NEMS OPERATIONAL ACTIVITIES

MONTHLY REPORT: MARCH 2022

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Brief description of NEMS Operational Services

Figure 1: Cumulative Number of Supported Indicators

The data collected from the NEMS database and the NEMS Referral Coordinators' database from ***15th of October 2018 to the 31st of March 2022***, indicates that NEMS has accomplished over three (3) years of operations; delivering the following:

Cumulative total of **83,707 Calls, 78,813 Missions and 56,769 NEMS referrals** only.

National Grand Total, October 2018 to March 2022
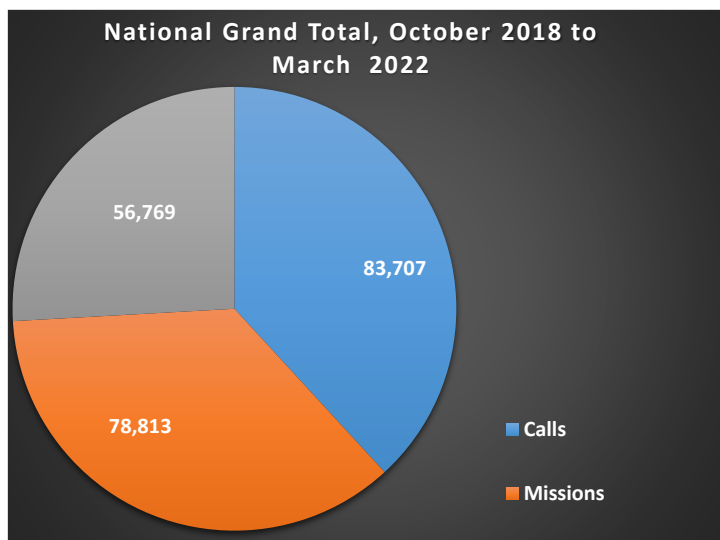
Distributions of the Ambulances

NEMS currently has **one hundred (100) ambulances** in operation nationwide. Each district has one ambulance allocated to the District Ambulance Supervisor (DAS) to serve as replacement in case an ambulance becomes inoperative, which summed to the total reported.

Ambulance Distributions	
District	**Grand Total**
BO	7
BOMBALI	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 February, NEMS operated below 10% of the ambulances around the country; this includes both the DAS' allocated vehicles. They have travelled a cumulative total of **6,019,676 km**. There were no records for the kilometre covered in March 2022.

COVID-19 Response

The total number of **COVID-19** confirmed cases **referred by NEMS** in *March* 2022 is zero, with no suspected case reported. The cumulative figures since the COVID-19 outbreak in the country in March 2020 is **3,683 confirmed**, 258 **suspected**.

1. Overview of the Calls, Missions and Referrals

Figure 2: Calls, Missions and Referrals (February 2022)

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

Year	Months	CALLS	Trend	MISSIONS	Trend	NEMS REFERRED PATIENTS	Trend
2022	Jan-22	942	-7%	686	-10%	426	-7%
	Feb-22	639	-19%	435	-22%	243	-27%
	Mar-22	188	-55%	125	-55%	66	-57%
Total NEMS Project		83707		78813		56769	

Table 1 above gives a comparative percentage trend analysis for the three (3) major indicators **(i.e., Calls, Missions, and NEMS Referrals**) by NEMS for the month of January, February and March 2022. The cumulative grand total for **Calls 83,707, Missions 78,813 and NEMS Referrals only 56,769.**

It is observed that there is a persistent decline in Calls by –55%, Missions by 55% and Incoming Referrals by 57%.

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

For the period under review, **188 Call**, **125 Missions**, and **66 Incoming Referrals** were supported.

1.3. Table 2: NEMS Daily Activities Averages

Daily Operations	Calls	Missions	NEMS REFERRED PATIENTS
Jan-22	6	4	2

Table 2 shows the average daily Calls, Missions and Incoming Referrals.

Calls Analysis

Figure 3: **Classifications of Calls**
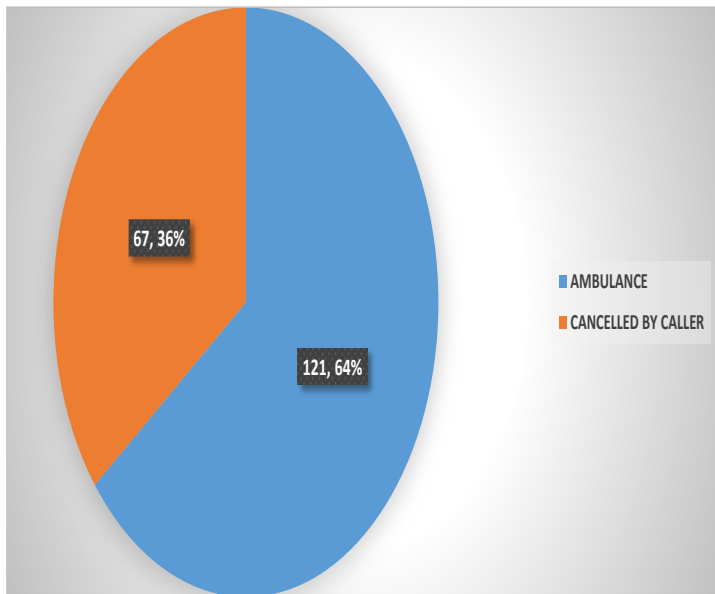
Figure 2 outlines the classification of Calls as they are received at the NEMS Call Center. The call center operators received a cumulative total of 188 Calls with 67 (36%) requiring ambulance, 121 (64%) cancelled by caller due to factors from the callers end e.g. poor mobile network.

2.1.Figure 3: **Breakdown of Calls by District**
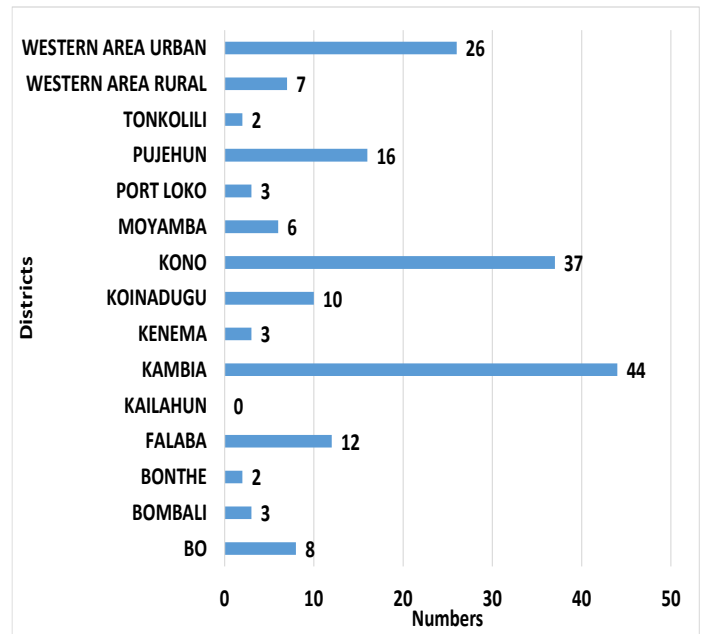
Figure 3 shows the breakdown of Calls by district . Kambia and Kono reports the highest and second highest number of calls received – 44 and 37 respectively.
No Calls from Kailahun, with Bonthe and Tonkolili recorded 2 each while Bombali and Port Loko registered 3 each.

2.2.Figure 4: **Number of Calls per Hour**
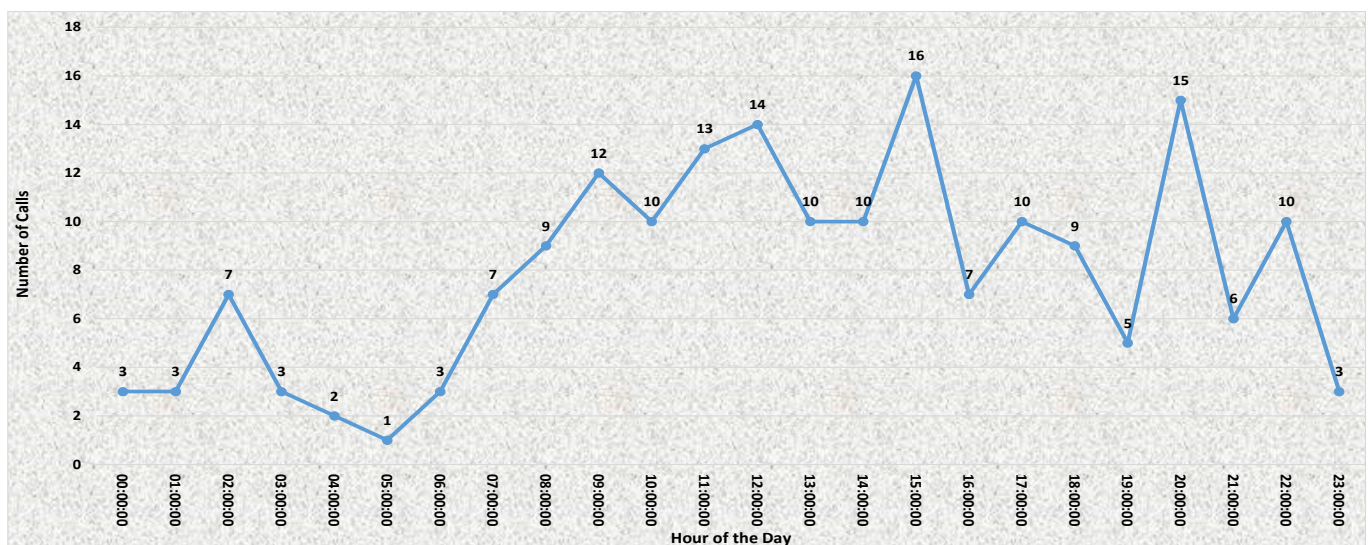
Figure 4 is a line graph that describes the number of calls received at NEMS operation center on an hourly base. The chart above this narrative shows that, there was a surge in the number of calls received between the hours of 09:00 hours and 23:00hrs GMT, irrespective of its fluctuation. The operation center recorded its climax calls at around 15:00hrs GMT.

2.3. *Figure 6:* Number of Calls per Day
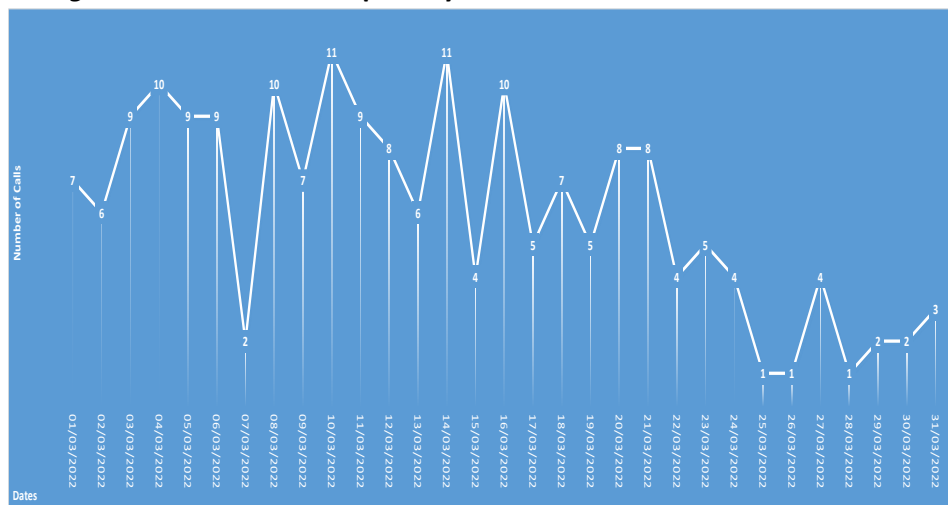
The chart demonstrates the trend of incoming calls to the NEMS call centre per day.

The least number of calls were recorded on the 25th, 26th with 28th with 1 call each, while the highest Calls recorded on the 10th with 14th calls.

2.4. Figure 7: Calls, Missions, Referrals by District
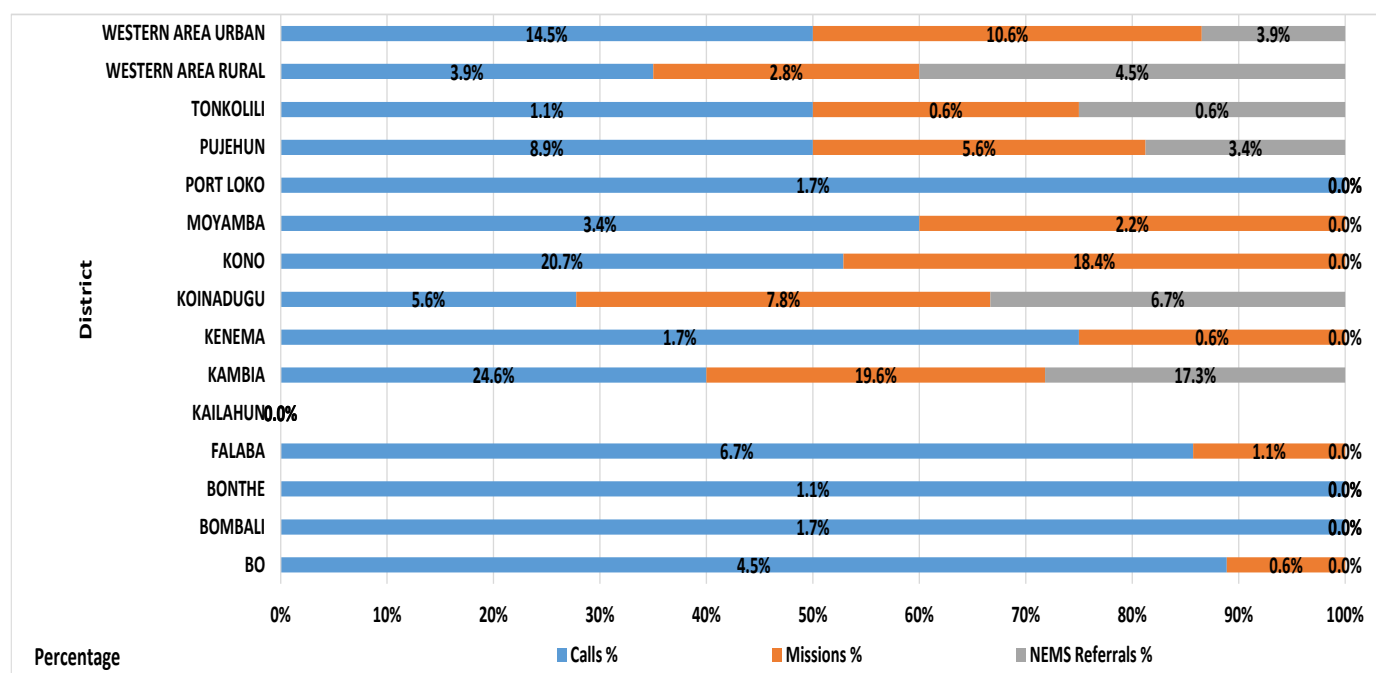
The bar chart above demonstrates the percentage of Calls, Missions and NEMS Referrals supported by NEMS per district in the month of March. On Calls, Kambia recorded the highest percentage with 24.6% and Kailahun with the lowest zero per cent.
For Missions, Kambia—19.6% reported the majority of the missions undertaken, and Bonthe the lowest with 1.7%. For Incoming Referrals, Kambia reported 17.6% and a7.3% for NEMS referrals.

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Chapter 3 -Missions

3.0.Figure 8: Categories of NEMS Missions
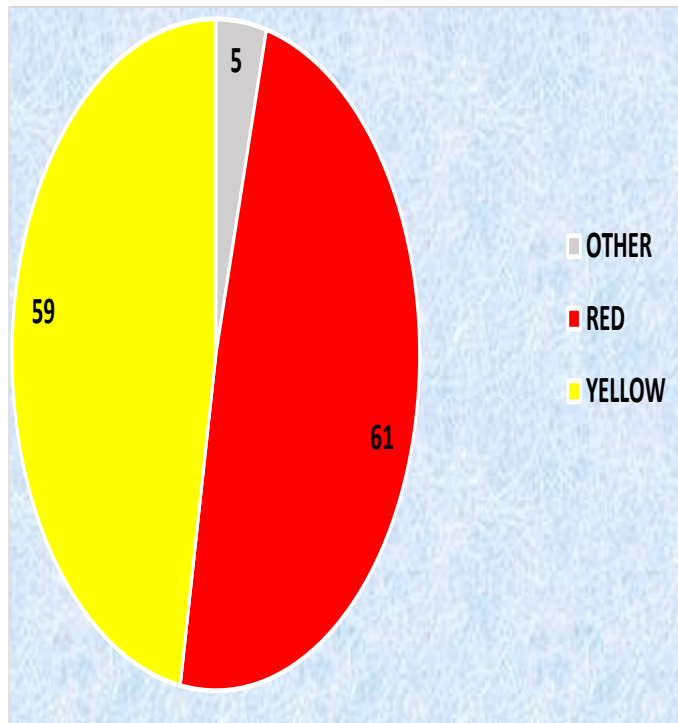
The chart **figure 8** gives an insight on how calls are categorized to determine a mission. The severity of the patient's condition has three major categories, with an additional color 'Other' (Red, Yellow and Green).

A patient assessment (Triage) is done to determine the severity of the condition; separating 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 thereafter.

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 this month's review, a total of 188 calls were received, out of which 120 were considered to be a missions, and 5 did not meet the requirement for emergency.

3.1.Figure 9: Time of the day of the Missions

The 'time of the day' is a measure of the time of the day, the call centre activates a 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 March:
Figure 9 displays a comparative percentage analysis for the day. A significant number of missions were undertaken during morning hours, with 36.2%, while 33.0% were done at night. The least percentage of missions were done during the day, with 30.9%.

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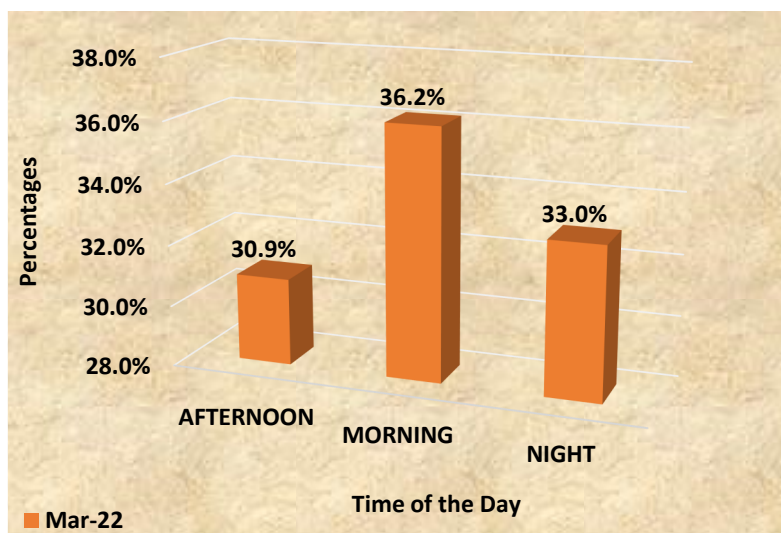
3.2.Figure 10: Comparative Analysis of NEMS Mission's complaints for the Previous month (January) to Current month February
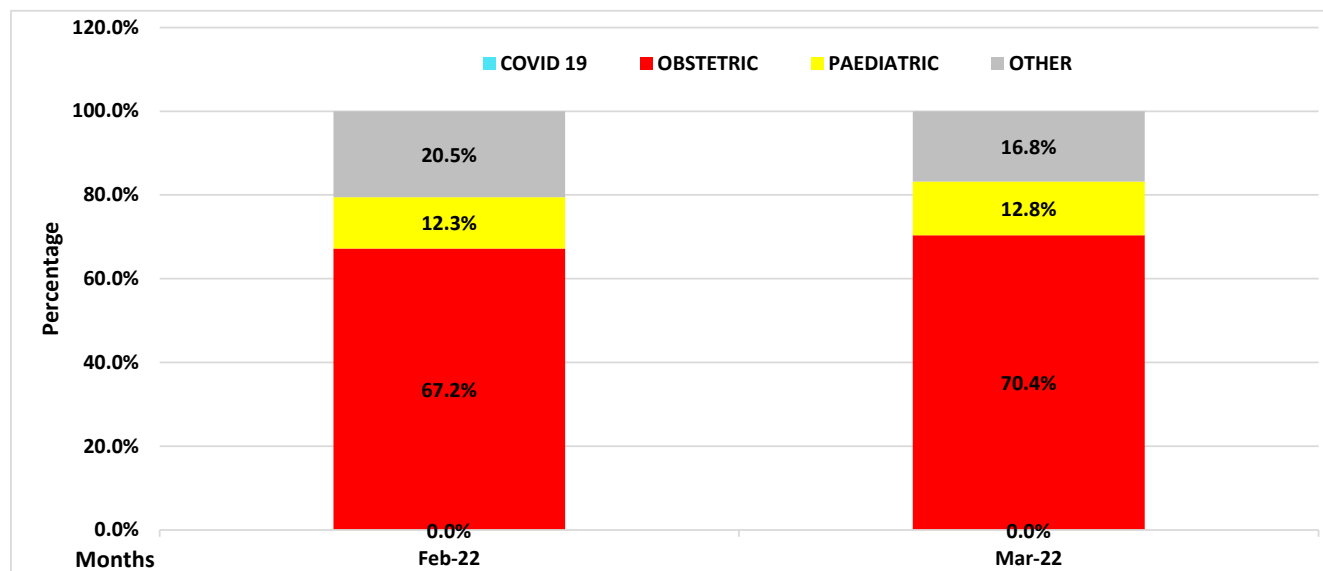
Figure 10 represents the major categories of complaints of the missions comparing **February and March 2022** data. The data for COVID-19 missions is 0 for both suspected and confirmed cases. It is visible that Obstetric cases are the majority of the missions transported to the various health facilities.

The indicator 'Other' is a combination of other complaints, such as Abdominal Pain, Animal Bite, Consciousness, Road Accident, Trauma and etc. Between the months of **February and March**, there is a -3.7% decrement in other cases. For Obstetric, there is 3.2% increment from the previous month, and for Paediatric a 0.5% increase.

3.3.Figure 11: Typology of complaints that lead to Missions
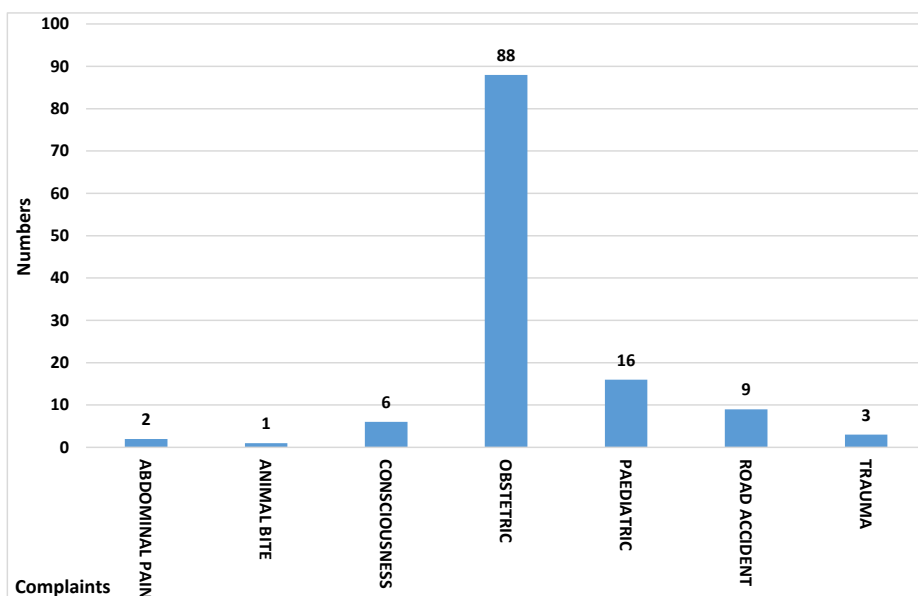
Figure 11 provides a detailed breakdown of the number of complaints received that are considered as missions.
It is evidently clear that obstetric (88) complaints were the most occurring, seconded by Paediatric (16), while Road Accident (9), Consciousness (6), while combining Trauma, Abdominal Pain and Animal Bite gives (6) cases happens to be the least complaints received for the month under review.

3.4.Figure 12: Trend of Missions complaints by day
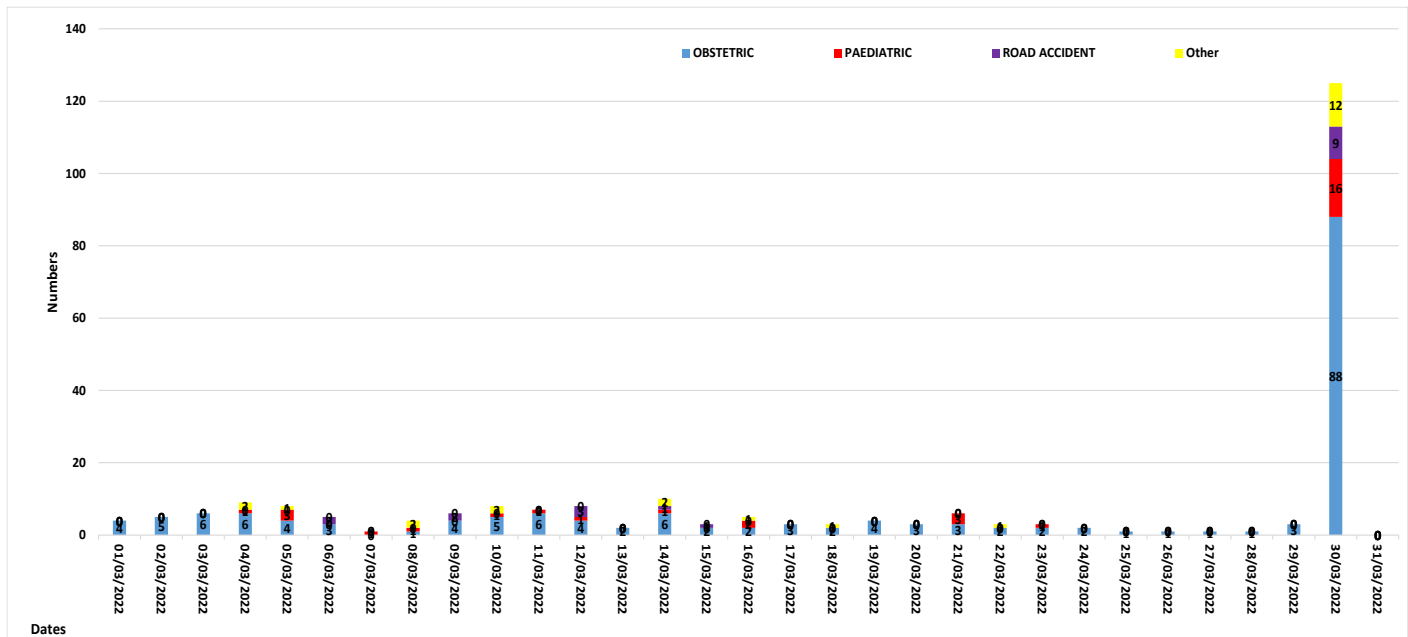
The chart displayed the number missions undertaken in the month of March on a daily basis, with a special attention on the various complaints. Obstetric cases appears to be the only number of complaints that was transition to a mission for almost every other day of the month, while an enormous number of the total missions done on the 30th.

3.5.Figure 13: Missions Complaints by District
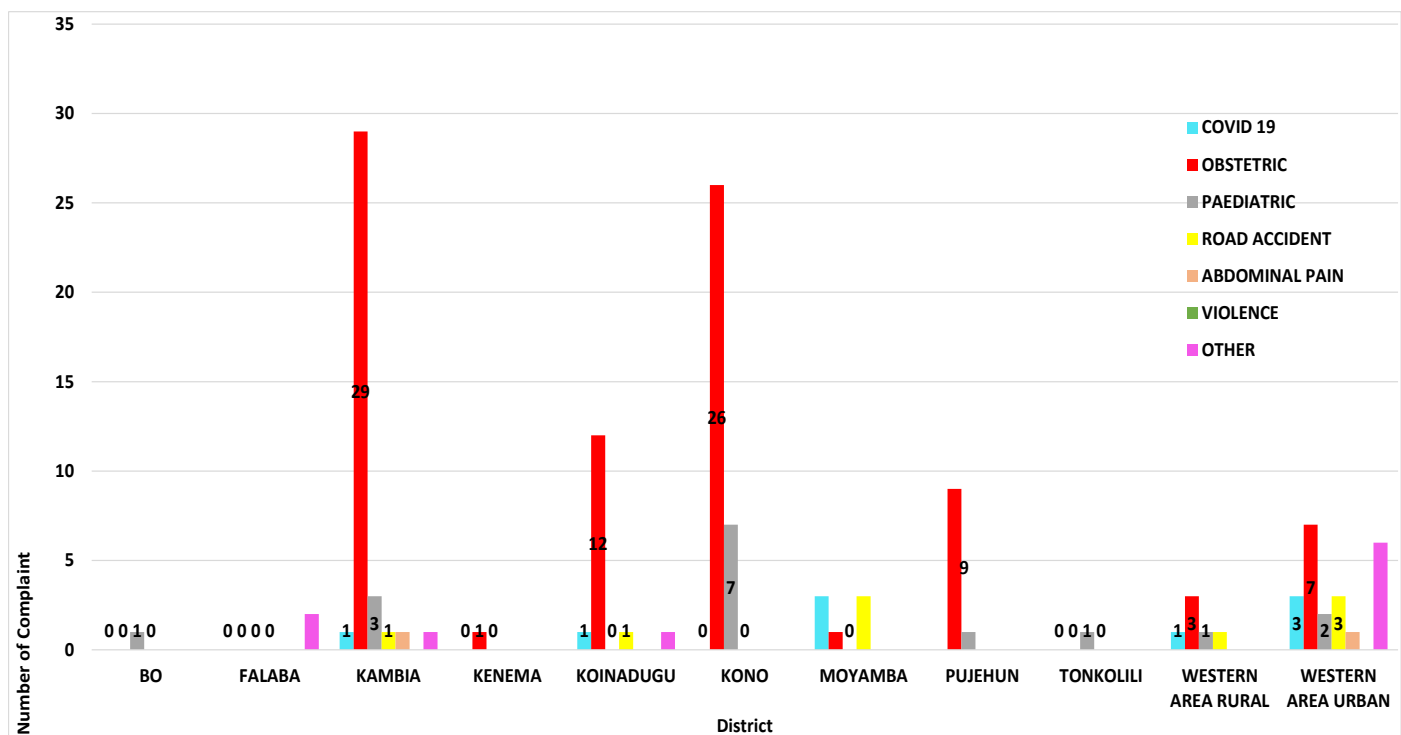
A breakdown on the number of complaints by the different districts nationwide. Out of the sixteen districts in Sierra Leone, only eleven were recorded, while the others were not. Kambia happens to be the facility with the majority of cases supported, while Kono seconded the chart.

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3.6.Figure 14: Number of Calls, Missions and Referrals Supported per Day
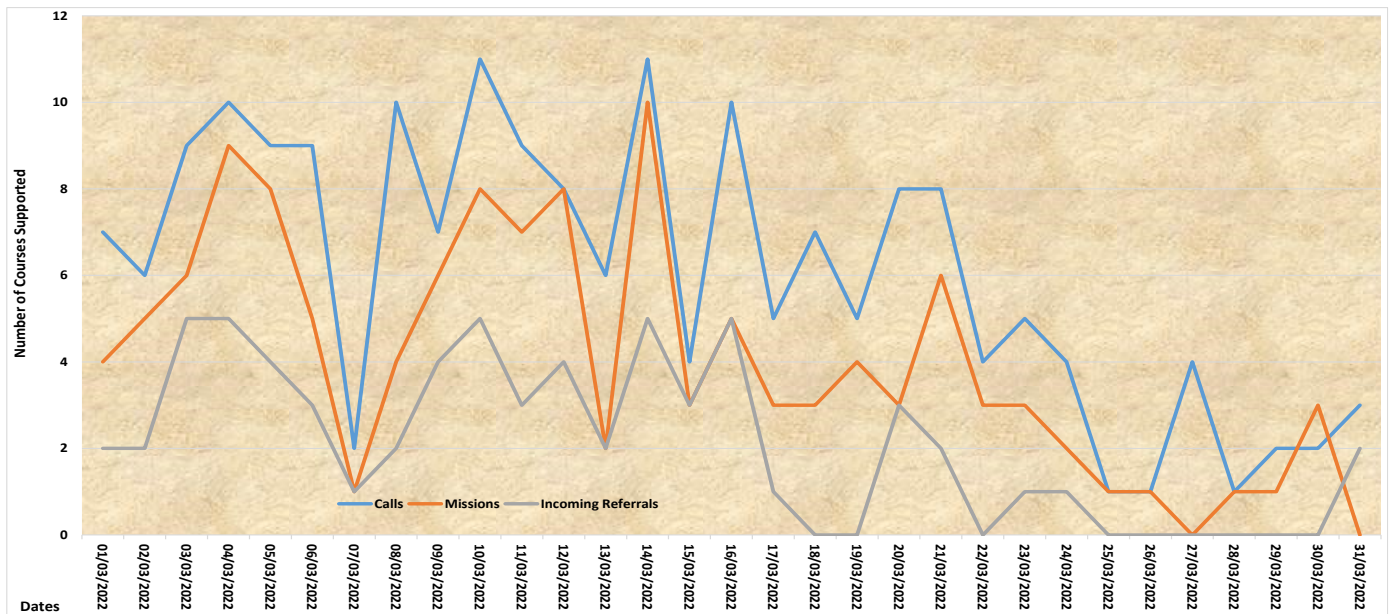
Figure 14 is a line chart that shows the number of Calls received, missions carried out, and NEMS referrals managed per day. Throughout March, the indicators fluctuated. The average call were 6, Missions is 4 and referrals 2 for the month under review.

3.7.Figure 15: Outcome of the Missions
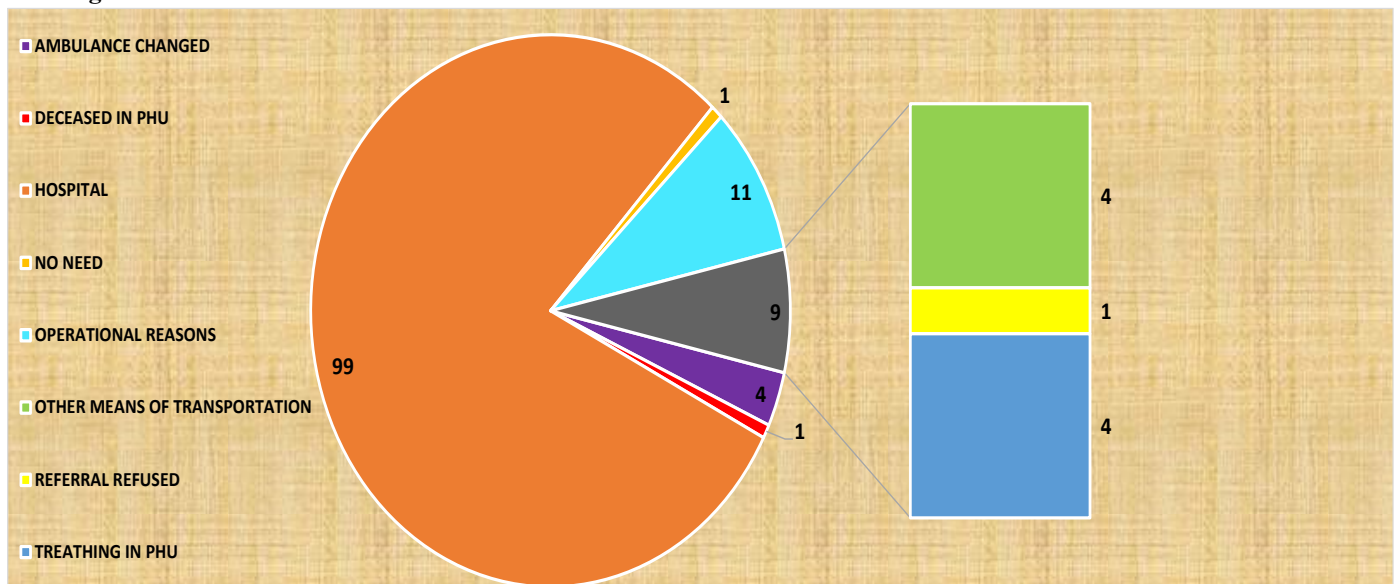
Figure 15 shows the outcome of missions carried out by NEMS in March 2022.

'Hospital' refers to mission lead referrals to a pre-identified health facility (Hospital). Referencing the data displayed in the pie chart above shows that (99) 79.2% of the missions leads referrals to a pre-identified specialist health facility. Compared to January 73.6% of the missions were referred to a pre-identified specialist health facility. This indicates a increase in the referrals from February to that of March 2022.

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

INDICATORS	ABORTED	DECEASED	HOSPITAL	NO NEED	Grand Total
AMBULANCE CHANGED	4	0	0	0	4
DECEASED IN PHU	0	1	0	0	1
HOSPITAL	0	0	99	0	99
NO NEED	0	0	0	1	1
OPERATIONAL REASONS	11	0	0	0	11
OTHER MEANS OF TRANSPORTATION	4	0	0	0	4
REFERRAL REFUSED	1	0	0	0	1
TREATHING IN PHU	4	0	0	0	4
Grand Total	24	1	99	1	125

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 March 2022 data shows that out of the 24 missions undertaken, 19.2% 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 reveals that out of 4 missions aborted, 4 (16.7%) of the aborted missions were due to 'ambulance changed',

♦ 'Deceased' – this mission outcome refers to death before the arrival of the NEMS ambulance team. March 2022 data shows that (1) of the mission were cancelled because the patient died. The 1 mission cancelled was due to the fact that the patients passed away in the PHU.

♦ 'Operational reasons' - this type of mission outcome has strong correlation with the ambulance technical problems. The table above shows that 11 (45.8%) of the aborted missions occurred because of technical problems with the ambulances in the month of March compared to February with 54.6% of aborted missions relating to 'operational reasons'

♦ 'Other Means of transportation' – refers to a situation where the patients or families of the patient decides to employ other medium of transportation after requesting for an ambulance. The February data shows that 4 (16.7%) of the aborted missions occurred because the patients used other means of transportation.

♦ 'Refuse Referral' - the data showed that only one patients refused to be transported to the required health facility.

♦ '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 4 (16.7%).

♦ 'Other reasons' includes 'no-need' of the ambulance (1).

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Chapter– 4 BEDS

4.0 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	42	54	64	72	79
Makeni Government Hospital	68	42	30	70	43	61
Mattru UBC Hospital	36	45	12	83	19	47
Connaught Government Hospital	235	18	0		24	25
Kailahun Government Hospital	38	41	37	46	42	42
Kambia Government Hospital	49	67	0		35	55
Kenema Government Hospital	123	46	41	68	63	58
Kabala Government Hospital	49	40	37	44	55	41
Koidu Government Hospital	74	92	36	87	57	108
Lungi Government Hospital	40	43	20	40	20	33
Moyamba Government Hospital	48	19	24	35	39	49
Ola During Children Hospital	0	0	0		131	95
Princess Christian Maternity Hospital	0	0	134	83	18	
Port Loko Government Hospital	65	0	35	36	20	43
Pujehun Government Hospital	40	51	37	40	35	84
Tonkolilli Government Hospital	49	74	40	25	72	47
34M Military Hospital	82	74	22	91	10	51
King Harman Road Government Hospital	4	85	17	27	15	52
Rokupa Government Hospital	19	72	21	68	26	58
Lumley Government Hospital	12	70	10		4	
Macauley Government Hospital	12		10	31	4	39
Emergency Memorial Hospital	33	91	0		34	86
Total National Bed Capacity	1215		617		838	

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 2,655 beds, which has decreased from its usual 2,672 useable beds.

♦ There are currently no referrals for admission to Lumley government hospitals and Kambia Maternal wing because they are currently undergoing rehabilitation. However, there is a provision for consultation available only for emergency cases that can be further referred if required.

♦ **Emergency Memorial Hospital** provides specialist care to patients requiring surgical care and cannot do so for maternity related complications.

♦ All other facilities listed in the table above provide all the required services 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 **March**, while King Harman Road Government Hospital recorded over 80% average occupancy.

♦ **Maternity Occupancy**: the table shows that no facility reported overcrowding, while the highest percentage average is from Koidu Government Hospital—87%.

♦ **Paediatric Occupancy**: Koidu Government Hospitals reports 108% average bed capacity for March, while all other facilities registered less than 100%.

4.1.Figure 15: National Percentage Bed Occupancy by Depart-
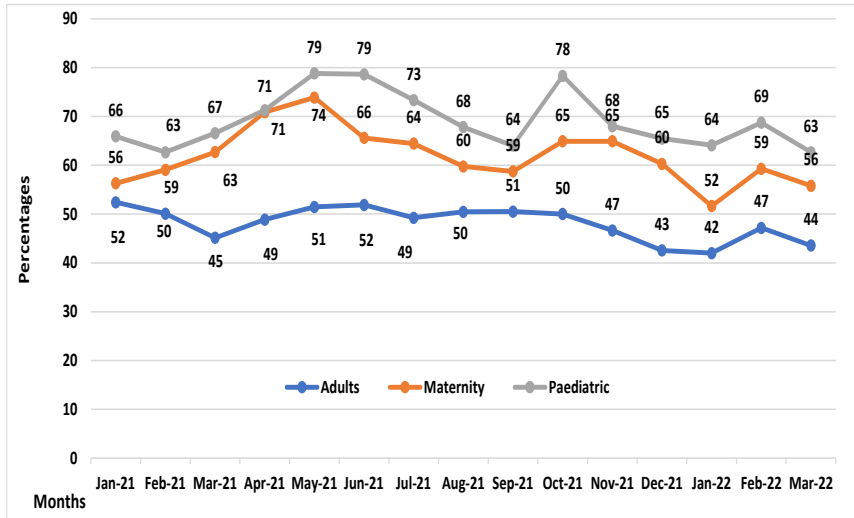
Figure 15 above provides an average percentage bed occupancy by month. Health facilities have various subsectors that are merged to form the major listed departments on the line chart. Since the commencements of 2021, the average bed occupancy has been below 80% for the different departments and all the various health facilities. slight decrease to 63% for the month of March.

Chapter– 5 Referrals

5.0.Table 7: Number of Incoming and Outgoing Referred pa-

From the diagram labelled table 7 adjacent this narrative shows the total of 830 referrals were supported by NEMS. In that number 727 were classified as incoming referrals, while 103 represented the total outgoing referred patients supported. In March, Kenema recorded the highest number of incoming referred patients, while King Harman Road, Kono and Lungi did not report.

No:	Facility	Total Referrals	Incoming Referrals	Outgoing Referrals	NEMS Referrals
	National Referrals by District, March 2022				
	National Total	830	727	103	66
	Nationwide %	100	88	12	8
1	34M	64	35	29	0
2	Bo	5	0	5	0
3	Bombali	11	10	1	0
4	Bonthe	15	15	0	0
5	Connaught	7	7	0	7
6	Emergency	34	21	13	0
7	Kailahun	57	55	2	0
8	Kambia	32	32	0	31
9	Kenema	110	108	2	0
10	King Harman Road	0	0	0	0
11	Koinadugu	54	46	8	13
12	Kono	0	0	0	0
13	Lumley	43	22	21	0
14	Lungi	0	0	0	0
15	Macauley Street	11	4	7	0
16	Moyamba	17	13	4	0
17	ODCH	99	95	4	3
18	PCMH	113	113	0	6
19	Port Loko	50	47	3	0
20	Pujehun	92	92	0	6
21	Rokupa	0	0	0	0
22	Tonkolili	16	12	4	0

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

Number of Incoming Referrals by patients' outcome, March 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
289	40	2	20	359	4	0	0	11	0	725
40	6	0	3	50	1	0	0	2	0	100
35	0	0	0	0	0	0	0	0	0	35
0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	10	0	0	0	0	0	10
2	1	0	0	12	0	0	0	0	0	15
0	0	0	0	7	0	0	0	0	0	7
14	2	0	0	3	0	0	0	2	0	21
9	3	0	3	40	0	0	0	0	0	55
2	1	0	1	28	0	0	0	0	0	32
8	6	0	3	88	0	0	0	3	0	108
0	0	0	0	0	0	0	0	0	0	0
7	5	0	2	30	1	0	0	0	0	45
0	0	0	0	0	0	0	0	0	0	0
0	1	1	1	10	3	0	0	6	0	22
0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	4	0	0	0	0	0	4
6	0	0	0	7	0	0	0	0	0	13
40	11	0	4	39	0	0	0	0	0	94
107	0	0	0	6	0	0	0	0	0	113
6	5	0	6	30	0	0	0	0	0	47
53	5	1	0	33	0	0	0	0	0	92
0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	12	0	0	0	0	0	12

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 (359), while out of the 11 were unable to admit, 40 of those were reported dead. 289 of the total patients were reported to still be in the various facilities receiving care.

5.2.Table 9: Number of Incoming Hospital Referrals supported by Cate-

Facility	Lactating	Non-FHCI	Pregnant	Under 5	EVD Survivor	Yes - other	Total
34M	0	32	3	0	0	0	35
Bo	0	0	0	0	0	0	0
Bombali	0	0	10	0	0	0	10
Bonthe	0	1	9	5	0	0	15
Connaught	0	7	0	0	0	0	7
Emergency	0	9	0	12	0	0	21
Kailahun	3	9	27	15	0	1	55
Kambia	1	2	25	4	0	0	32
Kenema	4	7	67	30	0	0	108
King Harman Road	0	0	0	0	0	0	0
Koinadugu	4	4	20	18	0	0	46
Kono	0	0	0	0	0	0	0
Lumley	0	2	18	2	0	0	22
Lungi	0	0	0	0	0	0	0
Macauley Street	0	1	1	1	0	1	4
Moyamba	1	0	3	9	0	0	13
ODCH	0	10	0	85	0	0	95
PCMH	8	0	105	0	0	0	113
Port Loko	3	8	21	15	0	0	47
Pujehun	0	0	39	53	0	0	92
Rokupa	0	0	0	0	0	0	0
Tonkolili	0	0	0	12	0	0	12
Total	24	92	348	261	0	2	727

Table 9 above explains the categories of incoming referred patients at the various health facilities nationwide for the month of March. EVD survivors have dropped significantly and continued to be zero. The various facilities supported a total 727 incoming referred patients.

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

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5.3. Table 10: Outcome of Referred Patients by Free Health Care Catego-

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	6	0	0	2	15	0	0	0	0	0	23
Non-FHCI	47	7	0	4	31	1	0	0	2	0	92
Pregnant	136	3	0	4	197	3	0	0	5	0	348
Under 5	100	30	2	10	114	0	0	0	4	0	260
EVD Survivor	0	0	0	0	0	0	0	0	0	0	0
Yes - other	0	0	0	0	2	0	0	0	0	0	2
Total	289	40	2	20	359	4	0	0	11	0	725

The March 2022 data shows 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 continues to report the highest number of death

5.4. Table 11: Referral by Health Facilities

REFERRAL HOSPITAL	Jan-22	Feb-22	Mar-22
Tertiary Facility Total	140	77	19
Connaught Hospital	51	16	3
Ola During Children's Hospital	17	9	1
Princess Christian Maternity Hospital	72	52	15
Regional and District Hospital Total	377	206	126
Bo Government Hospital	68	29	6
Bonthe Government Hospital	-	-	-
Kabala Government Hospital	33	31	16
Kailahun Government Hospital	17	5	-
Kambia Government Hospital	56	43	44
Kenema Government Hospital	44	25	3
Koidu Government Hospital	29	26	33
Lungi Government Hospital	6	1	-
Magburaka Government Hospital	8	2	-
Makeni Government Hospital	30	22	2
Moyamba Government Hospital	14	4	2
Port Loko Government Hospital	22	4	3
Pujehun Government Hospital	48	14	17
Segbwema Government Hospital	2	-	-
Other Government Facility	22	16	2
Kingharman Road Government Hospital	3	5	1
Other Government facilities (i.e.Macauley)	2	-	-
Rokupa Government Hospital	15	9	1
34 MILITARY HOSPITAL	2	2	-
Private/NGO facility Total	0	0	0
Emergency	20	7	3
Kamakwie	2	3	1
Masanga	6	1	1
Mattru UBC Hospital	11	4	-
MSF Hospital – Kenema	6	-	-
SERABU	-	-	1
LIFE CARE HOSPITAL	2	-	-
YELE	2	-	-
CHOITHRAM MEMORIAL HOSPITAL	3	4	0
SENDUGU	1	-	-
SHUMA HOSPITAL	1	-	-
CHINESE HOSPITAL	-	1	0
MARCY SHIP	-	-	1
COVID-19 CTC/CCC/ISOLATION	8	-	-
RENDEZ_VOUS	12	6	0

Table 11 shows the NEMS general monthly refer-rals to the main hospitals for the month of March. The table compares the data between January, February and March 2022. You can see that for the month under review (March), the tertiary facilities accounts for the least recipient of referrals (19) as follows:

♦ Connaught Hospital (3), Princess Christian Mater-nity hospital (PCMH) (1), and Ola During Chil-dren's Hospital (ODCH) (15) compared to Janu-ary and February with a total receipt of 140 and 77 respectively. This indicates a gradual decrease in the following months.

♦ The Regional and District Hospitals received 126 for March, a drop down from the previous month. This indicates a drop in the number of patients referred to the Regional and District Hospitals.

♦ Furthermore, the table adjacent to this narratives displays the number of patients referred to COVID-19 Treatment Centres and Isolation Units, with a drop to 0 on the number of con-firmed cases for both February and March 2022. There is a drop in Rendezvous from 12 in January to 6 in February 2022 and zero in March.

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5.5.1Figure 17: Number of Referred Patients by Arrival

The graph labelled figure 17 provides a detailed analysis on patients' arrival at the various hospital where referral coordinators are attached. The data for March 2022 demonstrates that major or most common means of arrival at hospital is through the utilization of other means, which is totally different from the usual.

Number of Incoming Referred Patients Supported by Means of Arrival, Oct 2017 to March 2022
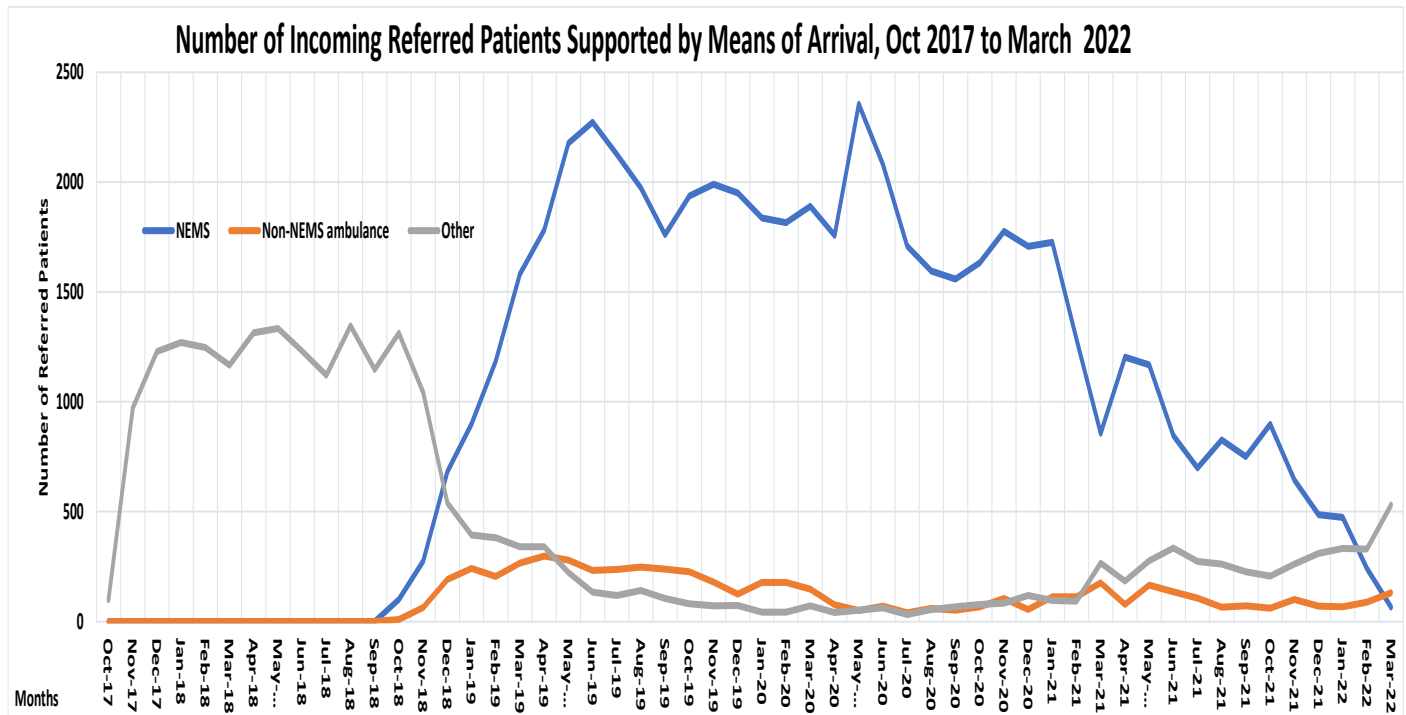
5.2.Table 12: Arrival Methods of the Referrals by Hospital
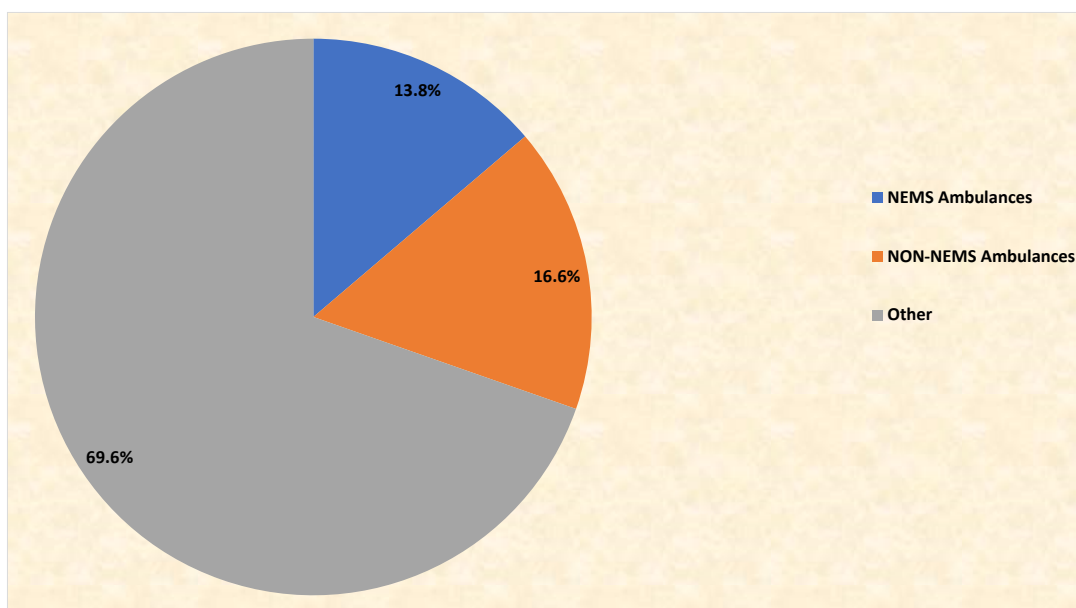
The pie chart labelled figure 12 above, exemplifies the methods of arrival at the various health facilities nationwide for the month of March 2022. 69.6% of the total number of referred cases received by the respective hospitals were transported by other means, while a combined total of 30.4% of the total number of referred cases that used other NEMS and Non-NEMS ambulances of transportation as displayed on the pie chart above.

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Table 12: Arrival Methods of the Referrals by Hospital

REFERRAL FACILITIES	NEMS Ambulances	NON-NEMS Ambulances	Other
Tertiary Facility	**26.9%**	**15.8%**	**57.3%**
34 Military Hospital	0.0%	57.1%	42.9%
Connaught Hospital	100.0%	0.0%	0.0%
Kingharman Road Govt. Hospital	-	-	-
Lumley Govt. Hospital	26.1%	4.3%	69.6%
Ola During Children's Hospital	3.2%	9.5%	87.4%
Princess Christian Maternity Hospital	5.3%	8.0%	86.7%
Rokupa Govt. Hospital	-	-	-
Private/NGO facility Total	**0.0%**	**0.0%**	**100.0%**
Matru UBC Hospital	0.0%	0.0%	100.0%
Regional/District Hospital	**14.4%**	**34.0%**	**51.6%**
Kabala Govt. Hospital	26.1%	4.3%	69.6%
Bo Govt. Hospital	-	-	-
Kailahun Govt. Hospital	0.0%	5.5%	94.5%
Kambia Govt. Hospital	96.9%	0.0%	3.1%
Kenema Govt. Hospital	0.0%	18.5%	81.5%
Koidu Govt. Hospital	-	-	-
Lungi Govt. Hospital	-	-	-
Magburaka Govt. Hospital	0.0%	91.7%	8.3%
Makeni Govt. Hospital	0.0%	70.0%	30.0%
Moyamba Govt. Hospital	0.0%	100.0%	0.0%
Port Loko Govt. Hospital	0.0%	12.8%	87.2%
Pujehun Govt. Hospital	6.5%	3.3%	90.2%
Grand Total	**13.8%**	**16.6%**	**69.6%**

The tabular representation labelled table 12 provides a further breakdown on patients' arrival at secondary and tertiary hospital nationwide for the month of March 2022. For tertiary hospitals, there has been an decrease on the percentage of NEMS arrival method, with Connaught Government Hospital being the only tertiary hospitals in Western Area Urban to register 100% NEMS arrival method, while the remaining percentage is shared among the other means of transportations.

In March, a significant potion of the referrals received were transported through other means of arrival. On the secondary facilities, it is only Kambia Government hospital that reported 96.9%, for NEMS arrival method, while majority of the other facilities recorded zero for NEMS, with Pujehun and Kabala Government Hospitals reporting 6.5% and 26.1% respectively.

5.2.Table 13: Time Taken to Triage

Time Taken to Triage	BO	BOMBALI	BONTHE	FALABA	KAILAHUN	KAMBIA	KENEMA	KOINADUGU	KONO	MOYAMBA	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Mar 2022	Percentage Mar 2022	Grand Total Feb 2022	Percentage Feb 2022
00:00:00 to 00:05:00	6	3	2	4	0	15	2	5	8	2	3	7	1	0	0	58	4.7%	183	17.9%
00:05:01 to 00:10:00	1	0	0	4	0	17	1	3	7	0	0	5	1	0	0	39	3.1%	131	12.8%
00:10:01 to 00:15:00	0	0	0	3	0	5	0	0	10	1	0	1	0	0	0	20	1.6%	62	6.0%
00:15:01 to 00:20:00	0	0	0	0	0	1	0	0	2	0	0	0	0	0	0	3	0.2%	24	2.3%
00:20:00 to 00:30:59	1	0	0	1	0	2	0	0	1	0	0	2	0	0	0	7	0.6%	22	2.1%
00:31:00 to 01:59:59	0	0	0	0	0	3	0	1	7	1	0	1	0	0	0	13	1.0%	34	3.3%
02:00:00 to 02:59:59	0	0	0	0	0	1	0	0	1	2	0	0	0	0	0	4	0.3%	2	0.2%
03:00:00 to 03:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	2	0.2%
04:00:00 to 04:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
05:00:00 to 05:59:59	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0.1%	2	0.2%
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%	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%	2	0.2%
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%	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%	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	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	8	3	2	12	0	44	3	10	36	6	3	16	2	0	0	145	11.7%	467	45.6%

The table above delineates the time taken by Call Centre to triage a patient when a call is received. In March 2022, call centre took less than 15 minutes to triage **9.4%** of the total Calls received, while in February 2022, it took less than 15 minutes to triage **36.7%** of the total calls supported, with a difference of **27.3%** decrement. The calls data shows that 90.6% 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 February , which showed a total of **63.3%** of the Calls supported took more than 15 minutes to triage a patient and make a decision to send an ambulance.

5.2.1.Table 13: Time Taken to Reach the Target

Time Taken to Reach the Target	BO	BOMBALI	BONTHE	FALABA	KAILAHUN	KAMBIA	KENEMA	KOINADUGU	KONO	MOYAMBA	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Mar 2022	Percentage Mar 2022	Grand Total Feb 2022	Percentage Feb 2022
00:00:00 to 00:30:59	0	0	0	2	0	30	0	13	22	2	0	6	1	4	18	76	89.4%	90	40.4%
00:31:00 to 01:59:59	0	0	0	0	0	1	0	0	6	0	0	1	0	0	0	8	9.4%	108	48.4%
02:00:00 to 02:59:59	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1.2%	15	6.7%
03:00:00 to 03:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	7	3.1%
04:00:00 to 04:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	2	0.9%
05:00:00 to 05:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	0	0.0%
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%	1	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%
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%	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%
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%	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	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	0	0	0	2	0	31	0	13	28	2	0	8	1	4	18	85	100.0%	223	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 target-ed Peripheral Health Unit (PHU) or a health facility is shown in the table above. In March 2022, **98.8%** of the missions transported took less than 3-hour to reach the targeted PHU, while in January **95.5%** of the total missions supported by NEMS took less than 3-hour to get to the particular health facility that requested for an ambulance. Those missions that took more than 2-hour to locate the respective PHUs, were **1.2%** in March 2022.

5.2.2.Table 14: Time Taken to Reach the Hospital

Time Taken to Reach the Hospital	BO	BOMBALI	BONTHE	KAILAHUN	KAMBIA	KENEMA	KOINADUGU	KONO	MOYAMBA	PORT LOKO	PUJEHUN	TONKOLILI	WESTERN AREA RURAL	WESTERN AREA URBAN	Grand Total Mar 2022	Percentage Mar 2022	Grand Total Feb 2022	Percentage Feb 2022
00:00:00 to 00:30:59	0	0	0	0	14	0	2	6	0	0	0	0	0	9	31	32.6%	84	28.2%
00:31:00 to 01:59:59	0	0	0	0	14	0	7	12	0	0	6	0	2	6	47	49.5%	170	57.0%
02:00:00 to 02:59:59	0	0	0	0	0	0	0	1	0	0	0	0	1	0	2	2.1%	15	5.0%
03:00:00 to 03:59:59	0	0	0	0	3	0	0	0	2	0	0	1	0	1	7	7.4%	5	1.7%
04:00:00 to 04:59:59	0	0	0	0	0	0	1	1	0	0	0	0	0	0	2	2.1%	12	4.0%
05:00:00 to 05:59:59	0	0	0	0	0	0	0	3	0	0	0	0	0	0	3	3.2%	2	0.7%
06:00:00 to 06:59:59	0	0	0	0	0	0	1	1	0	0	0	0	0	0	2	2.1%	5	1.7%
07:00:00 to 07:59:59	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1.1%	1	0.3%
08:00:00 to 08:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	1	0.3%
09:00:00 to 09:59:59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	3	1.0%
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%
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	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	0.0%
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%
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%
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%
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%
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%
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%
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%
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%
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%
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%
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	0	0	31	0	12	24	2	0	6	1	3	16	95	100.0%	298	100.0%

After locating the health unit that requested for an ambulance, the ambulance team then travel 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 March 2022, **82.1%** of the missions supported took less than 3 hours to reach the required health facilities, while in February, we saw a total of **95.5%** of the number of missions supported by NEMS within 3-hour to reach their various health facilities, which decreased by **13.4%** to the previous month.

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Chapter– 6 Covid-19

6.0. Table 13: COVID-19 Missions and Samples transported

Typology of Complain	Feb-22	Jan-22	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	-	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	0	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 March 2022. The rigorous measures implemented by the authorities responsible to manage covid-19 in Sierra Leone has contributed to the fall of covid-19 cases in the month of March.

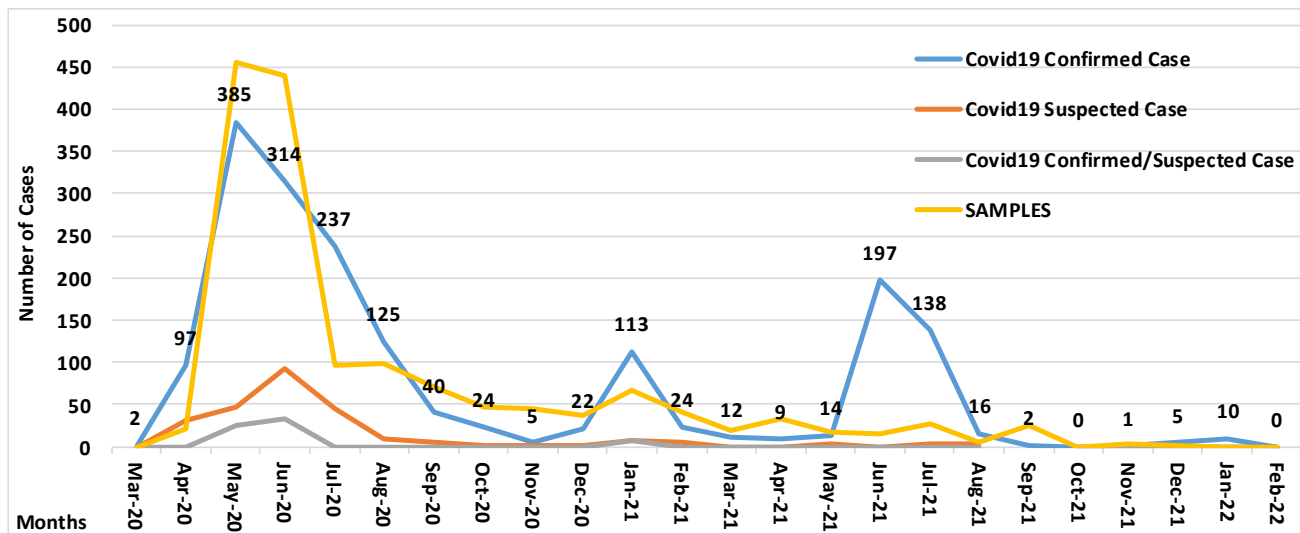### 6.1. Figure 22: Trend of COVID-19 missions (confirmed and suspected cases)

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 a constant drop in the number of confirmed cases since the nation recorded its highest number of confirmed COVID19 cases in May 2020 and commenced a steady drop until January 2021 when it started to rise again. It declined in February 2021 and remained steady until June 2021 when we saw a sharp rise in the number of confirmed cases. The management of the covid-19 cases noted a rise in the numbers recorded for the month of January. However in March 2022 the Covid-19 cases has fallen back to zero with no samples or suspected case transported.

COVID-19 Confirmed Cases
From NEMS data sources related to March 2022 were zero.
The pie chart figure 20 describes the transportation outcome of COVID-19 activated missions. Overall, the data showed that there are no covid-19 cases to be transported.

A detailed analysis of the number of coronavirus (COVID-19) cases is done here. No case was recorded in the month of February 2022.
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
There were no covid-19 suspected and/or confirmed patients, neither was there any sample to be transported.