Executive Committee Meeting
Minutes of meeting held on 14th January 2015

Present:  Barrie Rathbone (Chair)  Daniel Rogers  Nichole Bruce (Secretary)
Christine Iliffe  Mark Woodland  Sandra Kemp
Jan Moore  Peter Houtman  Glen Bush
Carol Greenway

1. **Apologies** were received from: Steve Hardy, Nita Odedra, Hilary Daintith, Tim Smith, Jane Aires, Peter Aires, Mark Goodwin, Geoff Woodruff, Heather Dipple Mike Silverman and Emmilie Aveling.

2. **Minutes of the last Meeting** on 1st October were agreed to be a true record of proceedings.

3. **Project Reviews**

   **Collaborative Teaching Programme**
   Daniel reported that the Paediatric Resus and Sick Neonate podcasts were just being edited finally and would be uploaded soon. Daniel also mentioned that Dr Kumar, who had spent time in Sierra Leone helping with the Ebola break out was helping to put together some content on Ebola and other infectious diseases for the website.

   Daniel and Barrie also mentioned that they were planning to visit Gondar with a multidisciplinary team in May to undertake some endoscopy training, further promotion of the Collaborative Teaching Programme website to encourage more Gondar based content as well as dietetics. Dietetics is one area which at the moment there is nothing in Gondar and a request for support had come from the Hospital CEO

   **Emmilie Aveling - Research Project**
   In Emmilie’s absence, Nichole reported that the research from Emmile’s study had now been published. She is at present in Australia and looking to work in America for 2 years. She will keep us updated regarding any papers etc which come out of the study.

   **Equipment Maintenance**
   Glen reported that Nick Brown had now been in Gondar since the start of November and had been asked to stay until the end of March. He had reported that Gondar are currently looking for a VSO to support the work and that he had been asked to help recruit as well as help adapt a BSc curriculum currently being used at Jimma University.

   It was reiterated that it would be good for Nick to visit Mekelle as they have had a UK partnership grant to support equipment maintenance which has lasted around 4 years. Nick to contact Nichole to make travel arrangements if this is not possible for Solomon to do this.

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MSc in Clinical Nursing
Carol mentioned that it would be really nice for her to get an update on how this was now progressing, being completely taught and run independently by Gondar. Nichole agreed to ask Heather if she managed to find out anything during her October visit.

Koladiba Health Centre
Christine informed the group that for the last 2 years her project had been mainly concentrating on midwifery training. Now they were supporting a pilot project led by Tatek from the Midwifery department at Gondar Hospital which aims to conduct surveys in the community to ascertain what facilities there are, any problems and access to health care for pregnant mothers, supported by a donation from the Rotary Club. There was also a commitment from Tatek to provide a monthly training programme for health centre midwives, HEW and TBA’s in the area.

After this Christine explained that there is a plan to provide further midwifery training.

Daniel reminded Christine that midwifery content had been promised for the CTP website and Christine agreed to speak to Rachel and Becky about this.

With regards to the Motorbike ambulance, through a Rotary contact in Gondar, Dashen Beer had now agreed to support the employment of a driver for the ambulance and the health centre had advertised for a driver.

Christine reported that there was good news, on her last visit the motorbike ambulance was still in really good condition and the community were urging the authorities to ensure that it is put to good use.

Mark from the Rotary Club asked if there was a possibility of obtaining some photographs and a story/Case Study (including names etc) of an individual whose life had been saved by the ambulance for publicity. It was agreed that this should be ok and that once the ambulance was up and running, Christine would contact Dr Shitaye to help with obtaining this.

Mental Health
Jan reported there had been 3 visits during October and November working with the staff on the ward as well as in the community. The reports back were that the ward was working well and whilst there the team encouraged engagement with carers and relatives. Another visit delivered training by specialists in how to deal with aggressive patients without using chains and this was well received.

Heather and Jan are planning to visit in April/May, it had been hoped to take some staff to Jimma who have a more established mental health ward, but it doesn’t seem that the staff are very keen to go. Jan mentioned that herself and Heather at least did plan to go during their visit. Jan also mentioned that there had been other ideas on how to expand the work with possibly a day care facility to run alongside the ward.

It was also reported that a project agreement for a pilot project run by Niguise, looking to survey the community has been given £500 funding.

Barrie questioned the power of the religious leaders in Gondar and asked “Do they know who we are and what we do?” Christine mentioned that on the
open day at the health centre they ran last year, they had invited the religious leaders too. I wasn’t however know exactly how much they know about the work we do in a wider context but their influence was deemed to be significant.

**Infection Prevention and Control (including SSC)**

Sandra reported that the THET bid had been turned down due to “Gondar’s weak communication”. Sandra decided that before deciding to move forward another visit was needed so she visited in October and was pleasantly surprised. Hand hygiene was being practiced on a lot of the wards and hand rub was available with a production plant in Gondar supplying what the hospital needs. Sandra felt that this needed more input and that Derby had offered 1500 bottles free of charge and all we would need to support would be the transit to Addis - Gondar Hospital would then arrange and support further transit to Gondar. Sandra also reported that 2 of the vice matrons were both graduates from the 1st cohort of the MSc in Advanced Clinical Nursing. During the visit, Sandra had agreed to provide 100 laminated WHO hand hygiene posters and had received a quote in Gondar of £25.00, but they were now saying that they have enough posters and didn’t need any more.

Initially the Safe Surgery project with was led by Jane and Pete Aires seemed to make some progress, but it seems like this has stalled. Sandra reported that Pete is willing to visit in April/May. There are individuals who are very keen to lead in obs and gynae as well as the fistula hospital. It was suggested to start in the Fistula hospital where Bezu was now based and she had offered to train nursing staff.

Sandra mentioned that she would be applying for funds to support this in a further round of funding coming up shortly this year. She also asked if nursing funds could also be used to support this. It was agreed by Peter Houtman and the rest of the group that it was ok to combine these budget headings to allow this.

It was suggesting using the CTP website to host the posters and for support. It was also suggested to bring Daniel and Barrie in on this project as it they had planned to take a surgeon out in their visit group and it was felt that this would help greatly. The surgeons who Sandra spoke to are very keen to move this safe surgery project forward.

Carol mentioned that it was part of the training in the MSc in Clinical Nursing that nursing students for their projects should be looking at issues in the hospital and ways of addressing them. May be this could be used to support these interventions.

**Orthopaedics**

In Laurence’s absence Nichole reported that Laurence had sent his visit report and that it has been attached to the minutes.

I was also reported that Laurence had a number of colleagues who were interested in travelling to Gondar later in the year and include a trauma surgeon, plastic surgeon and a theatre nurse, with the aim being to run some workshops on open fractures. He would be looking for funding to support this and help in sourcing funds was welcomed.
### Management Support

Daniel reported that Richard Nixon is very keen and is trying to source a manager to support the request from Gondar to help them manage the move into the new hospital. I was suggested to use social media to advertise the opportunity to help Gondar with this to seek a Health related project manager.

It was also suggested that an email directly to the UHL Chair of the Trust, formally requesting help for Gondar might definitely help.

It was decided that it is possibly now a good time to present to the Board at UHL to galvanise their support.

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### Communications Strategy

It was decided to discuss this at the next meeting when Heather Dipple is in attendance.

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### Fundraising

Christine thanked Mark Woodland and the Leicester De Montfort Rotary Club for their continued support and recent donation to support the pilot project being undertaken by Tatek.

**Grant Applications**

Link members were encouraged to be more proactive with grant applications enabling projects to be supported for longer with larger amounts.

**Give as you Live**

Nichole reminded individuals that this service can provide free funding for charities and we are signed up for it. This collects donations which are a percentage of spend spent online at certain retailers. Nichole will continue to send around prompts and marketing in relation to this.

**Charity Curry**

Nichole mentioned that she should have the date for a charity curry at the Cuisine of India shortly and will circulate asap.

**Charity Ball - 30 January 2015 - Mansion House - Glenfield Hospital**

Please support this event run to benefit both HALE mental health project as well as the EDAWU project in Nigeria - Contact Nichole Bruce for tickets.

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### Finance

Peter reported that Project Accounts had been sent around to project leads with overviews sent to all. These updates would continue to be sent out just after statements are received, to keep project leads up to date.

Peter also reported that the charity accounts for the year 2013-14 have passed scrutiny and will shortly be uploaded onto the charity commission website. The group is encouraged to at least have a look at it - at [www.charitycommission.gov.uk](http://www.charitycommission.gov.uk) - our charity number is 1122773.

**Administration**

Peter reported that there is enough in the administration account to cover up until May after Rebecca Brown agreed for the transfer of some funds from the Children’s Ward fund to cover the shortfall.

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All agreed that it was important that the role of administrator in Leicester continues and all agreed to support a further extension for another year to Nichole’s contract up until May 2016.

Amounts will be deducted again from balances of Project accounts to support this. I was also suggested to contribute £2000 from the unrestricted fund.

7. **Any Other Business**

**VISA Changes**

Nichole reported that there had been some substantial changes to the visa rules. For all of our visits to Gondar we should only travel on a business visa as there are stiff fines and possible prison sentences for individuals visiting on incorrect visits. I clarified and all individuals undertaking any sort of volunteering do require Business Visas.

The changes on the Ethiopian Embassy website now mean that Business Visas are only available for 30 day durations unless they are for government or investment business. This is obviously going to have great implications on some of our projects as visits will struggle to be a maximum of 3 weeks with processing time.

Nichole informed the group that she had contact THET and the other Health Links with Ethiopia to lobby the Ethiopian Ambassador to hopefully bring about a solution. She agreed to report any updates as soon as they are available.

**DMU Student Electives**

Carol Greenway at De Montfort University was keen to bring health students from DMU into the electives system at Gondar but that it was planned that these would be in a structured group visit. The nursing students through the DMU Global programme are visiting places all over including India and the Gambia and it would be good to bring them in organised groups to Gondar as well. Carol asked if members of the team would be able to sign documentation required by the students in Gondar should this happen and, Jan responded saying that her team would be only too happy to help with this.

**Neonatal Ward**

Sandra reported that she had received a plea for help from Dr Mehretie in Paediatrics at Gondar Hospital. They are having great difficulty keeping babies warm when they are transferred from maternity to the neonatal ward. Nichole mentioned that whilst VSO Jo was in post we provided some warming mats that were reusable to be placed in the neonate cots to keep babies warm during this time. She agreed to contact Solomon to see if he can find what happened to these, before thinking about providing any further.

8. **Date of Next Meeting**

Thursday 19th March 2015 - Time and Venue tbc

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