



**THE CASE FOR PROFESSIONAL LEAVE FOR HUMANITARIAN WORK
NHS STAFF INVOLVED IN GLOBAL HEALTH PARTNESHIPS**

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I will briefly introduce our named charity organisation (Motec Life-UK of which I am one of the leaders). I will also present the local, national and international case for professional leave in global health partnership.

MOTEC LIFE –UK is a British registered medical charity based in West Herts NHS Trust with membership across the British Isles. It is a multi-disciplinary organisation of mainly health care professionals and other professionals involved in health care delivery, technology, accounting, medical logistics, medico-legal issues aimed at safe provision of health care delivery activities and related issues in the developing world. We are guided by a constitution and our leadership of a Trustee Executive of six are democratically elected by secret balloting.

Motec Life UK is linked up with three hospitals and their associated nursing training institutions in the sub-Saharan nation of Ghana. The organisation was formally established in September of 2006 in response to a humanitarian cry for help by an orthopaedic trauma hospital at Koforidua in the Eastern Region of Ghana. Following the maiden working visit in October last year, there were requests from other hospitals in Ghana for help to improve local health delivery. Motec and West Herts NHS Trust have hosted in March of this year a delegation of Directors of the Ghanaian Health Ministry. During that meeting, request for assistance in the training of staff and participation in the development of Acute Medical Services at the Municipal City of Tema in Ghana was made by the delegation. A report by Motec following an assessment is due to be presented to the Trust Medical Board.

Motec is now linked up with the Tropical Health and Education Trust based in London. Our organisation is partially sponsored by the Brussels based International Organisation for Migration through its subdivision Migration for Development in Africa-MIDA. We are jointly exploring areas with the Educational wing of The Commonwealth Secretariat and sharing our educational strategies with the Ghana College of Physicians and Surgeons regarding 'educational and training gaps' that could be supported during our visits to our target hospitals in Ghana. We do not intend to expand further. Some of our membership are keen to link our national orthopaedic registrar training with a rotational working visit to Ghana through the Royal College of Surgeons which may be a while away.

For the overall picture, more than 10% of NHS organisations have established formal relationships with health providers in less developed countries in order to share ideas, experiences and skills (NHS Confederation Newsletter 2005). To date, there are more than 100 links between NHS organisations and their associated academic partners in the developing countries (Lord Crisp Report, February 2007, and The Tropical Health and Educational Trust (www.thet.org -link search). Relationships vary from single departments to large multi-disciplinary institutional links.

The objectives of Motec

- To provide and help improve health care delivery in the target hospitals based on our partners drive and request (not supply driven).
- To provide training and transfer skills to the local health workforce through education, workshops, medical / surgical working visits and possible exchange programmes.

In trying to achieve these, we have realised that both sides of the partnership can positively influence institutional development, healthcare service delivery, and teamwork professional and personal development. There is a clear cut sustainable impact on the development of the overseas hospitals in supporting capacity in rural areas and filling essential service gaps.

NHS organisations also recognise the value of links, seeing them as valuable tools for staff development. Our members work in multi-disciplinary teams on projects that take us beyond our usual sphere of experience. We gain valuable experience in devising and delivering teaching programmes, develop managerial and leadership abilities as well as resourcefulness.

From our point of view, clinical skills, experience and knowledge are enhanced as our NHS staff are confronted by diseases not seen in our day to day practice but afflicting some of our minority ethnic population in the UK. We learn from our professional partners, enlarge and we develop clinical skills and awareness.

We have the opportunity to appreciate the global inequalities in healthcare. Our NHS staff has an excellent chance to weigh the importance of cultural and economic factors for health in any community. Friendship with our partners, happy patients and improvement in the health care delivery both sides of the partnership are valuable outcomes of our links.

Liam Donaldson, A Chief Medical Officer wrote in July 2003: "The NHS benefits from the training opportunities and the breadth of experience on offer in international work, in which health care professionals are either involved in their own initiatives or through their employers". From my one year experience, I couldn't disagree with that.

The Royal College of General Practitioners recognise that the experience gained by voluntary doctors contributes significantly towards their professional development and that they return to UK with enhanced clinical, organisational and managerial skills that are of great benefit to the patients and profession. (Statement on Overseas Work-RCGP. www.rcp.org.uk/rcgp/international/os_work_exp.asp)

Others like the Royal College of Nursing (RCN) has noted that overseas experience provide valuable rapid learning:

- To promote and allocate scarce resources;
 - Plan, monitor and audit;
 - Conduct health needs for local population;
 - Integrate primary and secondary care; and
 - Thinking on your feet and making things happen.
- (The benefits of Overseas Experience. RCN 1996)

Motec's Working Strategy: Local, National and International Impact.

Working visits are planned four times a year: February, April, June, and October. The visiting teams are formed to ensure continuity of purpose and in response to the local demand and working strategy. Multidisciplinary team of experts work with local health workforce in various aspects of hospital based healthcare delivery - the wards, the laboratory, physiotherapy, pharmacy, operating theatres, nursing colleges etc. We send a minimum of four volunteers per target hospital. Multi-disciplinary teams means that the absence of volunteers will not impact significantly on our local services. It also emphasises that the visit is not a holiday. Teams are composed to strategically support a demand from our overseas partners.

Motec Volunteers also provide lectures and workshops that aim at addressing local needs of the Hospital. We have educational publications of our work on our web site to reflect on our experience and to help our target hospitals to view our lectures on line. So far we have two papers on orthopaedic trauma awaiting publication in international medical journals. Our experiences are shared with stakeholders in the healthcare delivery services in Ghana through appropriate fora that are in place for with the Ghanaian Health Ministry and others. So far there has been positive impact on policy issues and training programmes in Ghana. For example: the proposed in co-operation of basic trauma care in the Ghanaian medical assistants training in line with the WHO call for Basic Trauma Care across the world Declaration released in Vienna in 2004; the planned programme of training of Professional drivers in basic first aid measures to supplement the poor ambulance services; the creation of surgical centres within selected hospitals for delivery of specific health care services to a population with special needs that volunteers could also be involved in providing training for local workforce.

The Scottish, Irish (Northern) and Welsh Assemblies and governing bodies are well ahead in supporting voluntary health work in the developing countries with legislation in place for paid professional Leave. NICA an Irish programme supports staff for long term about six months paid service in the developing country. Gwent Health Care at Newport/ Ethiopian link, Lothian-Zambia. Northern Ireland Malawi partnerships are a few examples. In England, King's College Hospital – Somaliland, Plymouth –Ghana, University of York-Malawi links are a few that enjoy the active support of Hospital Trusts. Most details are available on the THET link site that has West Herts volunteer group listed.

Ultimately, our local circumstances will dictate the effort we make towards global health. I know as a fact that there is an immeasurable motivation that our members enjoy from working in different circumstances squaring up to the challenges. There is a return of the benefits to our staff and our patients, which should guide us in our policy prioritisation. Motec always compile reports on our working activities and these could be made available to the Trusts as a feedback. We will endeavour to minimise abuse of any professional leave granted through MONITORING and placement of flexible conditional clauses.

For effective working visit, a ten day professional leave per year per member to be capped to a certain number of members per Trust Hospital eligible per year would be a very practical way of ensuring that our patents in UK are well looked after.

Above all, NHS Trusts and philanthropist could take the credit for the contribution to Global Health through this formidable partnership with developing countries Un-intentionally, the job in hand attracts publicity. Every little counts.

I take this opportunity to appeal to agencies, governmental bodies who are in a position to support charitable organisations to help free up time for volunteers to perform humanitarian work in the developing countries. Sponsored career breaks or unpaid leave are other options. Support a worthy course today, and keep our hopes for tomorrow alive. Thank you.



**Motec's Review Group Meeting.
Hemel Hempstead 18th November 2007.**



**Motec Educational session at the British Council Auditorium
Accra, Ghana 16th October 2007.**