

REPORT ON GARKI HOSPITAL CONCESSION

ICRC VISIT

DECEMBER 2017

INTRODUCTION

In response to various challenges bedeviling public hospitals in Nigeria, such as underfunding, poor maintenance culture, poor attitude of staff and frequent industrial actions, the federal Government of Nigeria embarked on the National Health Sector Reform (HSR) policy of 2005. The aim was to support and invigorate expanded collaborations between healthcare providers and consumers.

The main thrusts of the Health Services Reform were the National Health Insurance Scheme (NHIS) and the Public Private Partnership (PPP) policy of the Federal Ministry of Health. These were to ensure broad and fair coverage, accessibility and affordability of healthcare services and providing financial risk security for Nigerians.

Consequently, in 2006 the Federal Executive Council (FEC) approved the PPP initiative and chose Garki General Hospital Abuja (that had been closed down for renovation for 6 years), to be Nigeria's pilot PPP project, the first of its kind! As a result of a very transparent due process, Nisa Premier Hospital Abuja won the bid as concessionaire to manage the hospital in May 2007.

We are now ten years into the Concession Agreement. Since the inception of the concession, we have demonstrated that the Public Private Partnership model introduced by Government is the answer to improving health care delivery in Nigeria.

PERFORMANCE SINCE THE CONCESSION AGREEMENT

Increased Confidence in Garki Hospital Abuja:

When we took over the management of the Hospital, it was in a state of virtual collapse. Absence of basic facilities, strike actions and funding issues saw patient number deplete to an all-time low. This sorry state led to an increase in medical tourism and painted the government in negative light. Today, we have through our outstanding performance engendered the confidence of residents of the FCT and its environs that quality health care is possible in Nigeria with the FCT as a model. In 2007, client encounter was ten thousand three hundred and one (10,301) but has grown to one hundred and fifty five thousand one hundred and seventy two (155,172) by 31st December, 2016 (see annexure 1).

Increased Funding:

Our funding model which is now free from government's budgetary and bureaucratic constraints is one that works. From 2007 till date, we have invested four billion six hundred and twenty eight million five hundred and eight thousand naira (₦4,628,508,000) in modern medical equipment comparable with best international standard and improved expertise cutting across a wide range of medical departments. See annexure 2 for medical equipment. By this letter we commit to invest another ten billion naira (₦10,000,000,000) over the next 30 years as we strive to transform Garki Hospital into an International Hospital.

Outcome of Increased Funding:

Over the last 10 years we have broken new ground in health care delivery in the FCT and Nigeria at large. We have introduced a fully equipped and functional neurosurgery department, sickle cell clinic, in-vitro fertilization (IVF) clinic and also high-end surgeries like kidney transplants and open heart surgeries. On June 23, 2015, our IVF clinic recorded the first birth of twin children (See annexure 3). Since then we have brought joy to hundreds of families within the FCT and its environs. Also, our kidney transplants and open heart surgery teams have successfully conducted 25 kidney transplant surgeries and 43 open heart surgeries. Sir, we are pleased to inform you that some of these patients came from the United Kingdom and Ghana. Sir, no other Hospital in Nigeria (government or privately owned) can boast of this success rate.

Training of Health Personnel

We have broken new grounds in training and re-training of medical personnel and medical students. We do not only train, but have become a resource centre/reference point for medical students/personnel from the United Kingdom, Ukraine, the United States of America and Ghana. Without access to government funding and foreign grants, we have trained 40 postgraduate medical doctors in the two stages of our residency program in Obstetrics & Gynaecology, Family Medicine and Paediatrics. Twenty-six (26) House officers have been trained across our departments, while twelve (12) pharmacy interns and over one hundred and eighty two (182) students have undergone training through our students industrial work experience scheme (SIWES) program in our Radiology, Pharmacy, Laboratory and Medical Records departments (see annexure 4).

Expanded provision of Tertiary Care

In keeping with the letters and spirit of the concession agreement, we have provided tertiary care and even broken new grounds with the provision of subsidized open heart surgeries, kidney transplants, neurosurgery and renal surgeries. These surgeries are provided year round and at amazingly discounted rates to discourage medical tourism and preserve foreign exchange earnings. Also, our intensive care unit (ICU) is state-of-the-art and manned completely by Nigerians.

Development of Local/Nigerian Content

When we commenced the high-end surgeries in 2013, these surgeries were conducted by a team of foreign professionals. Today we are pleased to state that the above surgeries are conducted by Nigerians. Only one member of the above team is a foreigner (see annexure 5). Sir, no other Hospital in the FCT or Nigeria can boast of this credential.

ICT

Hospital has been converted successfully to a fully paperless Hospital. All out patient and in patient department as well as Laboratory, Radiology, Pharmacy and theatres are fully serviced by the Hospital's Electronic Medical Records and enterprise resource planning software. In addition, health insurance billing and claims are processed electronically in Garki Hospital. This is in line with global best practice.

Debt profile

REDACTED

Remittances to the FCTA

REDACTED

Pro-Poor and Indigent Activities

In service to the indigent, the Hospital has vigorously sustained the mandate of the Pro-Poor Safety Net Healthcare Fund through participation and support for health outreaches, missions such as the Chanrai eye mission, surgical outreach with the West African College of Surgeons, and provision of subsidised treatments such as the in vitro fertilization (IVF) scheme. The total financial commitment to Pro-Poor activities and the number of beneficiaries far exceeds what the support documents in this report show. A more comprehensive analysis will take more time than the Grantor has given the Concessionaire to act. The full pro poor report must also include the activities of the FCDA Social Welfare

Officer attached to the Concession. This full analysis is under way. The Pro-Poor Safety Net Fund (PPSNF) is a charitable organization initiative incorporated in July 2008 and was designed to take care of the social responsibilities to residents especially the vulnerable and very poor citizens. The Pro-Poor beneficiaries comprise of poor and vulnerable indigents, victims of Boko Haram, IDPs, accident victims, and other emergencies, etc. In addition, abandoned corpses of victims were preserved for long periods in the mortuary until legal permission was obtained for their humane disposal. We would also want to inform your esteemed office that from inception to 2009, a member of the Board, Dr Ibrahim Wada donated his full salaries to the Pro-Poor activities.

REQUEST FOR REVIEW OF THE CONCESSION AGREEMENT

Over the past ten years as can be seen from the presentation Garki Hospital Abuja has evolved from a moribund state to a vibrant beehive of medical activities comparable to a UK NHS District General Hospital. Nisa Premier Hospital is committed to developing an advanced health care system in the FCT with Garki Hospital at the centre of it all. This will involve a further investment of one billion naira annually over the next ten years in order to achieve the following:

1. Develop a PPP driven health care system in the FCT by providing primary health care services at proposed primary health care centres and feeder clinics in the FCT.
2. Upgrade the Hospital environment to world class standard
3. Expand the Wards and operating theatres.
4. Provide a world class cancer treatment centre
5. Provide a world class telemedicine, diagnostic and imaging centre via a dedicated digital telemedicine network connecting with medical experts abroad and servicing all district hospitals in Abuja as needed.

The review of this PPP concession agreement will enable us provide the world class facilities on PPP basis at Garki Hospital.

CONCLUSION

We would to take this opportunity to appreciate the visit of your esteemed person and team to our facility. We want to assure you that we have been in full compliance with the terms of the concession agreement. We look forward to working together to develop world class health facilities in the FCT using the PPP framework and proving to the world that medical

services can meet First World standards in Nigeria

Dr Ibrahim Wada FRCOG FWACS OON

Founder and Executive Vice Chairman

Nisa Premier Hospital Abuja

Vice chairman Garki Hospital Abuja