

Nursing Leadership & Management During Covid 19 Pandemic: Experiences, Resource Mobilization and Challenges

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MTRH-Shoe for Africa Paediatric Hospital







Background

- MTRH Nurse leaders were in-cooperated into the MTRH Covid 19 Control and Suppression Committee and its subcommittees:-
 - Communication and coordination
 - ➤ Nursing & Infrastructure
 - >Treatment and Care
 - ➤ Surveillance & Contact Tracing
 - ➤ Home Based Care





Role of Nurse Leaders & Managers in Covid-19 Management at MTRH

- Prevention, Treatment & Vaccination
- ➤ Guide in the interpretation/Adapting Covid 19 National Guidelines/ Communique for implementation
 - Sensitization of all employees
 - ➤ Identified, outlined and communicated plan of action upon receiving suspected patients

Covid 19 Pandemic :Acid Test for Nurse Leaders and Managers





Experiences

- MTRH First Case Results 9th April 2020 (Tested on 6th April 2020)
- Harness Team work within interdisciplinary health care teams
- Listen, Empathize & Respect feelings of Uncertainty and Fear among nurses yet Empower nurses
- Cope with New and Evolving guidelines/ protocols/Updates,-New PPEs,-New Equipment
- Learning: New disease, first hand experience from health Team and patients





Envisioned our capabilities as MTRH:

-Focused testing-eligible patients & clients in view of testing kits and transportation media

 Continuous Sensitization on Strict adherence to Covid 19 prevention protocols:-No need for accommodation/Isolation of nurses and other care providers





- Courage and Optimism to support our Nursing teams:-
 - >-Nurses have:-Co morbidities/Elderly
 - >-Nursing Workforce needed despite sickness absence
- Communication/gratitude /support to nurses-Focused on Mental Health aspect of staff/ patients/relatives
 - -Psychological support and debriefing nursing teams to enable coping with infections/mortality(pts and colleagues)





Need for Prompt response and Decision making upon consultations/enquiries

Hotline:

➤ 0110052150 & cell-phone 056527474 to decongest the Night Superintendent/Referrals Coordinators call line (0701790434)

➤MTRH Covid 19 self screening tool- *219#





MTRH Multidisciplinary Rounds......







- Working hours/Duty reorganization –Night duty from 5pm to 7am upon Curfew hours
- Confidentiality yet prompt availability of Covid 19 results for immediate action
- Nursing voice-Needed in IPC, care provision, knowledge dissemination guidance, care provision and support





- Scaling down the Consultants Follow-up Clinics bookings & Extended Drug refill periods for Psychiatric and DM Patients
- Surveillance /Contact tracing was effective in early stages of the Pandemic not in CT4Covid 19
- Vaccination planning –Logistics & scheduling MTRH staff and collaborating institutions staff.





Resource Mobilization

- Reassignment /redeployment of nurses:
 Inpatient, Evaluation and Testing Centre, Home
 Based Care and Follow-up /Outreach services
- 2. Infrastructure: Rafiki Isolation Centre, Rafiki Evaluation Centre, Amani Isolation ward, MTRH World Bank Regional Laboratory, Oxygen generation plant, Oxygen Piping with relevant maintenance and service commitments



MTRH Covid Amani Isolation Ward



- Nurse Station Safe/Green Zone
- Donning Area
- Ward Entrance and Exit
- Doffing Area
- Shower/Amenities back to the Nurse Station



3.Collaboration:-



Kenya Covid 19 Fund Board with Equity Foundation

- -Indiana University,
- -USAID-
- -MOH
- -World Bank
- -Quadong P.R.China
- -Smile Train,

IPAS,

EABL,

Brightek IL





Resource Mobilization Cont...

- 4. Employment of nurses-(114 Nurses)
- 5. Other Health Products and Technologies (HPTs) High oxygen flow-rate administration consumables:-
 - High Flow Nasal Cannula (HFNC) and Continuous Positive Airway Pressure Non Invasive Ventilation (CPAP NIV) masks
 - 6. TeleHealth/Teleconferencing infrastructure





Resource Mobilization Cont...

7. Transportation Logistics

8. Maintenance of Non Covid 19 Essential Health Services

9. County Engagement and support to reduce movement/referral of Covid 19 patients.

10.Private Hospitals support to contain Covid 19 patients





Challenges

- Regulation of Visitors to the hospital
- Inadequate resources/Financial constraints (PPEs, oxygen, supplies, Drugs)
- Increased workload yet some patients perceived a dehumanized/Discriminatory care
- Burnout/Exhaustion/Long Working hours-curfew time-=Compensatory offs/food and teas/Debriefs/Duties with resting periods(4hrs)





Challenges cont..

- Psychological effect of Covid 19-for patients/relatives:-
 - Debriefing Patients & Relatives
 - Staff /Family -anxiety may infect/avoidance
- Stigma by colleagues and community-Sensitization/MTRH Integration policy





Challenges cont..

- Industrial action within the county facilities by doctors, nurses and clinical officers-Referrals
- Denial +ve results-Present to other facilities/lost to follow-up on HBC
- Covid 19 –"Loneliest of all diseases" (Isolation, PPEs, No visitors):-Introduced Covid 19 Care Companion for the very sick patients.
- Public/Political sheer disregard of safety protocols
- Infodemics and miscommunication-(Social Media)





Conclusion

- Salute the nursing fraternity:-
 - Nurse leaders'/Managers' moral responsibility and support to nurses
 - Nurses selflessness in Covid 19 care provision & Professional mentorship of nursing students and Young nurses.
 - Salute MTRH CEO Dr Wilson Aruasa for his Leadership & Support to MTRH Nurses & our DNS Titus Tarus —The Leader of Nurse Leader Managers at MTRH.





END.....Asante Sana



