Children's Hospital hit by bureau

LAHORE, July 4: Children's Hospital project director and dean Prof Dr Sajid Magbool has blamed bureaucratic delays for the problems faced by its staff. patients and their attendants.

Pressing problems at the hospital include shortage of staff and beds, encroachments on its premises and delay in the installation of equipment.

Prof Magbool said while the number of patients had increased substantially the number of doctors and nurses had declined over the years as many of them left on the expiry of their contracts and could not be replaced for lack of authorization. He said the hospital desperately needed over 60 doctors and nurses each to manage its daily patient turnout. The administration, he said, was managing the load by extending the duty

recruit doctors and nurses on contract basis.

With the increase in number of patients, the hospital's 250 beds are always occupied. Last week a number of patients in the medical special ward were found lying on the floor. After intervention by the dean, they were accommodated on beds meant for patients' mothers - in some cases two children to a bed. The attendant mothers now had nowhere to sit and no way to rest.

He said a store building was being turned into a hostel to accommodate up to 60 nurses currently living in rented houses. The new arrangement, which he hoped would be completed within the month, would bring down the cost.

UNINSTALLED: During a

hours. He said he had sought per-visit to the hospital this said, did not allow any altermission from the government to reporter learnt that an incinerator and a butterfly bath (hydrotherapy equipment for handicapped children) were lying uninstalled. Hospital officials said the butterfly bath had been lying uninstalled in the physiological rehabilitation medicine department for over two years. Sources said the two-year warranty on the equipment had already expired.

Prof Magbool said the installation of the incinerator had been delayed by a legal requirement for a separate building. Now that funds had been allocated for the incinerator building, he said, a fresh proposal for construction had been sent to the Health Department. The butterfly bath. too, he said, had remained uninstalled for months due to procedural snags. The original plan, he ations in the building. Approval had now been obtained and alteration work started.

ENCROACHMENT: Christian cemetery next to the hospital's administration block is said to have expanded on to hospital land meant for the construction of buildings to house the Institute of Child Health, Nuclear Medicine Department, an auditorium and hostels for doctors and nurses. Prof. Magbool said he had written several letters to the civil administration and the police in this regard but no action had so far been taken. He said the hospital administration had plans to construct a boundary wall to restrict the cemetery to its legitimate limits.

Residents of MCL Officers' Colony, adjacent to the hospital, use the hospital entrance and road. They use the administration block entrance during office hours and the main gate afterwards. Prof Magbool said there had been serious arguments with the residents who had installed gates opening on hospital land. The residents, he said, had claimed ownership of the land on which the road was built. The hospital, he said, had a similar claim. He admitted that the residents had no other approach to Ferozepur Road.

STRUCTURAL CHANGES: Some hospital officials alleged that the present management was 'de-structuring' the building by making structural changes without seeking permission from the relevant authorities. They said the soundproof room housing the EEG plant had been ruined and the machine shifted to the out-patients department. The EMG and evoked potential response machines had also been shifted to the OPD and

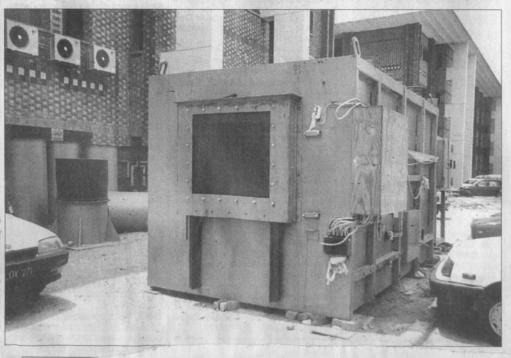


were out of use.

They said the physiological laboratory had been ruined to accommodate the Neo-natology Department which was earlier located on the ground floor of the emergency block. The department is recognized by the Pakistan and Medical and Dental Council and the College of Physicians and Surgeons Pakistan for training of FCPS students.

Similarly, they said, the laboratory set up on the ground floor near the Emergency and OPD blocks had also been shifted to Diagnostics Block. They said the laboratories in the Diagnostics Block were involved in research and closed after office hours. A laboratory for emergency cases, they pointed out, needed to function round-the-clock.

Prof Magbool claimed, how- o



cratic snags



ever, that the hospital had undertaken only minor modifications to suit its immediate requirements and not "alterations without approval" to the building.

EQUIPMENT: The staff also said electro-medical equipment, including three anaesthesia machines, EEG, EMG, audiometry equipment and dental laboratory equipment remained uninstalled.

The project director denied this, claiming that the equipment had been installed and was functional. He said the pathology laboratory equipment had been installed in the new pathology laboratory building and had been functional for the last two months. The EEG and EMG machines were functional in the OPD. Audiometry and dental laboratory equipments, too, he said

had been installed and were working. Other equipments, including CT Scan, echo cardiography, X-rays, ventilators, monitors and lasers, too, were operative.

BME LABORATORY: It was alleged that the hospital's biomedical engineering laboratory was not functioning properly.

Prof Maqbool said the laboratory was functioning and repairing equipment in quite a cost offer tive manner. He claimed that had recently repaired some equipment in Rs2 million for which a private company had provided a Rs8 million 'estimate.' The hospital, he said, employed some engineers and a technical officer from the Health Department was available for visits. He admitted, however, that the hospital needed more bio-medical engineers. — MANSOOR MALIK