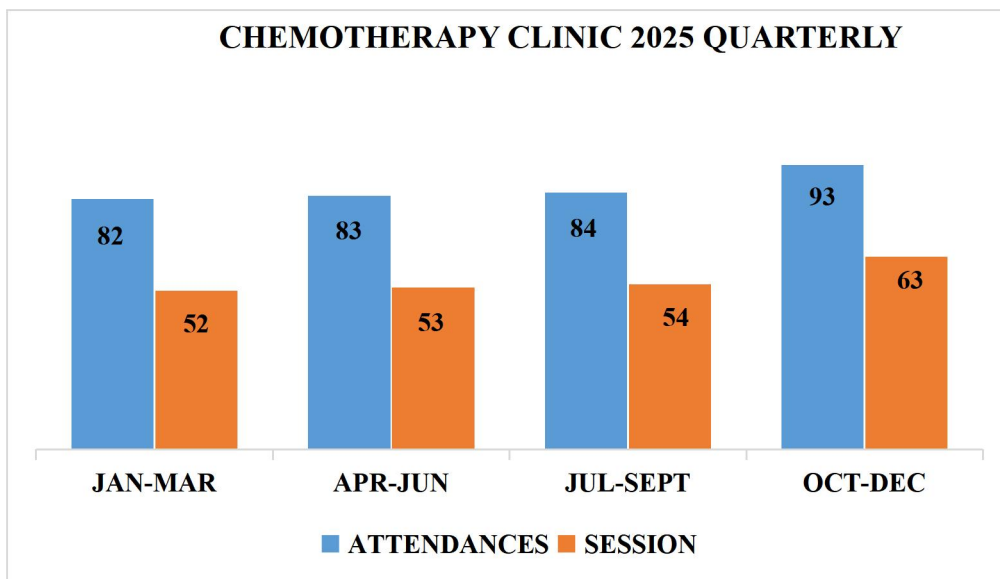
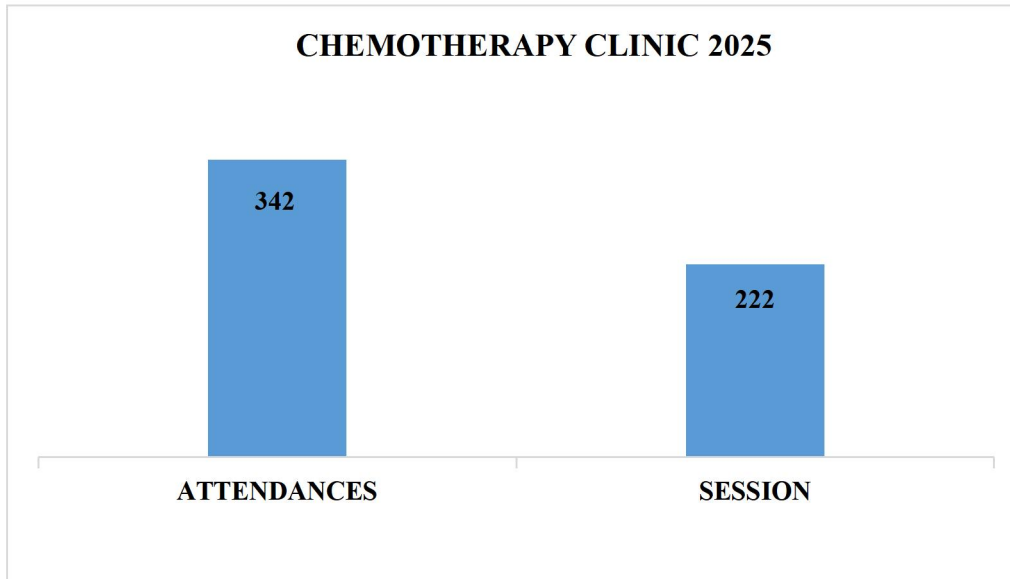
The Endoscopy Department is a specialized unit that is well equipped to perform diagnostic and therapeutic endoscopic procedures. These procedures include gastroscopy, colonoscopy, and bronchoscopy. Endoscopy is used to diagnose various medical conditions such as stomach ulcers, gastrointestinal bleeding, infections, tumors, and other abnormalities of the digestive and respiratory systems. During these procedures, tissue samples (biopsies) can be taken for histopathology examination to confirm a diagnosis. In addition to diagnosis, endoscopy also plays an important therapeutic role. It is used for, removal of foreign bodies, band ligation for severe esophageal and gastric bleeding, injection of medications directly into affected areas, control of bleeding, insertion of feeding tubes, and dilatation of strictures. The department is staffed by trained specialists and nurses who ensure that procedures are performed safely, efficiently, and with the highest standard of patient care.



### 10.7 Pharmacy

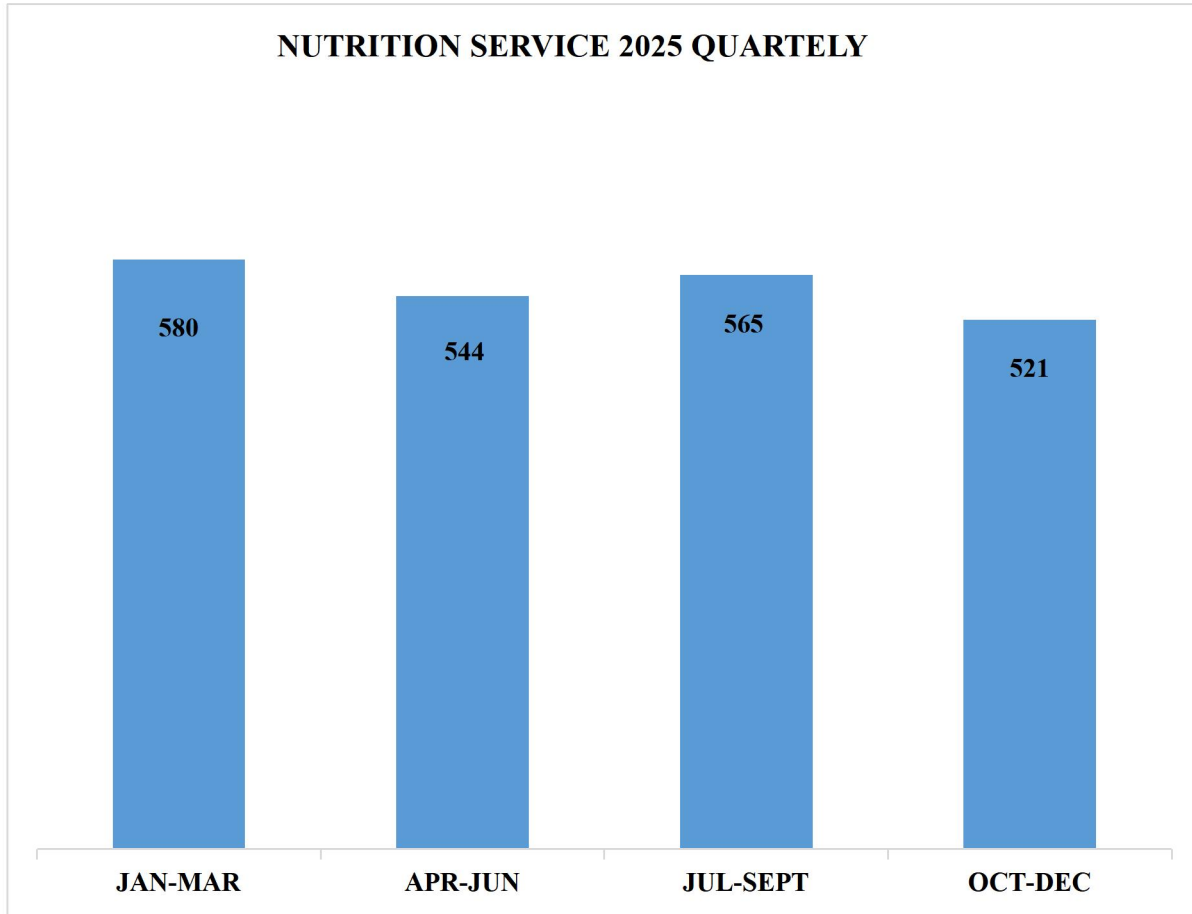


### 10.8 Chemotherapy clinic



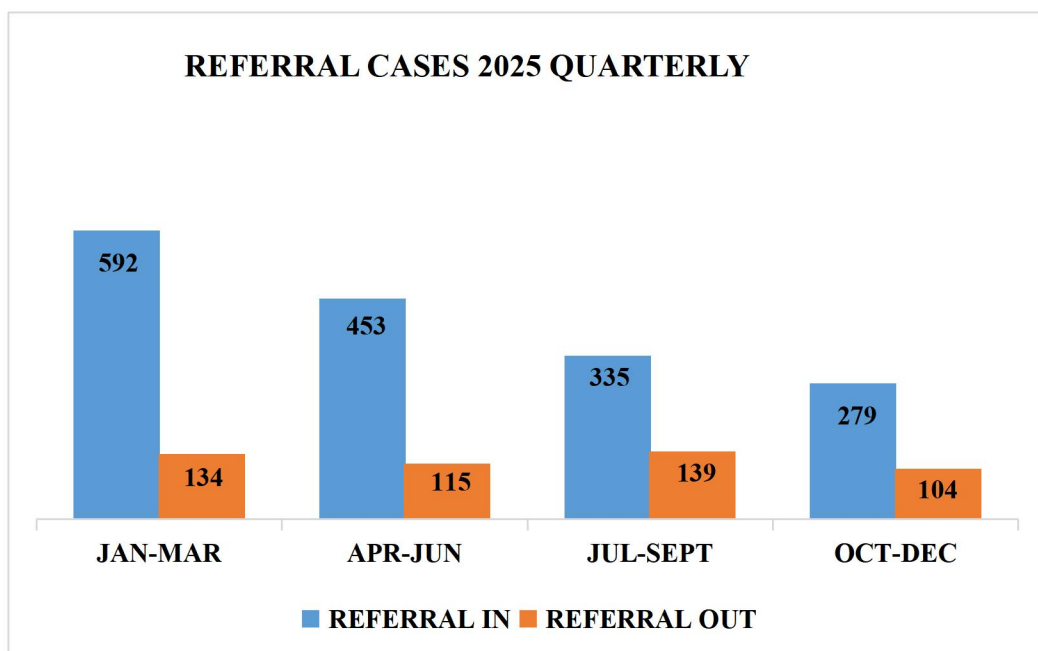
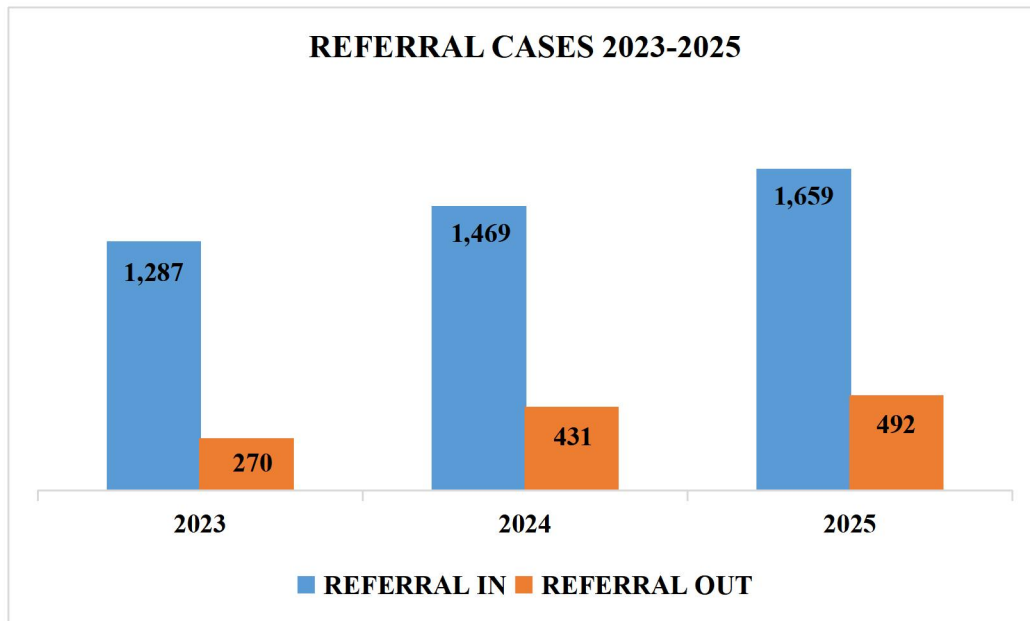
## 10.9 Nutrition

Nutrition service started at the end of the 2024, since then the clinic has expanded due to increasing number of patients with time. Therefore the trend in 2025 data were shown below;



## 11. REFERRAL CASES IN & OUT

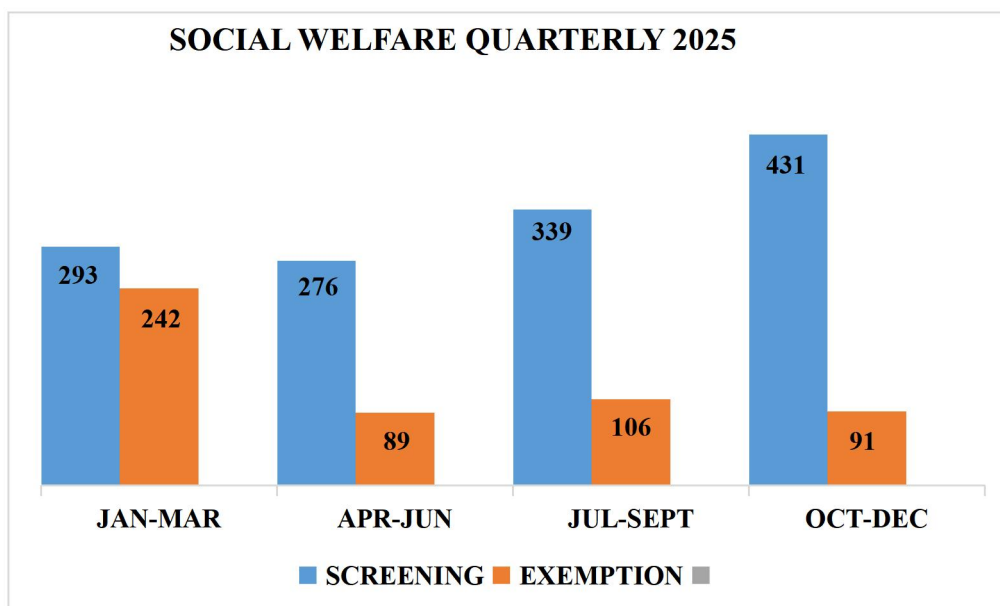
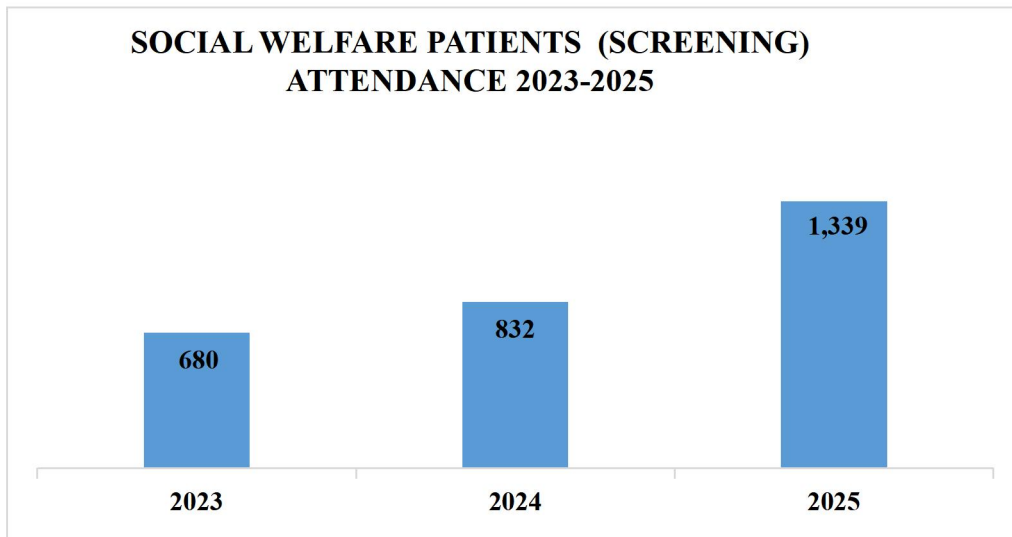
In 2025 the hospital received about 1659 cases of patient referrals in the hospital, of which the most leading facility that refer their patients was Mkomaindo hospital followed by Newala district hospital and Mangaka district hospital. Referral out cases in 2025 were directed to Muhimbili National Hospital, Ocean Road Cancer Institute, CCBRT, Good Samaritan Cancer Hospital at Ifakara and Mtwara Southern Zonal Hospital.



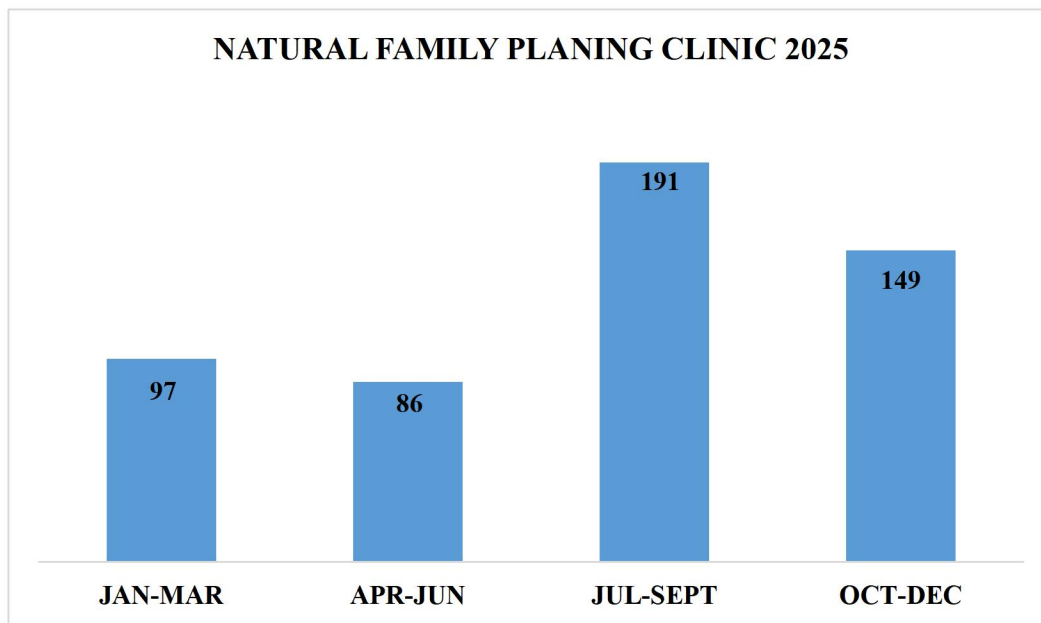
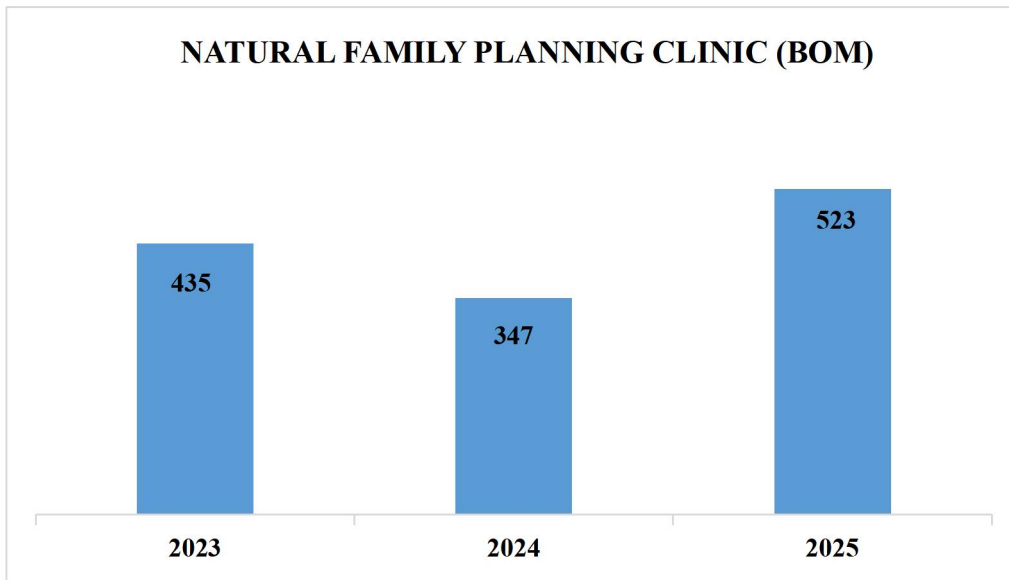
## 12. SOCIAL WELFARE

The department has successfully provided its services with the required quality through various fields. Therefore being able to meet the needs of our Clients as follows;

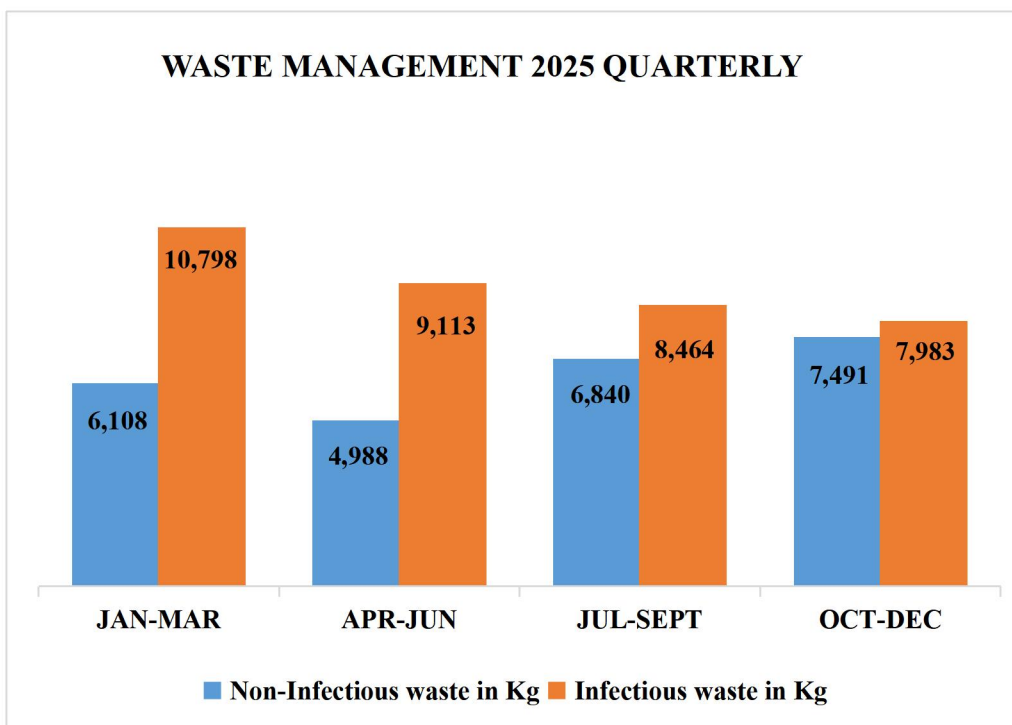
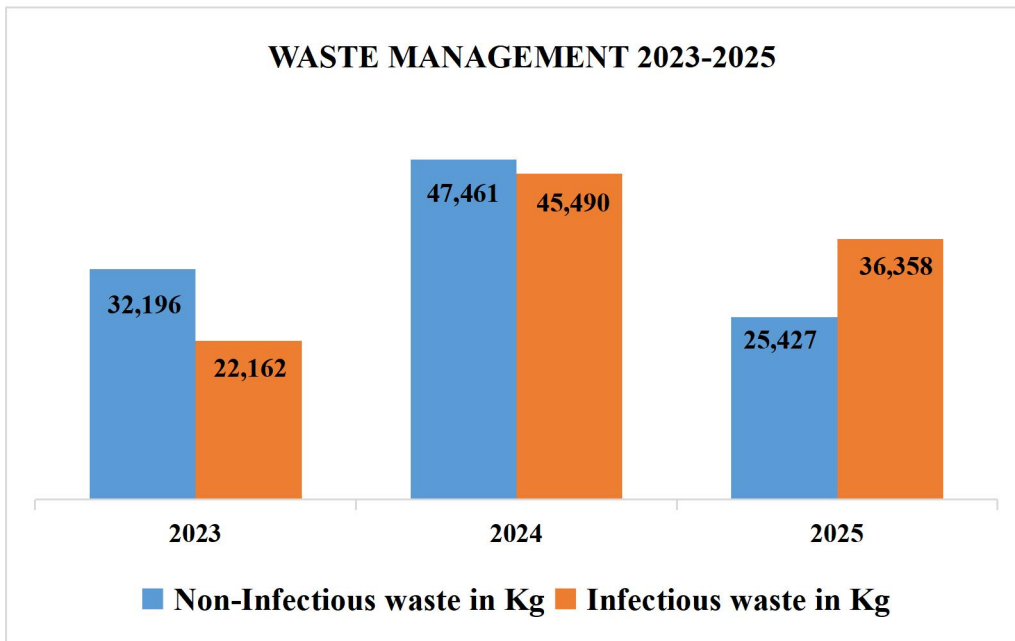
- i. Number of screened patients 1,339
- ii. Number of Patients who got Hospital food 28
- iii. Exempted patients 528
- iv. Under twelve 225
- v. GBV 31
- vi. Neglected 26



### 13. NATURAL FAMILY PLANNING CLINIC UNIT

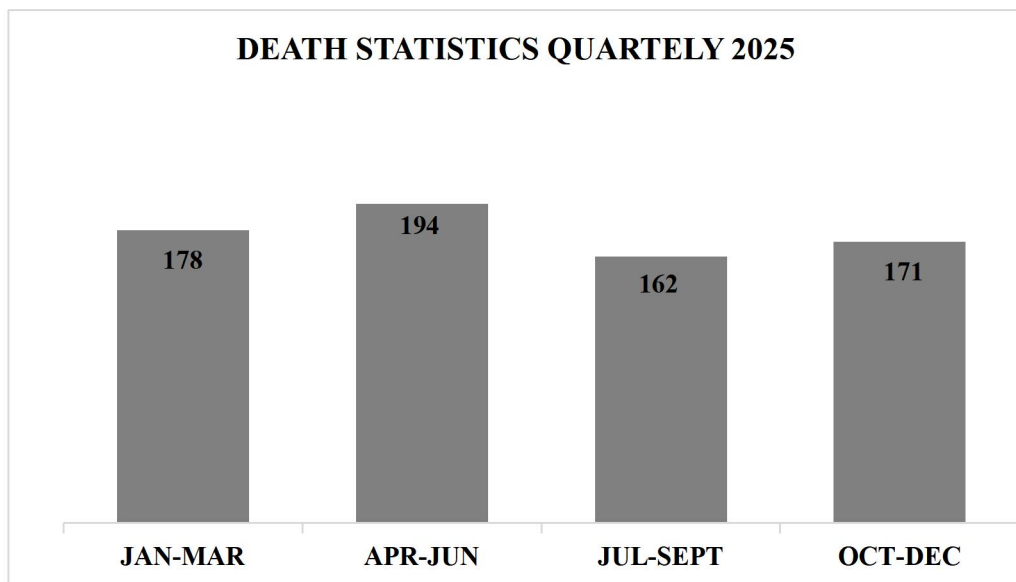
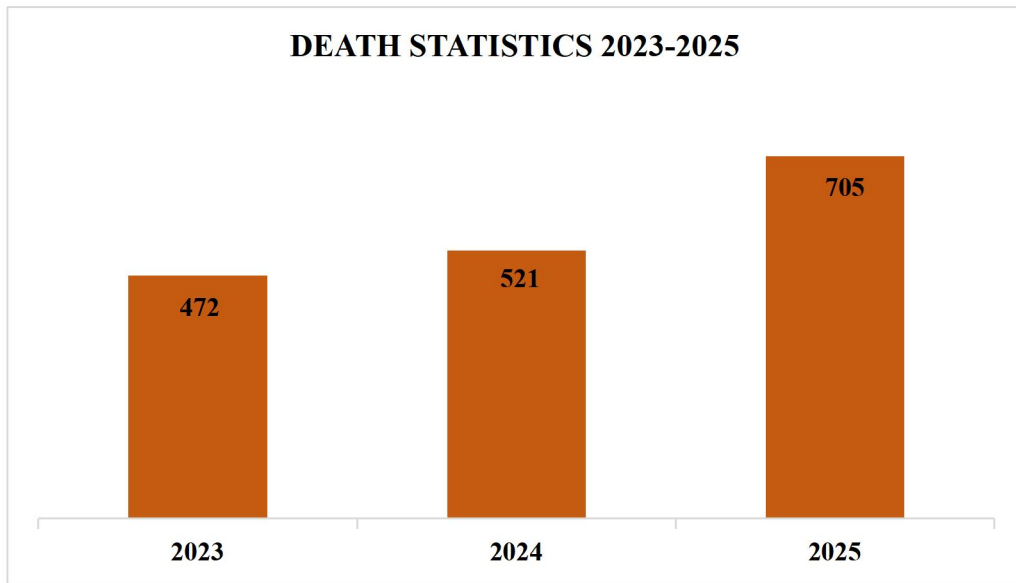


## 14. WASTE MANAGEMENT



**Comment:** In our facility, all infectious waste is burnt in the incinerator and non-infectious waste is deposited at dumping ground.

## 15. HOSPITAL DEATHS



## **16. NDANDA COLLEGE OF HEALTH AND ALLIED SCIENCES**

St. Benedict Ndanda Referral Hospital and Ndanda College of Health and Allied Sciences (Ndanda COHAS) operate in a symbiotic, integrated partnership rooted in the apostolic activities of the Benedictine Abbey in Ndanda, established under the provisions of the National Council for Technical Education Act, No.9 of 1997.

St. Benedict Ndanda Referral Hospital and Ndanda College of Health and Allied Sciences 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 the 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 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. Thekla 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 on Clinical Medicine, Medical Laboratory Sciences and Nursing and Midwifery and contributing to the broader healthcare system.

## 16.1 Programme offered

- 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 and Midwifery students (NMT)



Medical Laboratory students (MLT)



Clinical Medicine students (CMT)

## 16.2 Enrolment capacity

The school capacity is 100 students per annum for nursing and midwifery course, 120 students for clinical medicine and 60 students for Medical Laboratory course, currently we have a total number of 369 students.

NURSING AND MIDWIFERY				MEDICAL LABORATORY SCIENCES				CLINICAL MEDICINE			
NTA LEVEL	NUMBER OF STUDENTS			NTA LEVEL	NUMBER OF STUDENTS			NTA LEVEL	NUMBER OF STUDENTS		
	BOYS	GIRLS	TOTAL		BOYS	GIRLS	TOTAL		BOYS	GIRLS	TOTAL
NTA L4	7	35	42	NTA L4	13	11	24	NTA L4	47	30	77
NTA L5	8	38	46	NTA L5	14	12	26	NTA L5	51	33	84
NTA L6	17	40	57	NTA L6	8	5	12	NTA L6	0	0	0
<b>TOTAL</b>	<b>32</b>	<b>113</b>	<b>145</b>	<b>TOTAL</b>	<b>35</b>	<b>28</b>	<b>63</b>	<b>TOTAL</b>	<b>98</b>	<b>63</b>	<b>161</b>

Table 1. Number of students in Academic year 2025/2026

### **16.3 Future plans**

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

1. Constructions of students hostels, tutors houses, classrooms, skills laboratories and offices for tutors.
2. To send tutors for short courses on teaching methodology
3. To purchase a college bus that can facilitate transport activities during field-works
4. To send tutors for master's degree
5. To construct a strong fence around the college premises
6. To introduce new courses, such as Radiology, pharmacy
7. Rehabilitation of the old buildings at Zakeo and Main Campus
8. To introduce short courses that could be the source of income for the college

## **17. 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 than 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 2023/2024 financial year, the deficit stood at 463,724,921 million, while in 2024/2025 it was reduced to 285,816,374 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 2024/2025 and 2023/2024 financial years.

### 17.1 Statement of financial performance for the year ended 30 June 2025

	NOTE	30.06.2025	30.06.2024
<b>REVENUE FROM EXCHANGE TRANSACTION</b>		<b>TZS.</b>	<b>TZS.</b>
Hospital Services Income	9.1	9,688,189,907	7,535,832,466
Supportive Services Income	9.2	1,236,541,944	510,137,600
Miscellaneous Income	9.3	15,779,100	10,868,821
Refunds & Claims Adjustments	9.4	-191,939,453	-122,114,262
<b>Total Revenue from Exchange Transaction</b>		<b>10,748,571,498</b>	<b>7,934,724,625</b>
<b>REVENUE FROM NON-EXCHANGE TRANSACTION</b>			
Government Grants	9.5	1,297,836,704	1,360,673,783
Grants and Donation	9.6	2,048,727,092	2,014,385,706
<b>Total Revenue from Non-Exchange Transaction</b>		<b>3,346,563,797</b>	<b>3,375,059,489</b>
<b>NET REVENUE</b>		<b>14,095,135,295</b>	<b>11,309,784,115</b>
<b>EXPENSES</b>			
Cost of Consumables & Supplies Purchased (COGS)	10	3,129,118,306	2,379,119,066
Administrative Expenses	11	4,042,767,291	2,924,717,654
Salaries, Wages & Benefits (Staff Cost)	12	4,225,612,706	4,414,395,260
Finance Charges	13	53,101,059	40,130,241
Depreciation & Amortization	14	1,446,124,418	559,038,055
Project Expenses	15	298,898,488	289,230,760
Government Subsidies Expenses	16	1,185,329,401	1,166,878,000
<b>TOTAL EXPENDITURE</b>		<b>14,380,951,669</b>	<b>11,773,509,036</b>
<b>Surplus/(Deficit) for the year</b>		<b>-285,816,374</b>	<b>-463,724,921</b>

## 18. MAJOR EVENT AND PROJECTS 2025

### 18.1 St. Benedict Health Week

The St. Benedict Health Week & Sports Event 2025, held from 6th to 10th July 2025 at St. Benedict Ndanda Referral Hospital, was a large-scale outreach program dedicated to improving public health, fostering community unity, and promoting well-being. Guided by the theme “Get screened to protect yourself from serious diseases”, the event offered a wide range of free health services to community members, patients, and special groups. Services included general medical consultations and specialist screenings in internal medicine, pediatrics, urology, surgery, oncology, and orthopedics, dental and eye care, nutrition assessments and counselling, reproductive and maternal health services including family planning and cancer screening, physiotherapy and rehabilitation, and laboratory investigations with blood donation drives. Participants also attended health education sessions covering nutrition, hygiene, non-communicable and communicable diseases, reproductive health, and rational use of medicines



A total of 2,601 clients were served during the week, comprising 836 males and 1,765 females, making this one of the most impactful outreach events in the hospital's recent history. In addition to medical services, the program featured sports and recreational competitions such as football matches, chicken chasing, and tug-of-war, which encouraged unity and active participation across all ages. The success of the 2025 celebration was made possible through the joint efforts of district authorities, partner hospitals, security agencies, sponsors, and dedicated volunteers. Building on the achievements of previous years, this year's program has deepened our community engagement reflecting the enduring values of compassion, service, and togetherness inspired by St. Benedict.

## 18.2 Mother-and-child Care Centre

After a preparation phase of more than two and a half years, we were able to begin construction work for the establishment of a Mother and Child Center in **July 2025**. The project's first phase includes the renovation and expansion of the existing children's ward, as well as the construction of a new maternity department with an emergency operating theater on the ground floor and a neonatal intensive care unit (NICU) on the first floor. In the second phase, another new building is planned — housing an outpatient clinic for mothers and children on the ground floor and a postnatal ward for mothers on the upper floor. A pediatric intensive care unit, a department for physiotherapy and rehabilitation, as well as a playground are also planned and will be built in close proximity to the children's ward.



### 18.3 Clubfoot Camp 2025

From 23rd March to 2nd April 2025, Dr. Ute Terheggen and her team returned to Ndanda for another successful Clubfoot Camp. Specializing in the surgical correction of neglected clubfoot, the team worked hand in hand with our local medical staff to provide care for patients who could no longer benefit from early conservative treatment with casts. This year, 40 patients from across Tanzania were screened and counselled by both visiting and local orthopedic specialists.

The camp was made possible through a strong collaboration involving 4 senior orthopedic surgeons, 2 anesthetists, and 2 theatre nurses from Germany, together with our hospital's dedicated team. A total of 28 patients underwent surgery, all of which were completed successfully without any complications. The Clubfoot Camp remains a shining example of international teamwork, skill, and compassionate care that restores mobility and dignity to those affected.



#### 18.4. Makonde Plateau Water Project

For generations, people on the Makonde Plateau (south of the hospital, on the border with Mozambique) have had a water problem. Since tap water is not available, people collect rainwater in cisterns, which is used for drinking and domestic purposes. During the dry season, the supply lasts until around August. Then, until the start of the next rainy season in December, people have to travel long distances to fetch water. The water is often carried to the villages on foot by women or children.

Thanks to generous support from the Rotary Clubs of Rohrschach-Arbon and Nürtingen-Kirchheim, as well as the Abbey of Uznach, we were able to implement a water project.

An initial drilling in Chiwonga village in 2024 was unsuccessful – but shortly afterwards, a second drilling in Mitanga, about 10 km away, tapped into a source that can supply more than 18,000 liters of water per hour.

The water is brought to the surface using a solar pump and pumped to collection points in two nearby villages. There, the water is sold to the villagers at an affordable price – a 20-liter container costs less than 4 cents. The proceeds cover the running costs for personnel and maintenance.

The system has been operating smoothly since October 2025 and is used independently by the villagers themselves.

This has significantly improved the quality of life and hygiene conditions for the people in the villages.



### **18.5 Project Summary: Construction of Power House for Hospital Electrical Backup (2025)**

In 2025, we managed to purchase a backup generator and to construct a Power House as a preparation of our project “Extension of Solar System for St. Benedict Ndanda Hospital”, which will be realized in 2026.

The Power House includes adequate and properly ventilated space for the installation of batteries, inverter and one backup generator. It is equipped with automatic transfer switches (ATS), main control panels, and secure fuel storage to ensure immediate power restoration during outages. The system is designed for automatic operation, allowing seamless transition from the main power supply to backup power.

This infrastructure strengthens the hospital’s reliability, enhances patient safety, and ensures continuous medical services during power interruptions.



## **18.6 Project Summary: Construction of COHAS Student Hostels (2025)**

Due to the initiation of new programs at Ndanda College of Health and Allied Sciences (Ndanda COHAS), the number of students has increased from about 150 in 2024 towards 350 in 2025.

Therefore, we had an urgent need of accommodation of these students.

In October 2025, we successfully commenced the construction of a new hostel with the capacity to accommodate 104 students. This project is a major step towards improving student welfare and expanding the institution's infrastructure.

The new hostel will provide safe and convenient accommodation, creating a better learning environment for students.

Overall, this development strengthens both the college and the hospital by ensuring supporting the training of more healthcare professionals, who are capable of serving and supporting the community.



### **18.7 Project Summary: Renovation and Expansion of the Operating Theatre (2024–2026)**

The renovation and expansion of the Operating Theatre is an ongoing project that began in 2024 and is expected to be completed in 2026. The project involves upgrading the existing theatre and adding more than two additional rooms, along with a new office space to improve coordination and management.

Once completed, the expanded operation building will significantly enhance the hospital's capacity to conduct a higher number of surgical procedures across different departments. These include the Orthopedic Department, General Surgery Department, Eye Department, and the Obstetrics and Gynecology Department.

The improved facility will help to address previous challenges such as limited space and surgical capacity. Overall, the project will greatly benefit both the hospital and the community by improving access to safe, efficient, and timely surgical services.

