

Patients pay price as nursing care deteriorates

By Betty Amamukirori

The clock strikes midday as I enter Mulago National Referral Hospital's casualty ward. I am here to see a friend, working in one of the wards. As I pass by the emergency room, a faint cry for help stops me.

"Munyamba (help me)," shouts a man from the VII latrines opposite the ward. As I turn to look at him, a strong smell of urine hits my nose; I spot a dishevelled young man covered in wounds, trying to crawl out of the latrine. Unable to cross the small trench separating him and the main path to the emergency room, he gathers all energy within him and calls for help.

Nurses dressed in white and pink dresses distance themselves and hurry past him, without looking his direction. Tears stream down his face, but no one offers to help, including the nurses passing by.

While still watching him struggle to climb over the shallow trench, a nurse comes by; I run after her, tap on her shoulders and ask why they are not helping him. Without looking at me, she barks back, "You get and help!"

"But nurse, he has been crying for long and you people are ignoring him," I insist. She takes a long look at me, considers her response and says, "I am going to look for blood. Ask people at the emergency ward to help." She then dashes off.

A security officer, who has been watching us from a distance, walks over to me and says: "Those people nowadays work as if they are being forced. They are so demotivated, including the doctors. They have deviated from their original calling." The officer declines to be named for fear of losing his job.

The emergency room
I enter the emergency room to seek help. At the entrance, an askari is deep in conversation with some women; his work is to keep off people from entering the room. Not wanting to disturb the flow of their conversation, I enter the room and find a bed of activity.

Victims of accidents lie on tiny beds, some on the floor, writhing in pain. In one corner, nurses are huddled in a group over paddles of dirty water, talking in low tones. After jumping over the paddles of water and struggling past the crowd, I finally find an officer willing to help the wounded man, but after carrying out some of his errands.

Nurses speak out
"You have not seen anything yet. Nursing care is rotten to the core. Get time and visit all government hospitals in Uganda. You will realise how lead the system is," said one of the nurses I met at the paediatric ward, after I had relayed to her what I witnessed.

"She pulls me to the resuscitation ward and says such occurrences no longer surprise them. She notes that the standard of nursing care has degenerated to an extent that nurses no longer wait for a patient to undress for an injection."



Patients in the casualty ward of Mulago Hospital on New Year's Day. Sources say some nurses are not mentored well. Photo by Kennedy Oryemba



A nurse attending to a patient. In Uganda, one nurse attends to 11,000 patients

"I have seen several times one of my colleagues injecting a patient through the clothes," she says, after extracting a vial from me not to name her and her colleagues that had joined in the conversation.

"A lot of things have gone wrong in our profession. I don't even know if the disciplinary committee is still there. Recently, a midwife bit a patient's ear. The matter was reported to both the Police and the disciplinary committee. They glossed over it and she returned to work," another nurse said.

The nurses state that most of them no longer want to touch

patients; some come late, work for a few hours and disappear, while others abscond from duty without explanation.

"It's so common for a patient admitted in the ward to go back with bed sores yet they came for treatment. You find beds very dirty with traces of blood and dust, but no one pays attention. The nurses would rather gossip than do the nursing," she added.

Paul Andurua, a fourth-year medical student at Makerere University Medical School, noted that the situation is worse in the newly constructed Kiruddu Hospital in Makindye, Kampala. He says nurses are arrogant, some wear short uniforms and its common to see a doctor on ward rounds while a nurse on duty is seated somewhere engrossed on her phone.

"Nursing care in Uganda is very poor. I have witnessed so

One of the senior nurses revealed that bodies and dirty linen are used to ferry drugs out of the hospitals.

many appalling things being done by nurses. It scares me so much. Though I love my country, I don't want to work under such conditions," he says.

He reveals that contrary to the nursing code of conduct, nurses nowadays wear high heeled shoes, facial make up and perfumes, yet no one admonishes them.

"I have seen supervisors around, but I doubt if they are doing their work because some patients are allergic to perfumes and some suffer from asthma. The noise of the shoes and scent of the perfumes affect them a lot," Andurua said.

Paul Bukema, the general secretary of Uganda Nurses and Midwives Union (UNMU), and of the nurses system in the not far from because of the rot in the nursing system in government hospitals, private clinics have sprung up within a few metres of giving an example of Mbale Regional Referral Hospital.

Supervision
The nurses revealed that though the Ministry of Health has commissioners who are supposed to supervise them monthly, they no longer visit the hospitals, like it used to be in the past.

"They noted that even most of their bosses, such as the senior principal nursing officers, have abandoned their duties. Their work is to sit in offices and go to those conferences. It's so demoralising to have bosses who are not bothered about what is going on in the hospitals. Nursing is dead because of them," a nurse said.

They said even the monitoring teams that used to go round the wards to monitor hygiene also fizzled out and the whole process died.

Their statement was corroborated by Bukema, who said there is no monitoring and evaluation done by the nurses.

Jolly Ruhambarama, a senior paediatric nurse, currently offering nursing to the young nurses. He agrees that though the ethical code of conduct has been broken, nurses have been broken more because of some unethical conduct. "Yes, we speak more times because of some unethical conduct. One to act unethically," president Idi Amunyama, who served under poor and hard conditions, but noble calling that nursing is respected," she said.

"Looking at nurses today the way they behave, I wonder if they are really interested in the profession."

She also notes that some of the nurses have been without knowing how to use basic medical equipment such as the oxygen machine, monitor and guide them.

"The instructors do not appear in the ward as mandated. They expect a nurse who is already overworked with patients to mentor these nurses," she said.

However, Bukema said many trainees and even do both the tutoring and supervisory work at the hospital. The nurses, too, are employed by the huge number of patients. According to Bukema, an ideal nurse-to-patient ratio in Uganda is a general setting of 1:1. However, in a critical setting, like intensive care it is 1:1. However, the current situation, given the country's population, is that one nurse attends to 11,000 patients. He said currently, in a general hospital setting, one nurse

Health ministry PS speaks out



People being checked at the entrance to Kiruddu Hospital. The facility is part of Mulago National Referral Hospital

Health ministry PS speaks out

Dr Diana Atwine, the Permanent Secretary of the Ministry of Health, acknowledged that, indeed, the nursing care in the country is not up to standard and that the nurses are demotivated.

Last year, following the medical doctors' strike, President Yoweri Kagame Museveni agreed to have the salary of the medical officers increased together with that of the other public servants.

"It's true there are some people who are not good and are demotivated, but I hope this pay will add some motivation. We also need to strengthen our regulations and invest in mindset change," she said.

"She noted that medicines need not defend drug theft on grounds of poor pay, stating that money can never be enough and stated that they are working with the hospital administrators to ensure that every drug given out to the hospitals is accounted for. She added that there has been a laxity in supervision that has given the thieves a leeway to steal drugs without being noticed.

"We need to talk against theft of drugs. We need to



Dr Diana Atwine, the health ministry PS

plug the holes. No matter how much money is increased, if we don't talk about the loss, we are still going to see stock-outs," she said.

For now, the patients will remain at the mercy of (demotivated) nurses, until the Government fulfils its promise of increasing salaries. The Government might also have to get tough through evaluation and monitoring so that vices, like drug theft and corruption, are curbed.



A nurse ready for duty. Nurses in government facilities earn between sh400,000 and sh1.6m per month

money," one of the nurses said.

Drugs theft
One of the senior nurses revealed that bodies and dirty linen are used to ferry drugs out of the hospitals. He said the drugs are put under the body as it is being taken to the mortuary or wrapped under dirty linen as it is being taken for washing.

When asked to explain these serious allegations, Bukema noted that it is a regular occurrence, noting that nurses are human, too, with needs that need to be met.

"It's not only doctors stealing, everyone, including the support staff is doing it," he said.

Stakeholders speak out
Responding to the allegations raised by the nurses, Rebecca Nassuna, the acting registrar of the Uganda Nurses and Midwives Council, said the allegations have never been brought to her attention.

Hellen Mukakarsa Katarambi, the executive secretary of the Uganda Nurses and Midwives Examinations Board, said the education ministry should not be blamed for the poor quality of nurses being churned out.

"About 75% of the practical skills are given from the hospital wards by the nurses assigned as mentors to these students. We give the theory and the mentors give the practical skills," she said.

She said the students are given skill books which are supposed to be signed by mentors once the students do a satisfactory job and, if not satisfied, the mentors do not sign. The student is then asked to repeat. They are promoted to the next level, only if they pass the practical tests.

"The Ministry of Health should blame themselves. They are supposed to mentor the students and make sure they are not promoted before accomplishing the record book. It is a two-way system, so we should not be blamed.

Asource claimed some patients are injected with clothes on

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