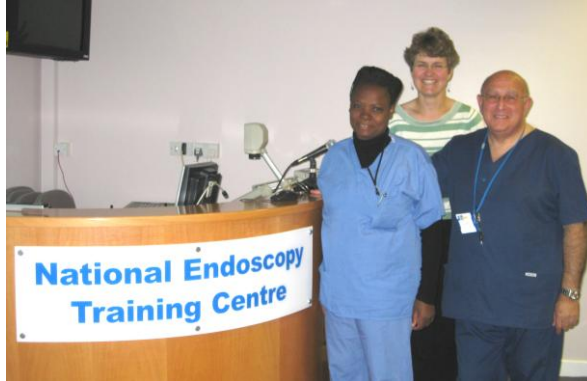


Report for visit of Sr. Rose Malamba to the Mersey School of Endoscopy and the Royal Liverpool University Hospital Gastroenterology Unit

Dates: 12-23 April 2010 (2 weeks)



Sr. Rose Malamba, Dr. Melita Gordon, Prof. Tony Morris, at Mersey School of Endoscopy

Aims of visit:

- 1) To update training / experience in nursing procedures
- 2) To update training / experience in instrument decontamination procedures
- 3) To develop nurses training logbooks and DOPS assessments for use in Malawi
- 4) To develop patient information and informed consent sheets for use in Malawi
- 5) To validate Rose’s DOPS performance of endoscopy trainers
- 6) To assess Tristel Stella pulse decontamination system for suitability for Malawi

Timetable of visit

date	Monday 12 April	Tuesday 13 April	Weds 14 April	Thurs 15 April	Friday 16 April
am	Introductions, tour	Meeting with Paul O’Toole and Melita Gordon to discuss DOPS	Upper GI cancer MDT and nurse-led clinic	Demonstration of Tristel Stella pulse cleaning system (Ireland, Brooks) Colonoscopy list	Bronchoscopy, in operating theatres (Stephen Gordon)
pm	Ultrasound – guided Liver biopsies	Life support training session	Consent and nurse training records (Christine Ireland)	Scope cleaning and decontamination Emergency OGD duty list (Collins)	Observation of nursing procedures and patient pathway Oesophageal dilation list (Morris)
date	Monday 19 April	Tuesday 20 April	Weds 21 April	Thurs 22 April	Friday 23 April
am	Upper GI endoscopic therapy course (Morris, O’Toole, Haslam)	Upper GI endoscopic therapy course (Morris, O’Toole, Haslam)	Upper GI endoscopic therapy course (Morris, O’Toole, Haslam)	Colonoscopy list (O’Toole) Report, and translation of patient information sheet (Melita Gordon)	Recovery room and decontamination room. Guidelines with Christine Ireland
pm	Upper GI endoscopic therapy course (Morris, O’Toole, Haslam)	Upper GI endoscopic therapy course DOPS assessments of trainers with Paul O’Toole (Haslam)	Upper GI endoscopic therapy course (Morris, O’Toole, Haslam)	Observation of nursing procedures and patient pathway in endoscopy rooms, OGD lists	Validation of DOPS assessment of trainers (O’Toole, Leiper)

Comments on activities and progress against aims of the visit:

Rose was able to spend time with endoscopy unit nurses at all stages of the patient journey, and for different lists and procedures. She also saw the entire endoscope decontamination room pathway, and the advantages and disadvantages of state-of-the-art endoscope decontamination systems. The entire decontamination system was non-functional for her first 3 days, meaning there were no lists operational, an illustration of the potential problems with high-spec automated systems.



Sr. Rose Malamba studying the decontamination processes at RLUH gastro unit



Sr. Rose Malamba following the patient pathway and nursing protocols at RLUH gastro unit

Rose was able to spend adequate time with Christine Ireland checking the nurses log-book that she has devised, discussing and writing new Chichewa patient information and consent sheets for use in Malawi, and accessing appropriate nursing guidelines for use in Malawi. All these documents are archived for Rose on a USB stick.

Sr Rose Malamba spent time being trained by Dr O'Toole in how to administer DOPS forms, particularly for peer-assessment of trainers. This will be an important component of the assessment of our training interventions in Malawi. Several of the local trainers kindly agreed to be assessed by Rose, and her use of peer-assessment DOPS was validated against that of Dr O'Toole's on several trainee-trainer lists.



Sr. Rose Malamba observing practice with Dr Paul O'Toole

Rose felt that attendance at the upper GI therapy course was particularly useful, because the Malawi endoscopy unit has much of this equipment, but had little experience in using it (for example balloon dilatation equipment, different banding equipment, injection and clipping of bleeding ulcers). She now feels she understands better the indication, techniques, equipment and management of complications.



Rose attending the 3-day upper GI therapeutic endoscopy course

Rose appreciated spending time with several of the specialist nurses, observing their independent practice. She has decided that she would like to train as a nurse endoscopist herself in 3-4 years time, and the Mersey School of Endoscopy has expressed its enthusiasm to help her achieve this aim.

Dr Melita Gordon arranged for the Tristel representative (David Herd and colleagues) to visit and demonstrate the Stella pulse system to her. The RLUH decontamination officer, Lynn Brooks, Sr. Christine Ireland and Dr Melita Gordon also attended this, and carefully assessed the suitability of the system for use with multi-shot cidex OPA, and with the Malawi scopes. It was felt to be an excellent and affordable solution, which would greatly improve decontamination standard in Malawi and be appropriate for their needs and throughput. It will also greatly reduce the risks of exposure to chemistry, as it is largely enclosed.



Rose Malamba discussing the Tristel Stella pulse decontamination equipment with David Herd and Lynn Brooks

Rose discussed with Paul O'Toole the individual candidates for the September 2010 basic training visit to Malawi. We have communicated with Malawi to emphasise the need for these individuals to have protected time to develop their skills in trainer lists.

Christine Ireland has given Rose some endoscopic equipment that has been donated (forceps, valves, clips), which she will carry back to Malawi, with an accompanying letter. She was entertained in the evenings and at the weekend in the homes of several of the Endoscopy Link team, and by the nursing staff of the gastro unit.



Recommendations and future plans:

This was felt to be a very successful visit, to be followed and built on by a further visit from Sr Marie Kunkeyani in October 2010.

- Rose will implement changes to the nursing pathways and decontamination procedures as relevant to the situation in Malawi. In particular, consenting patients will be done with better patient information. The changes to practice that were implemented during the previous visit will be continued and re-enforced as new nurses come through the unit.
- Rose will implement use of the new patient information and consent sheets, after local approval.
- Rose will implement use of the new nurse training log-books, particularly as she has now secured regular rotation of additional government nurses through the Malawi unit for training.
- Rose will implement the use of DOPS forms by trainers when they are working with trainees in Malawi. The local trainers (Thumbs, Hellberg, Kankwatira) have already indicated their willingness to do this, to assess the baseline competencies of trainees. She will also ensure that these trainees have adequate time in trainer-supervised lists before and after the September 2010 visit.
- Rose will conduct peer assessment of trainers in advance of the Sept 2010 and October 2010 visits, to establish baseline measurement of practice. She will also encourage trainees to give trainee-assessment of their trainers. The local trainers (Thumbs, Hellberg, Kankwatira) have already indicated their willingness to be assessed by a peer and by their trainees in this way.
- Rose and Dr Henry Mwandumba will negotiate with Tristel to purchase and ship the Stella pulse decontamination system for use in the Malawi Unit. The funding for this has already been provided by the Wellcome Trust to Dr Mwandumba. The current plan is to buy 2 trays and 2 pumps, to allow decontamination as lists proceed. Dr Mwandumba will consider and negotiate prices for single-shot chemistry relevant to bronchoscopy, but cidex OPA will probably remain the chemistry used for gastroscopes.
- The Gastro Unit will try to obtain full-face splash-masks for use until the Stella pulse system is in use, and deliver them to Malawi.