



SMP HEALTH LINKS FORUM
FRIDAY 19TH MAY, EDINBURGH CITY CHAMBERS
14:00-16:00
THE BUSINESS CENTRE

Summary Minutes

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APOLOGIES:

Andrew Blaikie, University of St Andrews
Carol Carson, VSO Volunteer
Mike McKirdy, Royal College of Physicians and Surgeons of Glasgow
Pamela Woodburn, VSO

ITEM ONE: LEADERSHIP CAPACITY BUILDING IN MALAWI

The Association of Malawian Midwives (AMAMI) and Edinburgh Napier University have worked in partnership for three years, implementing the Respectful Maternity Care (RMC) project. This Scottish Government funded project aims to develop, implement and evaluate respectful care in Malawi, using a human rights approach to maternity care. The project highlighted the need for capacity building amongst midwives and midwifery leaders. In response to this need, four Malawian healthcare professionals came to Edinburgh Napier University in May 2017 as part of the Commonwealth Professional Fellows Programme. These fellowships are offered to citizens of developing Commonwealth countries to enhance their knowledge and skills in a particular sector. The SMP Health Links Forum was delighted to be joined by Florence Lungu, Aubrey Banda, Thoko Lipato and Chikondi Macheso who are all part of the programme. Florence spoke about the objectives of the fellowship, their experience in Scotland and the lessons learned and shared.

The objectives of the fellowship:

- To identify Scottish priorities
- Understand the similarities and differences between Scotland and Malawi and transferable lessons
- To develop personal leadership qualities

The scholars visited various health facilities and training institutions, met midwifery leaders and took part in leadership training and conferences. One difference noted between the countries was the approach to mentorship. In Malawi there is no one-to-one mentoring during clinical practice, there can be 20 students to 1 mentor, whereas in Scotland much closer supervision is provided. The scholars identified a need to set-up a mentorship programme, develop effective leaders, establish a supportive environment, and to encourage midwives at all levels to conduct research and use evidence based practice.

[Click here to download presentation slides >>](#)

ITEM TWO: DEVELOPING IMPACT AND UPSCALING SUCCESSFUL WORK, WITH A FOCUS ON MATERNAL HEALTH

Dr Catriona Connolly from Ninewells Hospital spoke to the group about the Scotland Malawi Anaesthesia Project, which delivers emergency care education to improve maternal and child mortality rates. The training was adapted to be applicable in Malawi and focused on small group teaching scenarios. The project built capacity by training the healthcare trainers, providing supervision and mentorship and eventually handing over the teaching to the partners in Malawi. Reconditioned NHS equipment has been donated to Malawi for the training, no electricity or programming is required, only an informed instructor. The trained instructors have felt ownership and pride at being able to teach their colleagues.

Phase 1: 2006-2011

Between 2006 and 2011, 43 anaesthesia courses were provided, including critical care, transport of critically ill patients, obstetric emergencies and paediatric emergencies. Pre 2006, there was no critical care at the district hospitals, many deaths of critically ill people during transfer to the central hospitals and poor communication from the referring hospitals. The positive effects of the training have seen transfer numbers decrease by up to 74% as patients have been treated in the district and the survival rate of those treated locally has been 70-80%. In the 3 health centres collecting data, maternal deaths have decreased by 50%.

Phase 2: 2012-2016

The second phase of the project has provided training in the management of maternity emergencies/ life-saving skills, called "MOTTIE" courses. Clinical staff and guards/drivers were trained in three districts with the highest maternal mortality- Salima, Machinga and Mangochi. These trained instructors were then supervised while teaching MOTTIE courses. Data from Salima showed a 50% decrease in maternal mortality and in Machinga a 75% decrease.

Sustainability

Catriona spoke of a number of issues affecting the sustainability of the project. These included funding for lunches and refreshments, accommodation and travel costs for health centre staff, and trained instructors moving on to new employment. The project does not pay per diems and has noticed staff missing their training and attending a session where they will receive payment.

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ITEM THREE: HEALTH SYSTEMS STRENGTHENING IN MALAWI

Paul Kawale, University of Edinburgh PhD student and Senior Preventive Health Office at Nkhoma Hospital, spoke to the forum about strengthening health systems in Malawi. Paul provided background on the policies and strategies that have been adopted over the past two decades. There have been numerous interventions to improve maternal mortality, child health, HIV testing, HIV treatment adherence, malaria prevention and resource management/eHealth systems. For each intervention, Paul showed statistics highlighting how health systems have improved between 2011 and 2016, such as access to improved sanitation which increased from 8.2% to 51.6%. Further results of the health systems strengthening efforts are included in Paul's presentation.

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ITEM FOUR: OPEN DISCUSSION

Leadership

The group discussed similarities and differences in leadership between Scotland and Malawi. The Malawian Commonwealth Fellows noted that they have seen a lot of commitment from the leaders that they met in Scotland and many have been in post a long time. There are often fewer staff in Malawi which can result in leaders being overwhelmed and losing a sense of direction. There are some amazing leaders in Malawi, but mentorship and leadership programmes are needed. There is a tendency for managers to move on, which means it is important for clinical officers to be upskilled as well. The limiting factor is often a lack of resources and not a lack of skill.

Shipping to Malawi

The forum discussed the importance of coordinating when sending equipment/goods to Malawi. It is useful to know what items have been sent where and what else is needed. Over the years our members have regularly sent items to Malawi through the [Raven Trust](#); however this organisation has now ended its shipping service to Malawi. David Hope-Jones informed the group that another SMP member is now in the process of establishing

a new charity, likely to be called the Banana Box Trust, which will look to offer a similar shipping service to that previously offered by the Raven Trust.

A great deal of good has been done over the years sending donated goods to Malawi, however there is also a risk of unwanted, inappropriate or unusable items being sent to Malawi unless the highest standards are followed in deciding what should/shouldn't be sent. Our preference as a network is to, where ever possible, source goods in-country rather than send from Scotland. Accordingly, in consultation with our members and our partners in Malawi, we developed a checklist of ten points we encourage members to consider before sending goods to Malawi. We also have a Practical Guide to Sending Goods to Malawi available online. The SMP values all input to this document.

[Click here to view the checklist >>](#)

[Click here to view the guide to shipping >>](#)

The SMP will look to update this guide later in the year, once developments are underway.

Gender

The forum discussed the imbalance between the number of male and female clinical officers and the need for more women doctors. Catriona Connolly noted that she has seen a shift towards more female clinical officers and it is important to state that the opportunity for training is open to everyone.

ITEM FOUR: ANY OTHER BUSINESS

Scottish Global Health Collaborative (SGHC)

Stuart Ferguson, Clinical Leadership Fellow from the Royal College of Physicians and Surgeons in Glasgow, presented an executive summary of the new RCPSG report.

University of Edinburgh MSc Dissertation

Abigail Deibert is looking for contacts within hospitals or clinics (run by NGOs, the public sector or CHAM) that are involved with HIV/Aids treatment and prevention in Malawi. She is hoping to do a qualitative study on healthcare workers' views of recent healthcare worker retention strategies. Please [contact us](#) if you can assist Abigail with her request.

Turing Talks

On June 13th speakers from across the globe will share their experiences of innovative technology and how it is challenging the way we change our world. A special price of £45 has been offered to SMP members for the Turing Talks. For your special discount, enter the promotional code: 'Turing45' on the [Eventbrite booking page](#).

**THE NEXT MEETING OF THE SMP HEALTH LINKS FORUM WILL BE IN THE AUTUMN.
FURTHER DETAILS TO FOLLOW**