

Uganda Supporters Newsletter

Issue 1

May 2001

The First Word

Kate and Lesley want to express our heartfelt thanks to all of you who supported our fundraising efforts to make a difference to preoperative nurses in Uganda.

We raised enough money to fund the visit, to provide textbooks for all the participants and there is a little left over to seed our visit next year.....more of that later.



Kampala 2001

52 nurses from all points of Uganda came to Kampala during the first week of April,(we expected 40) to share the experience of education for the area of healthcare in which some of them had been working for many years. 45 different hospitals were represented from both rural and urban areas. The Ugandan Ministry of Health had agreed that they would support their accommodation and subsistence needs for the week.

Lesley and Kate were able to support all the other expenditure for the visit.

Education

From Monday through until Friday lunchtime the nurses were taken through a range of preoperative topics including themed days to include the environment, the patient, personal needs and management issues.

At the end of the course each participant received a copy of NATN's *Principles of Safe Practice* and *Safeguards for Invasive Procedures: The management of risks*.

They also received an instrument and a small personal gift each.

Standards of practice

What can be achieved with no resources, with rain water harvested from the roof to scrub with, with no equipment and very few instruments was extraordinary. The creative solutions we uncovered when a sharps bin is impossible to get make one! Examples of tins, or plastic containers recycled from a previous use, were given.

The anesthetic agent in common use is Ether, which though cheap and effective leads to much post operative nausea and vomiting. It is also highly flammable. Halothane was used when available in the two University Hospitals.

Diathermy was also only available in the two better equipped hospitals and everywhere else the surgeon has no choice but to clip and tie.

Nursing practice was uncoordinated and

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despite recent publication of an infection control guidance by the Ministry, it had reached very few of the more remote hospitals.

We established that there were some common standards of practice around the country and it is our aim to write these in a way that can be easily disseminated throughout the hospitals represented on the course.



Protection for the Nurses

It is thought that 1 in 3 Ugandans are HIV positive, so protection of the surgeons and nurses during surgery is paramount. We learnt that poor procurement practices by corrupt officials meant that Chinese sutures which break immediately and very poor quality gloves from India are the only means of protective equipment available. We issued a few samples of goggles which we had taken with us and implored them to use them, having educated them to the risks.

Change Management

It was emphasized at the end of the week that they must all share their new knowledge with their colleagues. In particular, new knowledge of nursing documentation and recording of incidents to patients and staff. Swab and instrument counts must be documented and the reasons shared with their teams.

Each participant received a certificate of attendance.



Return to Uganda

The Ministry of Health is very keen that we should follow up all the course participants and we will do this during the year with letters and news. We especially want to encourage them to write about the practice that has changed as a result of their education.

We have also been asked to return to visit the different regions and to see the practices we heard so much about, and to which we have added some of our own experience and knowledge and evidence from preoperative nursing in UK. The return visit is planned for 2002.

Thanks

Thanks are due to everyone who helped and supported our Mission to Uganda. We are especially grateful to the help given us by Dennis Robson and the J&J team in Kampala, who helped us sort out some of the local issues and supplied us with endless photocopies of handouts. A big thank you, we could not have achieved it without you.

Newsletter compiled by Kate Woodhead.
Email: periop@cwcom.net

Photographs: Kate Woodhead