

2020

DHQ Hospital  
Rawalpindi

# ANNUAL PROGRESS REPORT

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**DISTRICT HEADQUARTERS HOSPITAL**  
**RAWALPINDI**

We don't learn from experiences, we learn from reflecting on those experiences



**OUR VISION**  
**BETTER HEALTH FOR ALL**

بہتر صحت سب کیلئے  
روغ صحت تو لو لپارہ

**OUR MISSION**

**TO PROVIDE BETTER HEALTH FOR ALL**

THROUGH COMPETENT AND COMMITTED TEAM FOCUSING ON PROMOTIVE, PREVENTIVE,  
CURATIVE & REHABILITATIVE SERVICES

**OUR VALUES**

**COMPASSION**

**HONESTY**

**ACCOUNTABILITY**

**QUALITY**

**INTEGRITY**

**RESPECT**

**TEAMWORK**

# ENVIRONMENTAL SCAN

## ORGANIZATIONAL HISTORY AND STRUCTURE

Reflecting on the past shows us how far we have come and serves as a motivation to keep moving towards a shining and positive future.

District Head Quarters Hospital Rawalpindi started as a dispensary in 1850. After a century of progress, it was designated as District Headquarters Hospital in 1957. Hospital was taken over from the Municipal Committee with the date of provincialization with effect from 1<sup>st</sup> of April 1958. From 125 bedded hospital in 1960 to 221 bedded facility in 1989, it showed a continuous growth to keep pace with population growth and changing dynamics of surrounding community. At that time it comprised of 17 bedded police hospital, 19 bedded emergency and 97 bedded new block. Since 2012 it is working as a 453 bedded hospital having an area of 319,547 Sq. ft., out of which 174,378 Sq. ft. is covered.

## THE EXTERNAL ENVIRONMENT

Public Health sector in Rawalpindi district receives health care services through 96 Dispensaries, 112 Basic Health Units, 11 Rural Health Centers and 4 THQ hospitals. District Headquarters Hospital (DHQH) Rawalpindi is one of the three tertiary care hospitals, serving in public sector to meet the ever increasing healthcare needs in Rawalpindi District. It is a teaching hospital attached with Rawalpindi medical university along with Holy Family Hospital and Benazir Bhutto Hospital.

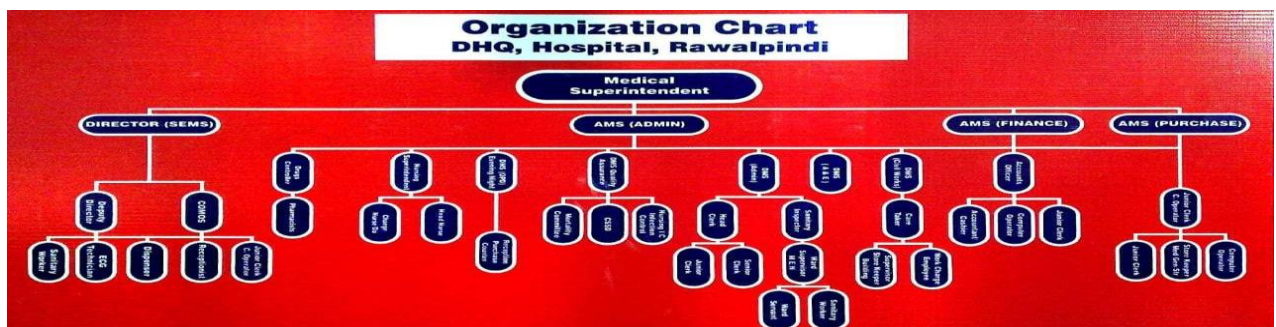
The hospital was constructed in the beginning for a population of 1.4 lacs of Rawalpindi City. The District Head Quarters Hospital Rawalpindi has been declared as a teaching hospital since 1975 and is attached with Rawalpindi Medical College, Rawalpindi for teaching purposes. It is providing basic health care to the residents of inner and old city and also serves as referral Centre for trauma patients.



## THE ORGANIZATION

DHQ hospital is the only public-sector hospital in the Rawalpindi Division having specialized Neurosurgery department. It is not only the hub of Medico legal Cases but also serves as the sole facility for medical/disability boards and main treatment center for all jail inmates of Rawalpindi Division. Being a healthcare facility receiving approximately 45000 patients monthly and 0.5 million patients in OPD each year along with more than 1900 medico legal cases and 400 plus post mortems examinations, it is vital to constantly upgrade the existing facilities to meet the constantly increasing demands.

District headquarters hospital receives the maximum patient load in the Rawalpindi Division. It is facing a multitude of problems, from severe shortage of space to insufficient financial resources and qualified staff. The patients come from Azad Jammu and Kashmir, Khyber-Pakhtunkhwa and Gilgit-Baltistan apart from the four districts of the division. Due to the space shortage and patient load, the OPDs and corridors are often crammed with people waiting for their turn to see the doctor. The emergency department, which receives around 580 patients every day, often runs out of beds. On most days, the staff has to put in additional beds and even use stretchers in addition to the 19 approved additional beds.



## OUR SERVICES

DHQ hospital provides a comprehensive range of services including emergency, outpatient, inpatient, diagnostics etc. To stay relevant in a changing world, institutions must continuously reinvent themselves. DHQ hospital is currently being renovated under the scheme “Renovation and Improvement of DHQ Hospital Rawalpindi” initiated in 2017 along with the scheme “Renovation and Improvement of Emergency of DHQ Hospital Rawalpindi”. After meticulous planning and extreme hard work, the wards, OTs and OPDs have been

upgraded to facilitate the working staff and make services more convenient for patients.

DHQ hospital is currently working as a 510 bedded hospital.

The District Head Quarters Hospital Rawalpindi has following departments:

- a. Anesthesia Unit.
- b. Blood Transfusion Unit
- c. Casualty Department
- d. Coronary care unit (CCU)
- e. Dental Unit
- f. ENT Unit
- g. Eye Unit.
- h. Gynecology Unit
- i. Hikmat
- j. Homoeopathy Unit
- k. Intensive Therapy Center (ITC)
- l. Main OT
- m. Medical Unit
- n. Modular OT
- o. Mortuary
- p. Neonatal intensive care unit (NICU)
- q. Neurosurgical Unit
- r. Orthopedics unit
- s. Pediatrics unit
- t. Programs on EPI, CDD, FP etc.
- u. Pulmonology Unit
- v. Reproductive Health
- w. Surgical Unit
- x. Tertiary Level (Teaching) Hospital Affiliated To Rawalpindi Medical College, Rawalpindi (Students From Army Medical College And Other Institutions Also Attend)

## **DIAGNOSTIC FACILITIES**

### **1. PATHOLOGY DEPARTMENT**

- a. Chemistry
- b. Hematology
- c. Microbiology

### **2. RADIOLOGY DEPARTMENT**

- a. X-Rays
- b. Contrast studies
- c. Ultrasound

d. Mammography

e. C.T. Scan

f. Doppler

**3. OTHER DIAGNOSTIC FACILITIES**

a. Endoscopy

b. Echocardiography

***OUR CORE VALUES***

**1. COMPASSION**

**2. HONESTY**

**3. ACCOUNTABILITY**

**4. QUALITY**

**5. INTEGRITY**

**6. RESPECT**

**7. TEAMWORK**

# HOSPITAL PERFORMANCE FOR YEAR 2020

## MAJOR DEPARTMENTS AND THEIR PERFORMANCES

This pandemic has changed our world forever. Struggles of the health sector have become part of media debates and Policymakers across the world have realized that healthcare is accessible to only a small percentage of the world's population. When a COVID-19 attacked everyone at the same time, it became very clear that money, power and connections are not always enough to find a bed. **Healthcare is everyone's problem. If everyone wants to be safe, all of us have to be safe.** Despite all the chaos and unpredictability surrounding whole world, hospital services through the year showed positive and significant growth compared to previous year.

## ADMISSIONS

SR NO	MONTH	ADMISSIONS OPD	ADMISSIONS ER
1	JANUARY	1527	2250
2	FEBRUARY	3085	1028
3	MARCH	2067	937
4	APRIL	1614	831
5	MAY	645	1695
6	JUNE	785	1509
7	JULY	886	1652
8	AUGUST	892	1564
9	SEPTEMBER	919	1462
10	OCTOBER	879	1495
11	NOVEMBER	783	1324
12	DECEMBER	910	1209
13	TOTAL	<b>14992</b>	<b>16956</b>

## OUT PATIENT DEPARTMENT

DHQ Hospital Rawalpindi offers wide range of out-patient consultation services. Our outpatient department provides responsible and comprehensive treatment for all specialties (medicine, surgery, ENT, Eye, Gynae/Obs, neurosurgery, orthopedics etc.) staffed by highly specialized and experienced physicians and trained nursing and administrative personnel. OPD is accommodated in a well-equipped, open-plan space on the ground floor, in order to ensure avoidance of unnecessary patient transfer and facilitate direct

cooperation among various specialties and supported by the highly organized Laboratories when needed.

SR NO	MONTH	ER OPD	GENERAL OPD
1	JANUARY	21783	43813
2	FEBRUARY	23874	45523
3	MARCH	22027	33528
4	APRIL	13368	10889
5	MAY	15526	10222
6	JUNE	12227	18163
7	JULY	15073	23499
8	AUGUST	20255	29345
9	SEPTEMBER	22511	44333
10	OCTOBER	19673	15841
11	NOVEMBER	14033	28410
12	DECEMBER	13390	32243
13	TOTAL	<b>213740</b>	<b>335809</b>

## DEPARTMENT WISE OPD STATISTICS

### MEDICINE OPD

SR NO	MONTH	MEDICINE OPD
1	JANUARY	13901
2	FEBRUARY	14676
3	MARCH	12227
4	APRIL	2188
5	MAY	4376
6	JUNE	6254
7	JULY	7361
8	AUGUST	7693
9	SEPTEMBER	7659
10	OCTOBER	3505
11	NOVEMBER	3721
12	DECEMBER	4124
13	TOTAL	<b>87685</b>



## COVID 19 STATISTICS

It was very clear at the start of the COVID 19 pandemic that it will test us not only in terms of physical resources but human resources as well. Many of our health care workers were already serving in RIUT and rest started getting infected at a fast pace. So, we had to formulate a clear strategy on how to deal with this. We started ramping up very quickly under the severe constraint of different tools – such as personal protective equipment, etc. no doubt our staff provided the best possible services throughout the pandemic, despite being designated as non-Covid hospital.

SR NO	MONTH	Suspected	Tested positive
1	JANUARY	0	0
2	FEBRUARY	1	0
3	MARCH	22	0
4	APRIL	17	0
5	MAY	112	61
6	JUNE	209	67
7	JULY	92	7
8	AUGUST	146	5
9	SEPTEMBER	169	1
10	OCTOBER	224	22
11	NOVEMBER	332	41
12	DECEMBER	358	22
13	TOTAL	<b>1682</b>	<b>226</b>

## SURGERY OPD

SR NO	MONTH	SURGERY OPD
1	JANUARY	3741
2	FEBRUARY	3621
3	MARCH	2617
4	APRIL	912
5	MAY	882
6	JUNE	1264
7	JULY	2004
8	AUGUST	2756
9	SEPTEMBER	2512
10	OCTOBER	784
11	NOVEMBER	541
12	DECEMBER	499
13	TOTAL	<b>22133</b>

## ENT OPD

SR NO	MONTH	ENT OPD
1	JANUARY	3760
2	FEBRUARY	3818
3	MARCH	2575
4	APRIL	498
5	MAY	551
6	JUNE	717
7	JULY	1215
8	AUGUST	1913
9	SEPTEMBER	1882
10	OCTOBER	629
11	NOVEMBER	420
12	DECEMBER	973
13	TOTAL	18951

## EYE OPD

SR NO	MONTH	EYE OPD
1	JANUARY	2452
2	FEBRUARY	2729
3	MARCH	1884
4	APRIL	319
5	MAY	428
6	JUNE	735
7	JULY	1213
8	AUGUST	1499
9	SEPTEMBER	1656
10	OCTOBER	436
11	NOVEMBER	372
12	DECEMBER	296
13	TOTAL	14019

## NEUROSURGERY OPD

SR NO	MONTH	NEUROSURGERY OPD
1	JANUARY	2178
2	FEBRUARY	2372
3	MARCH	1556
4	APRIL	593
5	MAY	648
6	JUNE	778
7	JULY	1142
8	AUGUST	1410
9	SEPTEMBER	1353
10	OCTOBER	399
11	NOVEMBER	336
12	DECEMBER	306
13	TOTAL	13071

## ORTHOPEDICS OPD

SR NO	MONTH	ORTHOPEDICS OPD
1	JANUARY	1866
2	FEBRUARY	1855
3	MARCH	1233
4	APRIL	517
5	MAY	588
6	JUNE	1048
7	JULY	1194
8	AUGUST	1592
9	SEPTEMBER	1448
10	OCTOBER	414
11	NOVEMBER	256
12	DECEMBER	329
13	TOTAL	12340

## DENTISTARY OPD

SR NO	MONTH	DENTISTARY OPD
1	JANUARY	2232
2	FEBRUARY	1318
3	MARCH	1576
4	APRIL	386
5	MAY	427
6	JUNE	632
7	JULY	1003
8	AUGUST	1431
9	SEPTEMBER	1359
10	OCTOBER	964
11	NOVEMBER	199
12	DECEMBER	186
13	TOTAL	11713

## HIKMAT/TIBB/HOMEOPATHY OPD

SR NO	MONTH	HIKMAT and TIB OPD	HOMEOPATHY OPD
1	JANUARY	631	1267
2	FEBRUARY	594	1479
3	MARCH	462	454
4	APRIL	239	420
5	MAY	239	420
6	JUNE	363	684
7	JULY	304	815
8	AUGUST	199	907
9	SEPTEMBER	254	789
10	OCTOBER	70	349
11	NOVEMBER	286	613
12	DECEMBER	149	279
13	TOTAL	<b>3790</b>	<b>8476</b>

## **GYNAE/OBS OPD**

<b>SR NO</b>	<b>MONTH</b>	<b>GYNAE OPD</b>
1	JANUARY	6837
2	FEBRUARY	6417
3	MARCH	4774
4	APRIL	2365
5	MAY	1824
6	JUNE	3032
7	JULY	3417
8	AUGUST	4675
9	SEPTEMBER	5189
10	OCTOBER	4729
11	NOVEMBER	4079
12	DECEMBER	3760
13	TOTAL	51098

## **PAEDIATRICS OPD**

<b>SR NO</b>	<b>MONTH</b>	<b>PAEDS OPD</b>
1	JANUARY	6308
2	FEBRUARY	7062
3	MARCH	4414
4	APRIL	663
5	MAY	705
6	JUNE	967
7	JULY	1617
8	AUGUST	2578
9	SEPTEMBER	3266
10	OCTOBER	3375
11	NOVEMBER	3174
12	DECEMBER	4662
13	TOTAL	38791

## PHYSIOTHERAPY OPD

SR NO	MONTH	PHYSIOTHERAPY OPD
1	JANUARY	349
2	FEBRUARY	184
3	MARCH	197
4	APRIL	0
5	MAY	0
6	JUNE	0
7	JULY	0
8	AUGUST	30
9	SEPTEMBER	294
10	OCTOBER	317
11	NOVEMBER	220
12	DECEMBER	201
13	TOTAL	1792

## FAMILY PLANNING OPD

SR NO	MONTH	FAMILY PLANNING
1	JANUARY	481
2	FEBRUARY	492
3	MARCH	490
4	APRIL	0
5	MAY	0
6	JUNE	0
7	JULY	136
8	AUGUST	509
9	SEPTEMBER	568
10	OCTOBER	411
11	NOVEMBER	492
12	DECEMBER	477
13	TOTAL	4056

## X RAYS

SR NO	MONTH	X RAYS
1	JANUARY	8702
2	FEBRUARY	9760
3	MARCH	7738
4	APRIL	6001
5	MAY	7987
6	JUNE	6585
7	JULY	6630
8	AUGUST	8382
9	SEPTEMBER	8747
10	OCTOBER	8609
11	NOVEMBER	5790
12	DECEMBER	8607
13	TOTAL	93538

## ULTRASONOGRAPHIES

SR NO	MONTH	USG
1	JANUARY	1809
2	FEBRUARY	1655
3	MARCH	1293
4	APRIL	542
5	MAY	688
6	JUNE	900
7	JULY	1047
8	AUGUST	1376
9	SEPTEMBER	1906
10	OCTOBER	1643
11	NOVEMBER	1319
12	DECEMBER	1326
13	TOTAL	15504

## CT SCANS

SR NO	MONTH	CT SCANS
1	JANUARY	1243
2	FEBRUARY	873
3	MARCH	954
4	APRIL	773
5	MAY	626
6	JUNE	710
7	JULY	8866
8	AUGUST	1198
9	SEPTEMBER	1057
10	OCTOBER	1175
11	NOVEMBER	187
12	DECEMBER	646
13	TOTAL	18308

## DOPPLERS

SR NO	MONTH	DOPPLER
1	JANUARY	143
2	FEBRUARY	130
3	MARCH	77
4	APRIL	73
5	MAY	75
6	JUNE	41
7	JULY	34
8	AUGUST	75
9	SEPTEMBER	107
10	OCTOBER	108
11	NOVEMBER	83
12	DECEMBER	72
13	TOTAL	1018



## DIALYSIS

SR NO	MONTH	DIALYSIS
1	JANUARY	466
2	FEBRUARY	429
3	MARCH	447
4	APRIL	438
5	MAY	462
6	JUNE	409
7	JULY	421
8	AUGUST	408
9	SEPTEMBER	410
10	OCTOBER	454
11	NOVEMBER	401
12	DECEMBER	463
13	TOTAL	5208

## TOTAL DELIVERIES

SR NO	MONTH	NORMAL DELIVERIES	C SECTIONS
1	JANUARY	379	301
2	FEBRUARY	314	318
3	MARCH	338	264
4	APRIL	312	241
5	MAY	233	280
6	JUNE	181	240
7	JULY	210	327
8	AUGUST	282	293
9	SEPTEMBER	256	353
10	OCTOBER	289	315
11	NOVEMBER	303	324
12	DECEMBER	306	360
13	TOTAL	3403	3616

## **SURGICAL PROCEDURES**

As COVID-19 emerged, planned/elective surgical procedures were temporarily reduced to

- a. Mitigate the risk of virus transmission
- b. Preserve personal protective equipment (PPE)
- c. Conserve hospital bed capacity
- d. Ensure availability of key equipment (e.g., ventilators)
- e. Allow shifts in health care staffing patterns.

By delicately balancing case prioritization, emphasis was placed on safety of patients, surgeons, other health care professionals.

<b>SR NO</b>	<b>MONTH</b>	<b>MAJOR OT PROCEDURES</b>	<b>MINOR OT PROCEDURES</b>
1	JANUARY	770	70
2	FEBRUARY	762	82
3	MARCH	656	62
4	APRIL	668	67
5	MAY	410	20
6	JUNE	371	35
7	JULY	398	42
8	AUGUST	681	80
9	SEPTEMBER	633	81
10	OCTOBER	618	41
11	NOVEMBER	675	56
12	DECEMBER	738	80
13	TOTAL	7380	716

## **LAB INVESTIGATIONS**

The recently concluded renovation and prevailing pandemic influenced the per annum workload, every effort was made to provide uninterrupted services. Pathology Department nominated/spared one technician and lab attendant in the time of COVID 19 crisis for providing services in RIUT lab. Our staff is serving all round the year with full dedication as part of RIUT Lab team from beginning of COVID 19 pandemic till date.

<b>SR NO</b>	<b>MONTH</b>	<b>LAB INVESTIGATIONS</b>
1	JANUARY	51178
2	FEBRUARY	51473
3	MARCH	40535
4	APRIL	38483
5	MAY	23035
6	JUNE	26173
7	JULY	33763
8	AUGUST	48170
9	SEPTEMBER	33208
10	OCTOBER	31008
11	NOVEMBER	23081
12	DECEMBER	27298
13	TOTAL	427405

## **TOTAL DEATHS**

<b>SR NO</b>	<b>MONTH</b>	<b>DEATHS</b>
1	JANUARY	145
2	FEBRUARY	107
3	MARCH	103
4	APRIL	113
5	MAY	120
6	JUNE	106
7	JULY	125
8	AUGUST	120
9	SEPTEMBER	117
10	OCTOBER	135
11	NOVEMBER	135
12	DECEMBER	125
13	TOTAL	1451

## MEDICOLEGAL CASES

SR NO	MONTH	MLCS
1	JANUARY	117
2	FEBRUARY	178
3	MARCH	170
4	APRIL	143
5	MAY	177
6	JUNE	158
7	JULY	198
8	AUGUST	169
9	SEPTEMBER	172
10	OCTOBER	182
11	NOVEMBER	121
12	DECEMBER	151
13	TOTAL	1936

## POSTMORTEMS

SR NO	MONTH	INTERNAL PM	EXTERNAL PM
1	JANUARY	28	11
2	FEBRUARY	25	14
3	MARCH	19	10
4	APRIL	15	3
5	MAY	26	6
6	JUNE	30	4
7	JULY	38	13
8	AUGUST	24	11
9	SEPTEMBER	30	10
10	OCTOBER	26	11
11	NOVEMBER	23	14
12	DECEMBER	30	10
13	TOTAL	314	117

## **ACCOUNTS DEPARTMENT(fiscal year 2020-2021)**

- **TOTAL BUDGET ALLOCATION = Rs. 1,005,197,400**
- **TOTAL EXPENDITURE = Rs. 968,475,078**

### **MAJOR PROBLEMS**

1. DHQ Hospital is notified as 357 bedded hospital and we are getting finance and staff as per this notification. However at present existing bed strength is 510. This issue is ready for presentation in coming syndicate meeting.
2. Currently Infrastructure is deficient and it's not possible to meet the teaching needs as per standards of Pakistan medical commission.
3. Existing Wards are congested and expansion is not possible within same building.
4. Single unit Medicine, surgery and Gyn/Obs Wards are 24/7 on call. Most of the beds in Gyn/Obs are being shared by two patients. Two units for each department must be made functional to meet the emerging needs.
5. There is no notified ICU/CCU ward. A locally arranged ITC/CCU setup is being run within existing financial and human resource.
6. Orthopedic ward was working without notification for many years within available resources. Recently it has been notified but no extra resources in terms of HR, Infrastructure and finance have been provided yet for its smooth running.
7. 34 bedded doctors hostel is available which accommodates post graduate trainees, registrars and house officers. At present PGs and Hos are working. It is highly insufficient for this strength of staff.
8. Approach to hospital is inadequate. Connecting patients with the right care at the right time is an important value-based care principle. Proper entry and exit is needed for smooth one way traffic in the hospital.
9. There is no qualified staff in administration to establish HR department and quality assurance department so it is difficult to implement MSDS in terms of sustainability.

Proper Departments must be established with adequately trained/qualified staff to get the MSDS indicators implemented in full letter and spirit.

10. No resources in terms of man, money and material has been provided for fulfilling Healthcare Commission standards. Due to non-existing/vacant positions for technical staff, it is not possible to depute right person for right job in critical stations like Operation theatre and pathology department.

## **DHQ HOSPITAL ACHIEVEMENTS**

1. Surgery, Orthopedic, Medicine OPDs and Pathology collection points have been shifted to well-ventilated open space from previous narrow corridor. It has facilitated more than 1500 patients visiting the hospital on daily basis. This provision has been created on Donation/self-help basis keeping in view the ongoing pandemic which has to be accepted and dealt as a NEW NORMAL. It has also helped in considerably reducing the repeated incidences of harassment and theft in congested corridors.
2. Operationalization of Long standing Non Functional 32 bedded Pediatrics Ward due to non-availability of Human Resource & Equipment.
3. Construction of Four New Waiting Areas for Gynae OPD, Orthopedic OPD, Neurosurgery OPD and main OPD on Self Help Basis.
4. Patient registration counters (Male, Female and Gyn/Obs) have been shifted to more accessible site in close vicinity to the OPDs for patient's convenience.
5. Hazardous waste storage site has been shifted to back of hospital minimizing health risks to the hospital staff and patients. Old Yellow room has been converted into orthopedic department OPD.
6. Installation of New Tube-well.
7. New sewer line of 36 inches bore has been installed to solve the drainage issues.
8. Single Uninterrupted Source of Electricity Direct from Grid Station.

9. Operationalization of state of the art laundry plant that can handle all of clean fabric needs in a simple manner hence enhancing the image of quality and prolonging fabric life by using distinct formulas for washing. It will also ensure prevention and containment of hospital infection.

10. Autoclaves have been shifted to a space adjacent to the laundry plant minimizing the occupational hazards related to electric shock and gas emissions.

11. Provision of new and improved place for general/ building stores on self-help basis hence converting garbage dumping site to a more useful space.

12. Shifting of cafeteria to widen and beautify the entrance of hospital. Aim was to provide a better space and good food for time challenged staff, patients and their attendants.

13. Installation of Hospital wide Security alarm system to ensure fast response from the security unit. The staff and patients of the healthcare facility will in turn feel safe knowing that immediate actions will be taken in case of an event.

14. Parking issues to staff have been solved to a great extent by merging the old cafeteria with existing staff parking. On an average three parking slots have been reserved for each department.

Lastly, we want to recognize and appreciate the hard work and sacrifices of all our staff members during this particularly distressing and disturbing period. We are thankful for their unflinching commitment and support which is the cornerstone of our Hospital and its legacy that we all are proud of.

Best Regards,

