

CASSIOPEIA NKANI

Vol. 39. January 2025

CASSIOPEIA-BRINGING 5 STAR QUALITY HEALTH CARE SERVICES TO THE 5 TARGET HOSPITALS FOR UHC

JICA - THE PROJECT FOR STRENGTHENING MANAGEMENT CAPACITY OF GENERAL HOSPITALS IN LUSAKA DISTRICT



Visiting floor managers from Matero First Level Hospital taking patient vitals at Chipata First Level Hospital during their one-week exchange visit

**FLOOR
MANAGERS
FROM MATERO
FIRST LEVEL
HOSPITAL FINISH
SUCCESSFUL
EXCHANGE VISIT
AT CHIPATA FIRST
LEVEL HOSPITAL**

**READY TO
SUSTAIN MEDICAL
EQUIPMENT
TECHNOLOGY
REPORTING
PRACTICE WITH
SOP**

**DR OLIVER
KAOMA SHARES
HIS EXPERIENCE
DURING THE
ANTI-MICROBIAL
RESISTANCE
PROGRAM
IN JAPAN**



FLOOR MANAGERS FROM MATERO FIRST LEVEL HOSPITAL FINISH SUCCESSFUL EXCHANGE VISIT AT CHIPATA FIRST LEVEL HOSPITAL



Floor Managers, from left to right: Ms. Harriet Chimfwembe Mulenga (Matero FLH); Ms. Priscilla Munsongwe (Chipata FLH); Precious Mwanza (Matero FLH); and Gladys Kaoma (Chipata FLH)

Matero First Level Hospital has become the second government-run hospital in Zambia to introduce the use of floor managers in the facility. The first to have done so is Chipata First Level Hospital, which came up with the concept after Medical Superintendents, Hospital Administrators (HA) and Matrons from the five first-level hospitals in Lusaka district participated in the two-week 2023 Knowledge Co-Creating Program (KCCP) held by JICA in Tokyo.

The KCCP training was aimed at enabling trainees to draw on Japanese approaches and experiences in hospital management

and to examine practices appropriate for Zambia. During the training, trainees recognised that there is room for improvement in access to healthcare services in Zambian hospitals, including long patient waiting times. To combat this, the hospital management at Chipata FLH decided to 'borrow' the concept of floor managers.

Floor managers are staff members whose primary function is to help and guide patients as they navigate the facility. Their responsibilities range from taking patient vitals to facilitating faster access to clinicians in critical cases.

Ms. Harriet Chimfwembe Mulenga, one of the nearly hired floor managers at Matero FLH, shared her

experience at Chipata FLH, where she spent a week (from January 13 to 17, 2025) receiving further orientation from the floor managers there. Ms. Mulenga stated that her new role requires assisting porters when they have too many patients to attend to. This includes helping secure the body of BID (brought-in-dead) cases until a nurse or doctor attends to them.

Her colleague Ms. Precious Mwana also detailed the work they do as floor managers: from helping with triaging patients by taking their vitals, to helping emergency patients in reaching the appropriate departments, where they need to go for screening or casualty department.

This assistance also applies to senior citizens, pregnant

CONT'D

women and very young children, who may struggle with long waiting times. For infants, minimizing wait times is especially important to reduce the risk of infection.

Ms. Mulenga also added that their new role provides them with a direct opportunity to help people hands on. For instance, they assist hypertensive patients in obtaining their medication while waiting for a doctor's consultation and direct patients to laboratories for tests or to the NHIMA ward for treatment.

Their floor managers at Chipata FLH were happy to share their experiences. Ms. Prisca Musongwe

and Ms. Gladys Kaoma praised the three colleagues, encouraging them to maintain their enthusiasm

and dedication. Ms. Musongwe noted that floor managers are the sign posts for the hospital, helping patients find their ways. She was proud of her work and advised them to collaborate effectively with porters, clinicians and doctors to deliver quality care to patients.

Ms. Kaoma on the other hand advised them to be humble towards patients – particularly the elderly – as floor managers represent the face of the health facility. She also remarked on the significant improvement seen since they first began floor manager's job in March 2024 and now – saying that patients and the community at large appreciate the work being done. The newly appointed floor managers at Matero FLH thanked their hospital managers for sending

them to Chipata FLH for training. They acknowledged the need to acquire new skills and to learn from their counterparts. They also emphasized their commitment to demonstrating the value of floor managers within the hospital so that hospital managers could see the need and importance of having floor managers in the institutions. Even patients see what we are doing and they will share what we are doing at Matero.

Lastly, they observed the need for identification and uniform jackets for easy recognition by patients. Additionally, they planned to share insights gained from Chipata FLH's floor manager operations, such as the importance of close collaboration with clinicians and doctors.

Chipata and Matero floor managers going through a patients' file to determine level of assistance needed



READY TO SUSTAIN MEDICAL EQUIPMENT TECHNOLOGY REPORTING PRACTICE WITH SOP

Lusaka District Health Office (LDHO) has implemented weekly and quarterly reporting practices on operational status of medical equipment in the five target first-level hospitals since 2023.

Although the reporting status first achieved the project target of 75% in November 2024, sustaining this achievement continues to remain a challenge due to the variations in reporting operation. The naming conventions for reporting files differ, making it diffi-

cult for LDHO to identify which reports from specific hospitals and which week were submitted. Additionally, some reports were not submitted leading to follow-up delays. Even when the target hospital thought they submitted their reports, they were not received by LDHO, a discrepancy found after several months.

In December 2024, Mr. Obed Samusiku, Medical Equipment Technologist at LDHO, with the assistance of Mr. Joseph Chizongo, a technical officer of the

Cassiopeia Project, developed Standard Operating Procedures (SOP) for the reporting practices from the five target hospitals. The SOP defines the reporting content, submission deadlines, procedures including reporting methods and file naming, ensuring reporting procedures, and response measures for late submission or non-compliance.

The SOP is expected to streamline reporting practices and ensure the sustainability of achieving the desired reporting status.



Mr. Obed Samusiku: Medical Equipment Technologist at Lusaka District Health Office asking questions at the joint KCCP online meeting on January 30th, 2025 at Intercontinental Hotel in Lusaka

JOINT FOURTH KNOWLEDGE CO-CREATION PROGRAM (KCCP) ONLINE MEETING HELD TO MARK END OF TRAINING IN JAPAN

Fourteen healthcare workers from the Lusaka Provincial Health Office (LPHO), Lusaka District Health Office (LDHO) and five first level hospitals participated in a joint online meeting on Thursday January 30th, at the Intercontinental Hotel to present the action points they plan to implement after their training.

The expectations for the participants of the two-week training program titled “Japan’s approach and experience in strengthening hospital management (Infection Prevention and Control, and Medical Equipment Management)” was for them to learn and develop understanding

of hospital management in Japan through hospital visits; to consider how to reflect and strengthen the knowledge gained through the course in hospital management in each general hospital in Zambia; to learn about cases of measures taken to address issues in the provision of healthcare services (including community healthcare) in Japan, and to consider ways to provide healthcare services at the provincial and district levels in Zambia; and lastly, to develop an action plans to be implemented on their return home.

Comprising of infection prevention and control team from the five target hospitals (two environmental health technologists, two nurses and

a medical doctor), five medical equipment technologists (FLH), the clinical care specialist at LDHO, and the senior environmental health officer and chief nursing officer (LPHO), the team presented their action plans to fellow health care providers who provided useful feedback and comments to the participants.

The meeting was officiated by the Provincial Health Director from LPHO, Dr. Simulyamana Choonga who praised the participants for their unwavering commitment to providing quality healthcare to the Zambian people. He also urged them to implement what they had learnt in Japan for the betterment of all patients who visited their facilities.



Above: Dr. Simulyamana Choonga giving opening remarks

Below: Q&A session during the KCCP meeting



Above: Dr. Shinsuke Murai welcoming participants to the meeting

Below: Participant group photo



Japan International Cooperation Agency

DR. OLIVER KAOMA SHARES HIS EXPERIENCE DURING THE ANTI-MICROBIAL RESISTANCE PROGRAM IN JAPAN

Lusaka District Health Office (LDHO) has implemented weekly and quarterly reporting practices on operational status of medical equipment in the five target first-level hospitals since 2023.

The course, “Infection Prevention and Control: Antimicrobial Resistance and Healthcare-Associated Infections)” under the KCCP is part of Japan’s Official Development Assistance (ODA) based on bilateral agreement between the Zambian and Japanese governments. Dr. Kaoma was selected for this program through the JICA Cassiopeia Project, a five-year collaborative hospital management initiative aimed at strengthening hospital management capacity for improving hospital management and healthcare quality in the five (5) target first-level hospitals in Lusaka District.

Upon his return, Dr. Kao-

ma shared his observations on how hospitals in Japan are run stating that “the level of organization in the various facilities we visited and their adherence to IPC standards was very high. Every member of staff understood what needed to be done and what was expected of them”.

On hospital management, he noted that Japan has a decentralized healthcare system that allows for a more focused way of managing and allocating resources. In contrast, Zambia still follows a centralized system where decision-making flows from top to down.

Asked on what aspects of Japanese healthcare he would like to see adopted in Zambia, Dr. Kaoma emphasized the importance of compliance with standardized IPC protocols across all levels and personnel at health facilities. He noted the facilities should be well-equipped and consistently supplied with the essential IPC materials. For instance, in Japan,

simple things like hand sanitizer are readily available for all health care providers, stock status is frequently monitored to prevent stock outs. Also, health facilities have dedicated infection prevention isolation facilities.

As part of the training program, participants are required to come up with action points that will work on implementing. Dr. Kaoma’s first action point is to conduct IPC training for health professionals and support staff at Chawama FLH. “If each person understands this, their attitude and IPC culture may improve,” he stated.

His second action point is to establish an Antimicrobial Resistance (AMR) Stewardship Team to monitor antibiotics prescription patterns and usage frequency, ensuring compliance with the World Health Organization (WHO)’s recommendations for the classification of antibiotics into three categories of Access, Watch and Reserve.



Dr. Oliver Kaoma making closing remarks at the end of the antimicrobial resistance training in Tokyo, Japan



Dr. Kaoma with other participants from across the globe and program facilitators at the National Center for Global Health and Medicine (NCGM) in Tokyo, Japan

CONT'D

Therefore, in order to measure the growth of the knowledge, we need to set up a baseline of knowledge on IPC and AMR among health workers. After this, we will set up a post training assessment which will give us an understanding of the comprehension levels in the of health professionals. In the

latter half of the year, we will do another assessment to check knowledge retention and be able to compare this in terms of improvement of compliance and surgical site infections.

The action points align with the programs aims which is to provide an opportunity for medical professionals in charge of AMR

& HAIs control and administrative officers to understand effective policies and practices for them, which could be applied and adopted in their own countries. Furthermore, it is also expected that the outcomes of the program will contribute to establish more resilient health system.

PHOTO FOCUS

Lusaka Provincial Health Office Director Dr. Simulyamana Choonga gwith Mr. Kohei Fukushima and Mr. Malama Mukupa from JICA Zambia at the online KCCP meeting on January 30th, 2025



JICA HQ visit to Chipata First Level Hospital on January 22nd, 2025



Kanyama FLH infection prevention and control (IPC) departmental champions receiving and reviewing SOPs on waste management on January 15th, 2025



Chilenje infection prevention and control (IPC) team conducting an IPC round in the dental department on January 23rd, 2025



Embassy of Japan in Zambia during the media day at Matero First Level Hospital on January 31st, 2025

Editor and Newsletter design: Ms. Kombe Kapatamoyo

Editor: Mr. Kei Ogata

Editor-in-Chief: Dr. Shinsuke Murai

CONTACT INFORMATION:

*JICA - The Project for Strengthening Management Capacity of the First Level Hospitals in Lusaka District
Plot No.11743A, Brentwood Lane, Longacres.
P.o. Box 30027, Lusaka, 10101, ZAMBIA*

<https://www.jica.go.jp/project/english/zambia/023/index.html>

Email: cassiopeia.project.zm@gmail.com