

## Visit Report

# Karnali Academy of Health Science (KAHS) and KAHS teaching hospital - what I saw in a brief visit.

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I had an opportunity to visit Karnali Academy of Health Sciences (KAHS), Jumla recently. My objectives of this visit were to understand the pre-existing nursing as well as other hospital related issues like waste management and infection control, to observe the new in-patient hospital building in terms of nursing perspectives and formulate a transitional plan in pre-existing buildings as well as to discuss the feasibility of starting Bachelor in Midwifery program in KAHS. To achieve my above mentioned goals, I visited different health institutions which included KAHS Teaching Hospital, District Health Office (DHO), Karnali Technical School (KTS), International Nepal Fellowship (INF), Marie Stopes clinic, as well as the newly elected mayor of Chandannath municipality and had interactions with management team, doctors, nurses, technicians and other staff of KAHS.

During my visit, I felt the possibility that KAHS can be a blessing institute to the people of Karnali and province no 6 as per new geopolitical structuring of the country. KAHS is in the beginning stage and obviously there are some challenges ahead. The major issues/problems I identified during this visit were

**1. Waste management:** There was lack of definite waste management system developed not only in KAHS hospital but also in entire Chandannath Municipality. I felt the need of developing immediate plan of action from hospital management in collaboration with municipality for both short term and long term

management of hospital as well as other general waste products. I raised this issues during my conversation with mayor as well as District public health officer.

**2. Infection prevention:** I realized that there is lack of proper knowledge, attitude and practice among staffs of various level in preventing infection inside the hospital. Both the staffs and the patients and even patient visitors need to be trained and educated in this issue.

**3. Inadequate staffing:** Inadequate number of staffs mainly cleaners and helpers is costing heavily to the hospital in terms of waste management and keeping the hospital and hospital campus clean and healthy.

**4. Inadequate trainings:** I observed that the staffs working in various departments like operation theatre and labor and maternity unit are not equipped with adequate training. There is urgent need of providing the staffs with ICU and critical care, SBA and OTTM training.

**5. Unavailability of high dependency care units:** Although hospital has taken initiative to establish post-operative and ICU, it's not functional at the moment due to unavailability of trained manpower. There is urgent need of establishing post-op ward as well as well adult and neonatal ICU so that the level of patient care increases.

6. **Labor Room and OT:** Labor room (LR) is situated quite distant from operating theater and the provision of quick and timely transport of patient from LR to OT is unsatisfactory at present. Although this problem won't be there once hospital is shifted to new building in near future, there is still need to build a transitional plan to take care this issue.
7. **Visitors waiting Area:** There were inadequate place for visitors in outpatient as well as in patient areas. This could be largely due to use of temporary spaces for OPDs as the main OPD building was caught in fire and destroyed recently. However, I realized that this problem will be less once the new in-patient block comes under use.
8. **Inadequate Ancillary services:** Laboratory and Imaging services are the backbone of physicians and are essential for diagnosing many disease conditions. Reliable investigation facilities reflect the quality of any hospital. During my visit I found that the medical laboratory services and Radiology and imaging services are inadequate and substandard to a medical college like KAHS. Moreover, there is no full functioning blood bank service which is very essential in a geographically challenged place like this. The provision of blood/blood product storage facility has to made in the hospital blood bank for which provision of 24 electricity facility is a must. Lack of adequate electricity seems to be the main challenge to the hospital at present. There is also need of establishing a physiotherapy unit with qualified physiotherapist in hospital. Although the new building is equipped with a proper Radiology and X-Ray room, the present one is substandard and there has to be a radiologist in the department.

The new 300 bedded in-patient building with many essential facilities is at its final stage of completion and we can believe that this building will solve many

above mentioned issues. Once the in-patient including well equipped maternity unit is functional in new building, it is possible that KAHS can utilize present in-patient blocks in various ways for which we need to formulate a transitional plan. These old buildings after some renovation and remodeling can be converted into various basic science laboratories like microbiology, pathology, biochemistry, pharmacology etc.

The new in-patient building looks adequate and spacious for 300 beds and is built in solid foundations. Although the construction is almost completed, there are some issues that can still be addressed to make it more staffs and patient friendly. There has to be adequate lighting in various corners. There should be provision of central supply of oxygen to every bed in high dependency units and every floor and adequate in general wards. The design and location of nursing station doesn't look scientific and patient friendly at present. It has to be modified and relocated so that both the patients and the nurses can have easy access. Moreover, the height of the wall in nursing station should be reduced. There has to be separate provision of extra security in psychiatric wards. This can be achieved by attaching metal grills in windows and building toilet/bathrooms within the wards. Moreover, it's a general practice and logical as well to have laundry in ground floor and every floor and ward should be equipped with disable friendly toilet/bathrooms.

The proposed canteen in ground floor has to be shifted to some other place and replaced by a diagnostic medical laboratory.

There are many home works to be done before starting 3 years Bachelor in Midwifery course in KAHS. These include intake of two masters in midwifery/ women's health faculties with three years' experience, a Nursing Director, Research facilitators and statistician. It is essential to establish a skill lab and build a minimum 150 capacity auditorium and Library. At last but not the least, there has to be adequate student to patient ration as per Nepal Nursing council criteria. Moreover, the institute have

to have organized and adequate midwifery education administration, defined responsibility and authority of the head of departments, student welfare and proper teaching learning aids and facilities.

I visited the DHO and found that they run programs like national immunization nutrition, safe motherhood, family planning, female community health volunteer, primary Health Care, tuberculosis, leprosy and HIV/AIDS Control, curative service, health training, health education and Information and Communication. At present there are 19 birthing centers in Jumla including KAHS. I felt that KAHS needs to work in close collaboration with DHO to strengthen the capacity of these birthing centers which will help to decrease the maternal and perinatal mortality and morbidity in this area.

I also visited various non-governmental organizations and health institutes working in Jumla including INF,

KTS and Marie stopes Clinic. KTS was established in 2037 BS and has produced thousands of health and other technical manpower needed for the country and is recognized as a center of excellence in skilling youth of Nepal. The success story of KTS can be a role model for KAHS. Moreover, KAHS can take initiative to work in partnership with INF and Marie Stopes International (MSI) and other similar organizations which will help to uplift the health status of Karnali.

In conclusion, there are both opportunities and challenges in KAHS. If all the stakeholders including staffs, management team and political parties and government work together with positive mindset, change and growth of KAHS is possible which ultimately will become the cornerstone to uplift the health of Karnali.