



# **NEMS OPERATIONAL ACTIVITIES**

## **MONTHLY REPORT: JANUARY 2022**





49 J Spur rd, Freetown, Sierra Leone

NEMS

National Emergency Medical Service

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## **Departmental Updates**

#### Finance

Finance supported all operational activities

### Human Resource & Admin

## **Recruitment:**

Jacob Israel Thorpe was hired for the position of Office Cleaner on the 4th January, 2022.

### **Training and Quality Assurance:**

## **Disaster Management**

Training was conducted from the 17th to 28th January 2022 and it was completed successfully.

## Logistics

Supply of fuel to all operative ambulances and HQ vehicles.

Supply of medical materials to all operative ambulances

Supply for all drivers phones and few paramedic phones in every ambulance

Distribution of staff cards - 10 cards.





## Brief description of NEMS Operational Services

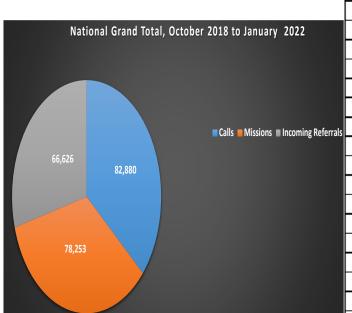
#### **Cumulative Number of Supported Indicators**

The data collected from the NEMS database and the NEMS Referral Coordinators' database from **15**<sup>th</sup> of October **2018** unto the **31**<sup>tst</sup> of January **2022**, indicates that NEMS has accomplished over three (3) years of operations; delivering the following:

NEMS has received a cumulative total of **82,880 Calls, 78,253 Missions and Incoming referrals are 66,626**.

## **Distributions of the Ambulances**

NEMS currently has **one hundred (100) ambulances** in operation all over nationwide, while each district among the 16 has one ambulance allocated to the District Ambulance Supervisor (DAS) to serve as replacement to inoperative ones, which summed this to the total reported.



Ambulance Distributions						
District	Numbers					
во	7					
BO MBALI	6					
BONTHE	5					
FALABA	5					
KAILAHUN	7					
KAMBIA	5					
KARENE	5					
KENEMA	6					
KOINADUGU	5					
KONO	7					
MOYAMBA	6					
PORT LOKO	6					
PUJEHUN	7					
TONKOLILI	8					
WESTERN AREA RURAL	7					
WESTERN AREA URBAN	8					
Grand Total	100					

#### Km Travelled

In January, NEMS operated with 97 Ambulances around the country, this include both DASs' allocated vehicles and the other 81 that were fully operational. The have travelled a cumulative total of **6,007,353 km**. In *January* 2022, Pujehun emerged as the district with the highest KM travelled **6,043** KM covered.

#### **COVID-19 Response**

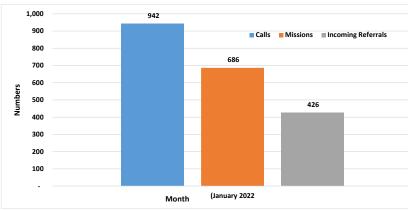
The total number of **COVID-19** confirmed cases **referred by NEMS** in *January*2022 is 10, with zero suspected case reported. The cumulative figures since the COVID-19 outbreak in the country are **3,683 confirmed**, 258 **suspected**.



#### 1. Overview of the Calls, Missions and Referrals

Fig1: Calls, Missions and Referrals (January 2022)

Fig1.



The graph above displays the trend at which **Calls, Missions and Incoming Referrals** are supported by NEMS in the month of January.

The number of Calls were **942**, and the Calls that were transferred to Missions were **686** and the cumulative Incoming referrals for the period under review are **426**.

Table 1: Cumulative and Percentage Trend of Calls, Missions, Referrals

Months	CALLS	Trend	MISSIONS	Trend	INCOMING REFERRALS	Trend
Dec-21	1088	-9%	842	-9%	860	-6%
Jan-22	942	-7%	686	-10%	426	-34%
Cumulative Total	82880		78253		66626	

The **Table 1** above gives a comparative percentage trend analysis for the three (3) major indicators (i.e., Calls, Missions, and Incoming Referrals) by NEMS for the December 2021 and January 2022. As of January 2022, the cumulative grand total for Calls 82,880, Missions 78,253 and Incoming Referrals 66,626

It is observed that there is a decline in Calls by – 7%, Missions by –1% and Incoming Referrals by - 28%.

**Table 2: NEMS Daily Activities Averages** 

Daily Operations	Calls	Missions	Incoming Referrals
Jan-22	30	22	14

**Table 2** shows the average daily Calls, Missions and Incoming Referrals supported in January 2022.



## **Calls Analysis**

Figure 2: Classifications of Calls

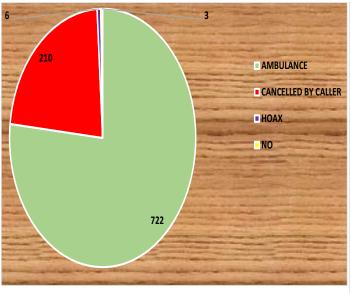


Figure 2 outlines the classification of Calls as they are received at the NEMS Call Center (Operation Center). NEMS Call Center operators received a cumulative total of 942 Calls (100%) with 722 (77%) of the total number of calls classified as ambulance (sent Missions), which means an ambulance is required and dispatched by NEMS' OC, 210 (22%) are cancelled by caller, 6 (1%) as Hoax and 3 No.

Figure 3: Breakdown of Calls by District

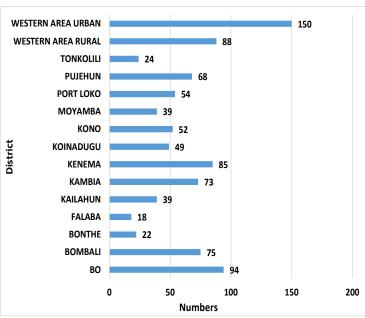


Figure 3 shows the breakdown of Calls by district in the month under review. Western Area Rural and Bo reports the highest number of calls received – 150 and 94 respectively.

Falaba recorded the lowest number of calls with 18 calls followed by Bonthe with 2nd lowest at 22 calls.

Figure 4: Number of Calls per Hour

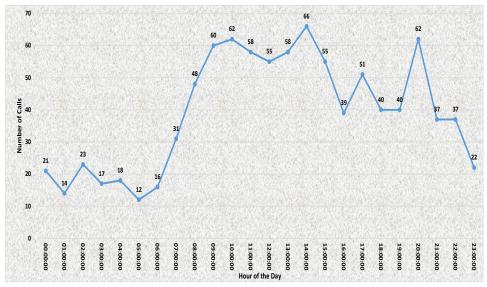
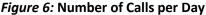
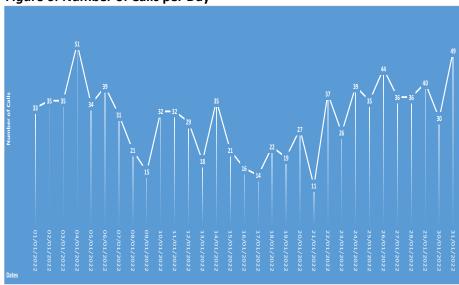


Figure 4 is a line graph that describes the number of calls received at NEMS operation center on an hourly base. The chart adjacent this narrative shows that, there was a surge on the number of calls received between the hours of 9:00 hours and 16:00hrs GMT. The operation center recorded its climax calls at around 14:00hrs GMT.



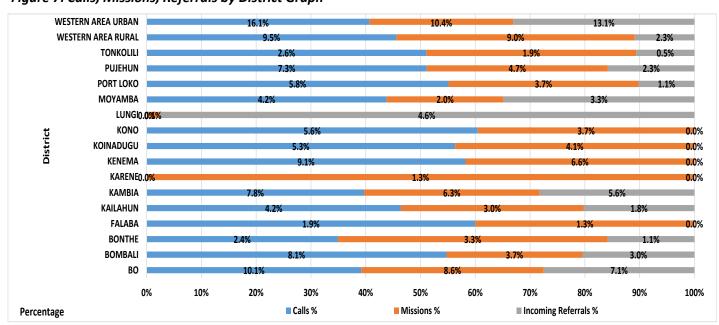




The oscillating chart above demonstrates the trend of incoming calls to the NEMS call centre per day in the month of January 2022.

The least number of calls were recorded on the 21<sup>st</sup> with 11 calls, whilst on the 4<sup>th</sup> the call system recorded its apex, with 51 calls received on that day.

Figure 7: Calls, Missions, Referrals by District Graph



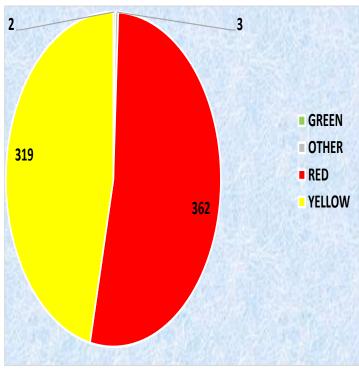
The bar chart above is demonstrating the percentage of Calls, Missions and Incoming Referrals supported by NEMS per district in the month of January 2022. On Calls, Western Area Urban recorded the highest percentage and Bo is the second highest, with 10.1%, while the least were from Karene.

For Missions, Western Area Urban—10.4% reported the majority of the missions undertaken, while Western Area Rural has 9.0%, the Bo and Kenema reported the same percentage (8.6% and 6.6%) respectively, but lowest were from Falaba and Karene district, with 1.3%.

For Incoming Referrals, Karene did not register any, while 13.1% of the total Incoming Referrals were from Western Area Urban, while Bo—7.1% and Kambia—5.6%.



**Figure 8: Categories of NEMS Missions** 



The 'time of the day' is a measure of the time of the call that consequently activates the NEMS mission. The diagram labelled Figure 9 demonstrates the percentage of missions undertaken in the morning (i.e., from 8 am to 2 pm), afternoon (from 2 pm to 8 pm) and night (from 8 pm to 8 am) comparing the daily percentages for the month of January 2022:

In January 2021, the bar chart listed Figure 9 displays a comparative percentage analysis for the day. A significant passion of the missions were undertaken during morning hours, with 36.2%, while 32.7% were done at night. The least percentage of missions were done during the day, with 31.1%.

The chart figure 8 gives an insight on how calls are categorized to determine a mission. The severity of the patient's condition has three major categories, with an additional color 'Other' (Red, Yellow and Green). A patient assessment (Triage) is to determine the severity of the condition; separate the stable patient from the severely ill and then prioritize available resources. NEMS utilizes the triage process to determine whether the patient's condition matches the threshold of an emergency and dispatch an ambulance. A NEMS mission can be activated, and an ambulance dispatched if the condition of the patient matches the severity criteria for Yellow and/or Red. The color code Green and other are ascribed when the patient's condition does not match the threshold and incomplete information is shared with call center, for the operator to activate a mission and dispatch ambulance.

In January 2022, a total of 943 calls were received, out of which 681 were considered to be a missions, only 5 did not meet the requirement for emergency.

Figure 9: Time of the day of the Missions

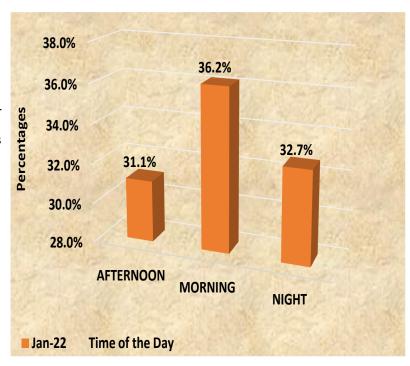
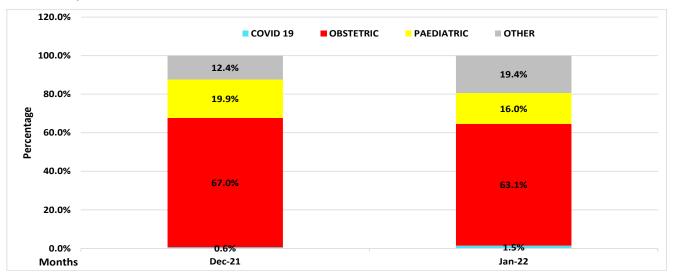




Figure 10: Comparative Analysis of NEMS Mission's complaints for the Previous month (December) to Current month January



The graph (Figure 10) represents the major category of complaints of the NEMS missions comparing **December 2021** and **January 2022** data. The data of COVID-19 missions include only 10 confirmed cases. It is visible that Obstetric cases were the majority of the missions transported to the various health facilities by NEMS.

The indicator 'Other' is a combination of other complaints, such as Abdominal Pain, Animal Bite, Breathing, Burns, Chest Pain, Consciousness, Covid-19, Road Accident, Seizures, Trauma and generally Other. And these showed a percentage of 19.4% for the months of **January**. Between December and **January**, there was a decrease of 7% increase in other cases. For Obstetric, there is a drop of 3.9% from the previous month to the January 2022 and also the same for Paediatric. For the Covid-19, there was slight increment from the month before January, which is 0.9%.

In December, the nation reported 5 Covid-19 case, which was 0.6% of the total missions supported, and that were transported by NEMS, while Obstetric cases were 67.0% and Paediatric—19.9%.

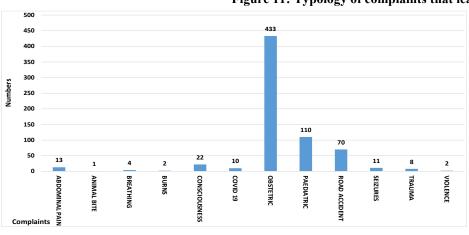


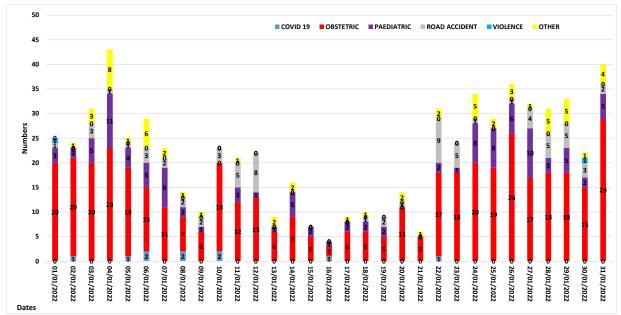
Figure 11: Typology of complaints that lead to Missions

The chart figure 11 above provides a detailed breakdown of the number of complaints received and then considered as missions.

It is evidently clear that obstetric (433) complaints were the most occurring indicator, seconded by Paediatric—110, while road accident—70 and Animal Bite cases happens to be the least complaints received for the month under review.



Figure 12: Showing Trend of Missions complaints by day



The data displayed in the stacked column chart labelled figure 12 above gives a further breakdown on the number of complaints per day and the trend at which complaints that lead to missions are reported for the month of January 2022. The chart showed a positive increase on the number of complaints for each day, with a sharp dropped on the 16th. As displayed on

the diagram above, Obstetric and Paediatric happens every other day of the month, while Road Accident cases third the chart. The number of COVID 19 complaint in December increase as to the previous month. A few numbers of violence complaints were received on the 1st and 30th of the month.

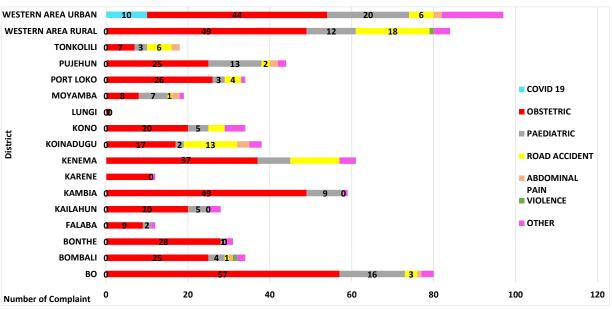
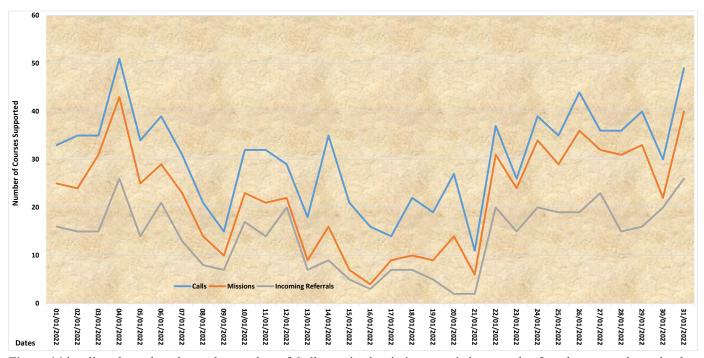


Figure 13: Missions Complaints by District

The chart above is a supplementary analysis on complaints with an in-depth description for the various categories of complaints by district for the month of January 2022. This figure does not only justified figure 3, but also that of figure 10. As western Area Urban reported the highest number of missions, so it records a massive number of obstetric complaints. The district is the only to report Covid-19 cases.

Figure 14: Number of Calls, Missions and Referrals Supported per Day



**Figure 14** is a line chart that shows the number of Calls received, missions carried out, and referrals managed per day by NEMS in January 2022. Throughout January, the indicators fluctuated. The average call were 30, Missions is 22 and referrals 14 for the month under review.

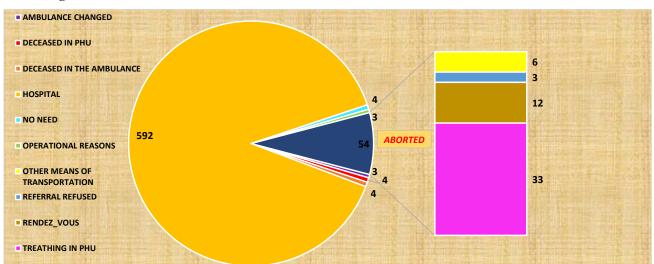


Figure 15: Outcome of the Missions

Figure 15 shows the outcome of missions carried out by NEMS in January 2022.

Hospital' refers to missions leading to referral to a pre-identified health facility (Hospital). Referencing the January 2022 data displayed in the pie chart above shows that (592) 89.2% of the missions led to referral to a pre-identified specialist health facility compared to the December 2021 figure that showed that 78.1% of the missions referred to a pre-identified specialist health facility. This indicates a massive increase in the referrals figure from the December to that of January 2021. This is further simplified by table labelled Table 4.



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Table 4: Displays Missions Outcome and the Reasons why missions are aborted

INDICATORS	ABORTED	DECEASED	HOSPITAL	RENDEZ_VOUS	<b>Grand Total</b>
AMBULANCE CHANGED	3	0	0	0	3
DECEASED IN PHU	0	4	0	0	4
DECEASED IN THE AMBULANCE	0	4	0	0	4
HOSPITAL	0	0	592	0	592
NO NEED	4	0	0	0	4
OPERATIONAL REASONS	3	0	0	0	3
<b>OTHER MEANS OF TRANSPORTATION</b>	6	0	0	0	6
REFERRAL REFUSED	3	0	0	0	3
RENDEZ_VOUS	0	0	0	12	12
TREATHING IN PHU	33	0	0	0	33
Grand Total	52	8	592	12	664

Table 4 above serves as a supplementary analysis to the pie chart above showing the outcomes of missions for the month under review.

'Aborted', The January 2022 data showed that out of the 1,006 missions undertaken, 52 (7.8%) of those missions were cancelled before or after the arrival of the NEMS ambulance team at the Peripheral Health Unit. For a mission to be cancelled, there are diverse reasons, and these could be any of the following:

- ♦ 'Ambulance Changed' the data for January 2022 revealed that out of 52 missions aborted, 3 (5.8%) of the aborted missions in January 2022 were due to 'ambulance changed',
- ♦ 'Deceased' this mission outcome refers to death before the arrival of the NEMS ambulance team. January 2022 data showed that (8) of the mission were cancelled because of the patient died. Out of the 8 missions cancelled, 4 of those aborted mission occurred because the patients passed away in the PHU and 4 of the missions were aborted because the patients passed away in the ambulances.
- 'Operational reasons' this type of mission outcome has a strongly correlation with the ambulance technical problems. The table above shows that 3 (5.8%) of the aborted missions occurred because of technical problems with the ambulances in the month of January 2022 compared with December with 24.4% of aborted missions relating to 'operational reasons'
- 'Other Means of transportation' refers to a situation where the patients or families decided to employ other medium of transportation after requesting for an ambulance. The January 2022 data showed that 6 (11.5) of the aborted missions occurred because the patients used other means of transportation.
- 'Treated at the PHUs' refers to a situation where either the PHU personnel or the ambulance team managed the emergency at the PHU level, with 33 (63.5%).
- 'Referral refused' the table above shows that out of 52 missions aborted, 3 (5.8%) was due to the patients or family members refusal to use the ambulance dispatched by NEMS,
- 'Other reasons' includes 'no-need' of the ambulance (4).
- ♦ 'Rendezvous' has been used to describe situations that may require more than one ambulance to complete a mission. The NEMS data for January shows that 'Rendezvous' was use to accomplish 12 (1.8%) mission out of 686 mission outcomes compared to December 2021 that was (2%).





## 3. National Hospital Bed capacity

Table 5: Bed Capacity and Average Percentage Bed Occupancy by Facility

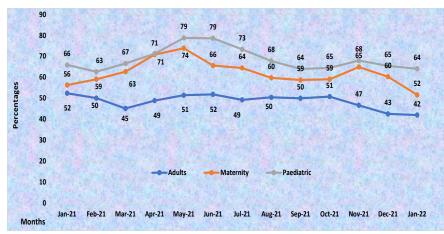
Facility	Adult Bed Capacity	% Average Bed Occupancy per Month	Maternity Bed Capacity	% Average Bed Occupancy per Month	Peadiatric Bed Capacity	% Average Bed Occupancy per Month
Bo Government Hospital	139	43	54	58	72	73
Makeni Government Hospital	95	58	27	73	41	41
Mattru UBC Hospital	36	36	12	73	19	69
Connaught Government Hospital	235	57	0		27	61
Kailahun Government Hospital	38	47	37	48	42	38
Kambia Government Hospital	40	45	23	41	35	57
Kenema Government Hospital	118	50	41	70	63	54
Kabala Government Hospital	49	33	37	39	55	38
Koidu Government Hospital	74	87	36	79	57	100
Lungi Government Hospital	40	32	20	43	20	33
Moyamba Government Hospital	48	20	24	41	39	49
Ola During Children Hospital	0		0		131	98
Princess Christian Maternity Hospital	0		115	60	18	
Port Loko Government Hospital	65	29	35	39	20	74
Pujehun Government Hospital	41	47	34	72	24	86
Tonkolilli Government Hospital	49	25	40	49	72	45
34M Military Hospital	82	45	22	47	10	73
King Harman Road Government Hospital	4	45	17	47	15	54
Rokupa Government Hospital	19	45	21	45	26	73
Lumley Government Hospital	12	0	10	0	4	0
Macauley Government Hospital	12	44	10	52	4	52
Emergency Memorial Hospital	40	74	0	0	27	72
Total National Bed Capacity	1236		615		821	

The tabular representation labelled table 5 above, provides further breakdown on the bed capacity and the percentage average for the different facilities.

From the tabular presentation, Connaught Hospital does not directly provide care to pregnant women with maternal related complaints and there is no specific department to handle pregnancy related complaints. Ola During Children's Hospital (ODCH), is a specialized children hospital providing care to sick children, while Princess Christian Maternity Hospital (PCMH), located adjacent ODCH with the purpose to support and address maternity related issues.

- ♦ The Special Care Baby Unit SCBU beds available at PCMH and ODCH are not counted in determining the bed capacity of the facility, which is the same for the other district or tertiary hospitals nationwide.
- ♦ These beds serve a different purpose from the others. Nationwide, all district and tertiary hospitals have a total of 2,672 beds, which has increase from its usual 2,612 useable beds.
- There are currently no referrals for admission to Macaulay Street and Lumley government hospitals because they are currently undergoing rehabilitation. However, there is a provision for consultation available only for emergency cases that can be further referred if that is required.
- Emergency Memorial Hospital provides specialist care to patients requiring surgical care and cannot do so for maternity related complications.
- All other facility listed in the table above provide care and has space for the various department listed in the table.
- ♦ Adult Occupancy: for the adult bed capacity, no facilities reported overcrowding in the month of **January 2022**, while Koidu Government Hospital recorded 80% or over average occupancy.
- ♦ Maternity Occupancy: the table shows that no facility reported overcrowding as previously recorded, while the highest percentage average is from Koidu Government Hospital—79%.
- ♦ Paediatric Occupancy: Koidu Government Hospitals reported 100% average bed capacity for January, while all other facilities registered less than that.

Figure 15: National Percentage Bed Occupancy by Department



The diagram figure 15 above provides an average percentage bed occupancy by month. Health facilities have various subsectors that are merged to form the major listed departments on the line chart.

Since the commencements of 2021, the average bed occupancy has been below 80% for the different departments and all the various health facilities Referral Coordinators are attached with a slight decrease to 64% for the month of January.

Table 7: Number of Incoming and Outgoing Referred patients

From the diagram labelled table 7 adjacent this narrative shows the total of 924 referrals were supported by NEMS. In that number 786 were classified as incoming referrals, while 138 represented the total outgoing referred patients supported.

In January 2022, PCMH recorded the highest number of incoming referred patients, while Lumley and Lungi reported the least. It is essential to note that this report does not include King Harman Road Government Hospital, Koidu Government Hospital and Pujehun Government Hospital for the total number of referrals supported in January 2022, which is due to computer issues.

	Nationa	National Referrals by District, January 2022										
No	Facility	Total Referrals	Incoming Referrals	Outgoing Referrals	NEMS Referrals							
	National Total	924	786	138	453							
	Nationwide %	100	85	15	49							
	1 34M	65	36	29	8							
	Во	70	66	4	69							
	Bombali	30	28	2	28							
	4 Bonthe	10	10	0	10							
	Connaught	32	32	0	32							
	Emergency	57	37	20	16							
	7 Kailahun	51	45	6	17							
	8 Kambia	52	52	0	52							
	Kenema	117	108	9	43							
1	King Harman Road	0	0	0	0							
1	1 Koinadugu	51	41	10	38							
1	2 Kono	0	0	0	0							
1	Lumley	34	8	26	2							
1	4 Lungi	3	3	0	3							
1	Macauley Street	15	4	11	2							
1	Moyamba	11	10	1	10							
1	ODCH	121	112	9	12							
1	PCMH	136	132	4	71							
1	Port Loko	51	44	7	22							
2	Pujehun	0	0	0	0							
2	1 Rokupa	13	13	0	13							
2	<sup>2</sup> Tonkolili	5	5	0	5							



Table 8: The Outcome of the Number of Incoming Referred Patients by Districts

	Number of Incoming Referrals by patients' outcome, January 2022										
Admission ongoing	Death	Death on arrival	Discharge against medical advice	Discharged	Onward referral	Patient did not arrive	Rejected referral	Unable to admit	Death in Ambulance	Total	
319	25	0	23	389	16	2	0	10	0	784	
41	3	0	3	50	2	0	0	1	0	100	
36	0	0	0	0	0	0	0	0	0	36	
11	1	0	0	54	0	0	0	0	0	66	
12	1	0	0	13	0	2	0	0	0	28	
0	2	0	0	7	1	0	0	0	0	10	
2	1	0	0	29	0	0	0	0	0	32	
23	0	0	0	7	0	0	0	7	0	37	
17	0	0	1	25	2	0	0	0	0	45	
14	2	0	1	34	1	0	0	0	0	52	
15	3	0	8	79	3	0	0	0	0	108	
0	0	0	0	0	0	0	0	0	0	0	
9	2	0	2	25	2	0	0	0	0	40	
0	0	0	0	0	0	0	0	0	0	0	
0	1	0	1	2	1	0	0	3	0	8	
0	1	0	0	1	1	0	0	0	0	3	
0	0	0	0	3	1	0	0	0	0	4	
7	0	0	0	3	0	0	0	0	0	10	
54	5	0	3	48	1	0	0	0	0	111	
112	4	0	0	13	3	0	0	0	0	132	
3	2	0	7	32	0	0	0	0	0	44	
0	0	0	0	0	0	0	0	0	0	0	
2	0	0	0	11	0	0	0	0	0	13	
2	0	0	0	3	0	0	0	0	0	5	

The outcomes of incoming referrals to the various health facilities nationwide are presented in the tabular diagram labelled Table 8 for the month under review. A significant portion of the referred patients were discharged (389), while out of the 784 patients, 25 of those were reported dead. 319 of the total patients were reported to still be in the various facilities receiving care.

Table 9: Number of Incoming Hospital Referrals supported by Category

Facility	Lactating	Non-FHCI	Pregnant	Under 5	EVD Survivor	Yes - other	Total
34M	0	17	0	0	0	19	36
Во	0	3	48	15	0	0	66
Bombali	0	7	17	4	0	0	28
Bonthe	0	0	9	1	0	0	10
Connaught	0	28	0	4	0	0	32
Emergency	0	28	0	9	0	0	37
Kailahun	3	11	21	10	0	0	45
Kambia	2	1	42	7	0	0	52
Kenema	5	19	72	12	0	0	108
King Harman Road	0	0	0	0	0	0	0
Koinadugu	2	10	22	7	0	0	41
Kono	0	0	0	0	0	0	0
Lumley	0	1	6	1	0	0	8
Lungi	0	0	1	2	0	0	3
Macauley Street	0	0	2	2	0	0	4
Moyamba	0	2	6	2	0	0	10
ODCH	0	20	0	92	0	0	112
PCMH	14	0	118	0	0	0	132
Port Loko	5	1	28	10	0	0	44
Pujehun	0	0	0	0	0	0	0
Rokupa	0	0	12	1	0	0	13
Tonkolili	0	1	2	2	0	0	5
Total	31	149	406	181	0	19	786

Table 9 above explains the categories of incoming referred patients at the various health facilities nationwide for the month of January 2022. Continuously, EVD survivors have dropped significantly and are hardly captured in our datasets. The various facilities supported a total 786 incoming referred patients.

Every actively hospital do have records for either pregnant women, with the exception of ODCH, Connaught Hospital and emergency, that do not provide hospitalized care for these categories.



Table 10: Outcome of Referred Patients by Free Health Care Category

FHC	Admission ongoing	Death	Death on arrival	Discharge against medical advice	Discharge	Onward referral	Patient did not arrive	Rejected referral	Unable to admit	Death in Ambulance	Total
Lactating	11	2	0	0	18	0	0	0	0	0	31
Non-FHCI	60	7	0	4	65	7	0	0	6	0	149
Pregnant	156	6	0	5	226	7	2	0	3	0	405
Under 5	73	10	0	14	80	2	0	0	1	0	180
EVD Survivor	0	0	0	0	0	0	0	0	0	0	0
Yes - other	19	0	0	0	0	0	0	0	0	0	19
Total	319	25	0	23	389	16	2	0	10	0	784

The January 2022 data showed that, a significant portion of both pregnant, under 5 and Non-FHCI cases were discharged, while another proportion are still at the various health facility by the time this report is produced. Under 5 reported the highest number of death

Table 11: Referral by Health Facilities (Hospitals)

REFERRAL HOSPITAL	Dec-21	Jan-22
Tertiary Facility Total	18.1%	22.8%
Connaught Hospital	4.7%	8.3%
Ola During Children's Hospital	2.7%	2.8%
Princess Christian Maternity Hospital	10.7%	11.7%
Regional and District Hospital Total	61.9%	61.3%
Bo Government Hospital	12.0%	11.1%
Bonthe Government Hospital	0.1%	-
Kabala Government Hospital	3.7%	5.4%
Kailahun Government Hospital	1.6%	2.8%
Kambia Government Hospital	10.8%	9.1%
Kenema Government Hospital	5.8%	7.2%
Koidu Government Hospital	6.5%	4.7%
Lungi Government Hospital	0.9%	1.0%
Magburaka Government Hospital	1.5%	1.3%
Makeni Government Hospital	5.5%	4.9%
Moyamba Government Hospital	4.2%	2.3%
Port Loko Government Hospital	4.3%	3.6%
Pujehun Government Hospital	4.6%	7.8%
Segbwema Government Hospital	0.3%	0.3%
Other Government Facility	4.9%	3.6%
Kingharman Road Government Hospital	0.6%	0.5%
Other Government facilities (i.e.Macauley)	•	0.3%
Rokupa Government Hospital	3.4%	2.4%
34 MILITARY HOSPITAL	0.9%	0.3%
Private/NGO facility Total	13.1%	12.0%
Emergency	0.9%	3.3%
Kamakwie	3.6%	0.3%
Masanga	-	1.0%
Mattru UBC Hospital	3.3%	1.8%
MSF Hospital – Kenema	1.8%	1.0%
SERABU	-	-
LIFE CARE HOSPITAL	0.1%	0.3%
YELE	0.3%	0.3%
CHOITHRAM MEMORIAL HOSPITAL	0.1%	0.5%
SENDUGU	-	0.2%
SHUMA HOSPITAL	-	0.2%
COVID-19 CTC/CCC/ISOLATION	0.6%	1.3%
RENDEZ_VOUS	2.4%	2.0%

**Table 11** shows the percentages of NEMS general monthly referrals to the main hospitals for the month of January 2022. The tabular diagram compares the data between September, December 2021 and January 2022. You can see that for the month under review, The tertiary facilities account for as the least recipient of referrals (22.8%) as follows:

- ◆ Connaught Hospital (8.3%), Princess Christian Maternity hospital (PCMH) (11.7%), and Ola During Children's Hospital (ODCH) (2.8%) compared to December 2021 with a total receipt of 18.1% for tertiary institutions. This indicated 4.7% increment in the January 2022 referrals data to December.
- ♦ For the month under review, the Regional and District Hospitals received 61.3% of all referrals compared to December 2021 with 61.9% of the referrals. This indicates a drop by 0.6% in the percentage of patients referred to the Regional and District Hospitals.
- ♦ Furthermore, the table adjacent to this narratives displays the percentage of patients referred to COVID-19 Treatment Centers and Isolation Units, with a rise on the percentage of confirmed cases in January 2022 that changed 0.6% in December to 1.3% in January 2022. It is intriguing to see that Rendezvous is 2.4% in December to 2.0% in January 2022.

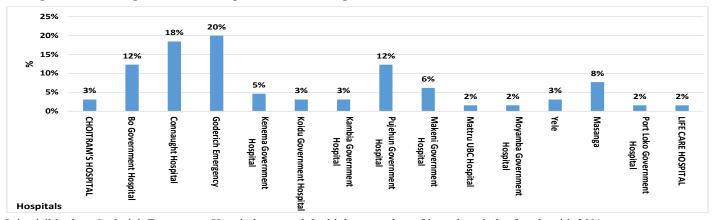
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Medical Service

Figure 16: Showing Destination Hospitals for Inter-Hospital Referrals



It is visible that, Goderich Emergency Hospital reported the highest number of inter-hospital referrals with 20%.

Table 11: Number of Inter - Hospital and Inter-District Missions and Referrals

NTERHOSPITAL REFERRALS	MISSIONS	REFERRALS
CHOITRAM'S HOSPITAL	2	1
Bo Government Hospital	8	1
Connaught Hospital	12	9
Goderich Emergency	13	11
Kenema Government Hospital	3	2
Koidu Government Hospital	2	1
Kambia Government Hospital	2	1
Pujehun Government Hospital	8	5
Makeni Government Hospital	4	3
Mattru UBC Hospital	1	1
Moyamba Government Hospital	1	1
Yele	2	1
Masanga	5	5
Port Loko Government Hospital	1	1
LIFE CARE HOSPITAL	1	1
INTER-DISTRICT REFERRALS (TOTAL)	65	44
Masanga	1	1
SENDUGU	1	1
CONNAUGHT MORTUARY	2	2
Kabala Government Hospital	8	5
Kamakwie Wesleyan Hospital	2	1
Kailahun Government Hospital	2	1
Mattru UBC Hospital	10	7
Kenema Government Hospital	6	4
Bo Government Hospital	1	1
WITHIN THE SAME DISTRICT (TOTAL)	33	23
Grand Total	98	67

The tabular diagram labeled table 11 above, illustrates the number of inter-hospital missions and referrals covered by NEMS in the month of January 2022. A total of 33 missions to that 23 referrals reported for inter-hospital, while 65 and 44 for missions and referrals respectively for inter-district movements supported by NEMS.



#### Figure 17: Number of Referred Patients by Arrival Methods)

The graph labelled figure 17 provides a detailed analysis on patients' arrival at the various hospital where referral coordinators are attached. The data for January 2022 demonstrates that major or most common means of arrival at hospital is through the utilization of NEMS' ambulances since the inception of this programme in Sierra Leone's health sector.

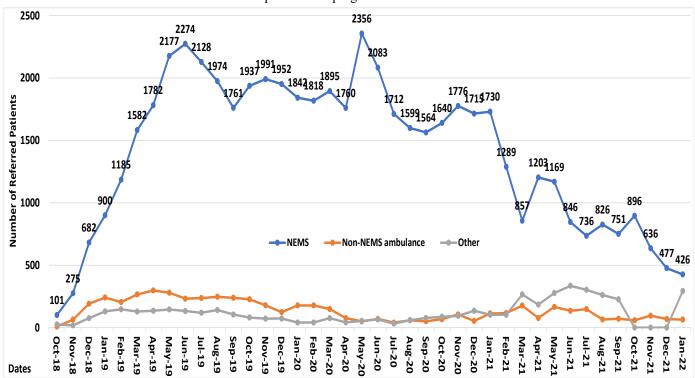
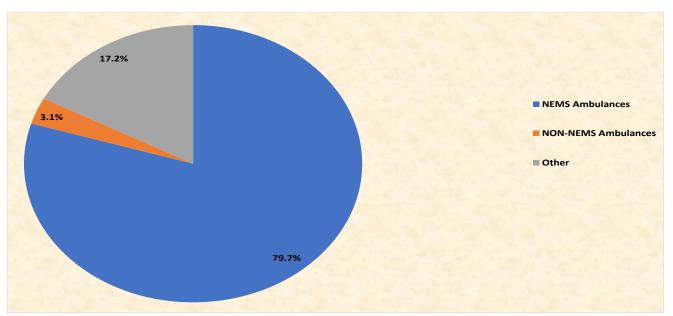


Table 12: Arrival Methods of the Referrals by Hospital



The pie chart labelled figure 12 above, exemplifies the methods of arrival at the various health facilities nationwide for the month of January 2022. 79.7% of the total number of referred cases received by the respective hospitals was transported by NEMS ambulance, while a combined total of 20.3% of the total number of referred cases used other means of transportation as displayed on the pie chart above.



Table 12: Arrival Methods of the Referrals by Hospital

REFERRAL FACILITIES	NEMS Ambulances	NON-NEMS Ambulances	Other	
Tertiary Facility	59.6%	6.9%	33.5%	
34 Military Hospital	19.4%	36.1%	44.4%	
Connaught Hospital	100.0%	0.0%	0.0%	
Kingharman Road Govt. Hospital	-	-	-	
Lumley Govt. Hospital	75.6%	0.0%	24.4%	
Ola During Children's Hospital	9.0%	3.6%	87.4%	
Princess Christian Maternity Hospital	53.8%	1.5%	44.7%	
Rokupa Govt. Hospital	100.0%	0.0%	0.0%	
Private/NGO facility Total	100.0%	0.0%	0.0%	
Matru UBC Hospital	100.0%	0.0%	0.0%	
Regional/District Hospital	79.4%	2.4%	18.2%	
Kabala Govt. Hospital	75.6%	0.0%	24.4%	
Bo Govt. Hospital	100.0%	0.0%	0.0%	
Kailahun Govt. Hospital	37.8%	0.0%	62.2%	
Kambia Govt. Hospital	100.0%	0.0%	0.0%	
Kenema Govt. Hospital	39.8%	13.0%	47.2%	
Koidu Govt. Hospital	-	-	-	
Lungi Govt. Hospital	100.0%	0.0%	0.0%	
Magburaka Govt. Hospital	100.0%	0.0%	0.0%	
Makeni Govt. Hospital	100.0%	0.0%	0.0%	
Moyamba Govt. Hospital	100.0%	0.0%	0.0%	
Port Loko Govt. Hospital	40.9%	11.4%	47.7%	
Pujehun Govt. Hospital	-	-	-	
Grand Total	79.7%	3.1%	17.2%	

The tabular representation labelled table 12 provides a further breakdown on patients' arrival at secondary and tertiary hospital nationwide for the month of January 2022. For tertiary hospital, there has been an increment on the percentage of NEMS arrival method, with Connaught Hospital and Rokupa Government Hospital are the only tertiary hospitals in Western Area Urban to register 100% NEMS arrival method.

Bo, Kambia, Koidu, Magburaka Government Hospital, Makeni Government Hospital and Moyamba Government Hospital are the secondary hospitals that showed 100% NEMS arrival method only, while all the others reported less than 80% as NEMS arrival method. Overall, the major means of transporting emergency cases from peripheral health units nationwide is through NEMS. Mattru UBC Hospital has 100% NEMS arrival.

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**Table 13: Time Taken to Triage** 

Time Taken to Triage	во	BOMBALI	BONTHE	FALABA	KAILAHUN	КАМВІА	KENEMA	KOINADUGU	копо	МОЧАМВА	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Jan 2022	Percentage Jan 2022	Grand Total Dec 2021	Percentage Dec 2021
00:00:00 to 00:05:00	28	46	8	6	14	21	29	18	16	10	21	22	13	34	38	324	35.0%	434	42.3%
00:05:01 to 00:10:00	40	16	8	3	22	33	36	13	19	17	16	23	6	29	56	337	36.4%	311	30.3%
00:10:01 to 00:15:00	13	5	4	5	1	9	11	7	4	4	6	10	1	12	26	118	12.7%	115	11.2%
00:15:01 to 00:20:00	3	3	1	3	1	1	5	3	3	1	0	4	0	5	10	43	4.6%	52	5.1%
00:20:00 to 00:30:59	2	0	0	0	0	5	1	1	6	1	3	0	0	4	7	30	3.2%	36	3.5%
00:31:00 to 01:59:59	5	5	0	1	0	2	1	6	2	3	5	9	3	3	12	57	6.1%	60	5.9%
02:00:00 to 02:59:59	2	0	0	0	0	1	0	1	0	2	3	0	1	0	0	10	1.1%	8	0.8%
03:00:00 to 03:59:59	1	0	0	0	0	1	0	0	1	0	0	0	0	0	0	3	0.3%	1	0.1%
04:00:00 to 04:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0.2%	2	0.2%
05:00:00 to 05:59:59	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0.1%	1	0.1%
06:00:00 to 06:59:59	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0.1%	1	0.1%
07:00:00 to 07:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
08:00:00 to 08:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
09:00:00 to 09:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.1%
10:00:00 to 10:59:59	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0.1%	1	0.1%
11:00:00 to 11:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	2	0.2%
12:00:00 to 12:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
13:00:00 to 13:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
14:00:00 to 14:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
15:00:00 to 15:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
16:00:00 to 16:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
17:00:00 to 17:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
18:00:00 to 18:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
19:00:00 to 19:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
20:00:00 to 20:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
21:00:00 to 21:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
22:00:00 to 22:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
23:00:00 to 23:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
Grand Total/District	94	75	22	18	38	73	84	49	51	39	54	68	24	88	150	927	100.0%	1025	100.0%

The table above delineates the time taken by Call Centre to triage a patient when a call is received. In January 2022, call centre took less than 15 minutes to triage an 84.1% of the total Calls received, while in December 2021, it took less than 15 minutes to triage 83.8% of the total calls supported, with a difference of 0.3% increment. The calls data shows that 15.9% of the total calls received that took more than 15-minute, which could be due to inevitable challenges in the allocation of an ambulance to undertake a specific mission. In comparison with December, which showed a total of 16.2% of the Calls supported took more than 15 minutes to triage a patient and make a decision to send an ambulance.

Table 13: Time Taken to Reach the Target

Time Taken to Reach the Target	во	BOMBALI	BONTHE	FALABA	KAILAHUN	KAMBIA	KARENE	KENEMA	KOINADUGU	KONO	MOYAMBA	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Jan 2022	Percentage Jan 2022	Grand Total Dec 2021	Percentage Dec 2021
00:00:00 to 00:30:59	33	10	13	0	10	20	0	35	21	17	6	13	14	2	60	73	194	45.0%	291	53.3%
00:31:00 to 01:59:59	38	17	16	3	11	32	0	21	13	10	6	14	20	9	12	11	210	48.7%	201	36.8%
02:00:00 to 02:59:59	1	1	0	2	2	3	0	0	1	1	1	0	1	3	0	0	16	3.7%	29	5.3%
03:00:00 to 03:59:59	1	0	0	0	0	0	0	0	1	2	2	1	0	0	0	1	7	1.6%	15	2.7%
04:00:00 to 04:59:59	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	0.5%	4	0.7%
05:00:00 to 05:59:59	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0.2%	3	0.5%
06:00:00 to 06:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	2	0.4%
07:00:00 to 07:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
08:00:00 to 08:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
09:00:00 to 09:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
10:00:00 to 10:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
11:00:00 to 11:59:59	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0.2%	0	0.0%
12:00:00 to 12:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.2%
13:00:00 to 13:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
14:00:00 to 14:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
15:00:00 to 15:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
16:00:00 to 16:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
17:00:00 to 17:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
18:00:00 to 18:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
19:00:00 to 19:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
20:00:00 to 20:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
21:00:00 to 21:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
22:00:00 to 22:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
23:00:00 to 23:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
Grand Total/District	73	28	29	6	23	55	0	56	37	31	16	28	35	14	72	85	431	100.0%	546	100.0%

When a decision is made to allocate an ambulance for a specific mission, the time taken by the ambulance team to reach the targeted Peripheral Health Unit (PHU) or a health facility is shown in the table above. In January 2022, 97.4% of the missions transported took less than 3-hour to reach the targeted PHU, while in December 95.4% of the total missions supported by NEMS took less than 3-hour to get to the particular health facility that requested for an ambulance, with an increment of 2%. Those missions that took more than 2- hour to locate the respective PHUs, were 2.6% in January 2022.

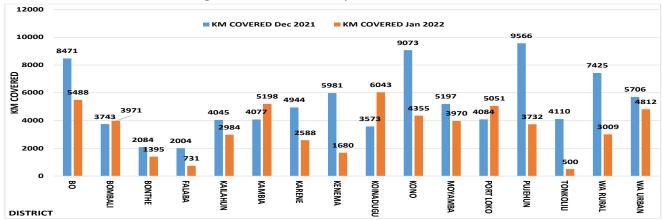
**Table 14: Time Taken to Reach the Hospital** 

Time Taken to Reach the Hospital	ВО	BOMBALI	BONTHE	KAILAHUN	KAMBIA	KARENE	KENEMA	KOINADUGU	KONO	МОУАМВА	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Jan 2022	Percentage Jan 2022	Grand Total Dec 2021	Percentage Dec 2021
00:00:00 to 00:30:59	21	9	3	1	16	0	19	7	8	4	5	14	4	18	47	176	30.1%	328	42.9%
00:31:00 to 01:59:59	36	16	25	17	33	0	29	17	13	9	19	22	4	55	36	331	56.7%	349	45.7%
02:00:00 to 02:59:59	5	1	1	2	3	0	3	1	2	1	2	3	3	1	2	30	5.1%	42	5.5%
03:00:00 to 03:59:59	2	0	0	0	0	0	0	5	2	2	2	0	2	0	0	15	2.6%	10	1.3%
04:00:00 to 04:59:59	1	0	0	1	0	0	0	4	1	2	0	1	1	0	0	11	1.9%	10	1.3%
05:00:00 to 05:59:59	1	0	0	0	0	0	0	0	2	0	0	0	0	0	0	3	0.5%	8	1.0%
06:00:00 to 06:59:59	0	0	0	0	1	0	4	0	1	0	0	0	1	1	0	8	1.4%	4	0.5%
07:00:00 to 07:59:59	0	0	0	1	0	0	0	1	0	1	0	0	0	0	0	3	0.5%	3	0.4%
08:00:00 to 08:59:59	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	3	0.5%	1	0.1%
09:00:00 to 09:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.1%
10:00:00 to 10:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
11:00:00 to 11:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0.2%	0	0.0%
12:00:00 to 12:59:59	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0.2%	3	0.4%
13:00:00 to 13:59:59	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0.2%	1	0.1%
14:00:00 to 14:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.1%
15:00:00 to 15:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
16:00:00 to 16:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
17:00:00 to 17:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.1%
18:00:00 to 18:59:59	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0.2%	1	0.1%
19:00:00 to 19:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.1%
20:00:00 to 20:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
21:00:00 to 21:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
22:00:00 to 22:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
23:00:00 to 23:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
	66	26	29	22	54	0	55	35	30	19	29	41	16	76	86	584	100.0%	764	100.0%

After locating the health unit that requested for an ambulance, the ambulance team then travelled with the patients to a specific health facility that has the required health services needed by the patients. The table above this narrative provides an in-depth analysis on the time taken to reach secondary or tertiary health facility. It is visible that in January 2022 over 91.9% of the missions supported took less than 3 hours to reach the required health facility, while in December, we saw a total of 94.1% of the number of missions supported by NEMS within 3-hour to reach their various health facilities, which decreased by 2.2% to the previous month.



Figure 19: Km Travelled by District



The District Ambulance Supervisors (DAS) Monthly Kilometre Reports showed that, In January 2022 data, a cumulative **55,507** km was travelled, when put in contrast with the December 2021, with **84,083** Km indicating a significant drop by **28,0576** km in the kilometres travelled by NEMS ambulances for the month under review. This reduction is consistent with the general drop in the number of missions undertaken by NEMS in January 2022.

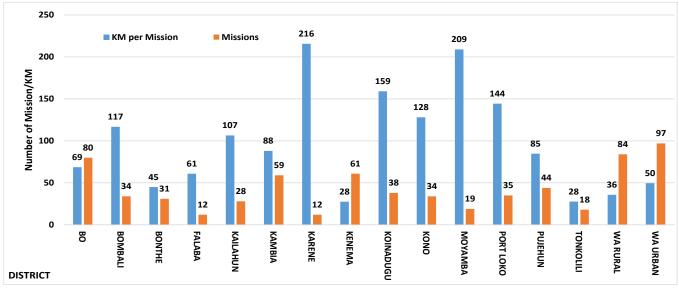
The two graphs (Figure 19 and Figure 20) displays the number of km travelled by NEMS ambulances per district and the average km/mission covered per district, with the calculation of all the missions undertaken by NEMS as recorded in the NEMS database. A comparison was the inter-district figures for January 2022with December 2021. Calculated the average km/mission is for all the missions handled by NEMS as per our database (and not only the one ending with a referral to the hospital, but those which required the ambulance to move from its location).

Assessment of the district data showed that, there was a general drop in the January 2022 figure compared to the December 2021 figure for most districts, with the exception of Karene, Koinadugu and Port Loko.

Another critical revelation of the January 2022 data evaluation is that Koinadugu covered above six thousand kilometres compared to December 2021 with nine thousand KM.

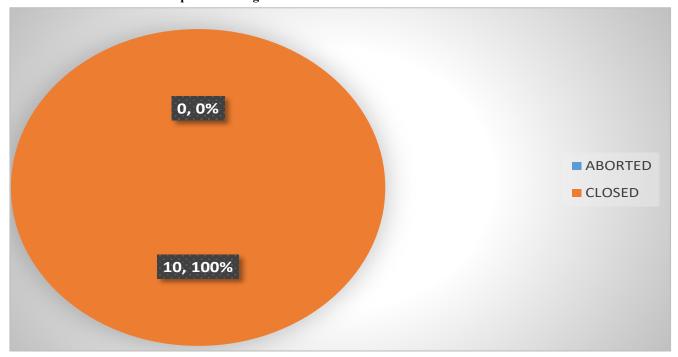


Figure 20: Average Km/Mission



The Bar chart labelled figure 20 compares the average KM covered for a mission by district for January 2022. For the month under review, the district with the highest average KM per mission is Karene with 12 missions, the ambulances covered a significant 216 Kilometers per mission (km/mission). The other districts that experienced significant increases include Moyamba by (209) km/mission, Koinadugu by 159 km/mission and Port Loko by 144 km/mission. It is essential to understand that, other district NEMS ambulances transported the missions recorded by Falaba and Karene.

NEMS National COVID-19 Response Figure 21: Outcome of COVID-19 Missions



From NEMS data sources related to January 2022, we observed that the strategy to repurposing the ambulances in January 2022 laid the foundation for the seamless accomplishment an exponential increase in both the movement of samples and the number of COVID-19 missions. As can be seen from the data presented, 1 mission that is strongly linked to COVID-19 related case that required NEMS ambulance for transportation. 3 samples recorded.

The pie chart figure 21 describes the transportation outcome of COVID-19 activated missions. Overall, the data showed that out of 10 cases that NEMS dispatched ambulances for, 7 (100%) of the case were transported to the 34 Military Hospital care centers.

Table 13: COVID-19 Missions and Samples transported

Typology of Complain	Jan-2	2	Dec-21	Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21
Covid19 Confirmed Case	1	10	5	1	-	2	16	138	197	14	9	12	24	113
Covid19 Suspected Case	-		-	•	-		3	3	-	3	-	-	6	8
Covid19 Confirmed/Suspected Case	-		-	•	-			-	-	-	-	-	-	7
SAMPLES	-		1	3	-	26	6	28	16	17	34	19	40	66
TOTAL	1	10	6	4	0		25	169	213	34	43	31	70	194

Table 13 for this report reinforces you with adequate information on the general COVID -19 operations for the month of January 2022. The rigorous measures implemented by the authorities responsible to management of covid-19 in Sierra Leone has contributed to the fall of covid-19 cases in the month of January.

Figure 22: Trend of COVID-19 missions (confirmed and suspected cases)

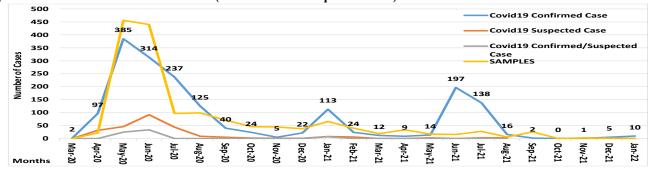


Figure 22 is a slightly oscillating line graph that illustrates the trend at which COVID-19 cases are reported to NEMS and transported by NEMS. A critical analysis from the chart above demonstrated that there has been constantly dropping in the number of confirmed cases since the nation recorded its highest number of confirmed COVID19 cases in January 2021 and commenced a steady drop until May 2021 when we saw a sharp rise in June 2021. The management of the covid-19 cases has seen a steady rise on the numbers recorded for the month of January. The number of samples transported plunged, when put in contrast to December 2021. In Western Area, samples are hardly transported, while this is common for the provincial districts.

#### **COVID-19 Confirmed Cases**

From NEMS data sources related to January 2022.

The pie chart figure 20 describes the transportation outcome of COVID-19 activated missions. Overall, the data showed that out of 10 cases that NEMS dispatched ambulances for, 7 (100%) of the case were transported to the 34 Military Hospital care centers.

A detail analysis of the number of coronavirus (COVID-19) cases is done here. 10 cases recorded in the month of January 2022 and these were all transported by NEMS to the respective treatment centres and holding homes.

The cumulative number of confirmed COVID19 cases are rising in the last few months. The current total number of confirmed COVID19 cases is at 3,683 since March 2020 to the month under review.

#### **District of Origin of the Patients**

The bar chart figure 23 depicts a bar chart, which showed the origin of all transported COVID-19 cases. It is evidently clear that Western Area Urban continues to record the majority of the cases transported, which is a total of 10.

Figure 23: Origin district of the COVID-19 patient (frequencies)

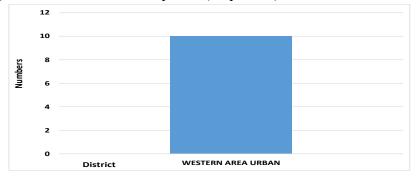




Table 14: COVID-19 Missions by Ambulance Station (confirmed cases)

District	Station	Code	% of Missions		
WESTERN AREA URBAN	St. Joseph	W U 04	90%		
WESTERN AREA RURAL	Lumley	W U 05	10%		

Table 13 for this report reinforces you with adequate information on the general COVID -19 operations for the month of January 2022. The rigorous measures implemented by the authorities responsible to management of covid-19 in Sierra Leone has contributed to the proper management of covid-19 cases in the month of January 2022.

#### **Ambulance Station**

Table 14 describes COVID19 confirmed cases by their respective stations. WU 04 which is the St. Joseph ambulance allocated to transport COVID19 cases reported and transported in the January 2022.

In the event of an emergency, the ambulance that is operational and at the nearest location to the patients is mostly called upon to transport the patients to the appropriate health facility for care.

#### **COVID-19 Treatment Centres Destination**

The Table 15 on this report delineates the COVID19 confirmed cases transported to their respective treatment centres in Sierra Leone. 34 Military Hospital has two treatment centre for COVID19 patients as displayed on the graph below. Adra and Connaught reported the one number of confirmed cases, representing 10% each.

Facility	Treatment Center	%
WESTERN AREA URBAN	34 MH CTC 1	70%
WESTERN AREA URBAN	34 MILITARY	10%
WESTERN AREA URBAN	ADRA CTC	10%
WESTERN AREA URBAN	CONNAUGHT	10%