HEALTH INFORMATION BULLETIN

Using Health Information for Decision making with evidence based data

1. UTILIZATION

Hospital Utilization Reporting Facility by Divisions - 3rd Quarter 2013

Central Divisions	Western Divisions	Northern Divisions	Eastern Divisions
CWM Hospital	Ba Mission Hospital	Labasa Hospital	Cicia Hospital
Korovou Maternity Hospital	Lautoka Hospital	Nabouwalu Hospital	Kabara Health Centre
Navua Maternity Hospital	Nadi Hospital	Rabi Health Centre	Lakeba Hospital
St Giles Hospital	Naiserelagi Maternity Hospital	Savusavu Hospital	Levuka Hospital
Tamavua Hospital	Rakiraki Hospital	Seaqaqa H/C	Rotuma Hospital
Vunidawa Hospital	Sigatoka Hospital	Wainikoro Health Centre	Vunisea Hospital
Wainibokasi Hospital	Tavua Hospital	Waiyevo Hospital	

The following details the hospital utilization for 3rd Quarter 2013 by Divisional & Sub-divisional **Hospitals**

No	Institution	Number of	Number of	Total	Total	Total	Occupancy	Daily Bed	Aver Length
		Outpatient	Beds	Admission	Discharge	Patient Days	Rate	State	of Stay
1	CWM Hospital	35,134	481	5,571	5,539	24,708	55.83	268.6	4.5
2	Navua Hospital	1,490	12	250	201	489	44.29	5.3	2.4
3	Vunidawa Hospital	4,601	24	139	133	453	20.52	4.9	3.4
4	Korovou Hospital	823	16	195	145	589	40.01	6.4	4.1
5	Nausori Hospital	5,754	17	584	433	717	45.84	7.8	1.7
6	Wainibokasi Hospital	937	12	211	210	642	58.15	7.0	3.1
	Sub-total	48,739	562	6,950	6,661	27,598	53.38	300.0	4.1
7	Lautoka Hospital	48,603	340	5,889	4,398	15,548	49.71	169.0	3.5
8	Nadi Hospital	20,486	79	904	622	2,938	40.42	31.9	4.7
9	Sigatoka Hospital	14,251	69	857	857	2,727	42.96	29.6	3.2
10	Ba Mission Hospital	16,280	55	687	416	1,828	36.13	19.9	4.4
11	Tavua Hospital	24,856	30	329	280	786	28.48	8.5	2.8
12	Rakiraki Hospital	11,017	27	261	205	793	31.92	8.6	3.9

	Sub-total	135,493	600	8,927	6,778	24,620	44.60	267.6	3.6
13	Labasa Hospital	19,394	182	2,947	1,703	8,970	53.57	97.5	5.3
14	Savusavu Hospital	9,426	56	571	417	1,387	26.92	15.1	3.3
15	Waiyevo Hospital	4,281	33	351	315	930	30.63	10.1	3.0
16	Nabouwalu Hospital	3,188	26	189	178	641	26.80	7.0	3.6
	Sub-total	36,289	297	4,058	2,613	11,928	43.65	129.7	4.6
17	Levuka Hospital	5,941	40	220	98	493	13.40	5.4	5.0
18	Vunisea Hospital	1,607	22	98	89	279	13.78	3.0	3.1
19	Lakeba Hospital	1,083	12	65	63	230	20.83	2.5	3.7
20	Lomaloma Hospital	1,214	16	24	20	84	5.71	0.9	4.2
21	Matuku	303	5	10	9	26	5.65	0.3	2.9
22	Rotuma Hospital	1,126	12	28	28	70	6.34	0.8	2.5
	Sub-total	11,274	107	445	307	1,182	12.01	12.8	3.9
	TOTAL	231,795	1,566	20,380	16,359	65,328	45.34	710.1	4.0
	GRAND TOTAL	238,056	1,809	20,608	16,541	74,240	44.61	807.0	4.5

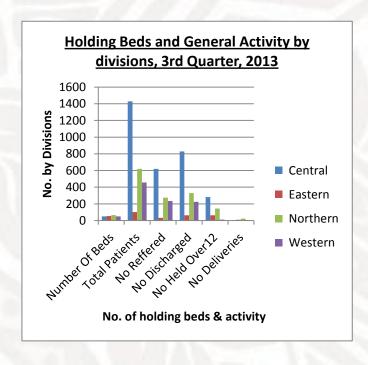
SPECIALISED AND PRIVATE HOSPITALS

No	Institution	Number of	Number of	Total	Total	Total Patient	Occupancy	Daily Bed	Average Length
		Outpatient	Beds	Admission	Discharge	Days	Rate	State	of Stay
1	St Giles Hospital	1,911	136	108	87	5,149	41.15	56.0	59.2
2	Tamavua/Twomey Hospital	3,940	91	77	58	3,623	43.28	39.4	62.5
4	Military Hospital		9	11.00		<i>P</i> 4	0.00	0.0	0
5	Naiserelagi Maternity	410	7	43	37	140	21.74	1.5	3.8
	Sub-total	6,261	243	228	182	8,912	39.86	96.9	49.0

The data is collated from 27 hospitals. The average number of inpatient beds available stands at 22 per 10 000 population with the current reported figures from the facilities [including specialist hospital beds].

There has been a paradigm shift resulting in the greatest number of outpatients seen at Lautoka Hospital than at CWMH. This is due to the closure of the general outpatients department at CWMH. The ALOS ranges from 2 days to 5 days, not including specialist hospitals like St Giles or Tamavua/Twoomey Hospital. The ALOS was calculated with available data.

ii. Health Centre Utilization



The status of holding beds for the 3rd quarter is demonstrated. The Northern division had the greatest number of holding beds; however, the central division had the greatest number of patients and the greatest number of people held over 12 hours. The number of deliveries at the health centre level was also noted to be highest in the North. This is reflective of the greatest number of deliveries occurring at the divisional hospitals in line with the practice of Safe Motherhood which was similar to the 2nd quarter, 2013.

Holding Beds Definition: beds that are used for stabilizing patients that may need referral to the Hospital, observation after treatment and before discharging home and for emergency delivery. Patients should be held for more than 12 hours before referral or discharge.

[Source- PHIS Counting Rules Booklet.]

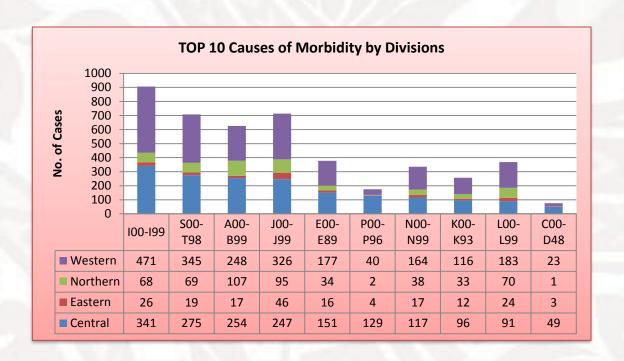
iii. Morbidity Top 10 Causes

Morbidity for the third quarter has diseases of the circulatory system at the top of the list compared to the last quarter where diseases of the respiratory system were the leading cause of morbidity at 22%. The last quarter report ranked diseases of the circulatory system as the third leading cause of morbidity. Diseases of the respiratory system has dropped to rank 2 in the third quarter; injury poisoning and external causes of morbidity has risen to the third leading cause of morbidity in the third quarter. Morbidity data is compiled from inpatient data from hospitals.

TOP 10 Causes of Morbidity 3rd Quarter 2013 [July - September]

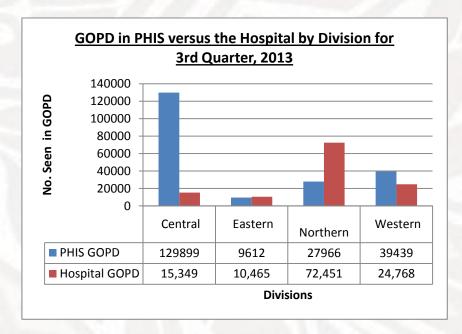
No.	Group Code	Cause Group	Grand Total	% [Percentage]
1	100-199	Diseases of the Circulatory System	906	19.9
2	J00-J99	Diseases of the Respiratory System	714	15.7
		Injury, Poisoning & Certain Other Consequences of		
3	S00-T98	External Causes	708	15.6
4	A00-B99	Certain Infectious & Parasitic Diseases	626	13.8
5	E00-E89	Endocrine, Nutritional & Metabolic Diseases	378	8.3
6	L00-L99	Diseases of the Skin & Subcutaneous Tissue	368	8.1
7	N00-N99	Diseases of the Genitourinary System	336	7.4

8	K00-K93	Diseases of the Digestive System	257	5.7
9	P00-P96	175	3.9	
10	C00-D48	76	1.7	
		4544	100	
		6257	6257	



Most admissions were reported in the Western Division followed by the Central and Northern Divisions in the second Quarter. Admissions due to Diseases of Circulatory System were most common in the Western Division, certain infectious and parasitic diseases were the leading cause for admissions in the other three divisions.

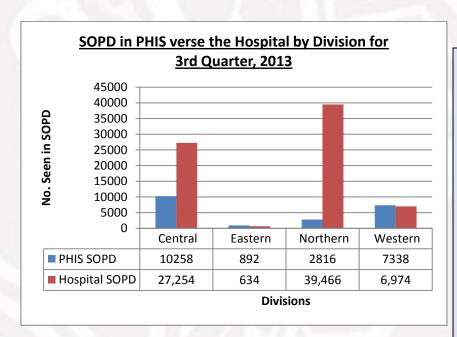
iv. GOPD



For GOPD services there were almost eight times (89% of all GOPD cases in the central division) more patients seen in the Central division at the Health Center level compared to the Hospitals, followed by the Western Division in the 3rd quarter, 2013.

This was contrary in the Northern and Eastern Division where more patients were seen at Hospital level than the Health Center level. This is indicative of the decentralization policy in place at the central division (Suva/Rewa)

v. SOPD



For SOPD services there were more patients seen in the Northern division at the Hospital level compared to Health Center followed by the Central Division. Contrary patterns were seen in the Western and Eastern Divisions where more patients were seen at Health Centre level compared to Hospital level.

This is based on data tracking to HIU on the PHIS platform and the hospital returns.

This provides evidence to suggest that more needs to be done in the area of SOPD decentralization in the Northern and Central divisions to ensure better community access to SOPD services.

2. <u>NCD</u>

i. Cancer

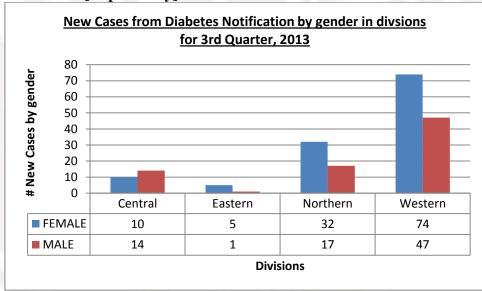
c) Top Five for Male & Female

2013	Female	2013	Male
Cervix	40	Liver	6
Breast	31	Prostate	4
Endometrium	12	Myeloid leukemia	4
Secondary malignant neoplasm of other and unspecified sites	5	Stomach	3
Unknown Primary site	3	Rectum	3

The leading causes of cancer for females were cervical cancer [25-59 age group]followed by breast cancer [40-70+ age group] in this quarter. Poor recording and poor diagnosis for female cancers yielded secondary malignant neoplasms and unknown primary sites as rank 4 and 5 in the top five. Alternatively, liver and prostate cancers were the two leading causes of cancer in males.

ii. Diabetes

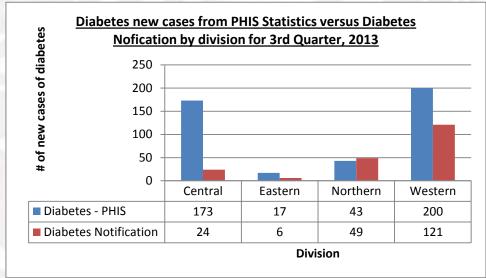
- new cases [steps survey]



The total number of diabetes notification received for new cases were 200 for the entire 3rd quarter. Western Division had a total of 121 new cases which was 7 times more than that was recorded in the 2nd quarter, 2013 when compared followed by Northern Division while Eastern division recorded the Lowest. This figure is grossly under reported as most facilities and officers do not fill or submit the diabetes notification forms as required. Only 15 facilities reported and submitted the Diabetes

notification forms. There is concern as diabetes notification reporting remains quite low from facilities.





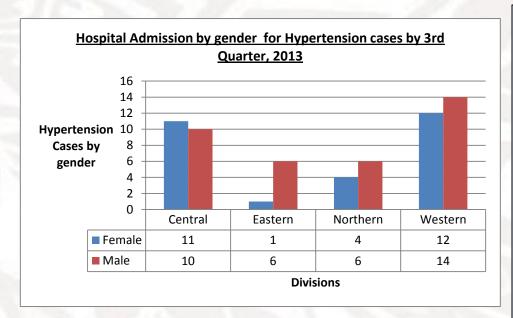
The total number of diabetes notification received for new cases were 200 compared to PHIS 433 which recorded the highest during its NCD screening done at the Health Center, Nursing stations and Zone level by 30- and 30+ for the entire 3rd quarter. For diabetes notification, this figure is grossly under reported as most facilities and officers do not fill or submit the diabetes notification forms as required by age group. Only 15 facilities reported and submitted the Diabetes notification forms where as the new cases that PHIS captures are from its 90 medical areas. More over, Western Division had the highest news cases recorded where by PHIS recorded 200 new cases when compared to Diabetes notification which was 40% more followed by Northern Division while Eastern division recorded the Lowest. Further more, Central Division PHIS recorded 7 times more compared to Diabetes notifications.

iii. Hypertension

a) new cases

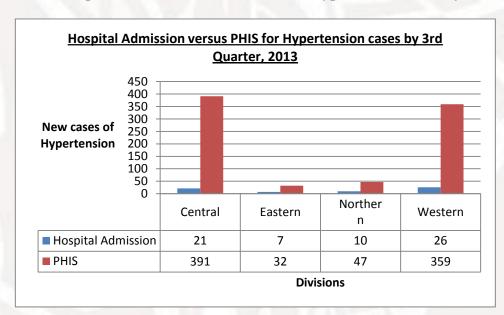
ICD-10			Race			ex					A	ge- grou	ıps					
Code		ı	F(F			1-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70	Grand
		Т	I)	(0)	F	М	4	29	34	39	44	49	54	59	64	69	+	Total
		3	2	Sit	2	3												
I10	Essential (primary) hypertension	1	0	е	6	0	1	1	3	2	1	9	6	10	4	10	9	56
	Hypertension secondary to other																	
I11.0	renal disorder	2	0	0	0	2	0	0	0	0	0	0	1	0	1	0	0	2
	Hypertensive heart disease with																	
111.9	heart failure	2	1	0	0	2	0	0	0	0	0	2	0	1	0	0	0	3
	Hypertensive heart disease																	
112.9	without heart failure	0	1	0	2	1	0	0	0	0	1	0	0	0	0	0	0	1
115.1	Hypertensive renal disease NOS	0	1	1	0	1	0	0	0	0	1	0	1	0	0	0	0	2
	, ,	3	2		2	3												
Grand To	tal	5	3	6	8	6	5 1 1 3 2 3 11 8 11 5 10 9						9	64				

b) Hospital Admission by Gender for Hypertension Cases



This is the 1st time Hypertension new cases is reflected in the quarterly bulletin. The total number of Hypertension notification received for new cases were 64 for the entire 3rd quarter. Western Division had a total of 26 new cases followed by Central Division while Eastern division recorded the Lowest. According to the results male are more vulnerable to hypertension compared to females. This is dependable upon the lifestyle and behavior of an individual. Hypertension new cases for PHIS are gathered during its NCD screening and subsequent clinical case reporting at the Health Center, Nursing stations and Zone level.

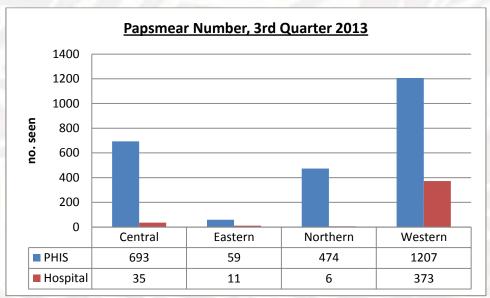
c) Hospital Admission versus PHIS for Hypertension cases by 3rd Quarter, 2013



This is the 1st time Hypertension new cases is reflected in the quarterly bulletin whereby Hospital Admission is compared with PHIS. The total number of Hypertension notification received for new cases were 64 compared to PHIS which recorded 6 times more new cases for the entire 3rd quarter. Hypertension new cases for PHIS is gathered during its NCD screening done at the Health Center, Nursing stations and Zone level by 30- and 30+. Central Division had the highest cases recorded followed by the Western Division while Eastern division recorded the Lowest.

3. MATERNAL HEALTH

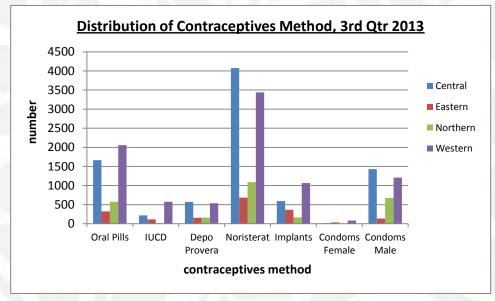
i. Pap Smear



Source: PHIS & Hospital Monthly Return, July – September, 2013

There were a total of 2858 paps smears reported nationally for the third quarter. 85% (reported) of his early detection measure was performed at health centre level and below, signaling the need for resource restructure to enable these lower facilities to instigate early detection of cervical cancer.

vi. Family Planning

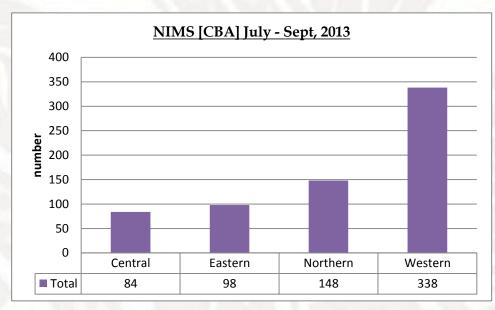


Source: PHIS July - September, 2013

CYP

The CYP shows variability in the different divisions: noristerat and oral pills gave more couple years protection in the Western and Central divisions, followed by condoms in this areas. The Northern division had greater couple years protection with noristerat, followed by condoms and oral pills. The Eastern division also had noristerat giving greater couple years protection followed by implants and oral pills.

vii. NIMS [CBA]



NIMS[CBA] covers the number of women of CBA who have received NIMS in which Western recorded the highest doses given followed by Northern, Eastern and Central. Also this is the first time NIMS[CBA] is been reported in PHIS.

Source: PHIS, July - September, 2013

4. CHILD HEALTH

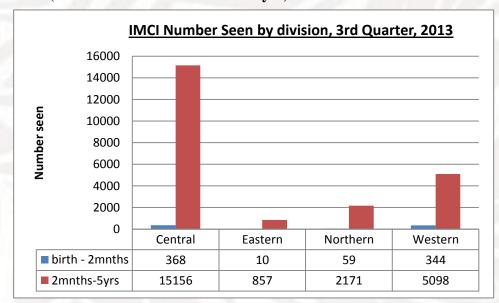
i. Immunization

Source: PHIS, July - September, 2013

Division	Hep BO	BCG0	DPTHe p BHib1	OPV1	Penum occal1	Rotavir us1	DPTHep BHib2	OPV2	Penumoc cal2	DPTHep BHib3	OPV3	Penum occal3	Rotavirus 2	MR1
Cent	2	2	2,546	2,547	2,571	2,560	2,612	2,601	2,518	2,659	2,664	2,656	2,628	2,001
East	10	10	129	128	129	130	200	201	199	238	229	228	210	214
North	16	16	843	841	830	829	886	874	875	832	819	820	813	706
West	5	7	1,795	1,803	1,754	1,763	1,818	1,811	1,760	1,857	1,850	1,824	1,798	1,427
Total	33	35	5,313	5,319	5,284	5,282	5,516	5,487	5,352	5,586	5,562	5,528	5,449	4,34 8

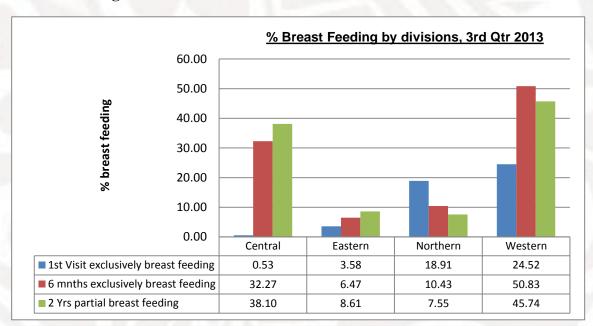
Based on the above figure, estimated coverage of MR1 was about 86.2% This is an improvement from the previous year 3rdQtr estimated coverage of 73%. [This estimation has used \(\frac{1}{4} \) of 2012 live births (20178) as denominator].

ii. IMCI (birth to 2mnths & 2mnths to 5yrs)



Source: PHIS, July - September, 2013

iii. Breast-Feeding

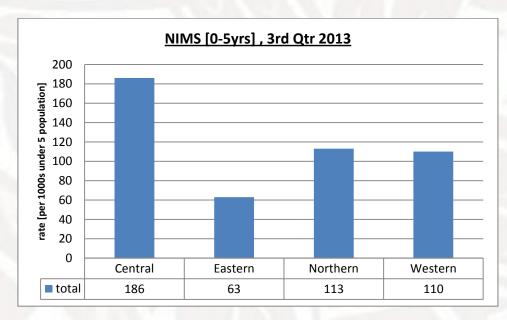


Source: PHIS, July - September, 2013

Western Division recorded more mothers practicing breast feeding during the birth to 6 months, followed by Northern & Eastern Division while Central recorded the lowest. Western Division

recorded 50.83% mothers continued breast feeding after 6 months and up till 2 years compared to Eastern Division recorded less than 6.47% continued after 6months and till 2 years.

iv. NIMS [6months-5yrs]



NIMS[6mnths-5yrs]covers those children between the ages of 6months and 5years whose parent/guardians have consented to receive NIMS doses. Central record the highest children who receive NIMS followed by Northern, Western and Eastern.

Source: PHIS, July - September, 2013

v. Malnutrition [Severe Malnutrition]

number
7
0
1
5

Sourtothus, July – September, 2013

Total of 13 cases of severe malnutrition were reported particularly in the Central followed by western and Northern whereas Eastern has no cases reported.

> Western division recorded the highest coverage for NIMS distribution followed by Central Division while the Eastern and Northern Division recorded none, the reason been that western

5. SCHOOL HEALTH

i. NIMS

School NIMS report by Division, 3rd Quarter, 2013

Division	Number of NIMS doses given	No NIMS Doses coverage in %
Central	4857	33
Eastern	0	0
Northern	0	0
Western	7543	244

division has a higher coverage because the PHIS database picks up the period when the data entry was done. During the 3rd quarter, all School Health Sisters and SDHS's were inform to update their NIMS data as pervious Quarter showed that there were under reporting of NIMS. So when they updated the NIMS data in the 3rd quarter period, the system captured the data and the period it was entered is as appears. Eastern and Northern Division has no coverage for NIMS due to the following reasons - Received expired NIMS tablets, Received NIMS in the 4th quarter – so the system will be updated in the 4th Quarter, No NIMS distributed at all in the 3rd Quarter. [Source: PHIS Counting Rules Booklet]

ii. HPV

<u>School HVP report by Division, 3rd Quarter, 2013</u>

	HP	V 1	HPV3			
Division	Number	HPV1 coverage	Number	HPV3 coverage		
Central	309	4	927	11		
Eastern	22	1	41	1		
Northern	76	1	122	2		
Western	45	1	834	12		
Total	452	7	1924	26		

HPV (Human Pailloma Virus) is one of the new vaccines that have been added. Three doses are given to 12 year old girls at two-monthly intervals. The human papilloma virus (HPV) vaccine prevents infection with certain species of human papillomavirus associated with the development of cervical cancer, genital warts, and some less common cancers. Central Division had the highest HVP coverage followed by the Western Division. Eastern division recorded the lowest HPV coverage. The PHIS Online system captured the data and the period it was entered. The reasons for such a low HPV coverage was because most of the forms received at HIU did not contain HVP data. In the 3rd quarter the School Health Sister and the SDHS were informed to update their HVP in the School Summary Form and also enter it online. Most of the coverage will be reflected in the 4 Quarter as most of the entries were done in this period. [Source: PHIS Counting Rules Booklet and http://en.wikipedia.org/wiki/HPV vaccine]

iii. RHD School RHD report by Division, 3rd Quarter, 2013

Division	RHD Screen	Total School Roll	RHD screen %
Central	328	14586	2
Eastern	280	295	95
Northern	0	2325	0
Western	3927	3094	127
Total	4535	20300	22

For RHD (Rheumatic Heart Disease) Screen, record the number of children screened. Rheumatic fever is an inflammatory disease that may affect many connective tissues of the body, especially those of the heart, joints, brain or skin. It usually starts out as a strep throat (streptococcal) infection. Anyone can get acute rheumatic fever, but it usually occurs in children between the ages of 5 and 15 years. About 60% of people with rheumatic fever develop some degree of subsequent heart disease. Early detection can prevent this disease from developing more worst. The PHIS Online system captured the data and the period it was entered that why Western Division recorded the highest followed by the Eastern Division while the Northern division recorded the lowest. [Source: PHIS Counting Rules Booklet and http://www.heartandstroke.com/site/c.ikIQLcMWJtE/b.3484081/k.5BE1/Heart disease What is rheumatic heart disease.htm]

iv. BMI

School BMI report by Division, 3rd Quarter, 2013

Division	Obese %	Under Weight %
Central	7	8
Eastern	10	13
Northern	16	10
Western	11	13
Total	9	9

The PHIS school summary form records the BMI status of children. Over the years the obesity amongst children has increased due to the behavior and pattern of eating followed by the lifestyle that have contributed to an increase in NCD which is a major concern. According to the results Northern Division recorded the highest obesity percentage amongst Children compared with the four division followed by the Western Division while Central Division recorded the lowest Under weight [Source: PHIS Counting Rules Booklet].

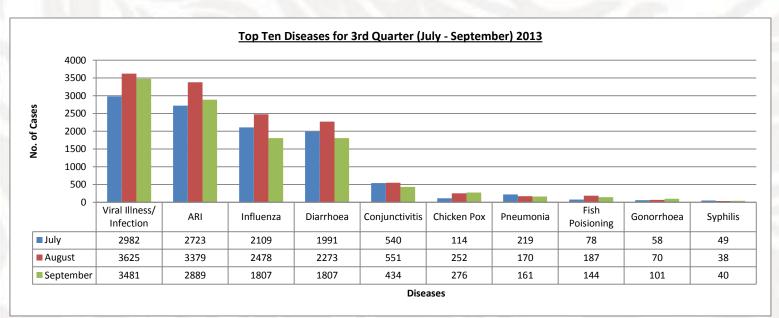
Notifiable Disease

- i. Notifiable Disease table
- ii. Top 10 CD cases
- iii. LTD by Divisions
- iv. Top 10 by sub-division [per chart]
- v. TB reports
- vi. HIV

Data source for the Notifiable diseases are obtained from the Notifiable Diseases Certificates, every week – ending

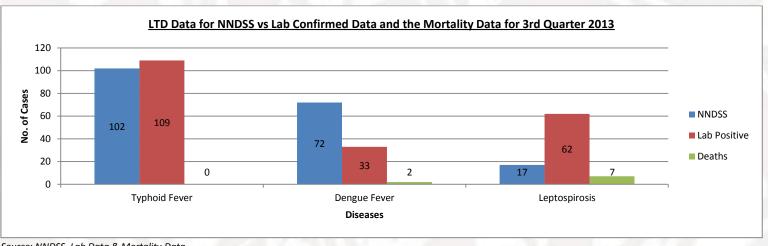
No.	Diseases	July	August	September	Total
1	Acute Poliomyelitis	0	0	0	0
2	Acute Respiratory Infection	2,723	3,379	2,889	8,991
3	Anthrax	0	0	0	0
4	Brucellosis	0	0	0	0
5	Chicken Pox	114	252	276	642
6	Cholera	0	0	0	0
7	Conjunctivitis	540	551	434	1,525
8	Dengue Fever	35	30	7	72
9	Diarrhoea	1,991	2,273	1,807	6,071
10	Diphtheria	0	0	0	0
11	Dysentry (a) Amoebic	0	0	0	0
	(a) Bacillary	5	12	7	24
12	Encephalitis	0	0	0	0
13	Entric Fever (a) Typhoid	45	38	19	102
	(b) Para Typhoid	0	0	0	0
14	Fish Poisoning	78	187	144	409
15	Ciguatera Fish Poisoning	0	0	2	2
16	Food Poisoning	1	0	1	2
17	German Measles (Rubella)	14	9	10	33
18	Infectious Hepatitis	16	16	13	45
19	Influenza	2,109	2,478	1,807	6,394
20	Leprosy	0	0	0	0
21	Leptospirosis	5	8	4	17
22	Malaria	0	0	0	0
23	Measles (Morbilli)	0	4	1	5
24	Meningitis	6	7	5	18
25	Mumps	2	0	1	3
26	Plague	0	0	0	0
27	Pneumonia	219	170	161	550
28	Puerperal Pyrexia	0	0	0	0
29	Relapsing Fever	1	0	0	1
30	Rheumatic Fever	1	3	2	6
31	Smallpox	0	0	0	0
32	Tetanus	0	0	0	0
33	Trachoma	49	17	37	103
34	Tuberculosis (a) Pulmonary	18	20	5	43
	(b) Others	0	0	0	0
35	Typhus	0	0	0	0
36	Viral Illness/ Infection	2,982	3,625	3,481	10,088
37	Whooping Cough	0	0	1	1
38	Yaws	0	0	0	0
39	Yellow Fever	0	0	0	0

(a) Gonorrhoea	58	70	101	229
(b) Candidiasis	4	8	6	18
(c) Chlamydia	0	0	0	0
(d) Congential Syphilis	3	6	6	15
(e) Gential Herpes	0	0	0	0
(f) Granuloma Inguinale	0	0	0	0
(g) Herpes Zoster	5	4	4	13
(h) Lymphogranuloma Inguinale	0	0	0	0
(i) Opthalmia Neonatorium	0	1	3	4
(j) PID	0	0	0	0
(k) Soft Chancre	0	0	0	0
(I) Syphilis	49	38	40	127
(m) Trichomoniasis	0	1	1	2
(n) Veneral Warts	0	0	0	0



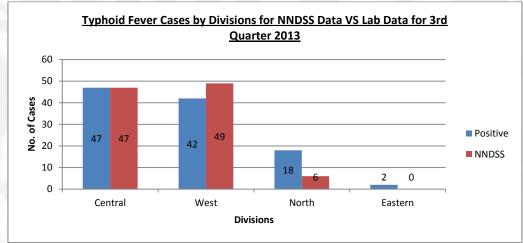
Source: NNDSS

The above are the top ten diseases for 3rd quarter 2013. The leading diseases are Viral Illness, ARI, Influenza and Diarrhoea.

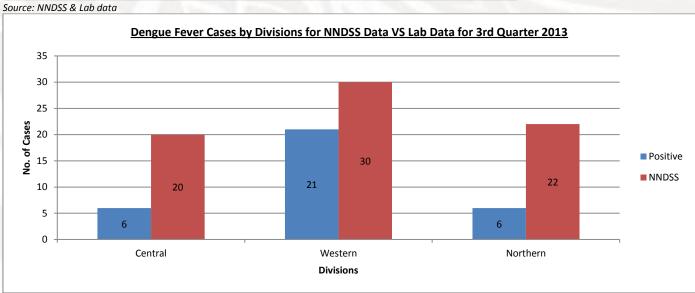


Source: NNDSS, Lab Data & Mortality Data

The above graph shows the cases for Leptospirosis, Typhoid Fever and Dengue Fever. The data are compiled from the NNDSS and the Lab confirmed data for months of July to September. The lab positive cases are more than NNDSS data for Typhoid Fever and Leptospirosis, unlike Dengue Fever cases are more reported through NNDSS as compared to Lab Positive. This could be the case definitions, or the patients symptoms the doctors diagnosed with. According to the Mortality data, there are 7 deaths due to Leptospirosis, 2 deaths for Dengue Fever and none for Typhoid Fever.

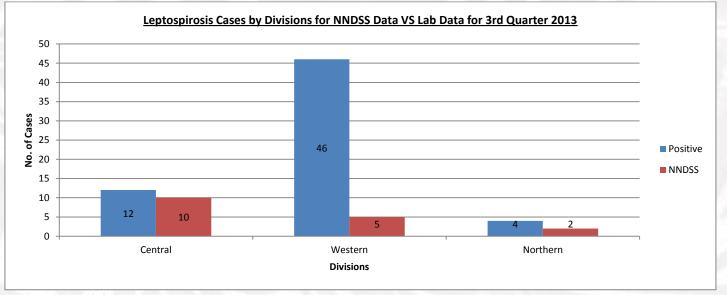


The graph is for the Typhoid Fever cases for July to September captured from the NNDSS and the Lab data. It shows that the positive cases are higher than the NNDSS data. The highest number of cases for Typhoid Fever is recorded in Western Division followed by Central division.



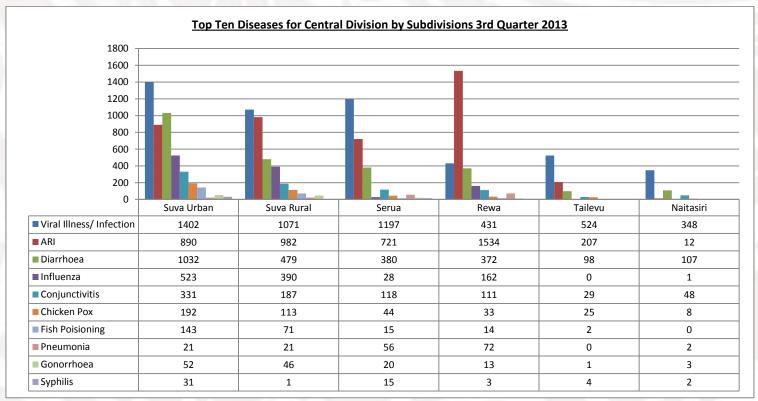
Source: NNDSS & Lab data

The above graph is for the Dengue Fever cases compiled through the NNDSS and Lab data for July to September by Divisions. Eastern Division does not have any cases reported for the above disease. NNDSS data is higher than the lab positive data. The lab data received for dengue fever is total of 188 for Months of July to September. About 82% are Negative cases, this include Western division recorded the most, followed by Central and Northern. Therefore, 18% reported with positive cases. The highest positive cases recorded in the month of July followed by August and September.



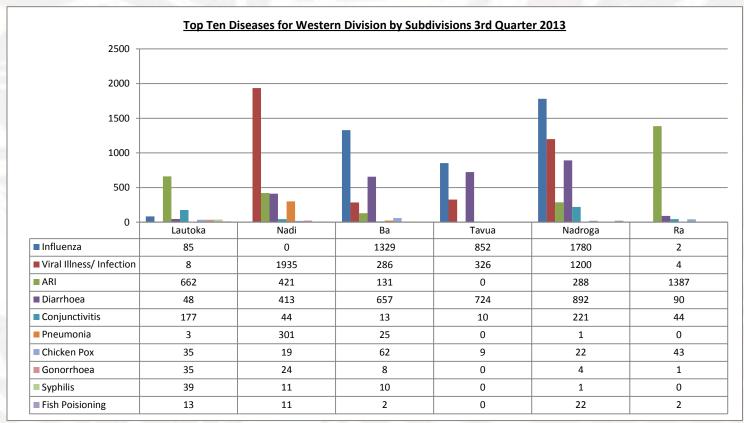
Source: NNDSS & Lab data

The above graph is for the Leptospirosis cases compiled through the NNDSS and Lab data for July to September by Divisions. Western Division recorded the highest cases of Leptospirosis which are positive cases. The total of 210 cases was reported from the lab data, where 148 cases were Negative. About 30% are positive cases, which include Western division with highest number of positive cases reported followed by Central and Northern. Eastern division did not report any case or Leptospirosis either through NNDSS or Lab confirmed.

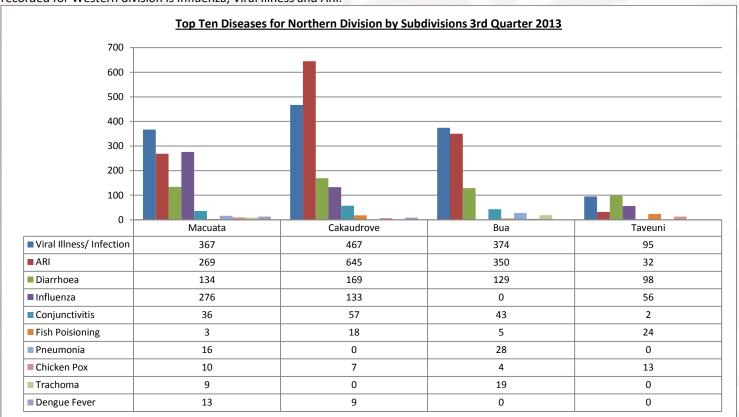


Source: NNDSS

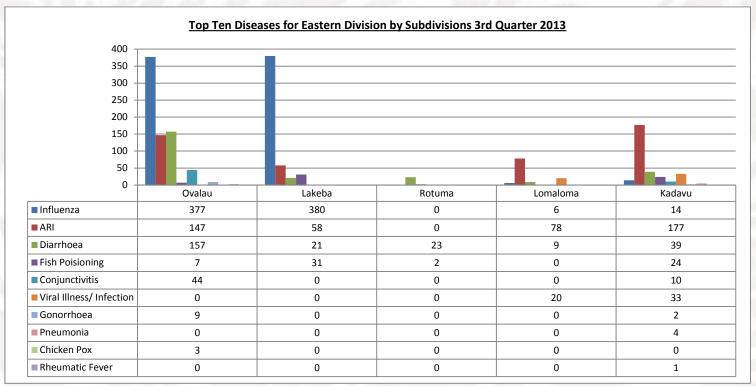
The above graph shows the top ten Notifiable diseases for each subdivision in Central division. The highest number of cases recorded for Central division is Viral Illness, ARI and Diarrhoea.



The above graph shows the top ten Notifiable diseases for each subdivision in Western division. The highest number of cases recorded for Western division is Influenza, Viral Illness and ARI.



The above graph shows the top ten Notifiable diseases for each subdivision in Northern division. The highest number of cases recorded for Northern division is Viral Illness, ARI and Diarrhoea.



Source: NNDSS

The above graph shows the top ten Notifiable diseases for each subdivision in Eastern division. The highest number of cases recorded for Eastern division is Influenza, ARI and Diarrhoea.

MORTALITY

i. Top 10 Causes of Mortality

Tabular	Diseases	Total	%
1-067	Ischaemic heart disease	173	20.4
1-052	Diabetes mellitus	164	19.3
1-069	Cerebrovascular diseases	68	8.0
1-068	Other heart diseases	42	5.0
1-066	Hypertensive diseases	36	4.2
1-086	Other diseases of the genitourinary system	25	2.9
1-076	Chronic lower respiratory diseases	23	2.7
1-046	Other malignant neoplasms	23	2.7
1-061	Other diseases of the nervous system	18	2.1
1-094	Symptoms, signs and abnormal findings	16	1.9

NCD remains the highest cause of mortality in the third quarter for 2013, making 59.6% of all deaths this quarter. NCD remains the top five causes of mortality. The cause for concern is that symptoms and signs and abnormal findings (R00-R99) makes it to the top 10 causes of mortality. This suggests that there are still poor principal diagnoses resulting in inability to classify the diseases under its correct

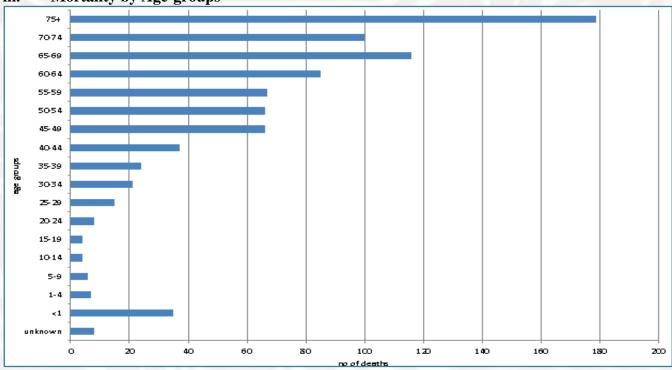
ii. Male vs Female Mortality

i. Male vs Female Mortality	
Diseases	Male
Certain infectious and parasitic diseases	27
Neoplasms	34
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	4
Endocrine, nutritional and metabolic diseases	100
Diseases of the nervous system	17
Diseases of the circulatory system	197
Diseases of the respiratory system	21
Diseases of the digestive system	8
Diseases of the skin and subcutaneous tissue	3
Diseases of the musculoskeletal system and connective tissue	6
Diseases of the genitourinary system	15
Certain conditions originating in the perinatal period	11
Congenital malformations, deformations and chromosomal abnormalities	6
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	8
External causes of morbidity and mortality	29
	486

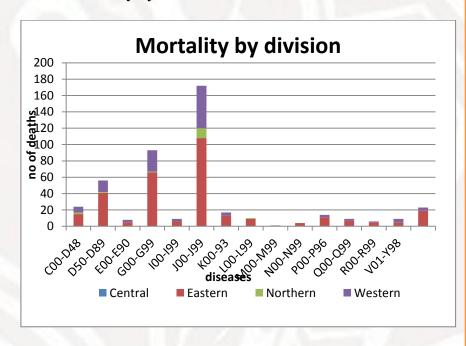
Diseases	Female
Certain infectious and parasitic diseases	16
Neoplasms	64
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	8
Endocrine, nutritional and metabolic diseases	78
Diseases of the nervous system	3
Diseases of the circulatory system	126
Diseases of the respiratory system	13
Diseases of the digestive system	8
Diseases of the skin and subcutaneous tissue	3
Diseases of the musculoskeletal system and connective tissue	3
Diseases of the genitourinary system	10
Certain conditions originating in the perinatal period	3
Congenital malformations, deformations and chromosomal abnormalities	5
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	8
External causes of morbidity and mortality	14
	362

The crude death rate for this quarter stood at 1/1000 population, with a total of 848 deaths (not including foetal deaths). 57% of total deaths were in the males. There was a difference in the cause of death by gender: for males and females the top three causes of death were diseases of the circulatory system, endocrine, nutritional and metabolic diseases and neoplasms (all NCD deaths totaling 68% of all males deaths and 74% of all female deaths).



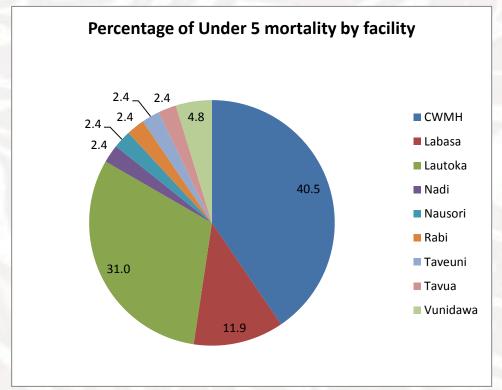


iv. Mortality by Division



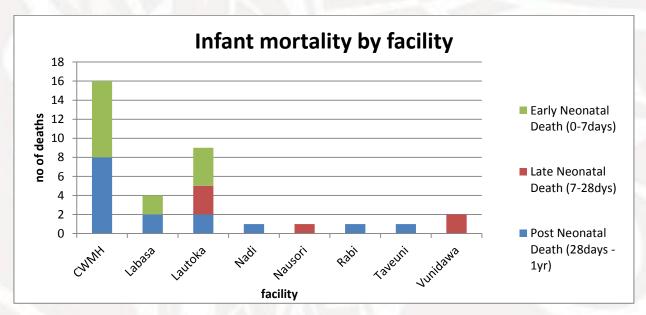
A00--B99 - Certain infectious and parasitic diseases CC-D48 - Neoplasms D50-D89 - Diseases of the blood and bloodforming organs and certain disorders involving the immune mechanism E00-E90 - Endocrine, nutritional and metabolic diseases G00-G99 - Diseases of the nervous system 100-199 - Diseases of the circulatory system J00-J99 - Diseases of the respiratory system K00-K93 - Diseases of the digestive system L00-L99 - Diseases of the skin and subcutaneous tissue M00-M99 - Diseases of the musculoskeletal system and connective tissue N00-N99 - Diseases of the genitourinary system P00-P96 - Certain conditions originating in the perinatal period Q00-Q99 - Congenital malformations, deformations and chromosomal abnormalities R00-R99 - Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified V01-Y98 - External causes of morbidity and mortality

v. Under 5 Mortality



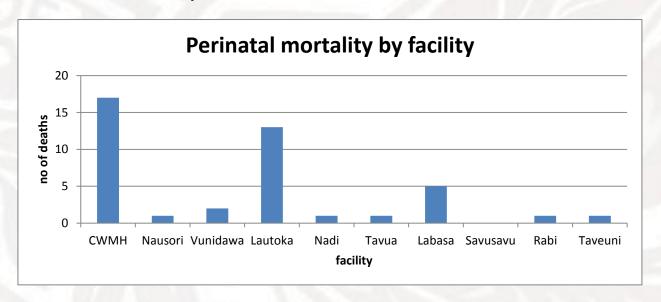
CWMH recorded most of the Under 5 mortality followed by Lautoka hospital and Labasa hospital. A total of 42 Under 5 mortality giving an estimated Under 5 mortality rate of 8 per 1000 live births (using ³/₄ of 2012 live births as denominator) was reported in this quarter.

vi. Infant Mortality



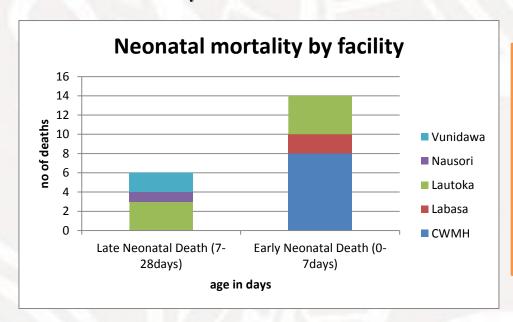
There were a total of 14 infant deaths giving an estimated infant mortality rate of 7 per 1000 live births (using 34 of 2012 live births as denominator). Majority of the deaths were reported in the post-neonatal and early-neonatal periods. CWM followed by Lautoka hospitals had the highest number of deaths.

vii. Perinatal Mortality



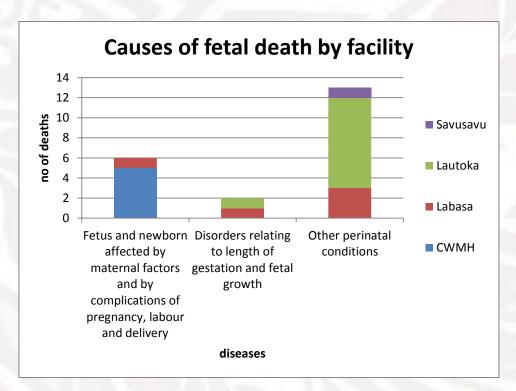
An estimated perinatal mortality rate of 6 per 1000 total births (using ¾ of 2012 total births as denominator) was recorded in this quarter. CWMH recorded the most perinatal mortality followed by Lautoka hospital and Labasa hospital

viii. Neonatal Mortality



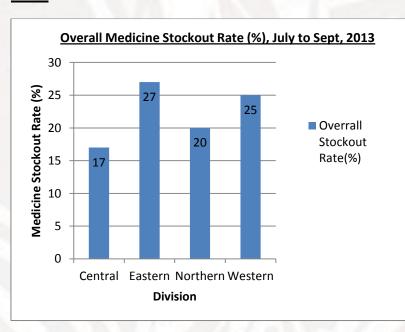
A total of 20 neonatal deaths giving an estimated neonatal mortality rate of 4 per 1000 live births (using ¾ of 2012 live births as denominator) was reported in this quarter. Most deaths were reported from CWMH followed by Lautoka hospital.

ix. Feotal Deaths



6. MEDICINE STOCK-OUT

PHIS

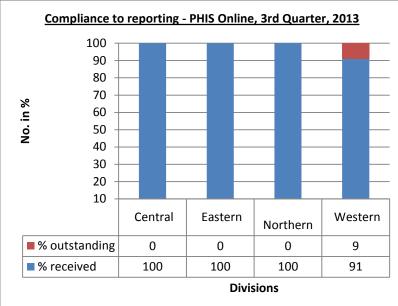


The PHIS system records the number of occasions where any one of the key medicines has been out of stock for a week or more in a month form each Medical Area. During Quarter 3, 2013, the Eastern Division had the most stockout with 27% across all Medical Area with Central Divisions having the lowest percentage. Compared to the 2nd Quarter, 2013 Western recorded 4% less Stockout in the 3rd Quarter, 2013.

7. COMPLIANCE REPORT

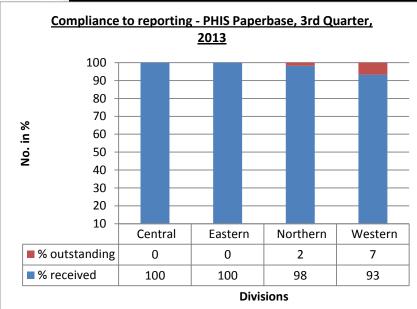
i. PHIS

% PHIS reports by division from July - September, 2013 – Online

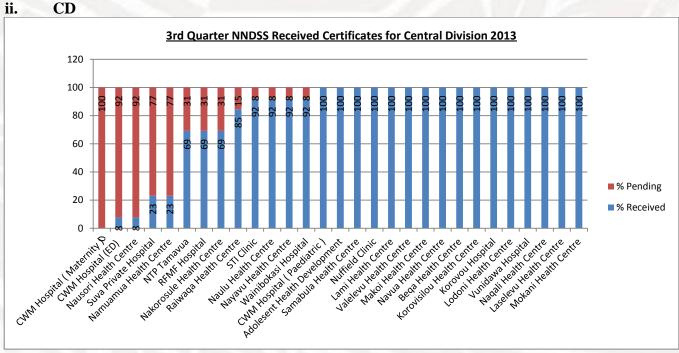


The preceding analysis is based on 98% of reports received through PHIS online for the 3rd Quarter, 2013. More than 4% reports were received through online compared to 2nd Quarter, 2013 [94%].

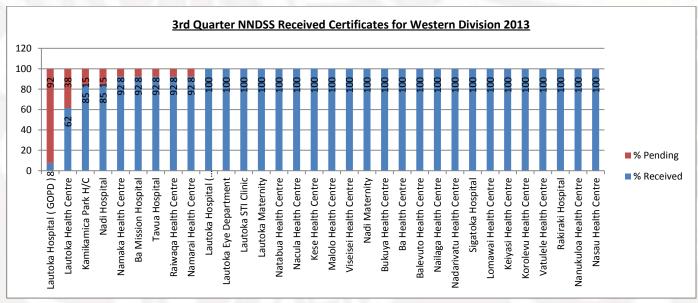
% PHIS reports by division from July - September, 2013 – Paperbase



The preceding analysis is based on the 98% of reports received through paper based reports from the four divisions for the 3rd Quarter, 2013. More than 9% reports were received compared to 89% for the 2nd Quarter, 2013.

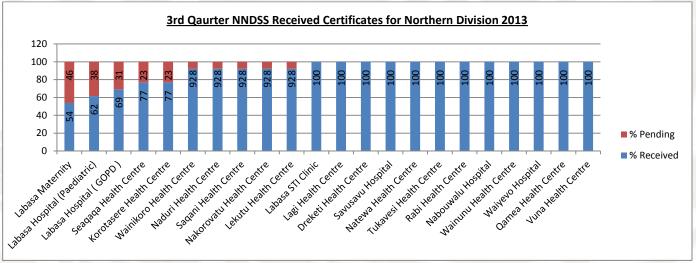


Timeliness submission of reports to HIU sent by the facilities has been improved compared to previous years. Few facilities have yet to submit their reports as illustrated in the above graph.

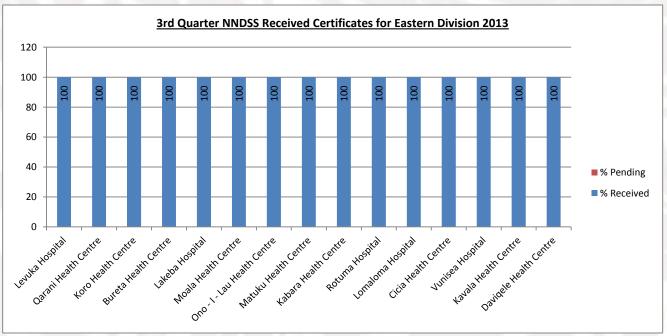


Source: NNDSS

Timeliness submission of reports to HIU sent by the facilities has been improved compared to previous years for Western division. The reports received for Western division is 94%, few facilities have yet to submit their reports as illustrated in the above graph.

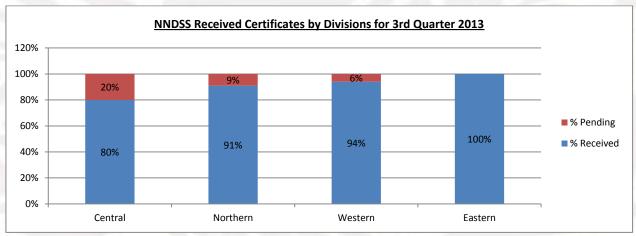


Timeliness submission of reports to HIU sent by the facilities has been improved compared to previous years for Northern division. The reports received for Northern division is 91%, few facilities have yet to submit their reports as illustrated in the above graph.



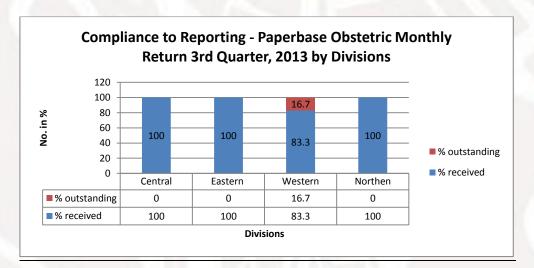
Source: NNDSS

The timeliness of reports for Eastern division is excellent. It has 100% reports have been received from this division. Thanks to all the facilities and the Medical officers for their great effort in sending the timeliness and complete report to HIU.

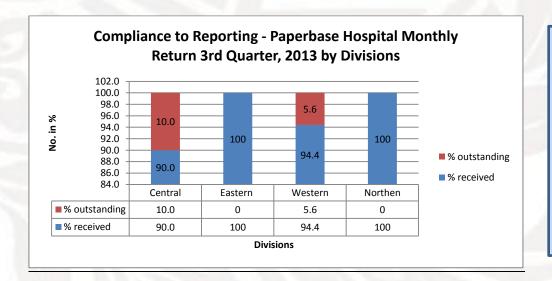


Overall the reports received from all the division has been improved compared to the previous years. For Central division 80% reports received, Northern division 91%, Western is 94% and Eastern is 100%. It is encouraging to note that the compliance to reporting has improved compared to other quarterly reports in previous years.

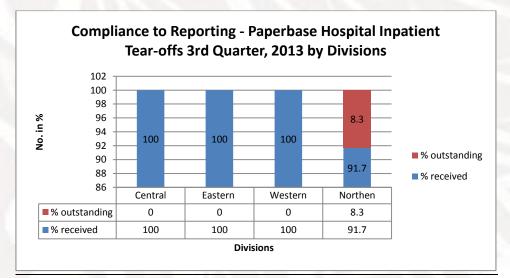
iii. Hospital Obs/Tear-offs/ Monthly Return



The preceding analysis for Obstetric Monthly Return is based on the 100% of reports received through paper based reports from the Central, Eastern & Northern divisions & 83.3% from the Western division for the 3rd Quarter, 2013.



The preceding analysis for Hospital Monthly Return is based on the 100% of reports received through paper based reports from the Eastern & Northern divisions, 94.4% from the Western division & 90% from the Central division for the 3rd Quarter, 2013



The preceding analysis for hospital Inpatient the 100% of reports received through paper based reports from the Central, Eastern & Western divisions & 91.7% from the Northern division for the 3rd Quarter, 2013.

8. HIU UPDATES

i] List of supervisory visits conducted in Quarter 3, 2013

A total of 29 Health Facilities were visited in Quarter 3 of 2013 of six (6) were from the Central Division, eight (8) were from the Eastern Division, eight (8) were also from the Western Division and seven (7) were from the Northern Division.

Ii] List of training conducted in Quarter 3, 2013

A total of eight (8) trainings were conducted in Quarter 3 of 2013 throughout the divisions. The trainings were conducted for the trainers as well as for the nurses. Most of the trainings were in conjunction with other donor partners from JICA and FHSSP. For HIU, the trainings conducted also had the inclusion of sessions by teams from the Fiji Pharmaceutical Biomedical Services throughout the divisions

The Civil Registration and Vital Statistics Committee (CRVS)

This committee includes the Ministry of Health, Fiji Bureau of Statistics, the Registrar General's Office and Information Technology Centre. The CRVS provides the foundation for standardizing vital statistics and ensuring quality, complete and timely data for decision making. There are regular meetings held and initiatives undertaken to ensure vital statistics data is consistent across the data collection institutions.

Birth Verification 2010

Following the CRVS recommendation to align the birth numbers and ensure accuracy in tracking births, a verification process was undertaken by the HIU for the year 2010. This year showed higher than expected numbers of births and therefore the CRVS needed confirmation on birth numbers.

The process undertaken revealed the following:

- 1. Incomplete recording in maternity registers
- 2. Non-capture of c-section birth outcomes in some maternity registers
- 3. Inaugurate patient details, such as, names, age, husbands' name, national health numbers and address.
- 4. Poor understanding of the concept of live births, still births, foetal deaths and intrauterine deaths.

The Divisional Health Information Officers provided the foundational support required for the verification process in the various divisions and their input in the process is duly acknowledged.

The need to review obstetrics data collection tools and standardize definitions was noted and is now being duly actioned.