



The Presidency

**NATIONAL HAJJ COMMISSION OF NIGERIA
(NAHCON)**

**GUIDELINES
ON
MEDICAL SERVICES FOR
HAJJ OPERATION**

(APRIL, 2019)

S/N	ITEM	PAGE
1	Preamble	3
2	Establishment of National Medical Team (NMT)	3
3	Responsibility of NAHCON	4
4	Responsibility of State	5
5	NMT Personnel Selection	6
6	NMT Distribution Between NAHCON and States	7
7	Checklist for Selection of National Medical Team	8
8	Duties of Medical Team	8
9	Role of Medical Team at Muna/Arafah	9
10	Terms of Engagement	9
11	Conditions for Suspension	10
12	Report on Hajj Operation	10
13	General Provision	11

1.0 **PREAMBLE:**

- 1.1 The National Hajj Commission of Nigeria (NAHCON), hereby issued the following Medical Services Guidelines so as to guide and set standards in the provision of medical services to Nigerian pilgrims.
- 1.2 That all (SMPWB/A/C) States Muslim Pilgrims' Welfare Boards/Agencies/Commissions and Travel Agencies engaged in organizing and coordinating the movement of persons from Nigeria to Saudi Arabia to perform Hajj shall strictly adhere to the provisions of this guidelines.

2.0 **ESTABLISHMENT OF NATIONAL MEDICAL TEAM (NMT):**

- 2.1 There is established a **NATIONAL MEDICAL TEAM (NMT)**, to provide unified healthcare services to Nigerian pilgrims in accordance with Saudi Arabia regulations and World Health Organization (WHO) standard, in an efficient and cost effective manner.
- 2.2 The **NATIONAL MEDICAL TEAM (NMT)** shall consist of;
 - i) Chairman, Medical Committee;
 - ii) Medical Doctors;
 - iii) Pharmacists; and
 - iv) Nurses.
- 2.3 The membership of NMT shall be appointed on a ratio of 40% by NAHCON and 60% by SMPWB/A/C, and should reflect the total numbers of all cadres provided in 2.2 above or as may be allocated to SMPWB/A/C by NAHCON in clause 5.0 hereunder.
- 2.4 That the total number of clinics to be established in Makkah shall not be less than five (5) and their locations shall reflect geographical mapping of pilgrims' accommodations, and that no

SMPWB/A/C shall establish any form of clinic in their pilgrims' accommodations.

- 2.5 That the Medical services for Madinah shall comprise of one central clinic at NAHCON's Office and multiples of mobile clinics within pilgrim's accommodation. State officials shall locate and guide all pilgrims to such designated centres in addition to the central clinic.

3.0 RESPONSIBILITIES OF NAHCON:

S/N	THEMATIC AREA	ROLES AND RESPONSIBILITIES
1	Personnel	<ol style="list-style-type: none"> 1. NAHCON to contribute a total of 40% of the entire medical team. 2. Armed forces personnel, Health Emergency Response Squad and Health Awareness Committee to be absorbed as part of the 40% national pool 3. Screening of all personnel 4. Orientation workshop for all personnel 5. Posting of all personnel <p>NB: SMPWB/A/C should be represented during screening and orientation of members of the NMT.</p>
2	Drugs supplies and consumables	<ol style="list-style-type: none"> 1. Carry out proper forecast of all drugs and consumable needs 2. Contribute 70% of cost of all drugs and consumables. (Subject to availability of funds or as may be reviewed and agreed between NAHCON and SMPWB/A/C).
3	Visa and travel logistics	<ol style="list-style-type: none"> 1. Responsible for procuring all NMT members VISAS and conduct other travel arrangements. And where applicable funds will be deducted from the affected SMPWB/A/C remittances/funds to fast track visa acquisition for members.

4	Electronic Medical Record (EMR) system	1. Consolidate EMR services in all clinics
5	Posting	1. Responsible for posting of Medical Team and personnel
6	Coordination	1. Responsible for all Medical personnel (including their schedules, welfare etc)
7	Vaccinations	1. Provide Vaccines to all States and intending pilgrims.

4.0 RESPONSIBILITIES OF STATES:

S/N	THEMATIC AREA	ROLES AND RESPONSIBILITIES
1	Personnel	<ol style="list-style-type: none"> 1. States shall contribute 60% of the entire medical team. 2. Contribution of Personnel from States shall be proportionate to their pilgrims. 3. States to ensure that all number and selection criteria of cadres allocated to them are met. 4. Names to be forwarded to NAHCON on time to avoid delay in visa acquisition and other arrangements for members.
2	Drugs supplies and consumables	<ol style="list-style-type: none"> 1. States shall contribute 30% of the total cost of procurement of all drugs and consumables. (Subject to availability of funds or as may be reviewed and agreed between NAHCON and SMPWB/A/C).
3	Environmental Health officers (Sanitation)	<ol style="list-style-type: none"> 1. States shall be responsible for recruitments of sanitation officers who will take care of Pilgrims' accommodation, their hygiene and welfare
4	Pilgrims Assistants	<ol style="list-style-type: none"> 1. Pilgrims assistants should continue to serve as guides for sick pilgrims to National Medical Centers.

S/N	THEMATIC AREA	ROLES AND RESPONSIBILITIES
5	Pre-Hajj activities	<ol style="list-style-type: none"> 1. States shall make adequate arrangement for their Pilgrims' Yellow Cards 2. Provide all Medical services at Hajj camps. 3. Ensure that all vaccinations activities are done for all pilgrims. 4. Ensure Proper Medical screening for all Pilgrims. 5. Create awareness on sanitation, hygiene, common medical conditions and NMT medical services.

5.0 NMT PERSONNEL SELECTION (NOMINATION FROM STATES BASED ON SET OUT CRITERIA)

S/N	STATE	TOTAL PILGRIM ALLOCATION	ACTUAL NO OF MEDICAL PERSONNEL ALLOCATED			
			DOCTORS	PHARMACISTS	NURSES	TOTAL
1	Abia	62	0	0	0	0
2	Adamawa	2601	3	1	2	6
3	Akwa Ibom	-	0	0	0	0
4	Anambra	63	0	0	0	0
5	Bauchi	3,090	4	1	6	11
6	Bayelsa		0	0	0	0
7	Benue	208	1	0	1	2
8	Borno	2,046	4	1	5	10
9	Cross River	60	0	0	0	0
10	Delta	107	0	0	0	0
11	Ebonyi	97	0	0	0	0
12	Edo	254	0	0	0	0
13	Ekiti	177	0	0	0	0
14	Enugu	65	0	0	0	0
15	FCT	2,721	4	3	3	10
16	Gombe	2,050	3	1	4	8
17	Imo		0	0	0	0
18	Jigawa	1,472	4	1	5	10
19	Kaduna	6,636	8	5	14	27
20	Kano	5,491	8	6	12	26
21	Katsina	4,815	6	2	9	17
22	Kebbi	3,914	6	3	7	16

S/N	STATE	TOTAL PILGRIM ALLOCATION	ACTUAL Nº OF MEDICAL PERSONNEL ALLOCATED			
			DOCTORS	PHARMACISTS	NURSES	TOTAL
23	Kogi	717	1	1	2	4
24	Kwara	2,221	3	2	2	7
25	Lagos	2,010	5	4	5	14
26	Nasarawa	1,108	2	2	2	6
27	Niger	3,946	5	6	6	17
28	Ogun	913	2	1	2	5
29	Ondo	295	0	0	0	0
30	Osun	964	1	1	1	3
31	Oyo	955	2	1	2	5
32	Plateau	1,111	2	1	2	5
33	Rivers	370	0	0	0	0
34	Sokoto	4,844	7	3	9	19
35	Taraba	1,579	2	2	2	6
36	Yobe	1,411	3	2	3	8
37	Zamfara	4,618	6	2	8	16
38	Armed Forces	389				
	Total	63,461	92	52	114	258

6.0 NMT Distribution between NAHCON and STATES

S/N	GRAND TOTAL (PRE AND POST ARAFAT)		NAHCON CONTRIBUTION @ 40%	STATES CONTRIBUTION @ 60%
1	Doctors	153	61	92
2	Pharmacists	119	73	52
3	Nurses	136	29	114
4	Medical Data/surveillance officers to be provided by NAHCON only	8	8	0
5	Health Awareness Committee	5	5	0
	Total	434	176	258

7.0 CHECKLIST FOR SELECTION OF NATIONAL MEDICAL TEAM PERSONNEL:

- The selection requirement should fairly reflect on gender parity
- Those that participated in last five (5) years' Hajj operations will be least considered.

S/N	CADRE	BASIC QUALIFICATION	POST-GRADUATION WORK EXPERIENCE	AGE RANGE	PROFESSIONAL AFFILIATION (CURRENT PRACTICING LICENSES)	ADDED ADVANTAGE
1	MEDICAL DOCTORS	MBBS	MINIMUM OF 3 YEARS	BTW 25-55 YEARS	MDCN	Public Health, Psychiatry, Family and Internal Medicine
2	PHARMACISTS	B. PHARM PHARMD BSC PHARM	MINIMUM OF 3 YEARS	BTW 25-55 YEARS	PCN	Hospital Community Public Health or Administrative Practice.
3	NURSES	REGISTERED NURSE BSC NURSING	MINIMUM OF 4 YEARS	BTW 20-50 YEARS	NMCN	Post-Basic Psychiatry in Nursing.

8.0 DUTIES OF MEDICAL PERSONNEL:

- 8.1 Medical Doctors** shall be fully responsible for patient/client's history taking, physical examination; ordering of diagnostic tests (where applicable), making appropriate diagnosis and prescribing the appropriate medication/therapy and/or referral to higher medical Centre as well administer intra-venous injections/infusions.
- 8.2 Pharmacists** shall be fully responsible for recommending appropriate medicines/consumables (guided by the Established National Drug Formulary and Disease Burden/Pattern as well as emerging epidemiology), quantification and appropriate storage of all drugs/consumables, dispensing, patient counselling and record keeping of all pharmaceutical transactions.

8.3 Nurses shall be responsible for ensuring patient triage, entry of basic patient history, taking of vital signs and assigning patients to Doctors, administering intramuscular injection and providing nursing support to all patients under observations.

8.4 Medical Data/Surveillance Officers shall coordinate the EMR system for up-to-date data and accurate electronic data/information of activities from the clinics and any related information external to the clinics. Detailed and accurate information on all patients attended to (including their diagnosis, treatments, referrals etc) shall be on daily basis entered electronically, analyzed and shared through a central server domain. The Team shall also be responsible for early detection of disease outbreak and response.

8.5 Health Awareness Committee shall carry out regular and systematic supervision to pilgrim's accommodation and NMT clinics, address hygiene related issues at NMT clinics and accommodation sites and report/feedback any observed environmental hazard (beyond their control) to the Chief of Operations for immediate high level actions. Conduct regular health campaign in pilgrim accommodation.

9.0 ROLE OF MEDICAL TEAM AT MUNA/ARAFAT:

At Muna and Arafat, NMT shall provide complementary and basic medical services for all pilgrims.

10.0 TERMS OF ENGAGEMENTS:

NMT members must attend the training and orientation workshops to be organized by NAHCON and shall sign a letter of undertaking which would clearly spelt out the terms and conditions of their appointment before they were airlifted to Kingdom of Saudi Arabia for their assignment.

485

11.0 CONDITIONS FOR SUSPENSION:

The Commission may order for the suspension of any NMT personnel/nominee from SMPWB/A/C or Travel Agency where it appears to the Commission after due enquiry that: –

- i) The Medical Personnel has/have failed, refused or ignored to comply with the directives issued by the Commission under these guidelines;
- ii) The Commission is satisfied that the operation of the Medical Personnel may constitute danger to the pilgrims who may use the services of the NMT;
- iii) The Medical Personnel is ordered by a competent Court of law to stop or suspend its operation;

Where a Medical personnel is found to have underperformed or acted in an untoward manner, the Commission may by notice in writing require the Medical Personnel to remedy the defect within such period as may be specified in the notice and on failure to remedy the defect to the satisfaction of the Commission within the specified period, the Commission may suspend the activities of such person.

12.0 REPORT ON HAJJ OPERATION:

- 12.1 With full support from Medical Data/Surveillance Unit, all clinics (pre and post Arafat) shall provide accurate and up-to-date reports based on the agreed framework of reporting.
- 12.2 The final Hajj medical report is the responsibility of the Chairman Medical Committee. Sectional Heads (Doctors, Pharmacists, and Nurses) will be fully responsible for their Sectional Reports and will report this to the Chairman Medical Committee through the Chief of Operations.
- 12.3 The final report shall be submitted to the NAHCON Chairman/CEO., before leaving the kingdom Saudi Arabia or one week after operation.

13.0 GENERAL PROVISIONS:

- 13.1 Application for National Medical Team membership shall be made through an online NAHCON portal @nigeriahajjcom.gov.ng.
- 13.2 That all NMT personnel's visa, travel arrangements, logistics and accommodation in Makkah and Madinah shall be secured centrally by NAHCON, whereas, during the MASHAEER activities in Muna and Arafah, State nominees should stay in their tents with their pilgrims while NAHCON will make travel arrangements and provide tents for NAHCON nominees.
- 13.3 Clinics should be spacious enough with good ambiance that can accommodate even a high turnover of patients.
- 13.4 Postings of NMT personnel while in Makkah should be done to conform with language and tribal barriers for ease of pilgrim's communication.
- 13.5 That all Drugs and consumables shall be procured centrally by NAHCON, and that SMPWB/A/C shall contribute 30% of the total sum of the drugs to be procured.
- 13.6 NMT personnel allowances and remunerations shall be fully remitted by the appointing SMPWB/A/C to NAHCON for payment uniformly, with a single coordination platform and management structure to be led by NAHCON. The duration of engagement of personnel and the rates to be paid will be jointly agreed by NAHCON and SMPWB/A/C.
- 13.7 All personnel/staff/state officials must assist pilgrim(s) in distressed health condition or report same to the nearest clinic or the NMT personnel. Any photo-shoot/video recording of pilgrim(s) in such condition is highly prohibited and shall be sanctioned accordingly.
- 13.8 NAHCON/STATE/NMT shall make adequate efforts in enlightening the pilgrims on the provisions of paragraph 13.7 above.
- 13.9 Generally, the loss of pilgrim's identity card, shall not be a basis for refusal by any medical personnel to attend to such pilgrim.

NOTE:

These guidelines provide for the appointment and requirements in the provision of medical services to Nigerian pilgrims and may be reviewed by NAHCON from time to time as the need arises. Non compliance with any provision of this guideline shall attract sanction in line with the extant provisions provided under National Hajj Commission of Nigeria (NAHCON) (Establishment) Act, 2006.