



**PERFORMANCE AUDIT REPORT  
ON  
ABBASI SHAHEED HOSPITAL  
KARACHI METROPOLITAN  
CORPORATION  
AUDIT YEAR 2016-17**

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**AUDITOR-GENERAL OF PAKISTAN**

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## **PREFACE**

The Auditor-General conducts audit subject to Articles 169 and 170 of the Constitution of the Islamic Republic of Pakistan 1973 read with sections 8 and 12 of the Auditor- General’s (Functions, Powers and Terms and Conditions of Service) Ordinance 2001 and Section 116 of Sindh Local Government Act 2013. The performance audit of Abbasi Shaheed Hospital under Karachi Metropolitan Corporation was carried out accordingly.

The Directorate General Audit, Local Councils, Sindh conducted the performance audit of the “Abbasi Shaheed Hospital” under Karachi Municipal Corporation in May 2017 with a view to reporting significant findings to stakeholders. Audit examined the economy, efficiency, and effectiveness of the hospital. In addition, audit also assessed, on test check basis whether the management complied with applicable laws, rules and regulations in managing the project. Audit Report indicates specific actions that, if taken, will help the management realize the objectives of the hospital.

The Audit Report is submitted to the Governor of Sindh in pursuance of Article 171 of the Constitution of the Islamic Republic of Pakistan 1973, read with Section 116 of the Sindh Local Government Act 2013, for causing it to be laid before the Provincial Assembly of Sindh.

Islamabad  
Dated:

**(Javaid Jehangir)**  
Auditor-General of Pakistan

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## **ABBREVIATIONS AND ACRONYMS**

ASH	Abbasi Shaheed Hospital
AIDS	Acquired Immune Deficiency Syndrome
CDWP	Central Development Working Party
C.T Scan	Computed Tomography Scans
DAC	Departmental Accounts Committee
DDWC	District Development Working Committee
DDWP	Departmental Development Working Party
DG	Director General
ECNEC	Executive Committee for National Economic Council
ENT	Ear Nose Throat
E.T.T	Endotracheal Tube
E.C.H.O	Echocardiography
E.C.G	Electrocardiogram
GoS	Government of Sindh
GFR	General Financial Rules
INTOSAI	International Organization of Supreme Audit Institutions
ICU	Intensive Care Unit
IPD	Indoor Patient Department
KKF	Khidmat-e-Khalq Foundation
KMC	Karachi Metropolitan Corporation
KMDC	Karachi Medical and Dental College
M.R.I	Magnetic Resonance Imaging
OPD	Outdoor Patient Department
OT	Operation Theatre
PAO	Principal Accounting Officer
PC	Planning Commission
PMU	Project Monitoring Unit
PDWP	Provincial Development Working Party
Rs.	Rupees
SPPRA	Sindh Public Procurement Regularity Authority
Sq.yds	Square yards
Sft	Square Feet

## **EXECUTIVE SUMMARY**

The Directorate General Audit, Local Councils, Sindh conducted performance audit of Abbasi Shaheed Hospital, Karachi Metropolitan Corporation during May 2017. The main objectives of the performance audit were to see whether the hospital was performing its function with due regard to economy, efficiency and effectiveness. Besides, it was also examined that the hospital is observing proper standards, rules and regulations of Tertiary Care Hospital. The audit was conducted in accordance with INTOSAI Auditing Standards.

Abbasi Shaheed Hospital is the 3<sup>rd</sup> largest public sector tertiary care hospital after Jinnah Postgraduate Medical Center and Civil Hospitals in Karachi. It is being run by Karachi Metropolitan Corporation providing medical services. It was completed in the year 1973 with 250 beds at the cost of Rs25 million on 7 acre land. Abbasi Shaheed Hospital was inaugurated on 2<sup>nd</sup> January 1974 by former Prime Minister Mr. Zulfikar Ali Bhutto. Gradually the bed strength and facilities were enhanced. At present total beds are 967. Abbasi Shaheed Hospital caters for medical needs of patients from adjoining localities as well as from adjacent areas of Baluchistan and rural areas of Sindh province. Majority of patients attending hospital for treatment belong to lower and middle class. In the year 1990, the foundation stone of Trauma Centre was inaugurated by the then Mayor of Karachi Metropolitan Corporation, one of the components of Abbasi Shaheed Hospital to meet accidents and emergency cases. It was led with new concept of Trauma which is related to the patient's care coming under treatment of road accidents, burn injuries and acute life threaten condition. This was the first Trauma Centre of its pattern in Pakistan. It was designed as per the requirements of Trauma Centre as needed with availability of all emergency Operation theatres and departments. Trauma Center was functioning since October 1993.

### **Key Audit Findings:**

Audit observed that there was lack of effective budgetary controls, shortage of Doctors and Paramedical staff that had partially affected the medical and health services. The number of patients was decreased due to non-availability of staff. There is insufficiency of medicines, surgical and laboratory items. Medical equipments were not working properly, some remained unused due to defective condition and non-availability of skilled professionals which seriously affected diagnostic services to the patients. There was instance of reuse of blood collecting tubes. Lighting system was not proper. There

were insufficient emergency medicines, surgical and laboratory items. Various departments were non-functioning in the hospital. There was un-authorized occupation of private rooms. The outstanding liabilities were not cleared. Electric Meters were not installed at Doctor's residence. There was violation of SPPRA rules, slow pace of development work, non-functional ambulances, improper condition of medical stores and sanitation. Incorrect assessment of requirement of medicines led to surplus and loss of shelf life. Adequate infrastructure for storage and preservation of drugs was not available. There is absence of Hospital Management Information System. All systems are manually based that lacked efficiency and effectiveness of the hospital.

**Audit Recommendation:**

The audit recommends fixing of responsibility on management for non-supply of medicines, surgical and laboratory items, unhygienic re-use of blood collecting tubes and non-installation of electric meters. Appropriate lighting system in operation theatre, supply of emergency medicines, well equipped laboratories should be arranged. The management must take prompt measures to obtain funds from the Government to clear outstanding liabilities. The management should take steps for improving service delivery through proper management of human resources. Private room should be vacated at once and responsibility be fixed, besides, recovery should be ensured. The audit also recommends appropriate arrangement of funds so that liabilities may be cleared. Follow SPPRA rules and expedite development work. The management should take serious notice to maintain non-functional ambulances. Storage System of medicines and SOP's should be reviewed and followed time to time and improve hygienic conditions.

## 1. INTRODUCTION

Abbasi Shaheed Hospital under Karachi Metropolitan Corporation is the 3<sup>rd</sup> largest public sector tertiary care hospital after JPMC and Civil Hospitals in Karachi. It is being run by Karachi Metropolitan Corporation providing medical services. It was completed in the year 1973 with 250 beds at the cost of Rs. 2.5 Crores on 7 acre land. Abbasi Shaheed Hospital was inaugurated on 2<sup>nd</sup> January 1974 by former Prime Minister Zulfiqar Ali Bhutto.

Abbasi Shaheed Hospital caters to the need of 6.000 million population residing in the vicinity of hospital covering approximately 9 towns out of 18 Towns of Karachi city, such as Gulberg Town, Orangi Town, Liaquatabad Town, North Nazimabad Town, Gadap Town, S.I.T.E. Town, North Karachi Town, Gulshan-e-Iqbal Town and Jamshed Town.

Gradually the bed strength and facilities were enhanced. At present total beds are 967. Abbasi Shaheed Hospital caters for medical needs of patients from adjoining localities as well as from adjacent areas of Baluchistan and rural areas of Sindh province. Majority of patients attending hospital for treatment belongs to lower and middle class.

In the year 1990, the foundation stone of Trauma Centre was laid by the then Mayor of Karachi Metropolitan Corporation, one of the components of Abbasi Shaheed Hospital to meet accidents and emergency cases. It was laid with new concept of Trauma which related to the patient's care coming under treatment of road accidents, burn injuries and acute life threatening condition. This was the first Trauma Centre of its pattern in Pakistan. It was designed as per the requirements of Trauma Centre as needed with availability of all emergency Operation theatres and departments. Trauma Center was functioning in October 1993. Moreover, C.T. Scan facility was also inaugurated in October 1993.

Hospital run through its own sources by charging Rs5/- per patient 50% of the amount is deposited into KMC account and remaining 50% of the amount is utilized by the Hospital to meet miscellaneous expenditure and local purchase of emergency medicines. Moreover, the salary of staff of Abbasi Shaheed Hospital is being paid by KMC.

## **1.1 Main objectives of the Hospital**

- 1.1.1 To provide timely health care facilities to the public
- 1.1.2 To maintain adequate human and financial resources for the smooth functioning of hospital
- 1.1.3 To cater for the requirements of health and sanitation
- 1.1.4 To establish adequate Hospital Waste Management System
- 1.1.5 To maintain effective budgetary controls to ensure appropriate allotment and utilization of funds
- 1.1.6 To establish a mechanism in place for ensuring economy and efficiency in procurement of medicines, its storage, procurement of medical equipment and physical verification.

## **1.2 Achievement of objectives**

Most of the objectives of the hospital could not be achieved due to shortage of funds from KMC and mis-management of hospital administration such as: quality care treatment of patients.

## **2. AUDIT OBJECTIVES**

- 2.1 The main performance audit objectives were:
  - 2.1.1 To check whether the major objectives of the Hospital are being achieved or not
  - 2.1.2 To check whether the medical facilities providing quality treatment to patients were available in a tertiary care hospital like Abbasi Shaheed Hospital
  - 2.1.3 To check whether the adequate financial and human resources are available or not
  - 2.1.4 To check whether the available financial resources were utilized effectively
  - 2.1.5 To check whether the procurement of Medicines for emergency purpose was made according to prescribed procedures
  - 2.1.6 To check the attendance of staff as per requirement of hospital
  - 2.1.7 To check the sanctioned/working strength of hospital staff as per KMC approved strength
  - 2.1.8 To check whether the waste management system was available in hospital according to standards
  - 2.1.9 To check whether proper security system was available in the hospital
  - 2.1.10 To check whether the Trauma Center is functioning properly
  - 2.1.11 To check whether the internal controls at hospital are operative



### **3. SCOPE AND METHODOLOGY**

3.1 The main audit scope was:

3.1.1 To examine the performance of the hospitals and health units during financial years 2011-16 for providing medical and health services to public

3.1.2 To examine the availability of required manpower and their rational utilization, procurement of medicines/equipment in addition to efficiency in hospital administration

3.1.3 To examine recruitment system of Specialists, Doctors and Paramedical Staff and pointed out irregularities

3.2 The main audit methodology was:

3.2.1 Review the record relating to Abbasi Shaheed Hospital, regarding Tertiary Care and emergency facilities were scrutinized in detail

3.2.2 Review the guidelines and instructions issued by the Health Department of Government of Sindh and KMC Directorate involved in policy formulation and issuance of directives to hospital administration for their implementation

3.2.3 The audit team visited the office of Medical Superintendent Abbasi Shaheed Hospital for conducting interviewing of key personnel i.e. MS, DMS and Accounts Officer

3.2.4 The audit team physically visited different departments of Hospital and observed deficiencies and irregularities

3.2.5 Joint Inspection of hospital was conducted by audit team along with the officials of Medical Department to assess the performance of medical and health services in regard to cleanliness, maintenance of medical equipment, stores facilities for medicines, disposal of bio-medical waste etc.

### **4 AUDIT FINDINGS AND RECOMMENDATIONS**

#### **4.1 Organization and Management**

##### **4.1.1 Decrease in number of patients due to insufficient human resource**

According to Para 4.5.1 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission states that the hospital develops and implements policies and procedures for the management of staff, which includes recruitment, selection, appointment, training, appraisal, promotion.

Audit observed that the overall working strength of hospital was 1,583 against sanctioned strength of 2098. Resultantly there was shortage of 515 human resources due to which decrease in number of patients was observed. Year wise detail is as under:

<b>Statement showing decrease of patients</b>					
<b>Sr.</b>	<b>Year</b>	<b>Total OPD Patients</b>	<b>Total IPD Patients</b>	<b>Total</b>	<b>No of Patients decreased</b>
1	2011-12	686,359	35,657	722,016	-
2	2012-13	608,262	33,877	642,139	78,097
3	2013-14	533,693	31,684	565,377	74,569
4	2014-15	662,823	28,517	691,340	-129,130
5	2015-16	536,034	27,917	563,951	126,789

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that management should take serious steps for improving service delivery through proper management of human resources.

#### **4.1.2 Insufficient availability of emergency medicines, surgical and Laboratory items**

According to Para 14.3 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “the stock is stored and managed to ensure that medications are current, kept safe and are continuously available to meet the needs of clinical staff and patients. Furthermore, Para 12.1 states that the medical testing laboratory is managed by a suitably qualified and registered pathologist, experienced medical technologist or other suitably qualified and registered laboratory scientist. Moreover, Para 12.4 states that the Safe and adequate facilities and equipment are provided to meet the needs and volume of patients served by the laboratory.

During physical visit Audit observed that Abbasi Shaheed Hospital which is one of the largest Hospital of Karachi faced shortage of emergency medicines, surgical and lab items. Detail is as under:

Medicines		Surgical Items	Lab Items	
i.	Tab Paracetamol	i.	Surgical Disposable	
ii.	Tab Brufen	ii.	I.V. Cannula	
iii.	Inj. Healothane	iii.	I.V. Drip Set	
iv.	Inj. Hydrocortisone	iv.	Ultra Sound Gel	
v.	Inj. Ranitidine	v.	Ett. Poly thin Gloves	
vi.	Inj. Tranexamic	vi.	Zinc Oxide Sticking Plaster	i. Dengue Kits ii. Pregnancy Kit etc.
vii.	Inj. Syathetic	vii.	Disposable Syringes	
viii.	Inj. Plasma	viii.	Urine Bags	
ix.	Inj. Harion	ix.	Surgical Gloves	
x.	Inj. Hydrocortisone	x.	Crape Bandage	
xi.	Tab. Novidate	xi.	Injector Syringes	
xii.	Inj. Glycopyrrale	xii.	Cotton Bandage 6"	
xiii.	Tab. Diclofenac Sodium			
xiv.	Inj. Tetanus Toxoid			
xv.	Cap. Amoxicillin			

Audit was of view that due to deficiency of emergency medicines and other essential items may result in increase of mortality and morbidity rates of poor patients.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends fixing of responsibility for non-supply of emergency medicines, surgical and lab items and prompt action must be taken for arrangement of funds from KMC for sufficient supply of medicine.

#### 4.1.3 Non-working of Oxygen points

According to Para 9.3 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, "Safe and adequate facilities and equipment are provided to meet the needs and volume of patients in the ICU". Moreover, Para 9.3.4 states that each bed has a central line facility for Oxygen, Suction, Compressed Air, Central ECG monitoring.

During physical visits Audit observed that various Oxygen Gas points were not working in different wards and management did not take appropriate measures to resolve the important issue of supply of Oxygen Gas. Detail is as under:

S.No	Department	Non-working of Oxygen Points	Qty Out of Order
1	Medical I.C.U	Oxygen Points	10
2	Peads I.C.U	Oxygen Points	01
3	Neonate I.C.U	Oxygen Points	04

Audit was of the view that continuous supply of Oxygen Gas in ICU is mandatory to facilitate the serious nature patients. Due to non-working of different Oxygen Gas points in various wards, the life of patients are in danger which may cause death of patients, which reflects the carelessness of management towards saving of lives of patients.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends fixing of responsibility on person(s) at fault and immediate working/functioning of Oxygen points be made, under intimation to audit.

#### **4.1.4 Inadequate facilities at Trauma Center**

According to Para 10.3.5 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “Facilities (equipment) are conveniently located within the hospital to be accessible to highest risk patients” Para 9.3.5 states that beds in the unit are arranged to allow ready access for routine and emergency procedures and are within direct vision of supervising staff at all times.

During physical visit of Abbasi Shaheed Hospital Audit observed that Emergency Medicines in Trauma Center were not available, arrangement of beds were not proper, sanitation staff was not available, smell in wards & Doctors were un-available on call duties.

Audit was of the view that insufficient/improper facility in Trauma Center patients deprived of basic facilities to many patients which may result improper treatment, and may cause any serious incidence.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that the missing facilities be provided in Trauma Center by the management for proper treatment of the patients.

#### **4.1.5 Un-hygienic re-use of Blood Collecting Test Tubes in laboratory**

According to Para no. 18 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “Clinical and other infectious or injurious waste is handled, stored and disposed off to minimize harm and risk of infection/injury to patients, visitors, contractors, staff and the community. Moreover, Para no. 12.2.16 states that the instructions are clearly displayed describing the safe disposal of clinical, toxic and radioactive waste.

Audit observed that the management was re-using the blood collecting test tubes after washing them un-hygienically with ordinary soap. This kind of activity on part of management negligence may cause spread of diseases of Hepatitis B, C and Acquired Immune Deficiency Syndrome (AIDS).

Audit was of view that re-uses of blood collecting test tubes may result in spread of serious diseases in the society. This is an example of serious mismanagement and deviation from prescribed Standard Operating Procedures. Pictorial evidences attached.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that the responsibility may be fixed upon person(s) at fault for re-using of blood collecting test tubes, which is highly un-hygienic practice. It is further

recommended that once used blood collecting test tubes should be discarded forever so as to avoid spread of deadly diseases and safety measures should be employed to discourage the practice of repeated use of blood collection tubes.

#### 4.1.6 Improper lighting system in hospital

According to Para 23 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission,” The hospital’s physical environment contributes to the safety and well being of patients, staff and visitors. Furthermore, Para 23.5 states that the environment in all patient areas is clean, well lit, ventilated with adjustable controls for lighting and heating, and decor is in good repair.

Audit observed that proper lighting system was not available throughout Hospital. Electric Bulbs were not available in the holders and ceiling fans were out of order. Besides, lighting system was not up to mark in different Operation Theaters’ which resulted in increasing the misery of patients and attendants. Detail provided as under:

S. No	Department	Detail of Out of order Lights	Quantity
1	Surgical I.C.U	Portable O.T Light	1
2	Urology	O.T Light	1
3	Ortho O.T	O.T Light	1
4	Emergency Gynae O.T	O.T Light	1
		Portable O.T Light	1
6	Emergency Gynae O.T-II	O.T Light	1
7	ENT O.T	Light Source	1
8	Labour Room	O.T Light	2
9	General Lighting in Hospital	Pictorial Evidence	

Audit was of the view that the management failed to comply with the rules set forth by the Government, which reflects the absence of systematic control & financial discipline.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that proper lighting system should be arranged in operation theaters’ and in Hospital premises for the safety and facility of the patients.

#### 4.1.7 Non-functioning of various departments due to shortage of resources

According to 21.14 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission,” Regular and routine checks of equipment (equipment audit) are carried out in accordance with the operational manual, maintenance contract and/or a history sheet of the equipment by the Store in-charge”. Moreover, Para 12.4 states that Safe and adequate facilities and equipment are provided to meet the needs and volume of patients served by the laboratory.

Audit observed that various Departments of Abbasi Shaheed Hospital are non-functional due to out of order of medical equipment and non-availability of chemicals in Pathological Laboratory. As a result, patients are referred to various hospitals. Detail of non-functioning departments is as under:

S. No	Department	Remarks
1	Pathology Laboratory	Important tests like Blood Sugar, Urea & Creatinine, LFTs, Lipid Profile, Hepatitis B & C, RA Factor, Bone Marrow, Widal test and Dengue fever tests are not performed in Lab.
2	Microbiology Department	Blood Culture & Sensitivity, Urine Culture & Sensitivity, Pus Culture & Sensitivity and Fluid Culture & Sensitivity are not performed on regular basis.
3	Ventilators	In Medical ICU 09 ventilators are not working out of 13, in P.I.C.U 01 ventilator is not working out of 06, in Surgical ICU 03 ventilators are not working out of 16 etc.
4	Incubators in nursery of Paeds department	In N.I.C.U, 06 incubators are not working out of 13.
5	Radiology Department	In Radiology only 05 ultrasound machines are working out of 14 and 03 X-Ray machines are working out of 05.
6	Dialysis	In Dialysis only 08 machines are working out of 19.
5	Kitchen and Cafeteria	(Pictorial evidence)
6	Operation theater in Gynecology Department	(Pictorial evidence)
7	Mortuary	(Pictorial evidence)
8	Audiometric Machine in ENT Department	(Pictorial evidence)
9	Operation Theater of ENT	(Pictorial evidence)
10	Video system of Surgery Department	(Pictorial evidence)
11	Non-installation of Biometric System for employees	(Pictorial evidence)
12	Non installation of Fire Fighting system	(Pictorial evidence)

Audit was of the view that due to non-functioning of departments the patients are deprived of medical & health facilities as well as the hospital is suffering revenue loss which reflects weak financial and administrative control.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that the management should take necessary steps to make various departments fully functional.

#### **4.1.8 Non-provision of latest laboratory equipments for different Medical Tests**

According to Para 12.4 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission,” Safe and adequate facilities and equipment are provided to meet the needs and volume of patients served by the laboratory. Furthermore, Para 12.4.3 states that the staff has access to sufficient laboratory equipment to carry out their jobs safely.

Audit observed that Hospital Laboratory was functioning improperly in absence of latest equipment for best test results. As a result, hospital sustained loss of revenue and general public suffered. Detail of un-available laboratory equipment are as under:

<b>S. No.</b>	<b>Name of equipment not available</b>
1	Polymerase Chain Reaction Analyzer (PCR)
2	Biochemistry Analyzer
3	Hematology Analyzer
4	Immunology Test Analyzer
5	Microbiology Analyzer
6	Parasitology Analyzer

Audit was of view that due to non-availability of latest equipments in laboratory the patients were deprived of laboratory facilities and avail laboratory tests services at expensive rates from private laboratories. Moreover, the hospital suffered financial loss due to loss of revenue, which reflects weak management.

Deviation from prescribed procedure constituted improper internal/financial control.



The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that management should arrange finances from Government of Sindh to make laboratory fully functional alongwith procurement of latest equipment for laboratory.

#### **4.1.9 Non-production of record**

According to article 170 (2) of constitution of Pakistan “The audit of the accounts of the Federal and or the Provincial Government and the accounts of any authority or body established by, or under the control of the Federal or a Provincial Government shall be conducted by the Auditor-General, who shall determine the extent and nature of such audit”.

According to AGP Ordinance Section 14. Powers of Auditor-General in connection with audit of accounts.—(1) The Auditor-General shall, in connection with the performance of his duties under this Ordinance, have authority— (a) to inspect any office of accounts, under the control of the Federation or of a Province or of a district, including treasuries, and such offices responsible for the keeping of initial or subsidiary accounts; (b) to require that any accounts, books, papers and other documents which deal with, or form, the basis of or otherwise relevant to the transactions to which his duties in respect of audit extend, shall be sent to such place as he may direct for his inspection; and (c) to enquire or make such observations as he may consider necessary, and to call for such information as he may require for the purpose of the audit. (2) The officer incharge of any office or department shall afford all facilities and provide record for audit inspection and comply with requests for information in as complete a form as possible and with all reasonable expedition. (3) Any person or authority hindering the auditorial functions of the Auditor General regarding inspection of accounts shall be subject to disciplinary action under relevant Efficiency and Discipline Rules, applicable to such person.

The management of Abbasi Shaheed Hospital failed to provide access to relevant record. Detail provided at Annexure-I.

Audit was of the view that record was not provided to audit resulting into non-authenticity of expenditure from public funds which constituted weak financial management.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that disciplinary action against concerned officers in pursuance of instructions issued by Chief Secretary of Sindh vide letter No. D.O No. SO (C-II)/SGA&CD/1-73/2012, dated 25.10.2013 and relevant record as mentioned in the list attached may be provided.

## 4.2 Financial Management

### 4.2.1 Non-availability of funds – Rs 9,693.232 million

According to WHO Standard the Performance Indicator on Health Expenditure for Pakistan is \$85/Capita, India \$118/Capita & for Bangladesh \$103/Capita.

Audit observed that the hospital did not receive sufficient funds of Rs 11,310.172 from Government to operate hospital smoothly. The funds required during various years were Rs 11,310.172 million as per WHO Performance Indicators on Health Expenditure in Pakistan. But actual expenditure amounting Rs 1,616.940 was incurred on 1,255,291 numbers of patients during financial year 2014-15 & 2015-16. Thus, the hospital faced deficit of Rs 9,693.232 million. As a result, the general public suffered from quality treatment and medical services. Detail is as under:

(Amount in rupees)

Sr.	Financial Year	Expenditure	Patients /Year	Expenditure /Capiat as per WHO Standards	Expenditure/ Capita by Hospital	Variance/ Capita	Variance
1	2014-15	872,383,786	691,340	\$85*106=Rs 9010	1,262	7,748	5,356,589,614
2	2015-16	744,556,278	563,951	\$85*106=Rs 9010	1,320	7,690	4,336,642,232
<b>Total</b>							<b>9,693,231,846</b>

Audit was of view that due to non-availability of sufficient funds, the management failed to operate the Hospital smoothly.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that the responsibility may be fixed on person(s) at fault and management must take prompt measures to obtain funds from the Government.

#### **4.2.2 Un-authorized occupation of private rooms by Doctors Rs 64.800 million**

According to Clause-25-unauthorised occupation of Accommodation Allocation Rules, 2002, “(2) The ejection of trespassers from the Government or hired accommodation shall be carried out by the concerned Estate Office, immediately without serving any notice on the trespasser and First Information Report shall be lodged against the trespasser by the Estate Office. (3) In order to expedite the eviction under sub-rule (1), the Estate Office shall arrange the disconnection of services like water supply, gas, electricity and telephone of the house under illegal occupation. (4) In case an accommodation is occupied or retained without legitimate allotment or is trespassed, the Estate Office shall charge rent at the rates given below from the occupant for the period of unauthorized occupation or retention.<sup>3/4</sup> (a) in case of unauthorized retention beyond legally allotted period, rent equivalent to one rental ceiling of the category of his entitlement or the category of the house under occupation, whichever is more, shall be charged for each month for the entire period of unauthorized occupation; (b) in case of trespassing or unauthorized occupation, rent equivalent to two rental ceilings of the category of his entitlement or the category of the house occupied, whichever is more, shall be charged for each month for the entire period of unauthorized occupation;

Audit observed that there were 72 private rooms in different wards of hospital and occupied by Senior Doctors, Post Graduates Doctors and House Job Doctors since last five (05) years at free of cost. During verbal conversation with management, it was informed that in past, hospital was generating revenue in the form of private room charges. Detail provided as under:

(Amount in rupees)

<b>Approx Rate/Day</b>	<b>Total Rooms</b>	<b>Total Rent/Day</b>	<b>Total Rent/Month</b>	<b>Total Rent/Year</b>	<b>Total Rent 5 Years</b>
500	72	36,000	1,080,000	12,960,000	64,800,000

Audit was of the view that due to unauthorized occupation of private rooms' hospital sustained suspected financial loss of Rs64.800 million in last 5 years.

The failure of management to vacate the private rooms occupied by doctors and uses them for generating revenue shows lack of interest and seems to be undue collusion of Doctors with management by accommodating private rooms, constitutes weak internal control and over sight on daily functioning of hospital.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that private room should be vacated at once and responsibility be fixed against the person (s) at fault. Besides, making recovery from occupant doctors should be ensured under intimation to audit.

#### **4.2.3 Outstanding utilities bills and hospital liabilities - Rs115.240 million**

According to the Government of Sindh Finance Department Letter No. FD/CW&M-I)(26) 91-92(P.T.II) dated 24-6-1993 and Rule 638 of PWD Manual volume-I, all charges incurred must be paid at once and under no circumstances may be allowed to stand over to be paid from the grant of subsequent year and also as per Finance Department Government of Sindh No. FD/B&E –I/51/2007 dated 2-7-2007 that liability of previous years shall not allowed to be cleared unless concurrence is given by Finance Department. However, last year's (2006-07) routine claim viz Reimbursement of Medical Charges and TA would be exempted from this condition.

Audit observed that management failed to pay outstanding liabilities of medicine, diet, medical gas and janitorial services. Audit was of the view that due to non-payment of outstanding liabilities may result into non-provision of essential services in future and may cause deprivation of health facilities to poor patients. Detail provided as under:

(Amount in rupees)

<b>S. No.</b>	<b>Company Name</b>	<b>Description</b>	<b>Amount</b>
1	M/s Naveed Medicos	Medicines Bills	9,100,000
2	M/s Zafar Brothers	Diet Bill	20,000,000
3	M/s Sui Southern Gas Co. Ltd	Sui Gas Bill	16,205,583
4	M/s Linde Pakistan Pvt. Ltd	Medical Gases	16,952,122

5	M/s NTC	Telephone & Internet Bill	765,342
6	M/s Allied Enterprises	Janitorial Services	6,303,032
7	HOD and PGs students	Stipend	45,913,774
<b>Total</b>			<b>115,239,853</b>

Deviation from prescribed procedure constituted weak internal and administrative control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that liabilities should be cleared at the earliest and responsibility may be fixed on person(s) at fault and prompt action may be taken for arrangement of funds from KMC and GoS, under intimation to audit.

#### **4.2.4 Loss due to reduction in ratio of X-Ray/Lab Test/C.T Scan and MRI**

According to Para 14.3 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “the medical testing laboratory is managed by a suitably qualified and registered pathologist, experienced medical technologist or other suitably qualified and registered laboratory scientist”. Moreover, Para 12.4 states that the Safe and adequate facilities and equipment are provided to meet the needs and volume of patients served by the laboratory.

Audit observed that the number of X-Rays, C.T Scan, M.R.I, Ultrasounds, E.T.T, E.C.H.O, E.C.G and Pathology Tests have been diminished gradually since last five years due to which the revenue of Abbasi Shaheed Hospital has been severely affected. Detail provided at Annexure-II.

Audit was of the view that the management failed to comply with the rules set forth by the Government, which reflects the absence of systematic control & financial discipline.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that matter may be investigated, reasons may be determined for reduction in laboratory tests of patients and corrective measure should be taken so as to increase the revenue and to provide the above-mentioned facilities to the general public.

#### **4.2.5 Loss to Government due to non-installation of Electric Meters at Abbasi Shaheed Staff flats – Rs 28.200 million**

As per Notification No. DLG/93/2013 Dated: 5-9-2013 issued from Directorate of Local Government Department vide Para Nos:

- i. Electricity may not be consumed without meters;
- ii. The reading of meters may be compared with bills being issued from electric company, in case of any difference correspondence may be carried out with Electric Company;
- iii. Reading of all Connections may be noted on daily basis;
- iv. A cell may be established in every council especially in Engineering wing; and
- v. No Reconciliation form may be signed without proper verification by Assistant Engineer / Engineer & Municipal Commissioner, Chief Officer, Town Officer etc as the case may be”

Audit observed that 94 flats were allotted to various Doctors, Nurses and other staff of Abbasi Shaheed Hospital, but deductions on account of consumption of electricity were not made from their salaries since individual meters were not installed on each flat instead electricity was being provided from the meter installed for hospital. Thus, the Government sustained loss of Rs28.200 million. Detail is as under:

(Amount in rupees)

<b>Approx Bill/Month for each flat</b>	<b>Total Flats</b>	<b>Total Recovery/Month</b>	<b>Total Recovery/Year</b>	<b>Total Recovery for 5 Year</b>
5000	94	5000*94=470,000	5,640,000	28,200,000

Audit was of view that due to non- installation of meters, Government sustained huge financial loss which constitutes poor financial/administrative management and lack of interest of department.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that fixing responsibility on person(s) at fault and prompt action may be taken against recovery of electricity dues and installation of electric meters should be ensured at earliest, under intimation to audit.

#### **4.2.6 Non-revision of OPD and Laboratory Test Fees**

According to Para-23 of General Financial Rules Volume – I, “every Government officer should realize fully and clearly that he will be held personally responsible for any loss sustained by Government through fraud or negligence on his part and that he will also be held personally responsible for any loss arising from fraud or negligence on the part of any other Government officer to the extent to which it may be shown that he contributed to the loss by his own action or negligence”.

During the performance audit of Abbasi Shaheed Hospital, KMC, Karachi, Audit noticed that Abbasi Shaheed Hospital is charging fees and rates under various heads accounts such as Outdoor Patient Department fees and different Laboratory charges on minimum rates from 5 to 3500 rupees in different categories, which are insufficient to meet the Hospital expenditures for smooth functioning. Moreover, different hospital tends to revise OPD fees at regular intervals of time, Indoor Patient Department fees and Laboratory rates with passage of time and with reference to inflation.

Audit was of the view that the management failed to comply with the rules which resulted in loss of revenue to hospital and subsequently inefficient functioning of hospital, which reflects the absence of systematic control & financial discipline.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that rates may be revised reasonably so as to run the hospital in an efficient manner and to increase the revenue of hospital.

### 4.3 Procurement and Contract Management

#### 4.3.1 Non-hoisting of Tenders on Authority's Website-Rs13.067 million

Rule-17(1) of Sindh Public Procurement Regularity Authority Rules 2010, states that, "Procurements over one hundred thousand rupees and up to one million rupees shall be advertised by timely notifications on the Authority's website and in print media in the manner and format prescribed in these rules".

Audit observed that, management purchased medicines worth Rs13.067 million during the period 2014-16 without hoisting of Tenders on Authority's Website. Detail provided as under:

(Amount in rupees)			
S.No	Name of Supplier	Cheque No & Date	Amount
1	M/s Naveed Medicos	25410144/06-12-2014	722,268
2	M/s Naveed Medicos	25410145/16-03-2015	817,134
3	M/s Naveed Medicos	25410147/16-03-2015	1,201,569
4	M/s Naveed Medicos	25410149/12-05-2015	1,226,506
5	M/s Naveed Medicos	25410151/28-05-2015	3,139,636
6	M/s Naveed Medicos	25410153/25-06-2015	2,454,650
7	M/s Naveed Medicos	25410155/24-05-2015	1,460,026
8	M/s Naveed Medicos	25410157/06-06-2016	500,400
9	M/s Naveed Medicos	25410159/06-06-2016	348,005
10	M/s Naveed Medicos	25410161/06-06-2016	514,987
11	M/s Naveed Medicos	25410163/06-06-2016	682,784
<b>Total</b>			<b>13,067,965</b>

Audit was of the view that management did not invite tenders through Authority's website which resulted into award of contracts in non-transparent manner.

Deviation from prescribed rules resulted into un-authorized expenditure and due to improper administrative/internal control. Deviation from directives issued by Planning Commission constituted poor financial discipline on the part management system.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.



Audit recommends that responsibility may be fixed on management for non-achieving economical & competitive rates, through SPPRA web site.

## **4.4 Construction and Works**

### **4.4.1 Slow pace of construction work on ENT/Eye Building & Quaid Block**

According to Para-23 of General Financial Rules Volume – I, “every Government officer should realize fully and clearly that he will be held personally responsible for any loss sustained by Government through fraud or negligence on his part and that he will also be held personally responsible for any loss arising from fraud or negligence on the part of any other Government officer to the extent to which it may be shown that he contributed to the loss by his own action or negligence”.

Audit observed that the Development work of Construction of Ear Nose Throat/Eye Building and Quaid Block of Abbasi Shaheed Hospital was in progress; however, its pace of development work is too slow. Consequently, the patients of ENT and Eye ailments are being deprived of getting proper treatment.

Audit was of the view that the management failed to comply with the rules set forth by the Government, which reflects the absence of systematic administrative control & financial discipline, towards monitoring the progress of construction work.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that release of funds for completion of ENT and eye building must be taken up at earliest on fire footing basis, so that poor patients can get treatment on urgent basis at a minimum cost.

## **4.5 Asset Management**

### **4.5.1 Out of order Ambulances**

According to Para 10.3.5 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “Facilities (equipment) are conveniently located within

the hospital to be accessible to highest risk patients” Moreover, Para 21.14 states that the regular and routine checks of equipment (equipment audit) are carried out in accordance with the operational manual, maintenance contract and/or a history sheet of the equipment by the Store in-charge.

Audit observed that hospital possesses seven number of ambulances out of which four were out of order and were parked outside without sheds.

Audit was of the view that due to out of order ambulances patients are constrained to obtain private ambulance services from private sources at exorbitant rates.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that responsibility may be fixed on management and arrangements may be made as soon as possible to repair the out of order ambulances to facilitate the deprived public, under intimation to audit.

#### **4.5.2 Non-disposal of out of order material/machinery**

According to Para 167 of General Financial Rules Volume-I, states, “Stores which are reported to be obsolete, surplus or unserviceable may be disposed off by sale or otherwise under the orders of competent authority to sanction the writing off of a loss caused by deficiencies and depreciation equivalent to their value”.

Audit observed that huge quantity of out of order Plants & Machinery and Furniture were dumped at hospital site at various places and the same were not condemned and were dumped at different places of Hospital despite of storage at one place. Consequently, the chances of theft cannot be ruled out. Moreover, as the out of order and scrap material was placed at various places of premises, the hospital gives a dismal presentation to visitors.

Audit was of the view that the management should take steps for auction of scrap material and to comply with the rules set forth by the Government. In this regard the entire situation reflects the absence of systematic administrative & financial discipline towards adherence of Government rules.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that repairable Plants & Machinery and Furniture be made operational on urgent basis for efficient running of the hospital. Further, the unserviceable materials/stores may be auctioned of as soon as possible to avoid an unforeseen loss.

#### **4.5.3 Non-maintenance of machinery/equipment of different wards**

According to Para 21 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, “there are clear and documented responsibilities, policies and procedures for procurement, use, maintenance, repair and disposal of equipment to minimize the potential for harm. Para 21.14 states that the regular and routine checks of equipment (equipment audit) are carried out in accordance with the operational manual, maintenance contract and/or a history sheet of the equipment by the Store in-charge”.

Audit observed that various machinery/equipment such as monitors, incubators, ventilators, MRI, Operation Theatre of accident & emergency are lying idle for long time due to non-maintenance of items by hospital administration. Detail provided at Annexure-III.

Audit was of view that due non-maintenance of machinery/equipment the poor patients are suffering due to non-provision of health facilities. The management has not taken steps for necessary repair of out of order equipment, which constitutes poor administrative and financial management.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that prompt action may be taken to obtain necessary finances from KMC so that vital life saving equipment could be made functional to save the Government property from loss.

#### **4.5.4 Improper condition of Medical Stores**

According to Para 14.1 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission,” The pharmaceutical service is managed and organized to provide efficient and effective pharmaceutical services through rational use of drugs within the hospital”. According to Para 14.3,” Stock is stored and managed to ensure that medications are current, kept safe and are continuously available to meet the needs of clinical staff and patients”.

During physical visit of Medical Stores following deficiencies were observed by Audit.

1. Medical Stores operated by unqualified Pharmacists
2. Roofs and Walls were seepage
3. Medicines Storage Refrigerators were out of order
4. Damaged expensive lifesaving drugs/medicines were found available in store
5. Expired medicines found available without disposal

Audit was of the view that poor management of stores may result in deficiency of medicines to patients, which may result in increase in mortality of patients.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that necessary steps be taken for proper storage of medicines as per standard practice.

## **4.6 Environment**

### **4.6.1 Inadequate sanitation system in hospital**

According to Para 14.1 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, "All hospital facilities, equipment and supplies are kept clean and safe for patients, visitors/attendants and staff".

Audit observed that the management failed to manage sanitation system of hospital. Only 56 Sanitary workers were performing their duties in three shifts which were insufficient to maintain the cleanliness of whole hospital. Audit observed following deficiencies:

1. Improper sweeping
2. No garbage was being lifted
3. Washrooms were in worst condition
4. Galleries of the Hospital building contained filth and garbage
5. Spiting were not removed from floor and walls of the Hospital
6. Surgical waste was not removed from wards

Audit was of the view that the management failed to comply with the rules set forth by the Government, which reflects the absence of systematic control & financial discipline.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that proper system of sanitation be evolved by recruiting more sanitary workers with specialized training and equipped with latest instruments, under intimation to audit.

### **4.6.2 Non-implementation of Solid Waste Management Guidelines**

The Sindh Hospital Waste Management Rules, 2014, rule 2 (f) states that "Hospital waste" includes any waste which is generated during the diagnosis, treatment

or immunization of human beings or animals or in research activities or in the cleaning of medical equipments, supplies and accessories pertaining thereto or in the production or testing of biological and including categories mentioned in Schedule I.

Audit observed that following Sindh Hospital Waste Management Guidelines were not followed:

- i. Waste Management Committee
- ii. Segregation at site of production (wards/ departments)
- iii. Waste containers
- iv. Transportation to dumping site in proper way (Trolley / Cart)
- v. Initial storage site in wards
- vi. Proper dumping site
- vii. Segregation of waste at dumping site
- viii. Transportation to final site
- ix. Final disposal site
- x. Incinerator facilities
- xi. Waste Management Staff
- xii. Training in handling waste
- xiii. Using protective gears
- xiv. Proper Knowledge of waste management
- xv. Regular Training sessions
- xvi. Medical examination of staff
- xvii. Infectious waste treatment
- xviii. Disinfected before disposal
- xix. Special barrier clothing
- xx. Incident report procedure

Audit was of the view that the management failed to comply with the rules set forth by the Government for management of Solid Waste Management, which reflects the absence of systematic control & financial discipline.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that solid waste management system should be implemented, so that the hospital premises are maintained in best hygienic condition.

### 4.6.3 Poor conditions of Janitorial Services in Trauma Centre

According to Clause-08 of Note Sheet, “In view of the above, sanction proposal is given as under in favor of M/s. Allied Enterprises for Private Janitorial Services at Trauma Center, Abbasi Shaheed Hospital, KMC.

Sr.	Description	Qty
1	Supervisor 24 Hours (12 Hours Shift)	2
2	Man Power (Morning & Evening Shift)	44
3	Complete Janitorial Service Round the Clock, Sweeping, Cleaning including Cleaning of Sewerage Line and with all essential equipments and material at Trauma Centre, Abbasi Shaheed Hospital	
	Details are as under:	
	Floor Polisher (As per Brusher)	1
	Garbage Bin 120 Liter (As per Brusher)	8
	Window Cleaning Pole 10 ft (As per Brochure)	20
	Dust Collector (As per Brochure)	12
	Sign Board (As per Brochure)	12
	Floor Wiper (As per Brochure)	12
	Dry Dust Mop (As per Brochure)	24
	Service Trolley (As per Brochure)	6
	Polythene Bags	
	Standard Quality Phenyle, Bleach, Swip Shaheen, Mop, Etc	
Dress Grey Color		

Audit observed that the management paid Rs9.000 million to contractor for Janitorial Services in Trauma Centre during 2015-16, which was unproductive and wasteful expenditure. The entrance to Accident/Trauma Center presents a highly obnoxious, unhygienic, and pitiable condition in terms of sight and smell which is beyond the tolerance of a normal person and will tend to make the patient lose confidence in the treatment being meted out. It seems that the presence of sweepers and inspection of the sanitation condition of the facility was not being carried out on daily basis. The Janitorial and Sanitation of the remaining hospital area is responsibility of hospital management to appoint sweepers and other allied staff. However, it was noticed that most of the sweepers were not attending the duties and that garbage was piled up at different wards and washrooms which adversely effected the environment of the hospital. The

patients were also complaining about the sanitation conditions and improper behavior of the sweepers.

Audit was of view that due to failure of management to exercise control over the working of Janitorial Service Provider which resulted in wasteful expenditure of Rs9.000 million. Neither action was taken against contractor nor penalty was imposed on delinquent and the entire situation shows that there is no administrative control.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that responsibility may be fixed for not ensuring the non-provision of janitorial service at Trauma Center by the contractor, despite the expenditure of Rs 9 million made during 2015-16. Further, necessary steps be taken to ensure the sanitation and hygiene is as per prescribed standard in the hospital premises.

## **4.7 Monitoring & Evaluation**

### **4.7.1 Non-availability of Security Arrangements**

According to Para 14.1 of Sindh Service Delivery Standards for Hospitals from Sindh Health Care Commission, "The Hospital's must have the security services to provide secure and safe environment for the patients, newborn and the serving staff (medics, nurses and paramedics).

During physical check of different gates, audit observed that there were no security guards, CCTV Cameras and Walkthrough Gates to check persons entering in the hospital.

Audit was of view that due to non-deputing of Security Guards and proper security arrangement at every gate of hospital and chances of happening of any unforeseen incidence cannot be ruled out. The entire position constitutes administrative control failure at all.

Non-installation of scanners may result any untoward incident and law and order situation.



The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that immediate measure be taken to appoint sufficient number of Security Guards and to install CCTV Cameras & Walkthrough gates at each entrance of hospital for the purpose of security, to avoid any incidence and to save the lives of patients.

#### **4.7.2 Internal inspection not conducted**

Section 90 of the Sindh Local Government Act, 2013, states that, “The working of the Councils shall be inspected at least once in a financial year by an Inspecting Officer or Inspection Team appointed by Government as may be prescribed”.

Audit observed that the internal audit was neither conducted nor was a procedure designed to conduct the same in order to strengthen the internal control system for proper maintenance of the record.

Audit was of the view that the management failed to watch the Government interest and ignored rules and procedures set forth by the Government. It also indicates the Department has not adopted any Internal Control System and financial mismanagement is prevalent in the Department. As a result, chances of misappropriation of funds at every stage cannot be ruled out.

Deviation from prescribed procedure constituted weak internal control.

The irregularities were pointed out to the Authority/Department during the month of April, 2018, but no reply has been furnished to this office till finalization of this report even our repeated written reminders.

Audit recommends that internal inspection of hospital should be carried out immediately and the report be furnished to audit. It may also be ensured that internal inspection is carried out annually on regular basis.

### **4.8 Sustainability**

4.8.1 There is need of continuous funding for smooth functioning of hospital for catering medical services to public. KMC is responsible for annual maintenance.

- 4.8.2 The OPD fees should be revised from Rs05 to Rs50 for self sustainability of hospital.
- 4.8.3 Laboratory needs to be made functional for revenue generation and the laboratory charges may be revised for sustainability of this hospital.
- 4.8.4 Urgent repair maintenance of medical equipment and ambulances be made through available resources for better functioning of Hospital.
- 4.8.5 Mortuary should be made functional on emergent basis to facilitate the general public.
- 4.8.6 Private rooms may be utilized for revenue generation instead of being occupied by Doctors
- 4.8.7 Hospital should be made financially and administratively as autonomous institution for better health service delivery. Although, expertise of Doctors is available and it can be used efficiently through better training and conducting of symposiums and seminars on latest research on medical treatments.
- 4.8.8 To sum up, hospital is sustainable by providing improvements as suggested above be made for better sustainability of this Hospital.

#### **4.9 Overall Assessment**

- 4.9.1 **Relevance:** The Hospital is in domain of relevance, because it is providing medical services to large population. However, there is need of improvement, such as Pathology Laboratory, Microbiology Department other non-functioning departments may be made functional for provision of medical services.
- 4.9.2 **Efficacy:** The Hospital can achieve efficacy by proper utilization of human resources. Besides, it should be made functional at its full capacity. The failure to achieve physical outcomes and financial performance leading to attain Hospitals goals/objectives.
- 4.9.3 **Efficiency:** Insufficient professional Paramedical staff and specialist Doctors and non-functioning various Departments is resulting in inefficiency of hospital and failure to achieve desired results. Besides fund are not allocated for proper functioning of hospital.
- 4.9.4 **Economy:** Owing to the non-revision of sources of income (OPD fee and Laboratory charges) economy could not be achieved. Besides, medicines were

procured of Rs. 13.067 million without open competitive rates by violating SPPRA rules. Thus, medicines were procured at exorbitant rates.

4.9.5 **Effectiveness:** The Hospital suffered from non-availability of funds from KMC and charging minimum rates of fees as well as shortage of staff reflects the ineffectiveness of the Hospital.

4.9.6 **Compliance with rules:** Violations of Government rules were observed.

4.9.7 **Risk rating of Project:** High

## 5 CONCLUSION

The Hospital can deliver better results if it is run economically, efficiently and effectively. All that is required is the managerial commitment as well as efficiency.

### 5.1 Key issues for future

The hospital hits snag due to non-filling the vacant positions of Doctors and paramedical staff, non-availability of funds, improper sanitation systems. Out of order ambulances, absence of latest equipment of Laboratory, improper security system, lack of revision rates of hospital in different services and unauthorized occupation of hospital private rooms are the major issues of hospital. Moreover, hospital management failed to provide basic facilities testing laboratory with latest machines, non-availability of emergency medicines, availability of broken medical furniture (beds, sitting stools, chairs etc.) in OPDs and General Wards, improper lighting system etc. are the reasons for loss of public interest towards the hospital.

### 5.2 Lessons identified

5.2.1 Dependency on KMC for funding.

5.2.2 Improper planning and inefficient management are keys to fiasco.

5.2.3 Non-functioning of various Departments/Medical Instruments/Ambulances of the Hospital.

5.2.4 Inadequate and low collection hospital revenue due to non-revision of rates of hospital for different services.

5.2.5 Functioning of private Laboratory inside the Hospital such as functioning of Khidmat-e-Khalq Foundation at high rates shows lack of control of hospital management.

5.2.6 Improper sanitation and lighting system and improper sitting system of patients and their attendants.

5.2.7 The best planning can be foiled by the worst management.

5.2.8 Behind every failed activity/project there lies the curse of mis-management and corruption.

## **ACKNOWLEDGEMENT**

The DAGP express appreciation to the Management and Staff of Abbasi Shaheed Hospital, Karachi Metropolitan Corporation for the assistance and cooperation extended to the auditors during this assignment.

**NON-PRODUCTION OF RECORD/ QUESTIONNAIRE**

- 1) Hospital certification to the prevailing standards.
- 2) Hospital quality policy /quality care mission/vision.
- 3) Written /typed manuals (Quality folders) of all departments.
- 4) A central quality office/ patient complaint/ feedback system.
- 5) Job description of all staff from head of department to sanitary workers.
- 6) Clinical and Administrative SOPs (standing operating procedures) made/ followed.
- 7) Hospital chain of command/ departmental flow charts/ working charts available.
- 8) Hospital statistics department:
  - a) Disease statistics.
  - b) No. of patients (indoor/outdoor)/month/year.
  - c) Staff attendance system.
  - d) No. of pending pension order/fatal case documents.
  - e) Daily admission statement/ Bed occupancy of hospital.
- 9) Head of department's monthly meetings outcome.
- 10) Patient feedback/ complaint, compliment registers/ proforma present of all departments.
- 11) Outcome of presenting patient feedback to the MS in monthly HODs meetings.
- 12) List of equipment for example BP apparatus, Glucometer, suction machine, cardiac monitors maintained in wards/ OPDs/ ICUs/OT/ Radiology/ Pathology.
- 13) Equipment numbered / Tags details.
- 14) Equipment log books.
- 15) Work instructions (WI) of all equipment.
- 16) Availability of Job Descriptions and SOPs.
- 17) Segregation of waste at ward/ OPD level.
- 18) Separate colored dustbins/ tags/ shopping in dustbins. (Colored coded) for infectious / non-infectious waste.
- 19) Waste transportation and disposal site.
- 20) Incinerator in use. Check log of incinerator, capacity and KGs of waste produced.  
Does incinerator meet the capacity of hospital?
- 21) In case of absence of incinerator, the mode of waste disposal. Contract with any other company /hospital.
- 22) Staff personal protective measures and policies.

- 23) Sanitary workers/ Lab staff/ OT staff personal protection awareness vaccinated or not. (Hepatitis B, C).
- 24) System of calibration / testing of sensitive equipment regularly as instructed by the manufacturing.
- 25) Details of firefighting exercises carried out.
- 26) Mass causality management drills in case of Bomb blast/ Heat stroke/ Earthquake/ Floods carried out or not. Trauma teams made. (in case a large No. of casualties arrive in hospital. Internal/ external coordinator, media coordinator.).
- 27) System of sterilization of equipment in place. Record of autoclave.
- 28) OT sterilization SOPs. Practices.
- 29) Laboratory tests SOPs regarding sterilization.
- 30) Medical store Tender for medicines. SOPs---Newspaper adds. Feasibility of environment for medicines storage. e.g. Expiry of medicines, temperature maintenance of refrigerators etc.
- 31) Patient cook house. Sanitation. Cooks hep B,C record. Stool test record availability.
- 32) Existence of hospital security system for staff and patients.
- 33) Yearly departmental objectives for better patient quality care system made in all wards/OPDs/offices//OT/Pathology.
- 34) Yearly departmental objectives achieved or not.
- 35) Availability of central/departmental training of staff.
- 36) Yearly/monthly training program for health care staff detail. Attendance sheet.
- 37) Any clinical Audits carried out by the hospital itself for own improvement, record and administrative action.
- 38) Any lectures/ training of sanitary worker /Ayas/helpers.
- 39) Visit record of administration to all depts., monthly/06 monthly record availability.
- 40) Agreement of janitorial services along with list of number of employees deputed and payment vouchers to company for last five years.
- 41) Agreements of maintenance of machinery and equipments of last five years along with payment vouchers.
- 42) Detailed up to date list of liabilities of janitorial, medicine, oxygen and diets along with vouchers.
- 43) Qualification of doctors, nurses, paramedical staff (technical &laboratory) working in hospital.
- 44) List of staff on deputation to other places along with their attendance.

- 45) List of staff having accommodation in hospital premises i.e hostel, flats etc.
- 46) List of outsider persons residing in hospital premises.
- 47) Permission of competent authority for establishment of free medicine from medical store being run by a pharmaceutical company

**Annexure-II**

**Loss due to reduction in ratio of X-Ray/Lab Test/C.T Scan and MRI**

TESTS PERFORMED AT ABBASI SHAHEED HOSPITAL IN LAST 5 FISCAL YEARS								
FISCAL YEAR	DESCRIPTION OF ANNUAL BASIS							
	XRAY	C.T. SCAN	MRI	ULTRA SOUND	E.T.T.	SCHO	E.C.G	PATHOLOGY TESTS
JUL-11 TO JUN-12	101207	6197	0	56200	231	1699	13622	1551614
JUL-12 TO JUN-13	103294	12832	109	51673	160	2987	19825	828905
JUL-13 TO JUN-14	87575	8573	1714	50846	241	3227	12525	1401807
JUL-14 TO JUN-15	55382	8910	818	43582	205	2439	12200	519577
JUL-15 TO JUN-16	65293	2975	677	40601	131	2770	12897	252120
FISCAL YEAR	DESCRIPTION OF MONTHLY BASIS							
	AVERAGE / MONTH XRAY	AVERAGE / MONTH C.T. SCAN	AVERAGE / MONTH MRI	AVERAGE / MONTH ULTRA SOUND	AVERAGE / MONTH E.T.T	AVERAGE / MONTH ECHO	AVERAGE / MONTH E.C.G.	AVERAGE / MONTH PATHOLOGY TESTS
JUL-11 TO JUN-12	8434	516	0	4683	19	142	1135	129301
JUL-12 TO JUN-13	8608	1069	9	4306	13	249	1652	69075
JUL-13 TO JUN-14	7298	714	143	4237	20	269	1044	116817
JUL-14 TO JUN-15	4615	743	68	3632	17	203	1017	43298
JUL-15 TO JUN-16	5441	248	56	3383	11	231	1075	21010
FISCAL YEAR	DESCRIPTION OF DAILY BASIS							
	AVERAGE / DAY XRAY	AVERAGE / DAY C.T. SCAN	AVERAGE / DAY MRI	AVERAGE / DAY ULTRA SOUND	AVERAGE / DAY E.T.T	AVERAGE / DAY ECHO	AVERAGE / DAY E.C.G.	AVERAGE / DAY PATHOLOGY TESTS
JUL-11 TO JUN-12	277	17	0	154	1	5	37	4251
JUL-12 TO JUN-13	283	35	0.3	142	0	8	54	2271
JUL-13 TO JUN-14	240	23	5	139	1	9	34	3841
JUL-14 TO JUN-15	152	24	2	119	1	7	33	1423
JUL-15 TO JUN-16	179	8	2	111	0	8	35	691



**Annexure-III****Non-maintenance of machinery/ equipment of different wards**

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
<b>CASUALTY</b>						
<b>S.#</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	NIBP MONITOR	6	4	2	-	SCHI NOS 2 /FUKUDA DENCHI
2	E.C.G MACHINE	2	1	1		CARDIOFAX/NEHON KODAN
3	MOBILE VENT	2	1	1		VERSAMED
4	FLOW METER	25	10	15		Local
<b>E.OT-1</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	DEFFIBRILLATOR	1		1		NEHON KODAN
2	ANESTHESIA MACHINE	1		1		Astra-3
<b>E.OT-2</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	ANESTHESIA MACHINE	3	1	2		PENLON
<b>E.OT-3</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	NIBP MONITOR	1		1		FAKUDA DF-7100
<b>C.S.S.D</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	AUTO CLAVE	2	1	1		LOCAL
<b>TRAUMA X-RAY</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	PORTABLE X-RAY	1			1	SHIMADZU 100MA
2	PROCESSOR	3	1		2	AGFA / C – 14
<b>S.I.C.U</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	VENTILATOR	16	8	7	1	RAPHEL / PHILIPS / E-VENT
2	PATIENT MONITOR	18	14	4		NEUTEC / FAKUDA
3	SUCTION	2	1	1		GIMA / CONSUN

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
	MACHINE					
4	DEFFIBRILLATOR	2	1	1		NIHON KODEN
<b>NEURO O.T</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	ANESTHESIA MACHINE	2	1	1		OHMEDA / PENLON
2	NIBP MONITOR	2	1	1		FAKUDA DF-7100
3	SUCTION MACHINE	3	2	1		EASTERM / MAXIASPEED
4	VENTILATOR	1		1		SEMENS 900-D
<b>ORTHO O.T -1</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	DIATHERMY	2	1	1		TEKNO / BOVIE
<b>ORTHO O.T.-2</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	MONITOR	2	1	1		FAKUDA / NEC
2	C- ARM	2	1	1		TOSHIBA/LIXTUM
3	ORTHO SCOPY	1		1		BS 3500 EP
4	CO2 MONITOR	1		1		OHMEDA
5	PULSE OXIMETER	1		1		OHMEDA
<b>RECOVERY</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	MONITOR	3	1	2		FAKUDA
2	SUCTION MACHINE	1		1		EASTERN ES-700
3	C-ARM	1		1		GE-STENO SCOP
<b>C.S.S.D</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	AUTO CLAVE	6	2	2	2	LOCAL
<b>FACIO O.T</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	SUCTION MACHINE	2	1	1		MAXIA SPEED / EASTERN
2	NIBP MONITOR	2	1	1		SCHILLAR / FAKUDA
3	LIGHT SOURCE	1			1	OLYMPUS ILK-3
<b>C.C.U</b>						

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	NIBP MONITOR	8	7		1	FAKUDA DF-700
2	E.C.G	5	3	2		CARDIO MAX/CARDIOLIN
<b>BURNS O.T</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	TOP LIGHT	3	2		1	CHINA
2	MONITOR	2	1		1	FAKUDA/NEC
<b>BURNS WARD</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	PATIENT MONITOR	1		1		SARRIA ST-41
2	B.P APPRATUS	5		5		LOCAL
3	FLOW METER	3		3		CHINA
<b>N.I.CU</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	INCUBATOR	19	13	6		DAVID/BISTOS
2	INFENANT WARMOR	3	1	2		DAVID/SYCOT
3	PULSE OXIMETER	2	1	1		NEWMATRIC
<b>P.I.C.U</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	VENTILATOR	6	5	1		SECHRIST/PHILIPS
2	NIBP MONITOR	7	2	5		SCHILLER/GOLDWAY
3	PULSE OXIMETER	4	3	1		SCHILLER/MARS
4	SUCTION MACHINE	4	3	1		VCARE/EASTERN/SAM
5	DIANAMAP	1		1		CRITIKON
<b>PEADS WARD</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	SUCTION MACHINE	1		1		GIMA
2	WEIGHT MACHINE	1		1		CHINA
<b>ORTHO WARD</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
1	PORTABLE X-RAY 100 MA	1			1	GE 100MA
2	SUCTION MACHINE	2	1		1	EASTERN / EUROVACH40
3	E.C.G MACHINE	2		2		FAKUDA DANCHI
4	B.P APPRATUS	3		3		CHINA
<b>MEDICAL ICU</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	VENTILATOR	13	8	5		HEMILTON
2	PORTABLE X-RAY	2	1	1		LISTEM / STEPHNIX
3	INFUSION PUMP	32	27	5		MEDIFUSION GERMANY / TOP JAPAN
4	ABG MACHINE	2		2		ABL / NOVA
5	SUCTION MACHINE	1		1		GIMA
<b>DIALYSIS</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	VENTILATOR MANUAL	2			2	SWEDEN
2	DIALYSIS MACHINE	19	8	4	7	TORAY / NIPRO / DIANAMI
3	RO PLANT	3	1	2		CRANE ENVIRONMENT / FRESENIUS (USA)
4	DIALIZER REPROCESSOR	3		3		NIPROLAB / ECHO(USA)
5	DRISATE MIXING SYSTEM	1		1		ROCKWELL (USA)
<b>RADIOLOGY</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	M.R.I	1		1		PHILIPS
2	ULTRASOUND	14	5	3	6	ESOATE/TOSHIBA
3	X-RAY MACHINE	5	3		2	STEPHNIX/LISTEM
4	D.R SYSTEM	1		1		SHIRAZEE / NOMI
5	FLOUROSCOPY	1		1		STEPHNIX
<b>MU-I</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	DEFFIBRILLATOR	1		1		BEXEN
2	ECG MACHINE	4		4		DONG JAIN/DOCTOR LEE/ PLANO TX

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
<b>MU-II</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	FLOWMETER	18			18	CHINA / PENLON
<b>MU-III</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	SUCTION MACHINE	2	1	1		KONGSUNG / GIMA
2	B.P APPRATUS	10			10	LOCAL
3	NEUBILIZER	3			3	CHINA
<b>NEURO ELECTRO PHYSIOLAB</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	E.M.G MACHIN	1		1		EBN EURO
<b>PHYSIOTHERAPHY</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	INTER FERENTIAL	2	1	1		EMS /UK / BELGIUM
2	CERVICAL TRACTION (ELECT)	2	1	1		LOCAL
3	SHORT WAVE DIATHERMY	5	1	4		EMS / UK
4	INFRA RED LAMP	2	1	1		LOCAL
5	TREADMIL	1		1		EMS / UK
6	ACTIVATOR BALANCE UNIT (INCOMPLETE)	1		1		FYSIOMED / BELGIUM
7	STAIRCASE (INCOMPLETE)	1		1		LOCAL
8	VIBRATOR CUT	1		1		EMS / UK
9	TILT TABLE	2	1	1		EMS / UK
10	LUMBER TRACTION	1		1		EMS / UK
11	LUMBER TRACTION ELECTRICAL	2	1	1		EMS /UK ENRAF NONIUS HOLLAND
12	MYO FEED BADE	1		1		S# 1437.910
13	VACUM SUCTION	1		1		EMS / UK
14	MASSAGER	1		1		EMS /UK
<b>LABOUR ROOM</b>						

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	PORTABLE OT LIGHT	2		2		CHINA
2	LAMP	6		6		CHINA
3	INFANT WARMER	2		2		AMPLA FANEM 2051
4	WAIGHT MACHINE	1		1		UNIQUE
5	ULTRASOUND	2	1	1		JAKUDA DENCHI/SONOCAD 5
6	HEATER	2		2		MASTER
7	C.T.G MACHINE	2		2		BISTOS
<b>SURGICAL UNIT-I</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	B.P APPARATUS	2		2		CHINA
<b>SURGICAL UNIT-II</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	B.P APPARATUS	5		5		LOCAL
2	NEBULIZER	1		1		YBDX-23B CHINA
3	FLOW METER	4	1	3		CHINA / PENLON
<b>NEPHRO ICU</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	VENTILATOR	2	1	1		PHILIPS / HIMALTON
2	X-RAY MACHINE 100MA	1		1		SHIMADZU
3	SYRING PUMP	1		1		DAIMAP
<b>EMERGENCY GYNAE O.T</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	PATIENT MONITOR	5	4	1		NIHON KODEN
2	ANASTHESIA VENT	3	1	2		PENLON
3	PORTABLE O.T LIGHT	1		1		CHINA
4	DIATHERMY	1		1		MEDITON DAIWHA
<b>GYNAE UNIT – III</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	SUCTION MACHINE	2	1	1		GIMA / CHINA

LIST OF ELECTRO MEDICAL EQUIPMENTS						
ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.						
2	B.P APPARATUS	6	1	5		CHINA
H.D.U						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	VENTILATOR	5	1	4		RAPHAEL (HAMILTON)
2	PATIENT MONITOR	5	2	3		OMNI INFINIUM
GENERAL O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	ANESTHESIA MACHINE	3	2	1		OHMEDA / PENLON / LOCAL
2	SUCTION MACHINE	3	2	1		CHINA
3	VENTILATORS	2	1	1		MANLY BLEAS MP3/ MP4
4	DIATHERMY	5	4	1		BOVIE MF 380 / MEDITOM DAIWHA
5	O.T TABLE	5	3	2		CHINA
EYE O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	VENTILATORS	2		2		PENLON / BROMPTON
2	FACO MACHINE	2		2		ALCON / OTLY
MINOR EYE O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	MICRO SCOPE	2	1	1		TAGAKI OM-5 / WILD MG 690
2	SLIT LAMP	2	1	1		TAGAKI / MAGNON
RECOVERY G.O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	DEFFEBRILLATOR	1		1		CARDIO LIFE
UROLOGY O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	O.T TABLE	2	1	1		OHMEDA
2	SUCTION MACHINE	4	1	3		CLMENTS / YX 980-D / SAM - 14
3	DEFFEBRILLATOR	1		1		CARDIO LIFE
ENT O.T						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	ANESTHESIA VENT	3	1	2		PENLON

<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
2	O.T TABLE	2		2		CHINA
3	LIGHT SOURCE	7	4		3	STORS / OLYMPUS
<b>DENTAL / FACIO MAXILLARY</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	DENTAL UNIT	11	6	1	4	MEHRAN / INDUS /CHINA
2	X-RAY MACHINE	4	2	2		BELMONT / KODAK
3	COMPRESSOR	5	2	1	2	BELMONT / BREEZE
4	AUTO CLAVE	3	1	1	1	WHANSHIN / PRESTIGE / UNIVERSAL
<b>NEURO WARD</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	SUCTION MACHINE	4	1		3	MEDISHIELD / GIMA / SUPER POWER 510
2	E.C.G MACHINE	1			1	DR-LEE-1208
<b>LABORATORY</b>						
S.#.	NAME OF EQUIPMENTS	QTY	WORKING	N/WORKING	CONDEMN	MAKE/MODELS
1	MICROLAB 300	1		1		VITAL CENTIFIC (GERMANY)
2	SELECTRA – E	1		1		VITAL CENTIFIC (GERMANY)
3	HITACHI 902	1			1	ROCH
4	INCUBATOR	2	1		1	GALLENKAMP
5	COULTER	1			1	PE - M2
6	WATER BATH	2	1	1		L-208-0618 MEMEST
7	SYSMEX 1000 X I	1		1		S#11353
8	MICROSCOPE	2			2	1020327 / 1020326 JAPAN
9	WATER BATH	3	2	1		MEMEST 1406-0328/1404-1595/1406-0322
10	MICROSCOPE MOTIC	4	2	2		30709045/30711630/30708898/30711729
11	CORBETT RESCANNER PCR	2		2		AUSTRALIA/RG-100
12	BIOSEFTY CABNIT II	1		1		BE -21000N00B285-M0004
13	SHANDON HISTO	1		1		MV-1527
14	HAEMONETICS MCS	1		1		9001 PXI
15	CENTRIFUGE LABOFUGE	1			1	S# 40623235
16	ELECTROLYTE I LYTE	1			1	S# 7025
17	ACL 7000 IL	1		1		S# 01501548



<b>LIST OF ELECTRO MEDICAL EQUIPMENTS</b>						
<b>ABBASI SHAHEED HOSPITAL PREPARED BY BIO MEDICAL ENGG DEPT.</b>						
18	MICROSCOPE NITRON	2			2	YS 2-T154456
19	MICROSCOPE KOYAWA	1			1	S# 82442
20	MICROSCOPE MICRON	1			1	S# 200405331
<b>DERMATOLOGY</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	HAND FOOT	1		1		SOLARIC SYSTEM
<b>AIR COMPRESSOR/VACUM PLANT</b>						
<b>S.#.</b>	<b>NAME OF EQUIPMENTS</b>	<b>QTY</b>	<b>WORKING</b>	<b>N/WORKING</b>	<b>CONDEMN</b>	<b>MAKE/MODELS</b>
1	AIR COMPRESSOR TRAUMA CENTER	2	1	1		PENLON
2	AIR COMPRESSOR SMALL UNIT	2	1	1		PENLON/LOCAL
3	VACUM PLANT	2	1	1		PENLON
4	AIR COMPRESSOR MAIN BUILDING	2	1	1		PENLON



Abbasi Shaheed Hospital and its Reception



Out of order Ambulances





Scrap and Out of order Furniture and Machinery



Private Rooms allotted to Doctors





Non disposal of Expired Medicines





Out of order Kitchen and Cafeteria





Medical Store and its Refrigerators



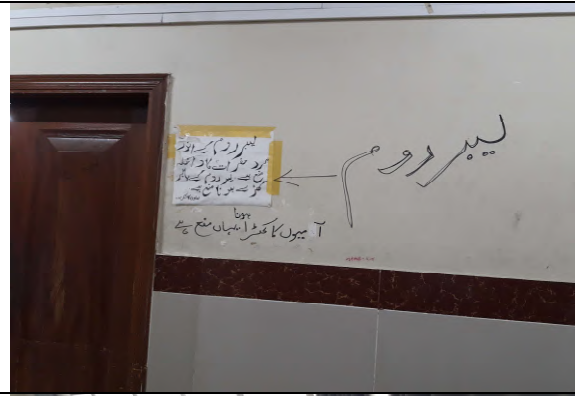


Sanitation and Lighting System





Store of Hospital (useable items available but not used)

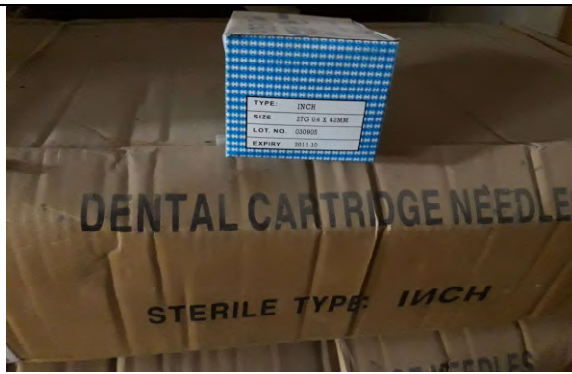
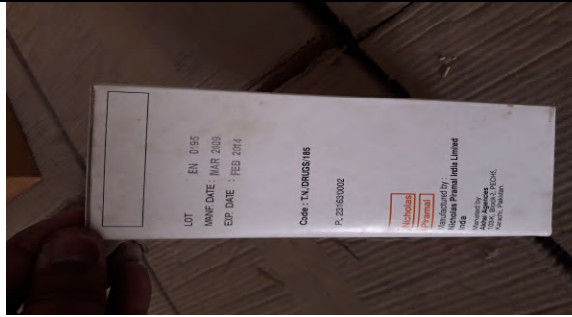


Gynecological Department and Ortho Department





Pathological Laboratory and Reuse of Blood Tubes



Miscellaneous