Who is doing What Where + surge capacity and constraints, Maban, Upper Nile, 4^{th} December 2011

Who	Where	What	Capacity	Functional	Drugs	Logistics	Fuel	Gaps	Surge potential
1. Agency name	1. type and facility name)	1. Services at EACH facility 2.no patient/day (est) 3.no.EPI	1. no.HR and type at EACH facility 2. sufficient?	1.Facilities open?	1. No. Weeks Drugs supply at EACH facility 2. Types of drugs e.g. general MOH /IEHK/PHCU kits 3. Received what date 4.details of any to be delivered	Location of main storage spaces Any logistic issues	1. No. Weeks Fuel supply 2. Any fuel issues	concerns morbidities	No. Mobile Clinics possible or increase surge
					5. Any Drugs supply issues				
Relief International Updates 18.11.11, 21.11.11, 29.11.11 update 4 12 11	Bounj PHCC note same name as Bounj/ Maban PHCC+ (see CHD section) Dangeli	1.OPD 2.Increased numbers 3.Functional cold chain	1 MO for all facilties 2 MA, 2 nurse, 1 vaccinator, 2 MW 15 in 3 HF (details of each?)	Y	18.11.11 Over 3weeks Emergency supplies Received from WHO/SMOH 14.11.11 Received solar fridge around 23.11.11, installed 29.11.11 ?	22.11.11 Not enough transport for team to take to Doro and Sayda Camp Communication, mobile network intermittent RH, hygiene kits short, need delivery in Maban		20 ANC at Doro, 6 delivered by 21.11.11 RH, hygiene kits short, need delivery in Maban Awaiting RH	
	PHCU	2.Increased numbers	MW					kits ?from UNICEF	
	Gasm Alla PHCU	1.OPD 2.Increased numbers	1 MW 1 registrar	Y	?			Holds the only functional	
	mobile clinic since 14.11.11 handing	OPD, ANC (with LLTN), EPI EPI:779 by 22.11.11 EPI: 1105 by 28.11.11 ANC: 632 by 28.11.11 OPD: 1145 by 28.11.11 Possibly training TBAS	5 staff (type?) 1 CO (RI) 4 nurses (UNHCR)1 MA, 1nurse, 1MW used to work now in bounj PHCC	У	?			cold chain in Maban	

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1. Agency name	1. type and facility name)	1. Services at EACH facility 2.no patient/day (est) 3.no.EPI	1. no.HR and type at EACH facility 2. sufficient?	1.Facilities open?	1. No. Weeks Drugs supply at EACH facility 2. Types of drugs e.g. general MoH/IEHK/PHCU kits 3. Received what date 4. details of any to be delivered 5. Any Drugs supply issues	Location of main storage spaces Any logistic issues	1. No. Weeks Fuel supply 2. Any fuel issues	concerns morbidities	No. Mobile Clinics possible or increase surge
					18.11.11 Recent MOH delivery, should be enough for 3 months for normal pt/day all facilities				
MRDO (implementing partner	Liang PHCU	1. PHC, OPD, ANC 2. Av 26 patients per day 3. No EPI	1. 2 CHW, 1 MW 2. Sufficient	Y	1. 15 weeks 2. PHCU kit 3. 22 nd November	Liang: storage in PHCU. Poor communications and radio not working. No Sat phone	No fuel required, no lab or EPI services	Accessibility is a problem, Liang is cut off by the	Mobile clinic probably not possible
Save the Children in SS) Updates 18.11.11, 21.11.11, 23.11.11, 28.11.11 No new updates	Thonkayo PHCU	1. PHC, OPD, ANC 2. Patients per day not yet known 3. No EPI	1. 2 CHW, 1 MW 2.Sufficient	Y	1. 15 weeks 2. PHCU kit 3. 22 nd November	Thonkayo: Storage in PHCU. Poor communications, cut off by river and road access not good because it is inland and roads are bad.	No fuel required, no lab or EPI services	river. Accessibility a problem	
	Thougye PHCU	increased pt/day?? Prev 80/wk??? 1. PHC, OPD, ANC 2. Av 15 patients per day 3. No EPI	1. 2 CHW, 1 MW 2. Sufficient	Y	1. 15 weeks 2. PHCU kit 3. 19 nd November	Thougye: Storage in PHCU. Poor communications but closer to the Bunj. Accessibility better.	No fuel required, no lab or EPI services		
	Sheeta / Sheta PHCU	Increased pt/day 1. PHC, OPD, ANC 2. Av 50 patients per day (prev61/wk) 3. No EPI	2 CHW, 1 MW	Y	1. 15 weeks but increased patients mean drugs may not last this long 2. PHCU kit 3. 20 th November	Sheta: Storage in PHCU. Poor communications and far from Bunj. Close to Blue Nile border. Can be accessed by 4x4	No fuel required, no lab or EPI services	Facility in need of full renovation. Lack of EPI.	

MRDO	Puomki / New Guffa PHCU	Increased pt/day 1. PHC, OPD, ANC 2. Av 60 patients per day prev 100/wk 3. No EPI	2 CHW, 1 MW	Y	1. 15 weeks but increased patients mean drugs may not last this long 2. PHCU kit 3. 22 nd November	New Guffa: Drugs stored 1KM from PHCU. Facility in need of renovation. Communications poor. Accessible.	No fuel required, no lab or EPI services.	Semi permanent structure of the PHCU to be improved. Lack of EPI.	
	Nila PHCU	1. PHC, OPD, ANC 2. Av 35 patients per day prev 30/wk 3. No EPI	2 CHW, 1 MW	Y	1. 15 weeks but increased patients mean drugs may not last this long 2. PHCU kit 3. 22 nd November	Nila: Storage within the PHCU. Poor communications. Accessible.	No fuel required, no lab or EPI services	Lack of EPI unless outreach is done from Bunj or Doro.	

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	Bugaya PHCU	OPD			5. Any Drugs supply issues		?	?	
County Health Department Updates 28.11.11 Update via Samaritans purse 4.12.11	Bounj PHCC + Also known as Buny / Benkoma / Maban PHCC+ (county hospital) note same name as Bounj PHCC (see under Relief international)	OPD ANC, OPD, 2 wards 50 beds each, delivery room, ANC, CHD office, Pharmacy, lab, A room drug storeroom being converted to an opertating lab see under Samaritan purse			From SMOH / WHO 14.11.11 Samaritans Purse have some supplies for their services (see under SP) Received some supplies from MSF B ?30 .11.11	CHD has 1 ambulance			
	Jamum PHCU	OPD ANC, EPI (when kersone for cold chain)					Jamum: no kersone for cold chain		
	Jinkuatta PHCU	OPD ANC					COIU CIIdiil		
	Khor Tumbak PHCU	OPD ANC							
	Thauye PHCU	OPD		mrdo					

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SIM Update via secondary sources	Doro PHCC 30 mins walk from Doro Camp	OPD expat SIM left, but will go back 1.OPD 2. previously 70/day now 50 to 100/day	No surgical HR But has equipment	yes	5.low essential drugs e.g. amoxycillin, paracetamol, and anitmalarials	Has surgical equipement but no HR		1. charge a consultation fee of 1 SDG	

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MSF B Updates 18.11.11, 21.11.11, 26.11.11, 29.11.11 Updated 30.11.11 updated 4.12.11	Doro Camp Static Facility Doro Area Mobile Facility	Assessment team arrived 21.11.11. Most likely to intervene see below OPD, ANC, EPI, ATFC (taking over form RI) OPD, ANC, EPI TFC Will only start if increased numbers, and most likely not	New fc, epreco,admin co, log 2 log, 1 watsan, 1 helaht promotore, 2 co, 1 ma, 1 nurse All expat and regional Recruiting local chw, mw mw driver, cleaner	started when??? 28.11.11 seeing >100/day 1 delivery; ast week	Have request IEHK Kit from WHO or UNICEF: awaiting supplies Received antimalarials 29.11.11 Have requested Vaccines from UNICEF Have requested plumpy nut from UNICEF Transport today or tomorrow Maban Will receive from unicef	Orders have been put in internationally for drugs Planning to build latrines at health facility and for MSF site Send barge 25.11.11 with supplies 9 in last trimester ANC on saturday On Thursday this week will send new dr and nruse and regional mw Sent cold chain to Maban. Freezer and fridge have generator Asked unicef for	? Msf b want to do IPD Goal ITFC Sp operating	As	Mobile clinic planned-possible if necessary Can support Bounj PHCC+ with IPD,, ITFC and deliveries but Samaritan's Purse there so not necessary at present
_	Triage Point at border Crossing Bounj PHCC+	Gave medical supplies ? what	Hasn't started yet. Triage and poss epi???			vaccines Relief international have vaccines and solar fridge			

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GOAL Updates 18.11.11, 28.11.11 Updated	Maban county Doro Camp	Assessment team arrived 21.11.11. with SP Assessing how to integrate agency health workers that have come from Blue Nile, support Bugaya PHCU possibly, Doro Camp, health and WASH Bugaya PHCU approx. 275 consultations per month, no EPI (refugees are not moving to this area, it is currently inaccessible by vehicle).	1. Bugaya staff CHW x 1, dispenser, TBAs, CHPs	Yes (Bugaya only)	Drugs in stock Drugs in stock	No access by road	?	No secondary care in Maban – only a PHCC Nutrition: MUAC showed 4% SAM (of 492 screened) No IDSR system No CHD	Currently not accessible by road

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					5. Any Drugs supply issues		-		
Samaritan's Purse Updates 18.11.11, 28.11.11 Update 4 12 11	Maban county Doro Camp	Assessment team arrived 21.11.11. with GOAL. Seeing how to integrate agency health workers that have come from Blue Nile, (had 70in hospital in Kumruk) support Doro PHCU possibly	Surgical Capacity Nurses (20) in Doro Camp (numbers NOT working		1have durgs????duration 2? 3? 4? 5 need RH kits could benefit from trauma / surgical kits if available Challenges procuring nutrition commodities	Have storage , vehicles and air transport	Fuel not an issues	Need lighting, power and running water at Maban PHCC+ Requesting RH Kits from? Need surgical / trauma supplies Using ouwn nutritional commodity stock to	Can supply basic kits to outlying PHCUs
	Maban / Bounj PHCC+	1.provide emergency surgery & obstetric care as of 3.12.11(converted drug store) Will try to establish stabilisation centre for OTP referrals from MSF B and RI	1 surgical doctor (from Kumruk programme) SMOH want him to support CHD2 expat medical/surgical staff, 12 national medical staff	Yes operating out of PHCC at request of Maban commissioner				support SC No current CHD in Maban making HUGE challenges for all health NGO's	

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ICRC Updates 17.11.11, 28.11.11	SUPPORTING Malakal Teaching Hospital, Malakal	Surgical team and supplies	1 full team: 1 surgeon, 1 OT nurse, 1 aneasthetist, 1 ward nurse	у	Sufficient	Malakal Can support with medevac if necessary although only 1 plane for whole country			Can send surgical team to the field in emergency
SMOH Updates 17.11.11, 28.11.11	Malakal Teaching Hospital	Hospital with surgical services	Surgery: 1 surgeon (from Kenyan Cooperation) and 4 surgical staff	У	Received from ICRC Received from WHO: trauma Kit, 11.11.11?			Need quick coordinated medevac from Maban	
	Maban County health Department	Gave: SMOH/ WHO IEHK ?amt to RI and County Hospitaldate? 14.11.11 SMOH gave CHD supplies 150 box IV fluid,50 box antibx 22.11.11 SMOH/ UNICEF gave solar fridge and installed 28.11.11 to Bounj PHCC	Giving 1 CO, 1MA To be used as needed still in Renk until possible to travel						

Who	Where	What	Capacity	Drugs	Logistics	Fuel	Gaps	Contacts
1. Agency name	1. type and facility name)	1. Services at EACH facility	1. no.HR and type at EACH facility	1. Drugs, vaccines, kits available for partners	1. Location of main storage spaces	1. No. Weeks Fuel supply	1. concerns	1. Name, email, phone
			2. sufficient?		2. Any logistic issues	2. Any fuel issues		
IMA Update 30.11.11	SUPPORT	Going 7th to 9 th December Install v sat, HF						
	County Health Department	radio to assist with weekly reporting, IDSR and DHIS						
		Will also assist CHD in coordination meeting in Maban 8 th December						

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Who	Where	What	Capacity	Drugs	Logistics	Fuel	Gaps	Contacts
1. Agency name	1. type and facility name)	1. Services at EACH facility	1. no.HR and type at EACH facility 2. sufficient?	Drugs, vaccines, kits available for partners	Location of main storage spaces Any logistic	1. No. Weeks Fuel supply 2. Any fuel	1. concerns	1. Name, email, phone
					issues	issues		
WHO Updates 18.11.11, 28.11.11	Malakal office	Preposition emergency drugs/ Core pipeline Emergency coordination at makalal and maban level as cluster lead Disease surveillance EPI support	1 IFP 1 NPHO 1 STOP 1 NFP	24.11.11Core pipeline State Kit type Trauma IEHK Diarrhoea CES 10 6 8 Upper Nile 1 1 1 EES - 1 1 WES 1 1 - NBeG 1 - - Wbeg - 1 1 Jong 1 1 1 Lakes 1 1 1 Unity 1 1 1 Warrap 1 1 1 Abyei 1 1 1	Drugs stored at SMOH			For supplies Contact Dr allan ampairwe@gmail.com EHA Juba Dr Fazal (on leave) fazalather@yahoo.com 09255 555 80 WHO Malakal Emmanuel Timothy ganjwokwho@yahoo.com 09121 677 52 WHO Malakal
	Supplies giv Malakal Tea Hospital, M Maban CHE MSF B	aching Hospital, alakal	·	ppliesdate??, mectizan tablets 25.11.11 lieswhat when ??14.11.11				

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Who	Where	What	Capacity	Drugs	Logistics	Fuel	Gaps	Contacts
1. Agency name	1. type and facility name)	1. Services at EACH facility	1. no.HR and type at EACH facility 2. sufficient?	1. Drugs, vaccines, kits available for partners	Location of main storage spaces Any logistic issues	1. No. Weeks Fuel supply 2. Any fuel issues	1. concerns	1. Name, email, phone
UNICEF Updates 18.11.11, 28.11.11	Malakal office Supplies Maban C Bounj PH MSF B	HD		y supplieswhat when e and installed 28.11.11	Core pipeline Drugs stored at Vaccines with SMOH		Prepositioning of vaccines at Maban level to be done	For supplies / cold chain information Contact Dr Patti Health and nutrition Malakal koronyapatti@yahoo.com psamuel@unicef.org phone: Dr. Paula Nuer Health and Nutrition Wau pnuer@unicef.org Dr Daniel EPI Juba dngemera@unicef.org 0955 355 890 Dr Isaac EPI Juba imgobina@unicef.org phone

Who	Where	What	Capacity	Drugs	Logistics	Fuel	Gaps	Surge potential
1. Agency name	1. type and facility name)	1. Services at EACH facility	1. no.HR and type at EACH facility 2. sufficient?	1. Drugs, vaccines, kits available for partners	Location of main storage spaces Any logistic issues	1. No. Weeks Fuel supply 2. Any fuel issues	1. concerns	1. Name, email, phone
UNFPA Updates 18.11.11	Malakal	Preposition RH kits at malakal CMR mapping and support		Prepositioned kits Need core pipeline report				For supplies and information contact Dr Abraham Emergency coordinator Juba thubo@unfpa.org
		Gave:						phone: 0955841043, 0912573299

Who	Where	What: meeting	What: mapping	What: other
Maban County Task Force Updates 30.11.11	Maban	Meeting 8.12.11	To Build on WWW+ 22.11.11	
Malakal Task Force Updates 15.11.11, 28.11.11	Malakal SMOH	14.11.11 23.11.11 28.12.11 Next meeting 5.12.11		
Juba Health Cluster Updates 18.11.11	Juba WHO	18.11.11 Next meeting 6.12.11	www+ 22.11.11 next due 23.11.11. Update 28 Nov sent GIS map: due 22.11.11 (Produced and distributed 26 Nov)	CMR mapping due 23.11.11 (UNFPA)

Please note the county wide response is led by Upper Nile SMOH and Task Force. Juba Health Cluster supports SMOH. Doro camp response is led by UNHCR. As such, all county information should be given as a priority to Maban Task Force (led by CHD, WHO support) and Malakal Task Force (led by SMOH, WHO support).

Guide to filling table

This table is serves as a tracking document as well as a tool to determine gaps. It does not reflect overall humanitarian situation but WWW and resources, constraints in health when any extra information is added: it is dated when (see examples below)

it is noted that situations are dynamic, and information reflected may not be entire due to delays in real time sharing of information

Who	Where	What	Capacity	Functional	Drugs	Logistics	Fuel	Gaps	Surge potential
1. Agency name And dates of update	1. type and facility name)	1. Services at EACH facility	1. no.HR and type at EACH facility	1.Facilities open?	1. No. Weeks Drugs supply at EACH facility	Location of main storage spaces	1. No. Weeks Fuel supply	1. concerns	No. Mobile Clinics possible or increase surge
e.g. Help the People, updates 12.11.11, 17.11.11	Facility name County hospital / PHCC / PHCU / mobile clinic e.g. BounjPHCC	Primary Health Care (PHC), Outpatients (OPD), vaccinations (EPI), antenatal care (ANC), inpatient (IPD), surgery (SX) 2.no patient/day (est) in OPD e.g. 14.11.11:150/day; 22.11.11 200/day 3.no.EPI Done in reporting period for measles, polio, total e.g. EPI measles 327 from 18 to 22.11.11	Doctor(Dr), Clinical officer (CO), Medical assistant (MA), Medical officer (MO), vaccinator (EPI), CHW, drug dispenser, nurse, midwife (MW) e.g. 14.11.11: 2 CO, 1 nurse. 19.11.11:4 MW, 2 CO, 1 nurse 2. sufficient?	i.e. open during this reporting period? Yes / no	e.g. on 11.11.11 2 weeks supply. 15.11.11 3months supply. 23.11.11 4 months 2. Types of drugs IEHK/PHCU kits / MoH /emergency supplies 3. Received what date and from e.g. 14.11.111 IEHK from WHO; 22.11.11assorted drugs from HQ juba 4. details of any to be delivered e.g. in 2 weeks from HQ 5. Any Drugs supply issues Shortages, out of date, insufficient, certain types needed	e.g.is it in health facility, in main centre, in county 2. Any logistic issues e.g. lack of storage space, road access,	2. Any fuel issues e.g. none in maban county, commercial stock outs, being stolen	Logistic / humanitarian access / 2. morbidities Main illness being seen, or any medical concerns e.g AWD/ malaria/ RH / SGBV	