

## **Report of link Visit to Ethiopia in November 2011**

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### **Summary**

The link visit in November 2011 involved teaching and training, donation of equipment, evaluation & monitoring, standard setting and needs assessment.

Between the 4<sup>th</sup> and 19<sup>th</sup> November 2010, 14 members from the health link visited Ethiopia. During this period the link members organized

### **Training/teaching**

Training the trainers programme for the nurse tutors, CME skills workshop in Emergency obstetrics and neonatal resuscitation for the midwives, Training in Safe and Clean delivery and newborn care for the Community health extension workers (HEW), emergency obstetrics surgery skills for MSc health officers and junior doctors, advanced gynecological skills for the specialists and skills update for the nurse anesthetists. A total of over 400 frontline health workers were trained during this visit.

The link pathology team also supported Hawassa Referral Hospital pathology staff towards their WHO accreditation goals.

### **Support for the health facilities:**

- Donated 30 oxygen concentrators to the hospitals in SNNP Region
- Paediatric, pathology, surgical and anesthetic equipment to Hawassa referral hospital
- Surgical instruments, suction machines, anaesthetic equipment and books to newly opened Adare Hospital
- Donated 5 electricity generators to 5 rural health centres in the Gedeo zone.
- Organized a workshop for setting minimum standards of care at all of the 32 HCs in Gedeo zone

### **Needs assessment and planning for the future**

- evaluation of link outcome in three exemplar HCs and needs assessment in Chelelektu and Chichu HCs.
- meetings to plan future activities with the HC staff, with the Zonal and Regional Health Bureau and Hawassa University College of Medicine and Health Sciences.

### **Introduction**

This visit, responding to local needs, involved 14 health professionals from UK (including a guest midwife from the Kings College Hospital, London and a guest Professor from Oxford) and as before needed several months of careful planning at both ends.

### **Objectives**

The main objectives of this visit were

- Training of the trainers and midlevel frontline health care workers as well as training of the HEWs.
- To support laboratory services at Hawassa
- Donation of electricity generators to health centres in the Gedeo zone identified during the last standard setting workshop to have poor electricity supply.
- Donation of oxygen concentrators and other essential equipment to the HCs and the hospitals
- Agree minimum standards of care at HC level in Gedeo zone
- Evaluate outcome of link activities

### **The Visit**

14 members visited including myself, Robyn Phillips (evaluation and quality control), Emma Mills, Sarah Norris Jane Herve, Anna Cannon (all midwives), Essam El Hammamy and

Professor CB Lynch (both gynaecologists), Jill Curtiss, Richard Roberts & Seema Chowdhury (all anaesthetists), Peter Dale (paediatrician), David Williams & Pamela Powell (both laboratory). Essam, Chris, Seema and Anna were there in their first visit with the link to Ethiopia. The visiting team were joined as observer by Dr Tony Jewell, Chief medical Officer of Wales, Martin Wade, Journalist from South Wales Argus and Hannah and Andrew both gap year students. SNNP Regional health kindly organized a large bus for transport of the team from Addis to Hawassa, the link paid for the driver and fuel expenses.

### **Training and teaching:**

A **Training the trainers** programme was organised for the nurse tutors from all of the 8 nursing colleges/universities in SNNPR. 16 attended. Head of Nursing at Hawassa Mr Aweke Yilma and Dr Negusse Paediatrician, joined the link members as faculty for the course. Dawit a participant from last year also joined voluntarily as faculty willing to give back some of the training he received last year.

The participants were then observed as trainers in the **CME skills workshop for 4 days in Emergency obstetrics and neonatal resuscitation** for 28 midwives working in rural HCs. Participants included midwives from HCs all around from SNNPR excluding Gedeo zone who were trained last year. *Training manikins, pelvis and dolls, USB sticks loaded with training materials* were donated to the 8 nursing colleges and universities and all of the midwives were provided with ambu bags and training materials for their HCs.

A workshop on **emergency obstetric operative skills and management of post partum haemorrhage** was arranged for the 2<sup>nd</sup> and 3<sup>rd</sup> year MSc health officer students and GPs from Adare and Alaba hospitals. A total of 35 attended.

Another workshop on **advanced management of PPH and Hysteroscopy skills** (including live demonstration) were arranged for the specialist gynaecologists working in SNNPR hospitals in which 10 attended.

With support from the *Mothers of Africa charity* a workshop in **skills update for the nurse anaesthetists** was organized in which a participant each from all of the 22 hospitals in SNNPR attended. The participants were also given textbooks in anaesthesia as well essential anaesthetic equipment to take back to their hospitals.

In Dilla the link organized a follow up **workshop on setting Standards** of care at health centres in the Gedeo zone. The workshop was run by Robyn with help from Nenko and was attended by 32 representing all of the health centres currently working in the Gedeo zone.

A course dinner was organized for the participants, a great occasion with members of the link again testing their dancing skills with the young course participants and local experts. Tony excelled in his twists!

In the second week the link organized 3 separate 2 day workshops Training in **Safe and Clean delivery and care of the newborn** in the villages for 70 HEWs from the Sidama zone in Yirgalem, 106 HEWs from Alaba special district in Alaba and 114 HEWS from Sodo and Shone zones in Sodo. Sarah, Anna and Emma were supported by the local midwives/ health officers Debrework.

*Laboratory* – following request from the Hawassa Hospital David and Pam assessed and advised on the progress in laboratory services at Hawassa towards accreditation for WHO standards.

#### **Donation of equipment:**

**30 oxygen concentrators were** donated to SNNP Regional Health Authority. One of these were donated to the Chichu health centre, 2 for the new Adare Hospital and the remaining to be distributed to 19 of the hospitals in SNNPR ( Hawassa - 20, Dilla -6 and Alaba – 2 - have all been supplied with adequate number of oxygen concentrators in the recent past).

**5 large electricity generators** were donated to Worka, Herede, Banko Tatuto, Gerbota and Mokonisa health centres. These health centres were identified by the Gedeo zonal health office to be most rural in desperate need of electricity supply.

**Hawassa Referral hospital** – following request from the hospital, equipment for the paediatric unit including bone marrow aspiration sets, exchange transfusion sets, number of urological surgical instruments and essential items for the histopathology lab such as microtome blades and teaching slides , CDs and stains for haematology teaching were donated by the link. During his ward rounds Peter found that one of the incubators donated by the link to the neonatal unit in the past were left as condemned. Peter managed to clean it up and with minimal effort got it going again!

**Adare Hospital-** the link members were welcomed in the new Adare primary care hospital by the Medical Director Dr Jiksa. The link donated a number of surgical instruments, a suction machine and 2 oxygen concentrators along with some books to the hospital.

**Evaluation and monitoring:**

On this occasion Robyn and I made brief visits to assess outcome of link involvement and support to the following institutions:

**Dilla hospital-** The hospital was found to be busy. Dr Anwar, the only surgeon, showed us around the surgical wards and sought advice regarding few complicated surgical patients. He also showed around the operation theatre which lacked most basic equipment and was in a poor state. The wards and delivery room was also found to be in lack of cleaning. In the very busy laboratory of the only two working microscopes one was donated by the link few months back.

**Chichu Health centre-** The link visited Chichu health centre and were pleased to note that the motorbike ambulance donated in March 2011 is working well and so far have made nearly 80 visits including some from up to 20km distance. The link was told that the motorbike ambulance is also at times being used by another nearby health centre when they have problem with transport of critically ill. The centrifuge donated by the link to the laboratory was working well. The link donated as promised before an oxygen concentrator to the health centre during this visit.

**Chelelektu HC:** The health centre staff and in charge Mesele welcomed the team and showed around. The delivery room has been improved following earlier suggestions from the link. Staff proudly showed us the new delivery bed, microscope and the electricity generators donated by the link since March 2011. The motorbike ambulance also working well and so far has made nearly 50 visits. The health centre has serious problem with water supply and the link team stressed importance of this to a member of the woreda health office.

**Yirgacheffe HC:** Unfortunately since Elias and Debrework have left the HC, standards have gone down in some areas. Motorbike ambulance is going well and has made over 600 visits but the only driver is apparently due to leave the HC soon We discussed these issues with new HC in charge Mesele.

We were pleased to hear that a primary care hospital has now been agreed for Yirgacheffe, building due to start in few months. The provisional plan for the site was 2km away from the town on a hill. We discussed with the new mayor of the town and stressed importance of the hospital to be built in an accessible location close to the town. He agreed to discuss this with the town council as soon as possible.

**Wondogenet HC:** Tesfanesh has left the HC and has been replaced by Waesse who was not aware of the oxygen concentrator in the delivery room. The motorbike ambulance in spite of having been serviced only a few months earlier is not working since July. The driver seemed to be nonchalant about this and happy as he did not have anything to do. We discussed all these issues with all the staff of the HC and reminded them of the strong team spirit the HC has always demonstrated

**Alaba Health Centre:** The health centre remains busy as ever but they have also been able to recruit more staff. The health centre with Gameda as in charge has now made steady improvement in many areas. The delivery room, library / computer room was well organized and some improvement was noted in other areas. Although the emergency room, admission room and the out patients could be much better. The microscope donated by the link recently is working and the staff showed that in the morning of our visit alone there were 70 positive cases of malaria. The motorbike ambulance in the last 3yrs has made over 700 journeys often over 40 km away.

**Shone HC:** The motorbike ambulance in shone seems to be working well and has made nearly 375 visits. Eshitu the only driver was proud to give Robyn a ride. Anna has worked as a volunteer midwife in Shone in 1992 and she was delighted to go back there after many years. It appeared that in 1992 Eshitu was the store keeper and they were glad to see each other after long time.

#### **Motorbike ambulances:**

We visited and evaluated the use of motorbike ambulances in all of the 6 HCs including Yiragacheffe, Chelelktu , Chichu, Wondogenet, Alaba and Shone. Except in Wodogenet in all of these places the motorbike ambulances are regarded by the HC staff and the community as a very special gift and highly valued and working very well. Wondogenet problem appears to be organizational and lack of interest from the driver.

It was agreed with Dr Aberra to arrange training of few more motorbike ambulance drivers for each of these HCs especially for Wondogenet by Silassie and Elias in the next few weeks. It was also agreed that Silassie and Dr Aberra would visit Wondogenet HC soon to address the current motorbike ambulance problem.

### ***Hawassa College and Hospital:***

During this visit we had formal open discussions with Dr Belayhun PhD, Dr Zerai, Dean of Medical College, Dr Wogen Medical Director and other key senior managers of the college. The college administration is going through changes and keen to re negotiate terms of the MOU signed only last year. The college team has agreed to draft a new MOU for the link to consider.

### ***Regional Health Bureau:***

Ato Kare, Head of the RHB unfortunately have been away for a training workshop in Addis during the link visit. But Ato Habatamu, Head of training helped in organizing various training activities including invitations for the participants and liaising with zonal heads for the HEW training.

### ***Beyond health:***

In Yirgacheffe the link members handed over a printer given by an employee from Nevill Hall to the local high school. The headmaster of this school with nearly 3000 was delighted as this would be the only two working printers they will have in their school.

### **Conclusion**

All the activities planned with our partners in Ethiopia went smoothly, thanks to Dr Aberra, who remains busy as ever with only one other surgeon working in the large hospital, Miss Metasabia, Nenko, Debrework, Dawit, Elias, Aweke and Ato Habtamu. While there were some difficulties in running the programmes in the college, there is no doubt that the link is valued highly by the health professionals at all levels in SNNPR especially at the regional health bureau and zonal health level and the link members are seen by them as genuine partners and friends.