



Kattappana 2010

Louisa Draper

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Hospitaalbroeders Nederland



Background: Our Experience in Ghana

- **Nursing staff likely to spend their whole career in one hospital**
 - may be very basic
 - no exposure to alternative methods
 - no exposure to new and updated practices
- **Mistakes become learnt and repeated**
 - ...and passed onto next generation
- **Quality of patient care may start to decline/fail to improve according to modern standards**

Background: Teaching in Ghana

- MOTEC provides teaching in Ghana 2-4 times/year
- Short visits, which presents several problems:
 - Short time therefore limited amount we can teach
 - In between visits, practices start to slip again
 - **Theoretical, but not observational** i.e. they cannot see the work in practice
- → ***A period of continuous training might be more beneficial, providing a longer, and more practical exposure to new and better practices***

Project Core Principles

- Improving healthcare in Ghana in target hospitals by allowing staff to carry out an observational attachment at a sister hospital
- Motivating our staff to improve, learn and strive for better practices
- Training the trainers: encouraging staff to:
 - take what they have learnt back to Ghana
 - teach others
 - **implement change**

Achieving These Objectives

- Provide exposure to better, more up-to-date practice
- 6 week residential period of observational work in another hospital with more modern practices
 - St John of God Hospital, Kattappana, India
- Programme supervisors in India oversee programme
- Members of Indian staff as mentors: encourage and guide Ghanaian nurses through their attachment, report back to us in UK/Ghana
- Clearly defined training programme, including daily ward duties, attendance at case reports, assessments

Support for the Project

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- Idea conceived by John Mitchell
- St John of God Hospital, Kattappana
- St John of God International Development Corporation
- MOTEC Life UK



Brothers of St John
of God.
KATTAPPANA,
Kerala State, India

Chosen Location for Observational Attachment



- St John of God Hospital, Kattappana
- Kerala State, India
- 80% all India's nurses trained in Kerala
- Strong culture of nursing, caring professions
- College of Nursing and School of Nursing on-site

Background to St John of God, Kattappana



- Hospital set up in 1969 by Brother Fortunatas from Germany
- Run by the Hospitaller Brothers of St John of God



St John of God, Kattappana



- Main hospital in the High Ranges
- State of the art, multi-speciality
- 18 major disciplines
- Surgery, post-op care, intensive care, emergency and trauma
- ~40 doctors
- 375 beds

St John of God, Kattappana



- Hospital philosophy and culture similar
- Similar climate, landscape, trees!
- Avoids “Brain Drain” (e.g. To USA/UK)

Project Summary



- Louisa Draper arrived Kattappana 25th April
- Three nurses arrived next day
- 6 week period of observational attachment, lectures, teaching seminars, practical demonstrations, assessments
- 10 days with Louisa at the beginning for “Induction Phase” – settling in, giving lectures and workshops

Participants



Yvonne Gblogah

– St John Hospital, Sefwi Asafo

Augustina Dogbe

– St Joseph's Hospital,
Koforidua

Sylvester Agyemang

– St John Hospital, Sefwi Asafo

Attachments Completed (So Far!...)



- Surgical ICU
- Neurosurgical ICU, monitoring of head injury, spinal injury and complex trauma patients
- Medical ICU
- General Medical Ward
- Paediatric Ward
- Accident and Emergency
- Introduction to Dialysis

Lectures Delivered During Induction Phase



- Adult Basic Life Support
- Paediatric Basic Life Support
- Pre-operative Assessment & Safety
- Post-operative Care
- Trauma and ATLS
- Choking and other emergencies
- Consciousness and the Glasgow Coma Scale

Interactive Teaching Sessions and Seminars During Induction Phase



- Practice sessions on Glasgow Coma Scale
- Keeping patient records
- Problems surrounding perioperative care
- How to implement changes back home
- Barriers to change

After the Attachment



- Presentations in Ghana e.g. 6-month and one-year reports to summarise what they learnt and how it is benefitting healthcare in their own hospital in Ghana
- Programmes for implementing change
 - Teaching
 - Meeting with senior hospital staff
 - Written report with recommendations
- Assessment and Audit

Plan

- Project continues
- End of placement assessments
- Phase II: Report writing
- Phase III: Return to Ghana and discussion
- Phase IV: Implementation

Watch This Space!
Thank You

