

MOTEC-LIFE-UK—MAIDEN VISIT TO NKAWKAW

By Gladys Ofori-Atta

ARRIVAL

After a thorough assessment of Nkawkaw Holy Family Hospital (HO FA HO) in April of this year, 2007, the time finally came for Motec to deliver in June. The team members were fully aware of most of what they were to expect. A Catholic Hospital administered by Holy Spirit Congregational Nuns with the co-operation of the Catholic Diocesan Health Committee, The Christian Council of Ghana, the Ministry of Health and other Health Related Bodies. The hospital has a Nursing Training College attached which raised the profile of academic, nursing and medical care. There were six doctors at post and various wards to cater for male and female medical/surgical, children, accident and emergency, maternity and isolation patients. Two new theatres were functional and a third designated for 'dirty cases' was also in place. An x-ray department sat conveniently between the clinics, accident and emergency and the theatres, just the same as the laboratory and the pharmacy. Discussions through phone calls with the Superior of the Nuns and the Senior Medical Officer in charge had been thorough but a few days to leave U.K came a few warning shots of the good spirit of our host and unfamiliar arrangements that needed patience and humility from Motec Leadership, praying that all men and women, patients, staff, foreign visitors, will be treated as equal irrespective of creed, colour, size and profession.

So when the team finally arrived at Nkawkaw from Accra on the 3rd of June after being picked up by the hospital transport, fully air-conditioned that left the Koforidua team battling to change allegiance, most members felt very much at ease in the comfort of a four wheeled vehicle carrying them in a British Summer temperature of about 18 degrees Celcius. A four bedded house of a reasonable standard was offered and the four member team did not struggle to choose their rooms. The leader of the team, a general Surgeon, Mr. Raymond settled almost immediately making it easier for others members to feel content with their choices. The team was made up of two Ghanaian born British (myself and Mercy and the other two British Asians doctors (Ami and Santhiapillai Raymond). The food arrangements appeared to have been left with a Ghanaian caterer as opposed to the norm of visiting volunteers from the continent joining the nuns at meals, at least so we learnt from the nuns themselves, medical and nursing staff. British culture does not leave you accepting a change without representation anywhere in the world, but at least, the leadership controlled members by reminding them of the purpose of the visit: patients interest, training, education of staff as well as transfer of skills and sometimes you could almost palpate the expression of 'give all to God, Allah, Hindu and what have you' in the echogenic voice of the Motec leadership from Koforidua.

INDUCTION

So it came to pass that the first full day was spent an induction day. The Senior Medical Officer Dr S. K. Amuzu took the team round the various departments of the hospital on Monday morning, meeting staff and patients, learning the local dynamics of patient care. As a scrub nurse, I worked at the Holy Family Hospital theatre for three years and I was very keen to return prodigiously to what I considered my re-discovered working home. No wonder I found my way to the theatre rather quickly and interacted with staff with ease and confidence.

CALL TO DUTY

Clinic work began in earnest late morning and the baptism of serious work began that same afternoon to save the life of an accident victim that Team could not wait for its officially planned surgical list the following day. For patient confidentiality, no further details can be released.

Although we had planned in the U.K. that Dr Ami, our anaesthetist was going to leave that evening for Koforidua to deliver a lecture and return to Nkawkaw the following day, it became strategically necessary to change personnel under difficult circumstances. Dr Ami traded with Simon, Mr Simon Siman Derby originally posted to Koforidua to replace her. As if ordained by the powers that be, the change of personnel seemed to have galvanised both teams at Nkawkaw and Koforidua.

The rest of the week went quickly as the team saw little day given lectures (average 45 minutes), working in the theatres daily mostly and spending the night in the bungalows and searching for pubs that were seven hours or so flight away, but finding alternative social sites that were as fulfilling as you would find anywhere in the cities of Ghana. Audio-Visual lectures on pre-operative Care, Pain Control, Risk Assessment at the Nursing Training College were well attended by students and a few qualified nursing staff. Surgery was performed on hernias, lumps of peculiar features,

acute trauma and others. In the course of the first week, the Sister Superior took some time off to welcome the team to Nkawkaw at the bungalow.

The working programme for the second week was similar, lectures, clinic, operations and the occasional social evenings. The intervening week end provided both groups the opportunity to meet, travel together to Pramso, visit Lake Bosomtwi and its surrounding attractions of natural beauty. I must confess that although I was born in Ghana and lived in the country for about 30 years, I was enjoying Ghana as a visitor just as my non Ghanaian colleagues for we all had a chance to dance by the lake, soak the fresh air of the virgin forest and meet different people. We settled on the job very quickly and interacted with the patients and staff of the hospital very well. Above all, many patients were seen in the clinics and about 50 patients underwent major and minor surgery during our working visit. Communications lines were established to find out how our patients were progressing. No complications were noted at surgery and the few days post op. We enjoyed our educational sessions and they seemed very popular among the nurses especially the students

OPINION AND RECOMMENDATION.

Holy Family Hospital is a health institution with great potential. We have suggested a few changes during our working visit to improve patient confidentiality. For example, the practice of visiting groups consulting in the theatre we thought breached the norm, increased the risk of surgically acquired infection and our theatre staff co-operated in halting this. Motec has also noted that a third theatre virtually sits idle at Nkawkaw. Perhaps renovation of this theatre could support the work of all visiting groups of the hospital and minimise the interruption of regular work done by the local doctors and teams. Motec could offer advisory and perhaps material support in this direction. In suggesting changes, we have been careful not to be seen as dictating the pace for change without consultation with local authority. Any mistakes in our approach, I am sure will be forgiven.

We are grateful to the authorities for the opportunity to serve as well as to be served. The initial observation that the administering novitiate were distant from Motec during our visit was corrected during the middle of the first week and additional basic items needed in our house of residence were then provided. The contribution of all local staff, notably Dr Brobey, Sr Agatina and Dr Amuzu, the Head of the Nursing School and our cook is commendable. We are also grateful for the payment of fuel by the hospital administration and the provision of a vehicle by the Nursing College. All deeply appreciated.

It is the hope of Motec that overall the patients and staff of Ho Fa Ho have benefited from our visit. It may be even better next time if two clinicians attend at the same time to rotate the out-patient and surgical interventions and also support our clinical documentations. Maiden visits can be difficult in many ways but our host tried to help us settle. Motec would also like to congratulate itself for a successful visit. Members of the visiting team under the experienced leadership of Mr Santhiapillai Raymond, supported by all of us Contributed to a healthy enjoyable and satisfying working visit. The contribution of each member of the team –Mr Simon Derby, Mrs Mercy Archeampong, Mr Raymond Ofori and I believe, myself helped provide a balanced team and a working group with a purpose. Long Live Motec. Long Live Ghana.