



Mulanje Mission Hospital Newsletter

Mulanje Mission Hospital
CCAP Blantyre Synod
PO Box 45 Mulanje
Malawi

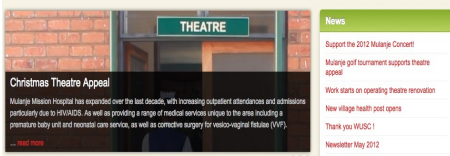
E-mail:
director@mmh.mw

National Bank of Malawi
P.O. Box 945 Blantyre

Hospital accounts:
407275 (\$)
286818 (£)
380873 (€)

SWIFT CODE:
NBMAMWMW

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Editorial Comment

By Dickson Chisale

Dear friends and partners,

This is yet another Newsletter presented to you all our readers to have a glimpse of what has happened in Malawi, especially Mulanje District, within which Mulanje Mission Hospital is providing medical services, social and spiritual support to its catchment area's population.

In March 2023, Mulanje received excessive rainfall which led to destruction of houses, crops and also loss of hundreds of lives. In some areas, whole villages were washed away; rocks and huge loads were deposited in those areas rendering the places inhabitable. Some people need relocation since their land has become useless to build new houses and

to do farming hence anticipating serious hunger in the next few months.

A ray of light has been the steadfast support offered by many; through individual donations and various grants the hospital will be able to provide materials for latrine and house reconstruction, farming inputs and emergency food and medical support.

In this Newsletter you can also read about the first quarter that the new Eye Clinic was operational, the quality improvement programme and about a successful visit from longstanding partners from Northern Ireland.

We wish you a pleasant read.

Dickson

Back from School



Michael Nyirenda and **Bertha Thewe** have both returned from university with a Degree in Nursing. Both have already worked at MMH for many years and are now even better equipped to serve patients and improve care. Congratulations! Thanks to those supporting capacity building.

Dr. Andrew reports on the first 3 months in the new Eye Department.

Setting up and seeing patients

The new unit is a welcome addition to a busy mission hospital. There were some delays with the contractor handing over the unit. Setting up the equipment, testing and demonstrating to staff how to use the equipment was a major milestone. Our first eye patients were seen on January 23rd. The combined Eye/Rehab and Dental unit was formally opened on 2nd March. Dignitaries and stake holders from far and near were in attendance. It was an opportunity to spread the news that these new services were available in the locality.

Previously patients had travelled far to access services. Radio and TV interviews were made locally to inform the community about the new eyes and

rehab Centre. We finished out last week on a high operating on 2 days of the week. Despite the 3 weeks of national mourning on account of Cyclone Feddy and the hardship patients came for cataract and glaucoma laser surgery.

Training

In addition to our dedicated eye nurses we trained the rehabilitation staff Sally and Eunice in basic eye assessment. This included how to undertake a visual assessment, pupil examinations, keratometry and biometry. This means that in busy periods other staff can be called in to help—a unique partnership. A major achievement was getting the staff to gel together and work as a team. The nursing staff Michael, Bridget and Kelly were very keen to learn. I was able to give tutorials every week to ensure they were confident in basic eye assessment. Our Monday morning 8am

sessions was an opportunity to receive feedback, plan for the week and teach.

Collaborating with Zomba Eye unit

Before we started cataract surgery at Mulanje Mission Hospital our nurses were placed at Zomba Eye unit for training in intraocular operative theatre technique and giving local anaesthetic eye blocks. This training was timed to occur just before the joint surgery sessions held over 3 days at MMH when we were joined by Cataract surgeon from Zomba Owen Kanazawa and team. This ensured their new taught skills were tried out and tested. To increase throughput we operated on twin operating theatre tables in Theatre 2. Jointly 19 cataracts were done. As this was a teaching and learning session the emphasis was on learning rather than numbers operated on. Both teams had fun together doing intraocular



▲ First cataract surgeries at MMH

Eye Clinic—first three months —*continued*

surgery in the new eye unit. We concluded with a debrief so both teams were able to share the experience of learning and teaching together. This collaboration greatly enabled us to proceed after they had left. We are so grateful to Dr Chinsisi Nyerenda and team at Zomba Central Hospital eye unit for supporting us in this way.

Outpatients

Outpatients was busy with quite a diverse number of patients attending including children.

Apart from cataracts other pathology seen included advanced Glaucoma, diabetic retinopathy, a baby with congenital cataracts and a young patient with probable conjunctival squamous cell cancer. We also saw patients who had come over the border from Mozambique where eye services are extremely rudimentary.

No patient was turned away because they couldn't pay for treatment. The initial cataract surgeries were all free. Patients for subsequent procedures were asked to make a contribution no matter how small.

Activity

By 22 March we had performed 45 eye procedures. Of this 31 were Manual Small Incision

Cataract operations (MSICS), the rest other procedures including laser treatment. We saw just over 200 outpatients. We referred 2 patients to the Eye Unit at Queen Elizabeth Hospital, Blantyre.

Summary

The unit in Mulanje has made huge strides and is set to make a big impact on the fight against avoidable blindness not only in Mulanje but in Malawi. With a little more support by appointing 2 more key staff members we should have a self-supporting sustainable unit within 2 years.

Thank you to all partners who made this clinic possible!



▲ *One of the first patients the day after cataract surgery*

▼ *Waiting area for assessment*



Damage across Malawi

The Tropical Cyclone Freddy weather system brought torrential rains in March, with the equivalent of six months of rain falling in just six days, causing devastating floods and mudslides in Southern Malawi. In one area of Mulanje, 600mm was recorded in just 24 hours. The record-breaking weather system hit Malawi at the end of the rainy season when rivers and water bodies were already at high levels. Over 1500,000 people have been affected since more than 700 people killed and over 500,000 people displaced in hundreds of camps, according to Malawi's Department of Disaster Management Affairs (DoDMA). Public infrastructure—such as schools, health facilities, district and main roads—have been damaged across the affected districts, and some 240,000 hectares of land has been flooded, including 75,000 hectares of cropland. Most water points in the affected districts are either surrounded by water or submerged. The President of Malawi, His Excellency Lazarus Chakwera, declared 14 days of mourning from 16 to 29 March to honour people who have lost their lives due to Tropical Cyclone Freddy.

Malawi is one of the most vulnerable countries in the world in terms of risks due to changing weather patterns.

Impact on Mulanje

Mulanje District has been affected heavily by Freddy and its aftermath.

Mulanje Mission Hospital did an assessment of the damage in its catchment area, through its Primary Health Care department. Based on an assessment in 34 villages, the following was concluded: 959 houses and 2085 toilets have collapsed. 75% of maize crops in model villages have been damaged, being washed or blown away. Of the trees which have recently been planted in our reforestation programme, 9000 were lost.

Internally displaced people (IDP) had gathered in camps, mostly housed in schools and churches. There were 7 camps receiving help and care via Mulanje Mission Hospital. In these 7 camps, 1600 internally displaced people stay, of which about a quarter is under-5 years old. The camps have now all been closed and people have returned to their homes.

Schools have reopened as of 17th April.

Our response

The hospital planned a response in two phases:

Phase 1—emergency aid and relief. This included provision of food and medical care in 7 camps; blankets and mosquito nets and emergency repairs to water sources. Chlorine to prevent water

borne disease was provided throughout the catchment area.

In camps, safeguarding committees were quickly established and toys for children provided.

Phase 2, from 15th May, will entail the following:

- Assisting 400 households with basic building materials such as plastic sheets
- Assisting 60 very vulnerable households with some cement, roof sheets and labour as needed
- Construction of 1000+ pitlatrines to prevent spread of cholera, typhoid and other disease
- Provision of materials for reparation of boreholes to waterpoint committees
- Provision of school materials to 8.000 affected children
- Provision of inputs for farming and livestock to 1600 farmers, with a focus on most needy and households with orphans/disabled persons
- Reestablishment of beehives where destroyed
- Training of 500 farmers in climate smart agriculture
- Replanting of >20,000 trees through community work.

The response is now in full swing. We thank all who support us doing this: many individuals and churches, the Verburg Charity Foundation, Wilde Ganzen, Christian Blind Mission and AFAS Foundation.



▲ Crops lost due to cyclone Freddy



▲ Extensive damage to roads and bridges in Mulanje

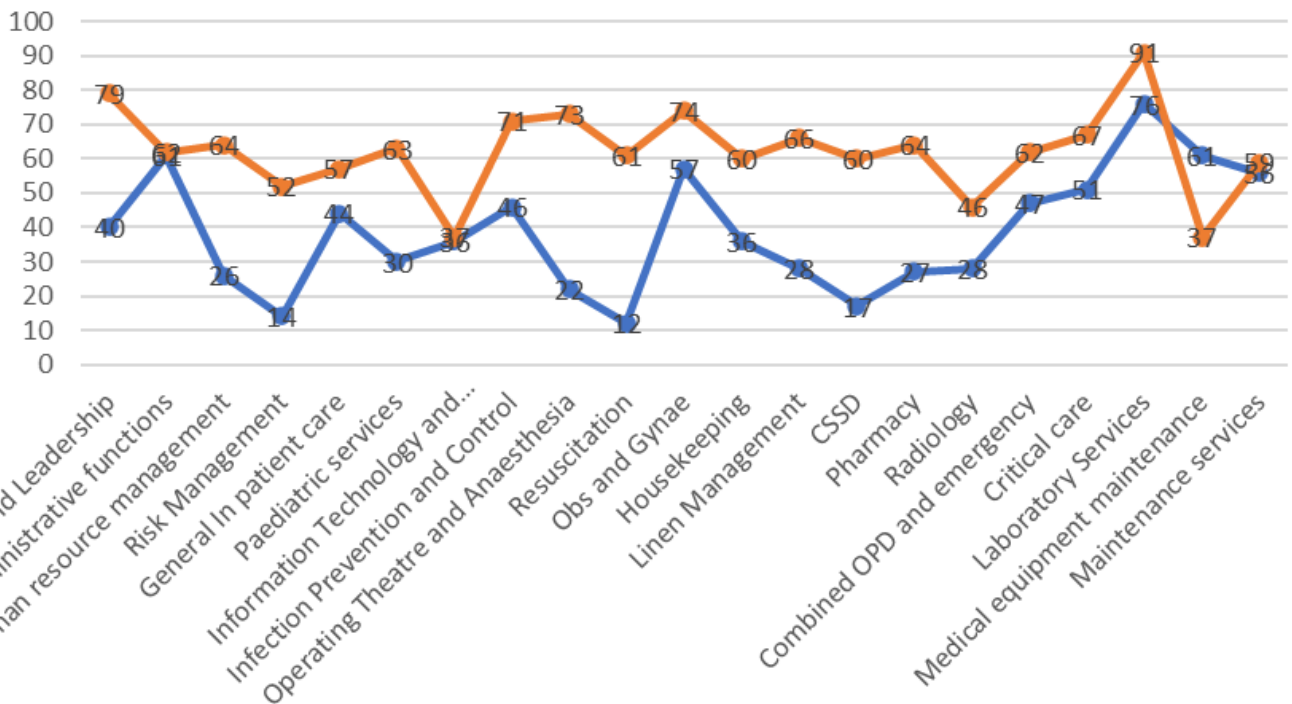
In the last edition, I shared about a quality improvement program that MMH had embarked on. A lot has happened in the past year to improve quality of services according to the COHSASA Standards. I am excited to share results of our most recent progress survey by the Ministry of health Quality Management Directorate. The hospital's overall score moved from 38% in late 2021 to 63% in 2023 representing a 65% increase in score!

The progress shows commitment of the hospital management and staff to continuously improve quality of health care services. The hospital management commends all members of staff for hard work and commitment towards quality improvement. In its strategic plan, MMH aspires to be an accredited health facility by 2028. This is a huge step towards reaching that goal.



▲ Deputy Director for Quality Management Directorate (Ministry of Health) poses with assessors and MMH staff after the progress survey.

Baseline Vs Progress Survey



▲ Scores for various departments—2021 (blue line) versus 2023 (red line)

Partners from Northern Ireland visit MMH

In April, we received two groups from Northern Ireland, both investing in the Sustainable Livelihoods Programme at the hospital. We are blessed to work with the Good Little Company and Fane Valley for many years and are enjoying a younger partnership in solar energy with Action Renewables. The last visit was four years ago, so there was much to share and celebrate.



John Best and Ronan McCanny from Fane Valley inspecting the new Sikoya Irrigation Scheme



Tara and Ciara Lynn from Good Little Company hand out diplomas to lead farmers

Partners from Northern Ireland visit MMH



Field visit and discussion between Fane Valley and farmers at Mwanamvula



Action Renewables' Lara and Jonathan co-funded solar equipment that keeps MMH running

University of Sheffield student raises funds for emergency relief

Erin Anglim is a medical student at the University of Sheffield. For her general medicine rotation, she was taught by a former MMH doctor.

Erin decided to raise funds for the emergency response following cyclone Freddy when she heard of the damage and suffering in Malawi.

She sought sponsors, ran a half marathon and donated £180,00 towards this end. Thanks very much, Erin!

Best Nurse Award

Every year, staff vote for the best nurse at the hospital. This year amongst all Oliver Banda from Childrens' Ward was elected.



▲ *Best Nurse 2022-23, Oliver Banda from Childrens' Ward*