



Report
Working visit Turiani Hospital
Ina Boerma and Ina van Ingen Schenau
Friends of Turiani Foundation
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1. Overall

We were very welcomed at the hospital, meet old friends and made new ones. We shared problems and talked about solutions. It is a difficult time for the hospital and the new management team. We see a hard working Dr. Castus and fr. Boniphace, working together with the workers, members of the management team and the Diocese. They try hard to save the hospital and to improve quality of care. We noticed that all over the country hospitals have a difficult time and lack of government support. In compares of other hospitals the quality of care in Turiani is quite good.

2. Management team

The new management team of Turiani Hospital:

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|---------------------------|----------------------|
| 1. Dr. Castus Haule | MDic |
| 2. Fr. Boniphace Mliga | Administrator |
| 3. Happiness Sempindu | Managementassistant |
| 4. Anna Kasasa | Matron |
| 5. Greyson Kandulu | assistant patron |
| 6. Valentina Modest | Accountant |
| 7. Richard Mkinga | Assistent accountant |
| 8. Dr. Venance Odillo | MD (OPD) |
| 9. Sr. Innocentia Mganula | Head Pharmacy |
| 10. Mrisho Javu | Head Lab |
| 11. Mathilde Aweda | Mother and child |

The complete team is monthly in a meeting together. On daily basis Dr. Castus and Fr. Boniphace are managing the hospital. When Dr. Castus is away Dr. Venace Odillo is replacing him.

The first week during our visit we had two meetings (see also reports of each meeting) with Dr. Castus and Fr. Boniphace. They shared the problems the hospital is facing at this moment.

Financial status

The biggest problem of Turiani Hospital is the financial status. At this moment dept almost 700.000.000 milj. Tzh. Large part is salary, March, October, November and December haven't been payed the salaries of the nurses last year. At this moment income is improving, but dept is still increasing every month. No money has received from the basket fund last year. It's a problem with the Government, they plan to break the contract with Turiani Hospital as a Designated District Hospital. The newly built Mvomero Hospital is intended to become the Designated District Hospital. This change of interest is the policy of the government all over Tanzania. The government is also building many new dispensaries and health centres in the country. They are now ready, and more budget is provided for the government hospitals. Mission hospitals should take care of themselves as Voluntary Hospitals. There will be a budgeted for treatment of pregnant women and children under five years old, but this still has to be agreed on. The Diocese board as owner of the hospital is working close with the hospital management team and will support the hospital in any way they can. But at this moment the Diocese also has big financial problems and is not able to support Turiani Hospital with money. The Diocese board wants that Turiani Hospital continues her activities.

Personnel

Another problem is to keep enough qualified nurses who are also motivated to do their work. Due to salary problems and shortage in general personnel goes to government facilitations. To keep up and to improve the quality of care it's a big challenge at this moment.

Patients

Last period a low number of patients are coming into the hospital, but now amounts are going up (600 a week). Also, in private ward more and more patients are coming in, but still not enough. By improving quality of care and outreach programs the hospital management hopes that the number of patients will increase. It is also very important to keep on improving customer care. On our last day Mrisho Javu held a presentation about customer care and during the morning report it was a subject of discussion. Not letting patients wait to long at OPD for example or explain what you are doing if you are busy and returns to the patient later on. 'Customers are people who need your assistance. They are not an interruption to your job, but they are the reason you have a job.'

3. Meeting with matron and assistant patron

We had a meeting with Anna and Greyson. They shared their problems with us. 16 nurses have left the hospital and there is a shortage of nurses. Nurses do not want to do extra shifts, due to the salary problems. Staff nurses on the wards changed, some on request and some just as a regular change. Anna and Greyson both are doing extra shifts due to the shortage, Greyson at the theatre and Anna at labour. To keep the nurses at the hospital they suggest extra training as a reward, it could give some more motivation. Some nurses are not motivated any more.

Ina van I had a meeting with Anna and Greyson about the rosters on request. Ina suggested to combine making rosters for male and female wards and to exchange personnel already in developing the new rosters. It is important to give insight information in the shortage of nurses. We discussed about closing the prenatal ward and make postnatal pre- and postnatal ward. In that way you need less nurses and it is easier to oversee. Anna and Greyson had already

suggested this in the past. When there are more patients the prenatal ward can be opened again (Like children ward 1 and 2). We also discussed with Dr. Castus and fr. Boniphace, but it is up to them.

In the beginning of February two bachelor student nurses and one MBO-student nurse are coming for five months. They will be divided over the different wards and Anna and Constancia will support them during their studies. Ymke Wieffer, a midwife and master student physician assistant in the Netherlands will come for two weeks (10th of February) to the Turiani Hospital and she will give a training course in acute problems in deliveries.

4. Meeting with the Diocese Board

Monday 12th of January we went to Morogoro together with Dr. Castus and Fr. Boniphace. We had a meeting with Fr. Lazarus Msimbe Administrator, Fr Medaro Mikisi Vice Administrator, Fr Fidelis Mwesongo, Secretary General, Fr Prochecy Kasonge Chairman Hospital Board. It was a good meeting. The Diocese board explained what happened one year ago and why they need to change the management team. Their goal is to keep Turiani Hospital in charge. The Hospital has a good infrastructure; laboratory, X-ray and a good reputation. The distance of the hospital to Mvomero is 50 km and quality of care in Turiani Hospital is higher. The Diocese board has also financial problems and is not able to support Turiani Hospital financially, but they prefer to continue the hospital activities. The board supports the hospital where it is possible and works closely together with the Turiani Management Team. Fr. Lazarus will visit Turiani Hospital next months and he intends to communicate with the workers as well (see also report).

5. Training team

Meeting with four trainers of the training team on Wednesday 8th of January. We discussed the past six months. Some trainers changed and not all trainers are yet in charge. Also, some trainers have changed the wards and Eva Nguya has left. It was a hard time for everyone, with shortage of staff and changing all shifts. But now the nurses who are in charge work weekdays morning shifts. Quality and continuation of care are guaranteed. The biggest problem is shortage of nurses and it is not possible to appoint nurses in all shifts. Due to salary payment problems nurses leave Turiani Hospital. The training team members want Celina to stay as a trainer and new in charge to join the training team.

The trainers

Cellina Maunde
Constancia Ndunguru
Mariam Nambole
Consolatha Maembe
Hadija Mlangiola
Hadija Bakari
Eva Kisimbo
Anna Kasasa
Lilian Mlanga
Margareth Kaombwe
Oliva Micheal
Theresia Kato
Lydia Mhanganya

Department

all shifts Private Ward
in charge Labour Ward
2e in charge Children Ward
In charge Male Ward
in charge Children Ward
in charge ICU
in charge Female Ward
Matron
in charge CTC

ante natal
MCD
OPD

Wednesday 15th of January the second meeting was together with the Dutch student doctor lecture and practice about resuscitation on their request. Four trainers, two nurses and pharmacist were there. It was a nice training in basic life support. The student doctors will continue the BLS training in small groups for workers of Turiani.

6. Physiotherapist

The physiotherapist, Freddie told us that he treats a lot of outpatients and does not have enough time to treat also inpatients. We noticed a decrease of patients at his department since last year and never saw him during report in the mornings. We asked him to be more pro-active in being informed what inpatients needs his support. He asked for another physiotherapist. The hospital management told him to make a business case and also the new doctors needs to know when they can referral a patient to the physiotherapist. Freddie would like a physiotherapist from Holland to come next time to help him and learn from each other. One of the student doctors, who left, was also a physiotherapist and he learned a lot from her. We will give his email address to our physiotherapist in the Netherlands and they can have contact with each other. Maybe she can come next time (it will be on her own cost, not from the hospital, but also not from the Friends of Turiani Foundation).

7. Container

Materials declared out the Friends of Turiani Foundation container arrived in good condition. Most equipment has already been divided and is in use. We saw computers, drip standards, monitors, ECG machine, AED, materials for the physiotherapist and even more. All workers got uniforms and were very pleased with it. Photo pictures were made to show to the donors at home. The Turiani hospital employed a worker who makes regular rounds to see if repair is needed and he can solve those problems.

8. Projects

Antibiotic resistance

Together with Mrisho Javu, head of lab we discussed with Dr. Castus the importance of the project about antibiotic resistance. Dr. Castus wants to continue the project because it is important for the hospital to do also blood cultures before starting antibiotics. At this moment the lab does wound cultures sometimes and also urine. But it is not common practice and prescribing of antibiotics is not always done in the right way. The hospital also can use this project to gain more insight in the bacterial environment and their resistance. This kind of research is not common in Morogoro Hospital or in other hospitals and the lab of Turiani Hospital is very good. The lab is capable to test also for other health care centres or hospitals. It improves patients care and reduces medication costs. Ina van Ingen shall contact Mrisho by email. He will plan a meeting with the IPC (infection prevention team) team of Martini Hospital in Groningen.

Burn prevention

Ina Boerma told about the project started together with the former management team. About 200 questionnaires were filled about measurement for prevention, occurs of burn, first aid and if they have search for help and visited healthcare centre or hospital. Ina is still busy with the results of the data. In future it would be nice to add burn prevention measurement to the outreach program. Dr. Castus would like so. Ina will control if the Dutch Burns Foundation will sponsor this project.

9. Lectures

On Friday 10th after morning report a lecture/case report was given. About 25 workers (doctors, nurses, lab) were present and the admission and follow-up of a burn case was discussed by using the burn admission form. Subject: fluid admission, pain medication, antibiotic use and wound treatment. There was a lot of discussion by the doctors and questions asked. At the end it was concluded that using a protocol is essential to the quality of care (quote of dr. Mashaka). The form, to be used as a protocol will be implemented in the electronic system and is also as a paper available in the Emergency Department.

During this week we could start treatment of two patients with burn wounds without antibiotics and could show everybody the good results.

On Wednesday 15th a lecture about antibiotic resistance after morning report. About 25 workers were present and a lecture about antibiotic resistance was given. Case reports and the result of wound cultures taken last year were presented. Hygiene and infection prevention and wound cleaning and dressing product were also discussed.

On Friday 17th a small overview of our visit was given after the lecture of Mrisho Javu.

10. Bedside training

In children's ward one child with severe burn was admitted and a child with crocodile bite wounds. Ina Boerma supported the new doctor and nurses in taking care of the wounds and the children. We were also asked to see a child with burns on the emergency department to support one of the new doctors. In the male ward Ina van Ingen helped with taking care of a man with a skin graft and in private advice was asked by Dr. Castus for a man with a diabetic foot.

On Thursday 16th of January together with Dr. Mussa a scenario training was given at the ER. Doctors and nurses together (total of 3 doctors and 4 nurses) were trained in ATLS and CRM. Two scenarios were done by two teams and discussed afterwards. It was a nice training and you could see that everyone really was involved. As a team (ER and ICU) they decided to practice at least once a month and Dr. Mussa shall be the organizer of the training. In the future they hope to give trainings one every two weeks.

11. Visit of gynaecologist

Dr. Harrison, gynaecologist of Morogoro Hospital visited the hospital 13th until 19th of January. It was already his third visit. He was the first medical specialist to come, arranged by the former management team and also asked other medical specialists to join the program. He likes Turiani Hospital very much and always treat a lot of patients when he comes. The visit was very well prepared by the hospital management team: he had clinics (140 patients) and patients are coming from far. And during two days he did five procedures operations. Dr. Castus and Dr. Harrison know each other very well as Dr. Castus was a trainee at his hospital.

12. Student housing

Dr. Castus and fr. Boniphace would like to have a student house for the Dutch students who are coming each year. Till now they stay outside the hospital and rent a house from Dr. Assey. A house in the compound will bring extra income for the Turiani Hospital. The hospital management team intend to rebuild the old house of Dr. Mhando (it is not safe for living anymore). They want to ask the Dutch schools to support this project. Ina suggested if it is possible to use the house opposite the guesthouse. It will cost less and can be used faster. Maybe needs some extra rooms. They will think about it and need to make a plan with a budget.

13. Others

On Monday 6th of January we attended the funeral of Pascal Muyanga. He sadly passed away and had been working al long time at Turiani Hospital as a nurse. His wife is still working in Turiani Hospital. It was good to see that Dr. Castus and fr. Boniphace attended the ceremony and some nice words were spoken.

The Friends of Turiani Foundation has brought an orthopaedic set for theatre. It was a request of the hospital. Luckily, we found a donor for the set.

On Saturday 11th of January we were invited to the farewell party of sr. Adelfina. She has been working at Turiani Hospital for many years as an AMO. She took care of many children at the children's ward. The nurses arranged the party at the big meeting hall of the Hospital. Dr. Castus and fr. Boniphace jointed the party and it was good to see the attention was given to sr. Adelfina.

Ina van Ingen had contact with ENT doctor Dr. Mawala. He has been in Turiani and was working in Muhimbili Hospital in Dar es Salaam. Dr. Castus had contact and he is willing to visit Turiani for the specialist program.

About 40 baby socks and hats knitted by Ina van Inge's mother were given to Anna Kasasa to be divided amongst new-born babies.

Dr. Castus had an email from Jos Dijkhof, who has been MDic long time ago. He intends to come in August as a voluntary doctor for 3 months. He has been a general doctor in the Netherlands and is retired. He is welcome in Turiani Hospital supporting the diabetic and hypertension clinics. Ina van Ingen and Ina Boerma contact him before he comes to Turiani.

The Hospital was founded 60 years ago, and the hospital management team wants to celebrate the 60th anniversary in 2021. It will be a celebration of a week and we are invited. There is no date yet, but they will let us know as soon as possible.

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