

WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 11

Date: March 11-17, 2012

1. Situation around IDP hosting districts

A. "New Durrani" IDP camp, Kurram Agency

EHSAR Foundation has been selected for provision of health services in New Durrani IDP Camp. WHO will provide financial support to EHSAR for the project for provision of PHC services in New Durrani Camp. Their NOC is in process and today FDMA will inform EHSAR about their NOC status.

UNFPA has started their MNCH services in New Durrani IDP camp. They have strengthened THQ Sadda in terms of MNCH services, Medicine kits and human resource by providing 3 medical doctors.

B. "Togh Sarai" IDP camp, Hangu district

IDP's camp in Togh Sarai Camp, District Hangu population: total 1188 families with 7414 individuals. Among individuals 2842 are males, 2574 are females and 1998 are children. Health situation in the camp is normal.

9 out of 18 HF reported DEWS in week 11 from District Hangu. Hangu DoH has started reporting on the new DEWS format but most of the Alerts generated are False. EHA-Hangu is constantly contacting the Health Facilities staff and sensitizing them on case definitions.

WHO DEWS report that acute respiratory infections are still the highest cause of morbidity (21% or 136 cases) of total of 652 consultations; other acute diarrhoea (7% or 43 cases); skin infection (3% or 16 cases)

C. WHO activities in Tank district

WHO-EHA, attended a meeting with the Commissioner D.I. Khan division, who planned Tank visit in order to scrutinize and strengthen the campaign. WHO briefed the honourable guest about DEWS activities and constraints. Evening meeting was conducted at the ACO office where observations regarding the campaign activity were shared by S.O.

Visits to the health facilities and Meetings with In charge facilities done. Most of the HeRAM forms were completed, in person, and at the facility.

Monitoring visits in pursuit of NID teams. Wall chalking, Finger marking and team & Area incharges presence and activity in the field was verified and supported.

In district Tank there are 33 health facilities. On job training and request for proper reporting at CD Rafiq Korona and BHU Shah Alam. In charge BHU Ranwal was instructed to keep a watchful eye on further Leishmaniasis cases in the village as two alerts are generated in short span. Health and Hygiene sessions conducted with the household and neighbours, where the Leishmaniasis alerts were generated. Hygiene kit was also donated.

D. Situation in D I Khan district

26 health facilities reported to WHO via e DEWS. A total of **6428** consultations were provided. ARI remained major cause of morbidity (**23.16 %**), diarrhoea (**8.87%**), scabies (**3.1 %**) and malaria (**3.14 %**).

WHO actively participated in the SNIDs held from 12th March to 14th March 2012. During Monitoring visits, S.O. DEWS checked Fix Sites, Transit Points, Mobile teams; DHTs and LHSs. Also, randomly took Clusters of Houses to check the quality of Polio Campaign. WHO regularly attended Evening meetings chaired by DCO D I Khan for 04 consecutive days during SNIDs and shared his findings of field monitoring visit with the participants. WHO also assisted EPI program in conducting Market Survey on 5th day of the campaign.

WHO also conducted field visits in response to the Alerts of Measles and other system generated Alerts.

WHO continuously monitors the situation of the nutrition stabilization center at DHQ D I Khan. In addition, WHO supervises the construction work of Ware House in old premises of EDO Health office, to be completed in mid of April this year by SFD.

WHO plans to organize an awareness seminar on Dengue Fever in Gomal Medical College D I Khan in next month in collaboration with department of Community Medicine.

E. Situation in “Jalozai” IDP camp, Nowshera district

A total of 15442 families (66907 individuals) are registered in Jalozai IDP’s Camp. 7755 Families (34855 individuals) are living in camp and 7687 families (32052 individuals) are living off camp (*Source: PDMA). The Seventh phase has been started. 200 Tents are pitched. 177 are occupied by newly arrived families.

An emergency Camp Coordination meeting was held in Jalozai IDP’s Camp. Officials of PEI-WHO briefed the participants about alarming situation of AFP/Polio in Khyber Agency and the plan of Polio and Routine Immunizations in the incamp and offcamp population was shared with the partners. The meeting was chaired by ACO, Nowshera and PDMA Camp Incharge. EDO Health Nowshera and EPI Coordinator of Nowshera attended.

One case of suspected Measles from Merlin Health Post and One alert of Falciparum Malaria from CAMP Organization Health Post were reported from the camp, responded by WHO. The measles case has left for Bara and not traceable. The Doctors of Jalozai Camp were trained about Sample collection by WHO, to avoid missing of cases in off camp population.

WHO PHO paid a monitoring visit to Merlin J3 and CAMP Health Post. Supportive supervision done. E-DEWS Training for the medical staff of Merlin and CAMP Organization organized on 12th March 2012 at 01:30 PM in CAMP Organization Health Post. 14 Participants were trained. The training was attended by NPO, WHO-PEI as well. He stressed on the participants to be vigilant and report any suspected case of AFP (Acute Flaccid Paralysis) to WHO. The newly arriving families of Bara remained without Routine & Polio Vaccination for more than three years.

F. Situation in Kohat district

34 out of 43 Health Facilities reported DEWs. EHA-Team District Kohat Monitored Polio activities along DoH and WHO-Polio.

Team visited Union Council Dhoda because DEWS data has already generated AWD Alert from the respective Health Facility that is BHU Dhoda. Team met Area in-charge, Mr Shehzad Mir in the facility. Micro-plan of the UC along team numbers and Map was checked then team moved into the field and monitored activities in Dhoda I. Area Incharge informed EHA-Team regarding 3 refusals from the area, team visited the chronic refusal households and after some discussions team was successful in convincing them for immunization. (House numbers were 78, 62 and 77 in Dhoda I).

Coordination meeting held with EDO-H, UNOCHA & District establishment regarding planning of Public Awareness Campaign on water borne diseases for the upcoming summer season. EHA-team, District Kohat

is planning to organize awareness campaign for religious leaders (Mullah's) of the district.

EHA-team, District Kohat has been trying to contact Contractors responsible for civil work in LMH and DHQ hospitals under SFD and ECHO fund but so far the work is stopped at their end.

eDEWS:

KPK DEWS:

330 reports were received reporting 81,457 patient consultations in 14 districts of Khyber Pakhtunkhwa Province. Acute respiratory infections are the highest cause of morbidity (28% or 22,962 cases) showing no change in percentage; acute diarrhoea (6% or 4,733 cases); skin infection (3% or 2,247 cases); suspected malaria (1% or 717 cases).

FATA DEWS:

46 reports were received reporting 11,550 patient consultations in 3 agencies of FATA. Acute respiratory infections are the highest cause of morbidity (26% or 3,032 cases) showing 5% decrease; acute diarrhoea (5% or 595 cases); skin infection (3% or 285 cases); suspected malaria (2% or 193 cases).

Alerts:

A total of 51 alerts including 4 measles outbreaks (2 from Lower Dir while 1 each from Bannu and Shangla) were received. 37 were suspected measles, 4 for leishmaniasis, 2 for Diphtheria, 5 for NNT while 1 each for Falciparum Malaria, AWD and BD.

District Wise Break Up: Suspected Measles 1(Khyber Agency FATA Agency), 2 (Mohmand Agency), 1 FR (Bannu), 2 (Bannu), 7 (DI Khan), 1 (Haripur), 8 (Lower Dir), 1 (Battagram), 3 (Nowshera), 2 (Peshawar), 3 (Swat), 2 (Upper Dir), 2 (Bunir), 1 (Shangla) and 1 from (Charsadda).

NNT 2 (from Bajaur Agency FATA), 2 (Lakki Marwat) and 1 from (Karak).

Leishmaniasis 2 from Haripur, 1 (Nowshera) and 1 from (Tank).

AWD 1 from Kohat, **BD** 1 from Kohat, **Diphtheria** 1 each from Hangu and Kohistan, 1 case of **Falciparum Malaria** was reported from district Nowshera.

ARI Centers:

7 ARI Centres were closed out of 14. 7 ARI centres are functioning in different districts of KPK. A total of 1,276 consultations were recorded from 7 ARI Centres in this week.

Functioning ARI Centers are 02 in District Shangla, 02 in Kohistan, 01 in Lower Dir and 01 in Abbottabad

Hospital Coordinator Activities:

Meeting held with DoH and UNICEF on Dengue preparedness and IDPs response in Jaloza camp.

Facilitated meeting of EDO health Peshawar with secretary health in HSRU on district preparedness for dengue control and prevention held on 15th March 2012. Meeting held with Special Secretary Education for obtaining nominations for upcoming training of master trainers from dengue awareness campaign in school and including chapter on dengue in curriculum. First Draft of HEPR annual plan shared with WHO Islamabad for comments.

Essential Medicines:

- Total of 7 coordination meetings conducted with different stake departments including EDOHs, MS, Pharmacists, stabilization centre's incharge, DSM PPHI and store incharge at D.I. Khan, Mardan and Charsadda in which training of LSS, availability, consumption of EM and Good Storage practices were discussed respectively.

- Total of 5 Monitoring and 2 follow up visits were performed this week in districts D.I. Khan, Tank, Dir Lower and Hangu. Gaps regarding irrational use, storage of essential medicines, inventory control, record keeping and stock outs identified generally. Training and required Essential medicines provided as per need at visited health facilities.
- 7 training sessions were conducted in district Bannu, D.I. Khan, Dir Lower and Nowshera in which total of 41 participants were on trained Leishmaniasis and Good Storage Practices. Three days LSS training workshop held at Peshawar in which a total of thirty participants who belonged to 5 KP districts and FATA Directorate trained on LSS.
- WHO Pharmacists responded 2 Leishmaniasis cases at Bannu and Nowshera by providing Meglumine Antimoniate Injections. 15 Measles and one Neonatal Tetanus cases responded at Bannu, Nowshera, Dir Lower and D.I. Khan by providing Vitamin A and TIG.
- WHO delivered additional medicines to BHU Shigay (Syrup Diphenhydramine HCl 240ml =144, Permethrin lotion = 150, Tablet Zinc sulphate 10mg = 500, delivery kits = 20, syrup paracetamol = 24, spirit 1 litter = 1, ORS = 300, Disposable syringes 5ml = 50) and BHU Zaimdara Dir Lower (Syrup Diphenhydramine HCl 240ml =120 and Permethrin lotion =150). Ibuprofen400mg=3000tab, Paracetamol 100mg tab=5000, Medium examination Gloves=500, folic acid 5mg tab=3000, swab gauze=13 dozens to LMH Hospital Kohat.
- **IDPs camp Togh Sarai Camp:** One day training was arranged for the CERD staff working at Toghsarai camp Hangu, in which the 2 MT and 1 MO were trained on case definition of Leishmaniasis, dose and administration of Meglumine Antimoniate Injection.
- **IDPs camp Jalozai Activities:** HeRAMS assessment of Jalozai Camp's health facilities completed this week by DEWS team. In response to increased OPD and gaps findings at Jalozai Camp, WHO delivered Clotrimazole tablet= 600, co-trimoxazole suspension= 200, Ibuprofen Tablet= 1000, Metronidazole tablet= 3000, Paracetamol suspension 60 ml= 770, Paracetamol suspension 120 ml= 280, Chlorpheniramine Maleate syrup= 240 delivered to CERD, Amoxicillin Tablets= 4000, Mometasone Furoate Inhalers= 22, Diclofenac Sodium tablets= 5000, Fexofenadine Tablets= 102, Ibuprofen Tablet= 2000, Metronidazole Tablet= 5000, Naproxen Tablet= 504, Phenoxyethyl Penicillin Powder= 480, Permethrin Cream= 300, I/V canula 18 G= 400 to CAMP Organization while Co-trimoxazole suspension= 210, Paracetamol suspension 60 ml= 700, Adhesive Bandages= 500, Chlorpheniramine Maleate syrup= 280, Cotton Wool=20, Syringes 5cc= 500, Paracetamol Suspension 120 ml= 420, 5 vials of TIG and 5 vials of ASVs to Merlin.
- **FATA:** Coordination meeting held with Deputy Director health services FATA in regards to acceptance of nominations for LSS training workshop by DHS FATA and assessment of essential medicines support required in conflict areas of the affected agencies in FATA" Visits have been made to DHS FATA main warehouse in which stored medicines checked physically and availability of space confirmed for temporary storage of nutrition medicines kit for Mohmand agency which will be sent to AHQ Ghallanej once the stabilization centre becomes functional.
- Three days LSS training workshop held at Peshawar in which a total of thirty participants who belonged to 5 KP districts and FATA Directorate were trained on LSS.

WASH:

- WHO EH team participated in two days UNDAF planning exercise organized by UNICEF Pakistan from 15th-16th March, 2012 in Islamabad. The team represented WHO opinion to focus WASH intervention in areas with optimum health benefits for marginalized and excluded communities.
- WHO EH unit KPK/FATA conducted and completed He-RAMs Assessment exercise of the health care facilities in KPK/FATA. The assessment results in process of compilation at provincial level.
- WHO EH unit KPK/FATA completed the technical assessment of civil WASH services & infrastructure of 28 health facilities in Khyber, Mehmand, DI Khan, Bunir, kohat, Hangu and DI Khan. The detailed technical documents for the reconstruction and rehabilitation of WASH infrastructure in the targeted health facilities shared with WHO country office Islamabad.
- EDO-H, District Kohat & Hangu requested WHO for support in Vector Control activities in their districts. They also requested WHO-Environment cell for conduction of all activities well in time before

the number of Malaria cases gets high.

- UNCHR started water supply improvement project under WHO assessment and recommended options in Afghan Refugee camps in District Haripur & Mansehra. The installation of hand pumps is in progress with WHO EH team is facilitating the project at district level in coordination with Pak CDP (UNHCR implementing partner).
- WHO team participated in three days polio NIDs in KPK/FATA in collaboration with DEWS team.
- WHO EH team KPK/FATA participated in consultative seminar On March 15, 2012 arranged by UN-Habitat & E-guard (Water aid IP) focusing on commencement of a Pilot project based on storage practices of communal solid waste management in District of Mansehra. WHO provided technical guidelines on storage, collection and low cost disposal of solid waste on community level.
- WHO EHA Team visited and attended Camp cluster meeting in Jalozai Camp and discussed the needs of the new IDPs influx in the Camp. WHO is planning to install three chlorinators on the main water sources in the context of the requirement of the IDPs population.
- CERD (UNICEF IP) water quality unit requested WHO EH unit for training on “water quality monitoring and treatment” and “water born diseases”. EHA-Team has been planning and coordinating with the organization and HUB office for the making necessary arrangements for the requested training.
- WHO EH team District Kohat hold a coordination meeting with “HANDICAP INTERNATIONAL” working in District Kohat & Hangu. The organization requested for the sharing of disease data of water borne diseases of few Health Facilities where HANDICAP is working in WASH sector. EHA-Team assured the organization of every possible support from WHO-EHA.
- Coordination meeting held with EDOH, EPI coordinator, National program, MS Samarbagh, MS DHQ, staff of the RHC Mayar, RHC Lal Qala, RHC Asbanr, CD Koto, SCH Khazana, BHU Shigai, BHU Zamindara and BHU Makhai for streamlining communicable disease Alerts response, monitoring visits, HeRAMs assessments and Malaria control program for planning the residual spray in leishmaniasis affected areas.
- WHO EH team FATA conducted a meeting with health staff in AHQ Landikotal to coordinate and rationalize the exact scope of civil work and avoiding any duplication prior to the proposed civil construction by WHO EHA team in the targeted health facility.
- WHO EH team district Shangla conducted a coordination meeting with EPS, WASH partner regarding the water supply and sanitation issues in areas reported AWD Alert in previous year.
- WHO EH team district Nowshera conducted a coordination meeting with TMA Nowshera on increased Dog bites cases reported in District Nowshera.
- WHO EH team district Kohat/Hangu hold a coordination meeting with EDO-H, UNOCHA & District establishment regarding planning of Public Awareness Campaign on water borne diseases for the upcoming summer season. EHA-team, District Kohat is planning to organize awareness campaign for religious leaders (Mullah’s) of the district.
- WHO Team visited DHQ Timargara, THQ Samarbagh, RHC Mayar, RHC Lal Qala, RHC Asbanr, CD Koto, SCH Khazana, BHU Shigai and BHU Zamindara, BHU Makhai for measles alerts response, monitoring visits and HeRAMs assessments.
- WHO EH team district Kohat is closely monitoring the progress and issue in civil WASH infrastructure improvement works in Liaqat Memorial Hospital Kohat & DHQ hospital Hangu. The contractor is still not responding on the issues and pending work communicated to him many times.
- WHO EH team is closely monitoring the civil WASH improvements works in City Hospital Lukky Marwat. The awarded work is almost completed and will be visited for final inspection in the coming week.
- WHO EH team Khyber agency along with DEWS focal person DHS FATA conducted field visit to CD Sultan khail and MCH center in Landikotal, civil construction survey has been completed for the above two health care centers.
- WHO EH team District Shangla Visited BHU Martung and BHU Chawga for WASH assessment in the targeted health facilities. On job health and hygiene session was conducted with sanitary staff on hospital hygiene and infection control measures in the health facility.
- WHO EH team visited Lady reading Hospital Peshawar. A meeting was held with the Director causality regarding the progress work. Paint work and electrification work is in progress.75% of the work is

completed in Causality LRH.

- WHO EH team completed the water and sanitation survey in 3 identified health facilities of district Abbotabad including RHC Havalian, Ayub teaching Hospital and BHU sherwan.
- The issue raised in the previous weeks about the perfect builders and the WASH and Civil Work awarded to them in Saidu Group of Teaching Hospitals are still pending as Perfect Builders didn't completed the desire work and when I asked them they told me that they have completed the work as still the required work also includes the repair and re functioning of Public latrines remains.
- WHO EH team Visited BHU Odigram, BHU Manyar, CH Manglawar, THQ Matta, BHU Dureshkhela, BHU Bahrain and BHU Mairagai to Investigate system generated Alerts along with DEWS team.
- In Epi week 11, 2012 WHO team responded 16 Measles Alerts/outbreaks (13 alerts and 3 outbreaks) received from village marongay, Qaziabad, Dandona khema UC and Tehsil Balambat, Village Hasil Bhandra Mayar Samarbagh, Village Darmal Payen UC Lajbook, village Kar kabanj, UC khagram, Tehsil Warri, kandaona Asbanr, village Qalagai Shontala, village Dandona Surano, UC and Teshil Smarbagh (District Dir Lower) CH Darban (District Bunir), Noble Town, Eid Gah Road (DI Khan) and village Sarsaradary (District Swat).
- All the above mentioned measles alerts/outbreaks were jointly responded by DoH & WHO EHA Team along EPI Vaccinators. Outreach Immunization activities were conducted in each affected areas with all available antigens along with health promotion campaign and distribution of hygiene kits and soap in the affected household.
- 2 Alerts reported from district Kohat in Week 11. An AWD Alert was reported from UC Dhoda by BHU Dhoda, BD Alert was reported by RHC Usterzai from UC Usterzai of Tehsil Kohat All the Alerts were received in Week 10 DEWS data and investigated by EHA-Team in Week 11. Details of Alerts have been shared in DEWS Alert sheet of Week 11 and all the precautionary measures including preventive protocol for the containment of diseases have been applied.
- WHO EH unit collected and analyzed 26 water samples including 5 water samples were collected from hand pump, unprotected spring and three house hold in village dandona surano (District Dir Lower); 3 water samples were collected from Hand pump and two household in village Qalagai Shontala UC and Teshil Smarbagh, 7 water samples from Alpuri city area (District Shangla), 2 samples from Nahu jrunday water source (Malakand Agency), 4 water samples from Union Council Dhoda (District Kohat) Bacteriological studies were conducted for 5 water samples from health facilities serving Afghan refugees camps (istrict Haripur). 26% of the samples were found faecally contaminated. WHO in collaboration with District water authorities and WASH partners responded to improve the drinking water quality by health promotion sessions, disinfection of contaminated hand pumps and distribution of 2000 Pure sachet, 200 sets of IEC material in the affected areas.
- WHO EH unit organized a one day on job training and sensitization of BHU Lal Qala 2 health staff on infectious waste management/ hospital hygiene and disinfection by using HTH (70%).
- WHO EH team District Shangla organized an on job Session with health staff and community representative health promotion & awareness on prevention of water born disease in village Chawga and Martung. A total 15 participants took part in this activity.
- WHO EH team in response to measles Alerts reported from District Dir Lower WHO conducted an orientation exercise for health staff on basic hygiene practices, isolation of patient and vaccination to prevent measles outbreaks. A total of 28 participants took part in this activity.

Nutrition:

- Orientation meeting held with District Nutrition Officers of Lower Dir, Upper Dir and Kohistan. Officers were briefed about their roles and responsibilities and reporting mechanisms.
- Coordination meeting conducted with Deputy Chief HSRU regarding the inaugural meeting of Provincial Thematic Working Group of Nutrition. Health secretary has asked for agenda and work up of the meeting before announcing date. The said requirements will be provided to HSRU till end of this week.
- Visit to District Buner conducted. Meeting with MS and Pediatrician DHQ Hospital Daggarr held. A

visit to the Stabilization center in the DHQ Bunir conducted. Understanding reached with MS and paediatrician. Request was made for refresher trainings of the staff before starting the activities.

- Meeting held with APC National Program for Family Planning & PHC regarding distribution of equipments to Shangla. Visit will most probably take place next week.
- Coordination meeting held with APC National Program for FP & PHC regarding inclusion of Kohistan into the LoA. Issue forwarded to DGHS DoH Khyber Pakhtunkhwa for approval.
- Meeting held with APC National Program for FP & PHC regarding nominations for one day ToT on Health and Nutrition Sentinel site surveillance system. Nominations agreed upon will be provided till the end of week.
- Coordination meeting held with Dr Pervez regarding the nominations for ToTs on SAM training and HANSS training from the IPs.
- Coordination meeting conducted with Deputy Director Nutrition DoH regarding nominations for ToT regarding Facility based management of SAM. Nominations provided by the Nutrition Cell.
- WHO Participated in the written tests of candidates for District Nutrition Coordinator through Joint AusAid proposal in DoH.
- Meeting held with MS DHQ Hospital Upper Dir. MS was briefed about the nutrition intervention by the World Health Organization (WHO) in the food insecure district of Upper Dir. He was oriented about the establishment and working of Stabilization Centre (SC) for the severely malnourished children at DHQ Hospital Upper Dir. A visit was facilitated by the MS DHQ hospital Upper Dir and WHO Surveillance Officer (SO) to Pediatrics Ward for the identification of SC and warehouse space. It was agreed by WHO SO that the main warehouse of the SC will be establish within the already existing warehouse of the WHO at DHQ Hospital Upper Dir. A meeting was also held with the trained female nurses of the SC.
- Meeting held with EDO (H) upper dir and District National Program coordinator upper dir. It was agreed to have close coordination in activities related to nutrition.
- Meeting conducted with MS THQ Chakdarra Hospital Lower Dir. SC establishment was discussed with the MS and also space was made available for the equipments. The MS assured his utmost support and cooperation regarding SC establishing and operational processes.
- Meeting conducted with EDO (H) Lower Dir and District National Program coordinator upper dir. It was agreed to have close coordination in activities related to nutrition.
- Total of **20** patients were admitted in 5 Nutrition Stabilization Center with **21** discharged after curing and **2** were defaulter cases.

District level coordination & monitoring:

Shangla: WHO conducted Visit to 3 BHU's (BHU Shalizara, BHU Kotkay, BHU Martung) for eDEWS analysis. Meeting held with DHQ staff for improvement of hospital waste management (12/03/2012) and agreement on cross checking by MT's Incharge of Wards on weekly basis. WHO distributed hand washing soaps and blanket in collaboration with CUP's on 14/03/2012.

Meeting held with TMO (Tehsil Muncipal officer) for large bin installation in the hospital and pit's digging within the next week for safe waste disposal. (14/03/2012).

Peshawar: Health coordination meeting Of KP and FATA will be held on 21st March, 2011. All DEWS Surveillance officers will Participate in DEWS quarterly meeting on 21-22 March in Islamabad

Lower Dir: Coordination meetings held with EDOH ,EPI coordinator, National program, MS Smarbagh, MS DHQ, staff of the RHC Mayar, RHC Lal Qala, RHC Asbanr, CD Koto, SCH Khazana, BHU Shigai, BHU Zamindara and BHU Makhai for Alerts response, monitoring visits, HeRAMS assessments and Malaria control program for planning the residual spray in leishmaniasis affected areas. HeRAMS Assessment of the health facilities of District Dir lower was completed.

Kohistan: Capacity building training of the health care providers of District Kohistan arranged with the help

of Malteser International. 31 participants (10 doctors, 19 MTs, one DSV and one person from EDO H office were given orientation session on DEWS, Dengue, Cholera and Leishmaniasis. Meeting held with the newly appointed Nutrition Officer WHO for Kohistan. Meeting with EDO-H Kohistan. EDO-H gave briefing about the World Bank project. WB is going to take health departments of six districts of KP including Kohistan, and further give it to the IPs. The Battagram model will be followed. Visit conducted to RHC Pattan, RHC Dassu and BHU Jijal.

Nowshera: Thirty Five Health staff of Health Facilities in District Nowshera trained about E-DEWS in PPHI Office. The staff was trained about Leishmaniasis by WHO Pharmacist to improve the reporting of Leishmaniasis cases, which is endemic in some of the areas of District Nowshera. HeRAM completed in the Health Facilities of District Nowshera by WHO team. 53/55 Health facilities and PRCS Health Post in Benazir IDP's Camp covered. The remaining two Health facilities are non functional. Monitoring Visits conducted to DHQ Nowshera, BHU Taru Jabba and PRCS Benazir Camp Health Post. On job capacity building done.

Haripur: WHO conducted evening review meeting with EDO Health, EPI coordinator, PEO WHO and Health manager of Save the children during Polio campaign Coordination meeting held with EPI coordinator regarding measles campaign in Afghan Refugee camp. BHU Sikandarpur, BHU Dheenda, CD KTS3, CH Khalabut, BHU STC4, RHC Ghazi and DHQ Haripur were visited to check alerts.

Swat: WHO Swat team fully participated in the SNID (12-14 March), the evening meetings were chaired by DCO Swat. HeRAMS Activity completed for 69 Health facilities of District Swat. Monitoring visit conducted to BHU Manyar, BHU Odigram, CH Manglor, THQ Matta, BHU Dureshkhela, BHU Bahrai & BHU Meragai.

Upper Dir: EHA-Team has been monitoring Polio activities in the District during SNIDs 12th -14th March, 2012. EHA team visited fixed sites, mobile teams and transit teams in the district and monitored activities of CSPs, Supervisors, area in charges and teams. Campaign inaugurations held at DCO Office, Upper Dir Mr. Riaz Mahsud DCO Dir Upper inaugurated the campaign on 8th march, 2012 and attended by EDO-H, DSM PPHI, NPO WHO-POLIO, M.S DHQ Hospital, National Program Coordinator, SO EHA-WHO, PEI Officer, NRDF, DSV and EPI team. Evening meeting day 1 held at EDO-H Office and Chaired by DCO Dir Upper and Dr. Ubaid Ul Islam Team Leader WHO and attended by EDO-H, NPO WHO Polio, WHO, Coordinator NP, PPHI, HRDO, DSV, FSVs, CSPs and Supervisors.

Logistic:

The following Supplies were supplied from WHO KP warehouse to:

District	Item Sent to
Nowshera	EDO Nowshera: 500 Bed Nets, 100 Meglumine Inj
Bunir	DHQ Bunir: 100 Meglumine Inj. DHQ Bunner Dagggar: One Nutrition Medicine Kit,2 Weighting Scale Adult,1 Air Conditoner,20 bed sheets,10 beds Arms matterss,4 Chairs, 1 Cooking range,10 Feeding Cup, 20 Glass Stainless Steel,3 Height Scale,3 Infantometer,2 juicer blender set, 1 Kitchen utensils, 6 Length board, 2 medicines Cupboard,1 Microwave Oven, 1 refrigerator,20 Serving Bowl,6 Serving Spoon,4 sphygmomanometer,6 spoon for food preparation,2 stretcher,1 wooden table, 20 Tea spoons,8 therometers,3 weighting scale baby.
FATA Mohmand Agency	One nutrition stabilization kit
Hangu	DHQ Hangu: 1 Hematology Analyzer with starter pack of reagent,1 Mini laptops with battery,8 patient Beds,6 Revolving stools

Kohat	EDO-H Office: 20 Clean delivery Kits,1 Gloria Spray Pump,3 IEC Material Small Frams, 10 Mortein Mat, 2 wagtech Kit, 200 Eye weare,500 Face mask,1 Lime powder 5 Kg, 2 Needle Cutter,2 Cholera beds, 5 Cholera Patient beds, 1 Sink, 4 Long shoes Rubber.
Lakki Marwat	DHQ Lakki Marwat: One Hematology Analyzers with starter pack of Reagent, 1 Mini laptops with Batteries,8 Patients Beds (SFD), 6 Patient stools.
Bannu	DHQ Bannu: one Hematology Analyzers with starter pack of Reagent,1 Mini laptops with Batteries, 8 Patients Beds (SFD), 6 Patient stools,700 IEC Materials Poster,10 Motrin Mat,2 Wagtech Kit, 6048 Detol Soap, 200 Eye wear, 500 Face Mask,2 Needle Cutter.
Peshawar	City Hospital Peshawar: 3 Horizontal Auto clave, 1 lead protective screen,30 Pairs rubber boots (SFD) LRH Hospital Peshawar: 6 Horizontal Auto clave, 1 lead protective screen,150 Pairs rubber boots (SFD) Merlin Peshawar: 20 Cotton Roll,500 Syringe 5cc, 280 Chlorpheniramine maleate Syrup,700 Paracetamal 600 MI Oral 120 MI, 420 Paracetamal 600 MI Oral, 210 Co-trimoxalole, 500 Adhesive bandage. KTH Peshawar: Amoxicillin 250 Mg Cap,8250 Iburfern 400 Mg tabs,146 Spirit 60ml,23 chlorpheniramine maleate Syrup, 80 Ors, 555 IV Cannula 18 Gauge,37 Nivaquine Syrup,252 Nebuilizer mask,800 Mupiricin Cream,1572 Permethrin Cream, 6200 Erythromcin 250 Mg Tab, 504 Amlodpine 5 Mg tabs, 60 Tixylix syrup, 6000 Diclofenac tabs, 1050 Betnovate Cream,96 Laxaday,2016 Sporanox Pulse,5 Adiditional Medicines Kit box,19460 Danil Tabs, 41 Echinaceatinture Syrup, 1250 benzy Pencillin inj,123 Nedex Lotion, 392 Naproxen 500 Mg tabs, 600 Vitamin b 12 tabs,14 Spirit 1 Liter, 165 Gentamucin Eye Drops,1575 I V Sets, 2400 Haloperidol Inj,1500 Heparin 5000 IU Inj
Lower Dir	THQ Chakdara: One Nutrition Medicine Kit,2 Weighting Scale Adult,1 Air Conditoner,20 bed sheets,10 beds Arms matterss,4 Chairs, 1 Cooking range,10 Feeding Cup, 20 Glass Stainless Steel,3 Height Scale,3 Infantometer,2 juicer blender set, 1 Kitchen utensils, 6 Length board, 2 medicines Cupboard,1 Microwave Oven, 1 refrigerator,20 Serving Bowl,6 Serving Spoon,4 sphygmomanometer,6 spoon for food preparation,2 stretcher,1 wooden table, 20 Tea spoons,8 therometers,3 weighting scale baby. CAMP Organization ARI Center Lower Dir: 1000 Iburfen Tabs,200 Co-trimoxazole suspension 50ml, 770 Paracetamal 60 ml oral,255 Chlorpheniramine maleate Syrup, 280 Paracetamal 60 ml Oral 120 ml, 300 Metronidazole Tabs,1000 Iburfen 400mg Tabs, Naproxen 500 Mg tabs, 22 Mometasone Inhaler,102 Fexefendine Tabs, 300 Premethrin Cream, 400 Pencillin Syrup, metronidazole tabs. DHQ Lower Dir: 4 Stool, 1 Haematology Analyzers with Starter Pack of Reagent, 1Mini Laptop with battery, 5 Multi Purpose Trolleys.
Upper Dir	DHQ Upper Dir: 5 Cholera Beds.2Cholera Folding Beds,2 Dust bins,3 Gas cylinder,1 Gloria Spray Pump,300 IEC material, 10 Motrin mat,200 Eye Wear, 500 Face Masks,1 Haematology Analyzers with starter Pack of Reagent,1 Mini Laptop with battery,5 Multi Purpose trollesy,2Needle Cutter, 30 OPD registers,1 Emergency trolley with Emergency Kit + Oxygen Cylinder,1 Resuscitation/crash trolley. 2 Weighting Scale Adult,20 bed sheets,10 beds Arms matterss,4 Chairs, 1 Cooking range,10 Feeding Cup, 20 Glass Stainless Steel,3 Height Scale,3 Infantometer,2 juicer blender set, 1 Kitchen utensils, 6 Length board, 2 medicines Cupboard,1 Microwave Oven,20 Serving Bowl,6 Serving Spoon,4 sphygmomanometer,6 spoon for food preparation,2 stretcher,1 wooden table, 20 Tea spoons,8 therometers,3 weighting scale baby
Shangla	EDO H Shangla Alpura: 5 Cholera Beds.2Cholera Folding Beds,2 Dust bins,3

	Gas cylinder,1 Gloria Spray Pump,800 IEC material, 10 Motrin mat,200 Eye Wear, 500 Face Masks,1 Hematology Analyzers with starter Pack of Reagent,1 Mini Laptop with battery,5 Multi Purpose trollesy,2Needle Cutter,32 OPD registers,1Stain Steel Sink,1 Bathing tub,3024 Detol Soap
D I Khan	Cholera Beds.2Cholera Folding Beds,2 Dust bins,1 Gloria Spray Pump,400 IEC material, 10 Motrin mat, 20 clean delivery kits,200 Eye Wear, 500 Face Masks,1 Haematology Analyzers with starter Pack of Reagent,1 Mini Laptop with battery,5 Multi Purpose trollesy,2Needle Cutter, 85 OPD registers. 10 color Comparator Kit
TANK	DHQ Tank: 5 Multipurpose Trolleys, 33 OPD registers
Mardan	EDO Office: 10000 Bendroflumethiazide 2.5 mg tabs,28700 Erthromycin 250 mg Oral,480 Iburfen Syrup,1000 Muriricin cream,450 Ranitidine Inj,1 BP apparatus Mercury,15 Cotton Roll, 103 Nebuilizer Mask, 500 Syringe 5 cc,490 Co-trimoxazole suspension 50ml, 490 Paracetamal 60 ml oral,120 Chlorpheniramine maleate Syrup,490 Paracetamal 60 ml Oral 120 ml,100 Erythromycin suspension, 3464 Clotrimazole 500 mg Vaginal,4000 Mult Vitamins Minerals, 300 Zyocain Gel, 30 Nivaquine Syrups, 395000 metronidazole tabs.