

Volunteer's Report for Trip to Uganda: May 16th-28th 2010

Persons travelling from the UK were:-

Helen Anderson Senior Matron A&E and EMU - RD&E

Kevin Williams Matron Plastic Surgery - RD&E

Maggie Knights Matron Day Surgery Unit - Sidmouth

The visiting team stayed in the Guest House situated in the grounds of Andrew and Sarah Hodges home. Andrew was at Kagando Hospital until May 21st, then returned and was with us for our second week.

Despite the Icelandic Volcanic ash being a real threat to travel, the team arrived at Entebbe on the due day!

The plan for this visit was to achieve some degree of teaching the nurses updated dressing techniques, safe practice in the theatre setting, recovery and post operative care of the patient. To this end we were driven from the airport straight to CoRSU Hospital, the lovely new rehabilitation hospital just outside Kampala.

We were given a guided tour of the hospital by the very glamorous Lydia, who looked after us for the remainder of our visit, as if we were royalty!!!!!! Special coffee trays set aside for us each day (with milk)!!!!

We then sat in on an OPD clinic, where we met up again with our dear colleague George Galliwango. Some of those attendees were booked straight into the ward, for surgery that week.

The Matron-in-charge was a lovely lady called Joy. She was very happy to welcome us all and grateful for our input. Christine is the Sister of the ward, who has the onerous job of organising and motivating the staff.

The ward is split in half, orthopaedics and plastics. There are about 65 beds in total, although there are more orthopaedic beds, as the patients tend to have to stay longer.

Kevin spent much of his time teaching and supervising the nurses in the room where daily dressings were carried out, trying to teach the up-to-date way of dressing wounds. Also he managed to get 2 vac machines working and set up on patients. These machines help to cleanse wounds in preparation for surgery.

Helen reorganised and stocked the Resus trolleys both on the ward and in Recovery. She held various teaching sessions on Basic Life Support, airway management, post-op observations, written documentation and Care of the Patient in recovery. She also worked with the physiotherapist in OPD.

Florence was the sister of the theatres, who was also at Mengo. Maggie spent the majority of the time in theatres. The theatres are quite spectacular! 4 plus a septic theatre. Staff were very welcoming and some were interested to learn about theatre etiquette, including scrubbing, disposal of sharps, the theatre count, care and knowledge of instruments and being the surgeon's assistant.

We had a reprieve over the middle weekend and took a 24hr trip to Mburu National Park where we were thoroughly spoilt. Game drive, lake trip, morning game walk and full board! That set us up for the second week.

During that week, we visited Mulago Hospital, where we met up with Monica the Sister on the Plastics ward. She was speechless when she recognised Kevin and Helen from her visit to the RD&E and delighted to see us again. We visited the Burns Unit and Plastics ward, where there were some very impressive murals on the walls for the children.

The second week was a repeat of the first, although we had three days of surgery, as there were so many operations to do.

We returned via Nairobi , (as our original BA flight was cancelled due to the cabin crew strike) and spent 7hrs in the airport! So it was 24hrs of travelling to get back home again.

Many thanks to Sarah for sorting this out for us at the BA office in Kampala.

REFLECTION

Some things were commendable:-

- A hot lunch each day of beans, rice and matoke and dodgy looking meat!!
- A productive liaison between Joy, Kevin and Helen re staffing rotas, dressings and the need for improved verbal and written communication between staff.
- Kevin's knowledge was invaluable in helping staff learn and understand the reason for procedures and how to implement them.
- Staff were generally eager to learn and participated well in practical sessions.
- In theatres, a system of safe, non touch sharps disposal was introduced and the counting before and after an operation of swabs and sharps was demonstrated and implemented. Theatres was generally very well run.
- Resus trolleys, suction machines, pulse oxymetres were repaired/amended and got into working order.
- Documentation created included:-
 - Check lists for the Resus trolleys,
 - A list of different dressings and when to use them
 - Resuscitation technique/Basis Life support.
 - Staff rota changes
 - Scrubbing technique, care of instruments, theatre counts, safe surgery check lists.

Areas for improvement:-

- The need for analgesia/sedation prior to some mainly orthopaedic dressings. There was unnecessary pain inflicted on patients whilst re-dressing their wounds. Getting the nurses to understand that patients do not need to suffer was a challenge.
- Post operative nursing care and observations on the ward, were very lacking. The nurses did not seem to have an awareness of the importance to observe and report if there were worrying changes in a patient 's condition.
- There is no internal communication within the hospital. Therefore trying to find someone urgently proved a huge problem.
- Motivation of staff to change practice is an on-going problem. Historical and cultural issues will probably always be a stumbling block.

However, the trip was a definite success and it is hoped that maybe Christine could visit the UK and come and see our nurses at work!

Our thanks go to Andrew, Sarah, Naomi and Sam for being the perfect hosts. There were some very interesting car journeys, games of volley ball and table tennis that interspersed our time there. Not to mention Cally, a very lively 6month old Labrador, who gave us the most energetic welcome each day!!

Finally thanks to Maggie's church [Primley URC](#) and kind friends who raised £500.00 which covered Maggie's airfare.

Maggie Knights
May 2010