

UPDATE FROM KULMASA 2025

Since the inauguration of the polyclinic in Kulmasa on September 30th 2024, the mission changed focus from outreach to facility based healthcare. Previously, healthcare was through outreach activities only; home visits, mobile clinics, child welfare clinics, immunizations, health education and promotion. Now with the polyclinic structure in place there is so much more we can do.

The polyclinic can now attend to emergency cases, admit patients, conduct delivery of babies, do many basic laboratory investigations, x-ray services and minor surgeries. It is of such great relief for staff to have the space to work in and for clients to have the space, the equipment and other logistics for their treatment.

We are very happy to be supported by the Eimers Stiftung and the St. Paul's Parish in Bocholt. With funds received, we have been able to purchase a vein finder.



← Vein Finder; Handheld by staff

Sometimes, it is very difficult to find the veins of newborn babies and older babies in order to administer medications or blood. Babies have to be pricked several times before a vein is found. With this device, it is sometimes easier to find the vein making work less stressful to staff and less painful for babies

With new services comes the need for more staff. With funds received, we have been able to employ additional staff to support in some areas; a General Nurse for the ward and also a Solar/electrical technician to manage the installed photovoltaic system. Until November last year, the national grid was very unstable and we could not use some equipment. But since the installation of the solar, all equipment are in use and we are happy to have the solar technician as part of our team.

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Left:

Mutakilu Bayon, a native of Kulmasa and an Electrical Technician by profession has been trained as a solar Technician. He is available around the clock to provide support services for the running of the polyclinic in Kulmasa.

Funds have also supported us with the purchase of some consumables. Especially those associated with the laboratory including consumables for blood donations and transfusions. Blood bags, blood giving sets, cannulas, sample tubes, cotton, gauze among others. This is a big help because due to poverty with associated poor diets, many children, pregnant women and the aged come in with severe anaemia where they require blood transfusion.

We often referred many people to referral facilities because we had not started blood banking. But now, with stable power supply from the installed solar, the bloodbank fridge is powered and we are able to offer blood transfusion services. Often, when pregnant women came to deliver and were anaemic, due to the risk of bleeding during child birth, we referred them to the bigger hospital some 50km away. Many could not follow up to the referral centre due to the cost involved. So we are very happy now to be able to deliver babies of anaemic mothers because of the possibility of blood transfusion. It makes a big difference and we are very grateful.

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Left: Laboratory Technician bleeds a patient relative who has been cleared to donate blood

Below: Head of Laboratory Dr. Rashida Salifu in the main Lab



In Ghana, there is a National Health Insurance Scheme which allows health facilities to be reimbursed for services and medicines offered to enrolled members. But before facilities are on this scheme, they must be accredited by the National Health Insurance Authority (NHIA). The polyclinic is Kulmasa is now going

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through processes to be enrolled. Therefore, clients have to pay out of pocket in order to access services. However, if we should bill clients for the full cost of care, they cannot afford. Clients therefore only pay for some services and medicines while others are given to them for free. Special emphasis is placed on services to children, pregnant women, the aged and children with special needs and disabilities. With funds we are able to provide free routine medications of folic acid, iron and multivitamin to all pregnant women. Some services are also offered for free during outreach services and mobile clinics in the villages.



As part of outreach activities, staff teach mothers how to use the local food ingredients they have to prepare balanced diets for their families but especially for children under five years who need special care in order to grow well. Staff use the opportunity to teach women the nutrients in each of the local food items available and how to combine them to prepare nutritious diets. Men are often curious and join these sessions too which is very good because the staff use the opportunity to bring them into the conversation of providing nutritious meals for especially growing children, pregnant women and vulnerable adults.

In the year 2025, the facility attended to 8,536 people through the OPD (Out Patient Department) including mobile clinics and special clinics. Mobile clinics tend to see the more general population while the special clinics are for attending to mostly children with special needs and disabilities though some adults also turn up.



***A Special
Mobile
Clinic in a
Community***

Attendance for pregnant women was 1,548 and there were 152 deliveries conducted. X-ray services could only start on a small scale due to low voltage from the national grid. From September through to November when the solar was installed, few x-rays were taken using power from a diesel generator. By end of year, 55 x-rays had been taken. Ultrasound scans are also available for pregnant women. 891 scans were taken with 148 of them being referrals from other health facilities. About 400 children were attended to 3143 times together for Child Welfare Clinics (CWCs) where children under 5 years receive routine immunizations and their growth monitored. 7 cases of tuberculosis were discovered by our outreach team through active disease surveillance. A total of 2038 admissions were recorded during the year.

1352 people were attended to during home visits. These included 386 children under 5 years, 25 malnourished children, 25 pregnant women, 3 people living with disabilities or special needs and 132 aged people among others.

So whether through outreach activities, medicines and consumables or staff, Eimers Stiftung and the EWK of St. Paul's Parish in Bocholt is supporting the Family clinic of Kulmasa in many ways and ensures it continues to provide quality health care to the rural community of Kulmasa and its environs.

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Outlook into 2026

In 2026, we hope to employ some more staff; nurses, laboratory technicians and Pharmacy staff in order to be able to provide 24hour service in some critical areas.

We hope to procure equipment like firefly for phototherapy of newborn babies who are jaundiced. We need more patient monitors and oxygen cylinders. Consumables like cannulas, infusion and blood giving sets, gauze and cotton wool, plasters, laboratory reagents and diagnostic test kits are routine things to be purchased as well as medicines.

We would like to continue to provide outreach services and some free services to vulnerable groups including pregnant women and children living with disabilities and special needs.

We are very grateful for your support and look forward to our continued collaboration into the future.



*Thank
You
From
All Of
Us*