HID INFO line

Kingdom of Bahrain
Ministry of Health
Health Information Directorate

Ministry of Health
2004 Major
Health Information Directorate
Achievements

January 2005, Issue No. 13

"Information is an important and integral Part of the plan for improving Bahrain healthcare services, that is why implementation of Health information technology solutions is one of the top Ministry priorities"

H.E. Dr. Nada Hafadh, Minister of Health

"The Ministry is embarking on major initiatives for implementation state of the art Information technology solutions; this comes as part of the Ministry of Health initiative in improving the Bahrain population health status"

Dr. AbdulAziz Hamza, Undersecretary of Health

"Improvement of existing healthcare IT infrastructure is one of the major undertakes the Ministry of Health is focusing on, this is aimed in improving the utilization of the existing IT services"

Dr. Fawzi Ameen, Assistant Undersecretary for Planning and Training

"Partnering with the private sector to launch ICT services will be the main initiative that the Ministry of Health will take in the next 24 months, we have found that this is the most effective approach to achieve the Ministry of Health ICT strategy goals and objectives"

Mr. Ahmed A. ALHujairy, Director Health Information Directorate

Health Services Without Walls

Person

By: Barrie Dale Radburn

Over the years, ORACLE Applications have tended to have been developed in isolation. This has led to a redundancy in data in that each Application has data entry facilities and storage Tables of its own. This is most notable when considering "people"-type entities. For instance there is more than one Application that gathers information on Doctors; others gather information on Nurses, and yet others gather information on Patients. Each of these Applications gathers what might be called base data and there is therefore a duplication of information, or, worse still, differing information for the same person.

The purpose of the Person Project has been to examine each of the ORACLE Applications and determine where "people"-type information is gathered and, where relevant, to create a single Table in the ORACLE Common Schema for each person type.

In addition, a Person Table has been created that holds demographic and base data (Arabic Name, English Name, Government Address, Date of Birth, Date of Death, Sex, Nationality and Telephone Numbers) for each person for whom information is required in the Applications. This Table is organised by CPR Number and it is intended that this number be used as the link to every other person-type Table created.

The initial load of the Person Table was taken directly from the current ORACLE Patient Master Index (OPMI), which will now be discontinued; patient information will be held on a newly-created Patient Table. Each night, a daily upload is done to the Person Table of new MDIS PMI records, or records where the demographic details have changed.

Apart from the Student Immunisation Registration System, which is currently linked to the OPMI, it has not been the purpose of the Person Project to link existing

Applications to the Person Table; that will be done by other Project(s) yet to be defined.

As the Applications are linked, the facility will be included to retrieve records from the MDIS PMI that do not appear on the Person Table (e.g., a new Pharmacist in the Drug Control System). The upload will be done on-line and so the information will be immediately available to the requesting Application.

The benefits of this approach are:

1) All people will be identified by a common factor, the CPR Number, which is the Bahrain Government's standard means of identification.

2) Data redundancy/duplication will be eliminated.

3) Demographic base data will only be able to be refreshed from CIO, who are the owners of such data.

Project team members
Feom left:
Manal Ahmed,
Barrie Radburn,
Ebrahim Adim,
Sanjeev Sukare and
Mohammed Khalil

Barrie: Senior System Analyst

Implementation of IT Security Solution

By: Rajesh Verghese

Trend-Micro Antivirus

Ever since MoH private network was connected to the public Internet, network security is a growing concern. Threats like Intrusion, Hacking, Virus, DoS (Denial of Service) are the main ones. E-mail virus and e-mail spamming are the latest addition to the list of threats.

Our internet access was through the Novell BorderManager Firewall and Proxy. BorderManager is an excellent product which keeps the intruders out of our network. And the proxy part of the product allows authenticated MoH users to browse the internet safely. This took care of the Hacking, Intrusion, Browsing issues. For E-mail we used to have an Anti-Virus Gateway - WebShield, a product from McAfee.

All these products were software based, depending on the platform it runs. HID was constantly on the lookout for a more comprehensive product. Several products were evaluated. One of the products evaluated was Fotrinet's FortiGate FG300. This performed extremely well during the testing phase. The FortiGate FG300 is a product which combines Anti-Virus, Firewall, IDS, e-Mail spam block and VPN implemented in a hardware level. With this product implemented MoH's network is well protected from all kinds of external threats.
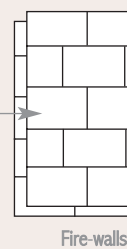
Trend-Micro Antivirus

Network security includes internal threats also. Virus is one of the major threats facing a desktop computer. The Government of Kingdom of Bahrain has signed a deal with Anti-Virus manufacture Trend-Micro. As a part of the government, MoH also has implemented Trend-Micro products in its network environment.

The desktop product is called OfficeScan Corporate Edition 6.5. The Server products called SeverProtect 5.x are installed and configured on all the servers. The products are installed and controlled through a central system called the Management Console, which runs on a Windows Server. All products of Trend-Micro can be controlled and configured through this console. This makes the updates of antivirus definitions easily manageable and available.

Internet

www.moh.gov.bh

Fire-walls

Rajesh: Network Engineer

Upgrade of the Connectivity between Health Information Directorate and the Head Quarters from Frame Relay to Multiprotocol Label Switching

By: Victor Del Castillo

MOH still supports 3 legacy systems in its fold. These are: OLIMS which handles the inventory activities of the ministry's users, CHS, which takes care of important information of those who have joined the College of Health Sciences as students, and the PHI for the government's primary health insurance for those employed in the private sector. These applications house their data at the Central Informatics Organization's (CIO) mainframes and are accessed remotely thru a Novell communication software called 'Terminal Pro'. Data Encoding are done at the workplaces while output forms are similarly printed in the same sites. On the other hand, reports can be printed on site or when the volume is quite great, an option is indicated for the printing to be done at the CIO's computer center.

At the time that these applications were developed until for quite some time, the terminals and printers were all connected to controllers in individual ports or when more ports were needed, multiplexers served the purpose. A modem would complete the data communication network with the controller connected to it. With the advent of area networks, controller-connected terminals were replaced, leaving only the printers connected to the controllers. This was due to the problems faced in the changeover process. Unexpected characters would be printed and unnecessary page ejections would occur.

A breakthrough came when after numerous testing, the stray characters being printed, were discovered to be caused by some control characters in the communication software. Thus, the job of moving the printers from controller-connected to print servers was finally jump-started. With the able assistance of CIO and the joint efforts of both PIMS and TSU members, this project reached completion and the ministry is now able to realize savings in its equipment and communication lines rental.

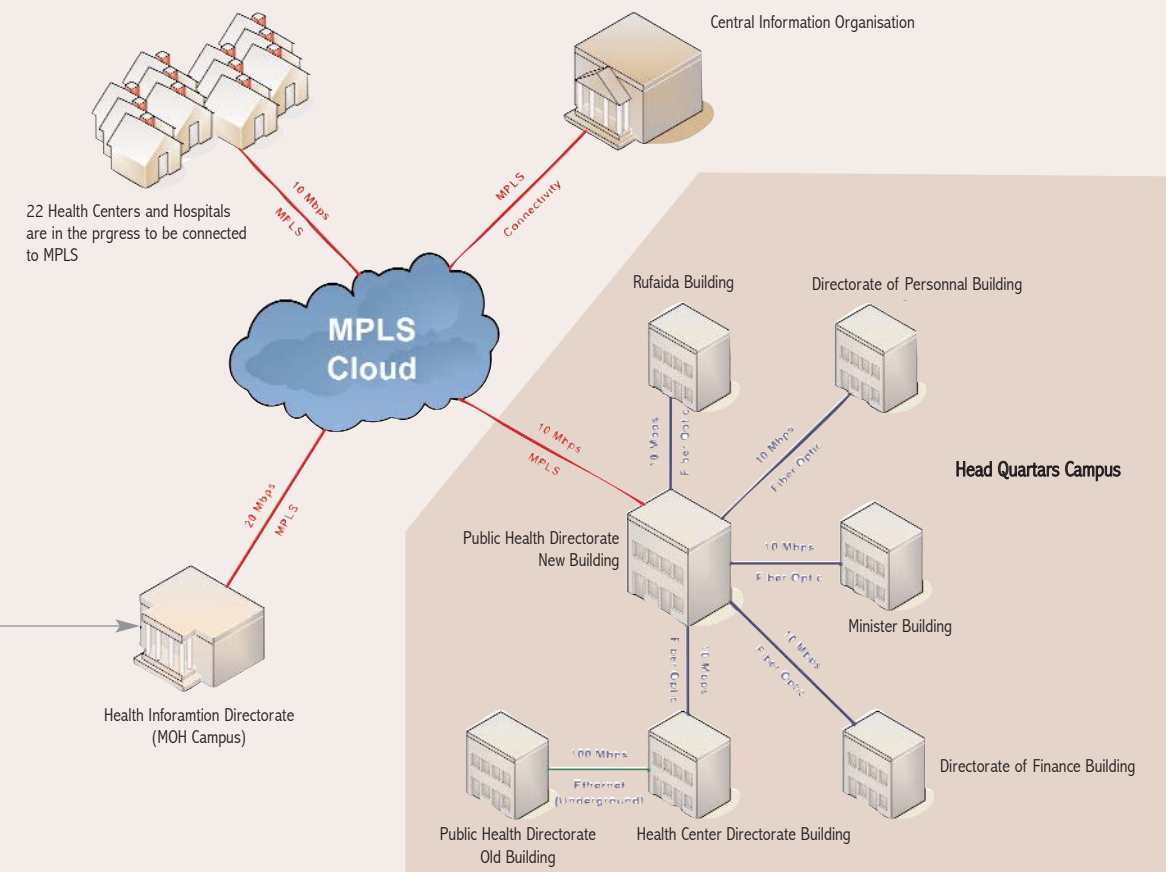### Eliminating of Frame Relay Lines in Head Quarter Campus

Eliminating of Frame Relay Lines in Head Quarter and connecting all adjacent buildings with Fiber Optics Cable was then accomplished. Retrieval of the 128/64 Frame Relay Line at the Directorate of Health Center Building was the last link before HQ was declared 100% LAN Campus. Directorate of Public Health is the Main hub in the area. Aside from having the File and Print Sharing Server, the MPLS appliance and Fiber Optics concentrator and switches reside here.

Directorate of Finance, Directorate of Personnel, The Minister's Building, Rufaidah Building, Health Center Directorate/Birth and Death Registration Office are all connected to Directorate of Public Health Building through 100 Mbps Fiber Optics laid underground. And with the combination of 100 Mbps Ethernet cabling, 100Mbps switches within all buildings and 10 Mbps of MPLS speed, utilization of the networking resources are achieved to the maximum.

Implementing Fiber Optics Connectivity in the Head Quarters not only speed up the work flow and reached the utmost work output of the staff and users but also eliminated the leasing expenses of the several Frame Relay Links permanently.

Providing IT solutions may indirectly affect MoH staff in general, but the capability of speeding up and rolling out better services due to IT upgrade will surely and directly affect the patients and clienteles in a very positive way.

Vector: Network Specialist

Central Information Organisation

22 Health Centers and Hospitals are in the prgress to be connected to MPLS

10 Mbps MPLS

MPLS Connectivity

MPLS Cloud

Rufaida Building

Directorate of Personnal Building

Health Quartars Campus

Public Health Directorate New Building

Minister Building

Health Inforamtion Directorate (MOH Campus)

Public Health Directorate Old Building

Health Center Directorate Building

Directorate of Finance Building

SAA HOST Printing

By: Rajesh Verghese

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Birth Certificate Printing

By: Samar Abdul Salam

Birth and Death Registration section at Public Health Directorate is responsible to issue the birth certificate to all new born in Kingdom of Bahrain. In 1993 Birth Registration system was implemented in Birth & Death registration section to register all new born and parents information, and produce a manual Birth Certificate for the requester.

Upon the request of Ms.Khadijah Abdul Aal "Head of Birth & Death registration section", the Director of Public Health "Dr. Sameer Khalfan" contacted HID to develop a facility to print the Birth Certificate information electronically. The Project was actually started on November, 2003. Project team members were formed as follow:

Public Health Directorate, Birth & Death registration section: Dr. Sameer Khalfan, Ms.Khadijah Abdul Aal and Fayza Ahmed.

HID: Ms. Samar Abdul-Salam (project Manager), Ms.Huda Alaiwi, Mr. Ebrahim Adam, Mr. Hussain Jassim and Mr. Sanjeev Sukare.

Since the Birth Certificate is an official legal document, Public health Directorate requested the new Birth Certificate information to be printed in bi-language (Arabic and English), to help the parants to use this document in any forign country if needed.

The Kigdom of Bahrain has the honer to be one of the first countries in the region to implement the printing of Birth Certificate electronically in both languages.

Birth Certificate contains Child CPR, Child and Parants names, Sex, Date & Place of Birth and date of registration. This project was implemented on November, 2004 in Birth & Death registration section. The implementation of such project helps in processing the production of Birth certificate in minimal Time.

Finally, after the success of the project, HID will undertake another project of implementing the Death Certificate electronically.

The new birth certificate

Projects team members in a meeting with the users

Samar: Senior System Analyst

Inauguration of MoH web site

By: Maban Mansori

Under the patronage of H.E. Dr. Nada Haffadh, Minister of Health, the Ministry of Health successfully launched a new version of its website on Internet. The ceremony was held at the Gulf Hotel on 11th of May 2004. It was attended by senior officials from the Ministry and other guests.

The launching started by a welcome message from Mr. Ahmed AlHujairi (Director, Health Information Directorate) who gave brief explanations about the aim of this new web site and its main features that will benefit all citizens of Kingdom of Bahrain.

Then, Ms. Heyam Hazeem (Project Manager of MoH Website Project) conducted a short demo on the web site explaining its objectives, features and services. She outlined that the website is rich with informative material.

Later, H.E. Minister launched the web site, and invited all to visit it and have an overview of its services. Finally, H.E. Minister thanked all the staff of Health Information Directorate who participated in this successful project. She emphasized that all efforts need to be directed to sustain the web site so that quality is integrated into all the services of Ministry of Health.

The web address of the website is http://www.moh.gov.bh

H.E. Dr. Nada Haffadh launching the website

Maban: Computer System Analyst

Computer Equipment Leasing

By: Mahish Ravindranathan

Ministry of Health has more than 500 Personal Computers and Printers which are outdated and needs to be replaced. Furthermore there are new user requirements and equipment request which needs to addressed urgently.

MoH is struggling in meeting the user's requirements through purchasing scheme.

HID receives more than 200 request yearly for PC's and Printers and these requests cannot be met through the budget allocated.

Therefore, Ministry of Health has taken a big leap and has considered leasing the best choice for computer equipment procurement. Although leasing option is a bit more expensive, the extra cost can be justified by the following benefits:

Facilitate rapid technology deployment: Systematic technology replacement. New equipment can be obtained, that will work smooth with new releases of applications.

Increased number of Equipments: MoH requirement of equipments is huge as more services are getting dependent on computers. At the same time the purchasing budget is relatively very limited. Therefore, leasing is a preferred option to meet MoH requirements.

User Satisfaction: As new equipments will always be deployed, downtime will be minimized and this will keep MoH users more effective on their tasks.

Help Smooth Budget spikes: Leasing is considered an operating expense and spreads costs over time, rather than requiring repeated large expenditures in the particular fiscal year.

Facilitate Standardization efforts: Total maintenance costs for MoH equipments can be lowered as the equipments will always be under warranty. A comprehensive leasing contract can be signed with the vendor to meet MoH requirements

No Asset Management: With Leasing option will remove the burden of managing huge amount of assets. This is including storing, deployment, managing, and disposal. The vendor will be responsible for managing the equipments.

Following are just a few benefits of implementing the Computer Equipment leasing project in the Ministry of Health.

1) Replace all Pentium-I & Pentium-II with either Pentium 4 or Pentium III PC's

2) Replace some of the Pentium-III with Pentium-4 where required

3) Provide Equipments for HID projects

4) Provide equipments for new MoH requirements

5) Implement Printer sharing project

6) Replace Dot Matrix printers in Patients area

7) Provide scanners, inkjets, LCD Projectors wherever needed.

8) Provide laptops to key people.

Implementation of this project is a huge step in overcoming the existing shortage of computer equipments in the ministry. Moreover it will enable the ministry to extend its services to the patients effectively and satisfactorily.

Mahish: Equipment Analyst

Health Center Automation Project Phase IV (HCAP4)

By: Nooriya Yousif

Health Center Automation Project Phase IV was initiated in September 2003, but was suspended several times due to the delay in acquiring hardware. The aim of this project is to automate 6 more Health Centers (Jidhafs, Hamad Town, Moh'd Jassim Kanoo, East Riffa, Kuwait and Budaiya). All other Health centers were automated through Health Center Automation Project phases 1, 2 and 3.

The scope of this project is to provide the necessary infrastructure to enable these health centers to connect to the MDIS applications such as Patient Registration (PMI), Appointment functions (OPD) for General Practise and Dentistry service at Medical Records, Laboratory and Radiology. In addition to that, to implement On-Line Inventory Management System (OLIMS) and also to switch connectivity of Mother &Child Healthcare System (MCH), Time Attendance System (TAS) to the wide area network.

The main aim in such automation is to enable these health centers to exchange information with each other and the major hospital in the kingdom, to reduce amount of manual work, to improve the quality of services provided to the patients at the health centers, and improve staff utilization and efficiency.

This project is successfully completed except for implementing Laboratory and Radiology Systems at Budaiya Health center due to the maintenance work at these areas and the shortage of licenses. The new Target date for completion is February 2005.

Nooriya: Senior System Analyst

Patient Admission Waiting List Management System

By: Siddiqa Al-Qassub

This project was initiated to correct the errors and rectify the shortcomings in the existing MSIS Waiting list management module.

The main goal was to integrate it with the ATD system, so that bookings made from the waiting list system can update the ATD system. It is primarily being used for emergency admissions.

Earlier, it was not possible book and hold an available bed in a ward for the expected admission of an emergency patient. Often, by the time the patient is moved to the ward to be admitted, another patient is admitted in the vacant bed, due to lack of communication. However, after the implementation of this project, it is possible block a vacant bed for a specific patient and only he can be admitted into that bed. The system will not allow a patient with any other CPR to be admitted into that bed unless specifically released by the user.

Siddiqa: System Analyst

Minor Development (Software Modification requests)

Application development Unit successfully completed 264 software modification requests between 1/1/2004 and 30/11/2004. This involved adding new features, making changes to existing features and removing errors from the existing software applications.

Human Resources Development

Health Information Directorate believed that human resources are most important asset, thus, it is committed to invest in training and development of all the staff.

In 2004 members of HID participated in several national and international activities either by submitting a study paper and presentation or by attending the conferences to benefit from others experiences.

Bahrain Formula One Medical Services Project

By - HID F1 Project Team

Ministry of Health was given the opportunity to provide the Medical Services for the Formula One Grand Prix event held for 3 days from April 4th, 2004 in Bahrain International Circuit.

The Project Team was consisted of MoH and BDF Hospital employees selected from both Medical Services and Administrative Services Directorates. Health Information Directorate's Team was also a part of the project team which was committed to provide Project Management and IT & Communication Support Services.

Formula 1 Project Office:

A Project Management Office was established in Rufaydah Centre with a Project management Administrative team to co-ordinate and supports the work of the Medical Services teams and other support services teams. The project office was responsible for scheduling, co-coordinating and auditing all team tasks, processes and deliverables to ensure compliance with the projected schedule and budget.

IT & Communication Support Services:

A dedicated line was established for communication along with the development of Internet and Intranet sites for planning, implementing, and communicating the F1 Medical Services Strategy.

The main responsibility under IT & Communication Support Services was to setup a reliable, secure and efficient Communication link and Data network for all Teams to be utilized and ensured the best medical services were available for this major international event.

Business Intelligence (BI) Sharps Up SMC Bed Utilization

By - Heyam Hazeem

One of Salmanya Medical Complex's main obstacles in providing better health services has always been characterized as the absence of accurate and timely information that facilitate a necessary efficient decision making process. The existing health applications are not directly sharing information, as they are working in silos, which make it difficult to analyze resource utilization within the pool of SMC medical services.

Before introduction of BI, Bed Utilization management system was not sophisticated enough to ensure full bed utilization at all times. Wards information was difficult to gather timely and as a result a lot of lost opportunities were discovered post facto.

In an attempt to solve these problems, two groups were formed. One from SMC "Bed Utilization Group (BUG)", on the other hand, the second group was formed at Health Information Directorate (HID), with the mission to analyze these requirements and to introduce "Business Intelligence (BI)" Application to respond to SMC's requirements of better decision making and efficient bed utilization. The two teams worked closely together and within few months time the BI saw its way to real life and started solving "Bed Utilization problems in SMC wards".

Development progress of Business Intelligence Project (BIP)

The group first made inventory of all systems involved in SMC bed utilization. BIP analyzed the overall structure of information flow and took a note of all the technical and business process problems

Throughout the project, the process of admission, transfer & discharge was reviewed, scrutinized and re-engineered to suite the actual timely information requirements. BIP team received a remarkable cooperation from almost all departments involved such as medical records, admission office, medical review office and nurses. They all have actively participated in the satisfaction of Bed Utilization Group's requirements.

A lot of efforts were paid by the BI team to modify and integrate the health applications making sure that data outcomes were defined, valid, accurate and reliable to use for analyzing purposes.
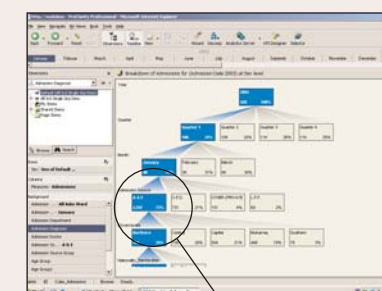
Several BI reports were developed on Microsoft Excel that helped analyzing admission, discharge and bed utilization of SMC wards. SMC administrators, chairmen and medical records were trained and made familiar to the uses of BI reports.

The achievements of this effort was first felt when bed control was implemented in SMC wards. Patient waiting time in A&E was reduced dramatically. Admission registrar today can view the status of beds in all wards on-line and admit patients on actual vacant beds according to specialty. Nurses of the wards are now entering patient's transfers and discharges and have a better picture of their bed occupancy rates.

HID and SMC today are no doubt proud of this new system, which made it possible for them for the first time to control their core business and render the

acceptable in-patient services mentioned above.

The writer gives the credit of this excellent effort to all members of BI team and business users for their positive contributions and thanks HID and SMC managements for their support and continuous encouragements.

Admission Source							
A & E		O.P.D.		OTHER (PRIVATE)		L.P.P.	
2,597	73%	731	21%	151	4%	69	2%
Governorate							
Northern		Central		Capital		Muharraq	
761	29%	736	28%	554	21%	468	18%

Analysis of admission in Salmanya Medical Complex wards by admission source for the 1st quarter of 2003

Heyam: Head of Application Development Unit

Publications

Health Statistics 2003

The Ministry of Health devotes a special attention to update health statistics on annual basis because it realize very well the importance of availability of accurate and updated data which is necessary for decision makers and program managers to develop their plans and polices.

The Health Information Directorate at the Ministry of Health has released the 23rd edition of the Health Statistics Report - 2003, which includes statistics about financial and human resources, primary and secondary care and private hospitals. The major changes in this edition are the implementation of the International Classification of Diseases (10th Revision) for the morbidity and mortality data, and a comprehensive change was made in the Bahrain Defence Force Hospital chapter in terms of contents and layout. Also, a new chapter is added to the report to cover the Bahrain Specialist Hospital statistics.

Dissemination Health Statistics

The Section played a major role in the provision of health statistics and health indicators. HID was coordinating the work of exchanging the data closely internally with Public Relation office, other ministries and private hospitals. As will as intern-ational agencies such as World Health Organization and Gulf Counties executive Counsel - Health Ministers

HID Manual

The directorate has implemented a number of policies designed as a part of the Ministry of Health policy network, to provide an environment which is robust and resilient to all aspects of :-
   Security
   Deployment of health information technology
   Technical innovation, and Customer support.

As a continuation of the policy network, directorate Currently, undertake the project to develop "HID Manual" and expected to completed by end of Dec. 2004, with main goals:
   To document all HID standards, functions, procedures, & guidelines.
   To encourage all MOH staff in general and HID staff in specific to use a unified standard, procedures, & guidelines.
   To communicate these standards to all MOH Staff

This manual lists all of the current Health Information Directorate procedures. Some of these procedures are linked to particular services which reflect the service provided by a particular section to clients, others sustain the directorate environment in general.

PPIM Role and Responsibilities

By: Barry Danirll

In the autumn of 2004, HID instigated the internal committee *Programme Planning & Issue Management Committee (PPIM)*. The aim of this committee is to align HID project priorities with MoH Strategy, certify that they conform to the HID Mission, and coordinate to ensure the success of HID projects

The committee operates at the tactical and operational levels, to ensure that projects are conducted to the maximum benefit of the MoH, to recognized standards and within MoH and HID policies. The responsibilities fall into 3 groups.

1. Policy. The group is responsible for maintaining policies, procedures and standards as they relate to the methods used for, and quality of projects conducted within HID.

2. Tactical. The group ensures that the tactical plan created at the end of each year, covering the following 2 -3 years, is aligned with the HID and MoH strategic direction.

3. Operational. The group meets regularly (bi-weekly) throughout the year to monitor progress and performance, react to changes in schedules,

resources and business priorities, and make such adjustments to the current year plan as deemed necessary.

The committee reports directly to HID Management. It is responsible for resolving project issues, but any issue that falls outside the committee's field of influence is escalated to HID Management for their attention.

The committee in one of the meetings

Barry: IT Advior

Ministry of Health Achievement - 2003

Publication section took the responsibilities of production of the Ministry of Health annual report with coordination with other directorates. The report covered the most strategic achievements accomplished during 2003 that reflect the government orientation towards improvement and development. Healths of the population and manpower development have been and continue to be the main concern and focus for Bahrain leaders represented by His Majesty King Hamad Bin Issa Al Khalifa, His Highness Prime Minister Shaikh Khalifa Bin Salman Al Khalifa, His Highness the Crown Price and the Commander-in-chief of Bahrain Defence Force, Shaikh Salman Bin Hamad Al Khalifa.

Participating in different committees

The directorate has participated effectively in various committees formulated by the Ministry's top managements at the Ministry level such as:
- Haj Committee.
- MoH electricity consumption committee.
- Health System performance committee.
- National Strategies for prevention of blindness.
- Program Performance Budgeting System.
- Salmanyia Hospital Admission Improvement Group (SHAIG)
  Salmanyia Hospital Pharmacy Improvement Group (SHPIG)
  Tuesday Clinical Meeting.

The National Committee for Prevention of Blindness held a meeting for discussing "World sight day - October 2004"

الشبكة الصحية بين بتلكو و وزارة الصحة

وقعّت وزيرة الصحة الدكتورة ندى حفاظ مؤخرا مع السيد رشيد معراج رئيس مجلس ادارة شركة البحرين للاتصالات السلكية و اللاسلكية (بتلكو) مذكرة تفاهم مبدئية حول مشروع تقني صحي جديد باسم "شبكة المعلومات الصحية" و يهدف المشروع لتحسين وتطوير خدمات الاتصال في مجال الرعية الصحية .

و قد نوه السيد أحمد الحجيري مدير ادارة المعلومات الصحية، المدير التنفيذي لمشروع شبكة المعلومات الصحية الى أن المشروع يتكون من خمسة مشاريع متكاملة مما يمكّن الوزارة وبتلكو من تطوير قنوات جديدة للاتصال بين مراكز الرعاية الصحية والأطباء وموظفي القطاع الصحي والمجتمع .

و أكد الحجيري أن المشروع يهدف الى تمكين الأفراد في المجتمع من الحصول على الخدمات الصحية من خلال الهاتف والأجهزة التي تعمل باللمس على الشاشة والأنترنت . وسوف يتم ربط المستشفيات الخاصة والعيادات والصيدليات بشبكة صحية مركزية واحدة .

و الجدير بالذكر أن جميع المشاريع المكونه للمشروع الرئيس سوف تدار بالتعاون بين شركتي بتلكو و ادارة المعلومات الصحية ، و هي كما يلي :

1- مشروع موقع بوابة شبكة المعلومات الصحية على الأنترنت.

2- مشروع العلاج عن بعد.

3- مشروع مركز الاتصالات الصحية.

4- مشروع شبكة المعلومات الصحية للرعاية الخاصة.

5- مشروع خدمة الرسائل الصحية الالكترونية.

جريدة الأيام، العدد 5621، بتصرف

Social Committee

The Social committee in HID has been formed since 2000 and it has the responsibility of coordinating and organizing social events related to HID. It consists of 9 volunteer members from HID.

In the year 2004, the committee organized a trip to Sakheer tent in February. And it organized the HID's annual awarding ceremony in April, which was under the patronage of the former minister of Health Dr. Khalil Hasan. In July, the committee organized the HID family day for the staff and their families in the Gulf Air Club. Then, in the Occasion of Eid Al-Feter, the committee organized a gathering for a breakfast in HID. In addition to the mentioned activities, the committee has organized a variety of social events such as farewell parties for HID staff and contractors, as well as staff gatherings for swimming pools, lunches and breakfasts inside and outside HID.

Social committee team
from left
first line: Amal, Auhood, Arif, Hussain
Second line: Huda, Hussain, Ali and Jaffer

One of the social comittee activites

H.E. Dr. Nada Hafadh visit to Ministry of Health stand of FutureIT Conference & Exhibition 2004 at Gulf Hotel, Bahrain - May 2004