



Mongolian Emergency Service Hospital Hygiene Project

MeshHp.mn

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Report of the 8th visit to Ulaanbaatar **26 September – 3 October, 2012**

Participants

Prof. Dr. Walter Popp, University Clinics Essen
Jörg Spors, Fire Brigade Essen
Michael Roszburg, MVZ Dr.Eberhard u. Partner - Dortmund
Jörg Spors (Emergency Center) and Michael Roßburg (laboratories) will write own reports which will follow.

Visits to hospitals

Visit to **Songinokhairkhan District Hospital** together with Mr. Orgil (advisor to the deputy minister):

The hospital has 165 beds and is caring for 120,000 children in the area. Staff is 100 persons, 8,000 inpatients a year, outpatients are in a different clinics. A new hospital will be build in the ADB project Health 4 with 450 beds and 7 departments planned. The mean stay in the hospital is 7 days, rooms most of all have 4 beds. The actual ICU is very simple with 5 beds only for children:



In the lab, there is a workbench which is not used as there is no need for it (no microbiology).

The kitchen has rather new equipment but the ceiling is in bad condition. In the kitchen frozen meet was seen together with flour in a refrigerator:



Open butter was seen in a not cooled storage room together with blankets:



From our view it makes sense to get a new ICU/Emergency ward, also it would make sense to have a small microbiologic lab with determination of bacteria.

In **Hospital No 2**, some renovations were done, especially regarding the hall outside of the sterilization unit.

The sterilization unit is newly painted and getting a new sterilizer.

Also endoscopy ist renovated and looks rather well:



A new washer disinfector for endoscopes from Korea is working there now. We were told that laundry is a big problem and should be renovated.

In the **National Central Hospital**, Dr. Myadagma is out of work because of pregnancy now, Dr. Bolor is doing her work and a new epidemiologist is doing the work of Dr. Bolor.

There were 20 MRSA cases this year.

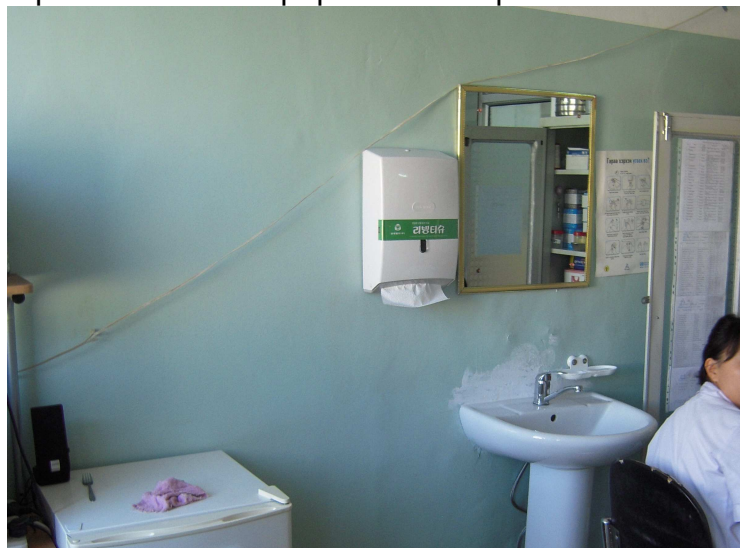
10 days training of hand hygiene were done with blackbox on different wards.

80% of the staff got 3 injections of hep B vaccine and all new staff must have a complete vaccination.

In this year, in the sterilization unit 85 BD test were done and 25 BAG steam tests, also 300 EO test. We recommend to do a EO test only once per week.

Epidemiologists were trained at NCCD for one month and trained all head nurses of wards for one week.

Two UK nurses implemented some paper towel dispensers:



In some areas we saw that they are still in use; but it seems a question of budget whether also in the future paper towels will be used, the same is about fluid soap. Alcoholic handrub dispensers are available everywhere on the wards. It is thought about to buy ready-made handrubs in the future.

The new emergency room will open soon.

Regarding the sterilization, it was told that the sponsor wants Korean products which have half price in comparison to MMM. But a final decision has not been made.

The new transplantation unit for organ transplantation looks rather well:



Bone marrow transplantation has not been done until now.

On some wards bedpans are used. There is no bedpan washer and bedpans are washed by hand.



Prof. Walter visited **Ajin Ujin**, the new private sterilization company of Dr. Tsolmon. Their work did not really start but equipment is available and working and design is according to international recommendations.



Also a photo documentation system of in- and outgoing instruments is available.

Michael Roßburg and Prof. Walter visited the **National Cancer Center** and had a talk with Dr. Bayar, deputy director, and the quality manager.

The National Cancer Center has 206 beds and 7,000 inpatients, 70,000 outpatient visits a year. There are departments for surgery, radiotherapy, chemotherapy. Brain tumors are only in Shastin hospital, pediatric cancers are in the Childrens´ Hospital and colon and kidney cancers are only in Hospital No.1. There is a palliative care unit with 16 beds where most of all training is done.

We were told that cancer patients die at home or somewhere else according to possibilities of family.

There are 3 hospices in UB and liver cancer makes 40 % of all cancers, then followed by stomach, esophagus, lung and cervix cancer.

In the chemotherapy department there are lot of inpatients who come from the countryside.

It is a plan to strengthen chemotherapy and palliative care in district hospitals.

Cancer therapy is not been paid by health insurance but only by the state.

All staff is vaccinated against hepatitis B and also tested against hepatitis C virus.

New staff must be testet and vaccinated.

There are separate endoscopes for hepatitis positive patients.

We saw a pathology lab.

Dispensers for alcoholic handrub are available in the whole hospital, part of them are empty.



The cleaning equipment seems to be of a little higher quality than in most of the other hospitals.



The sterilization unit is big and has a rather good design. There is a clear way of instruments through it.



Ultrasound is working, also the drying ovens. Also the welding machine for wrapping. Containers are very old as usual, the same is for the Russian sterilizers.



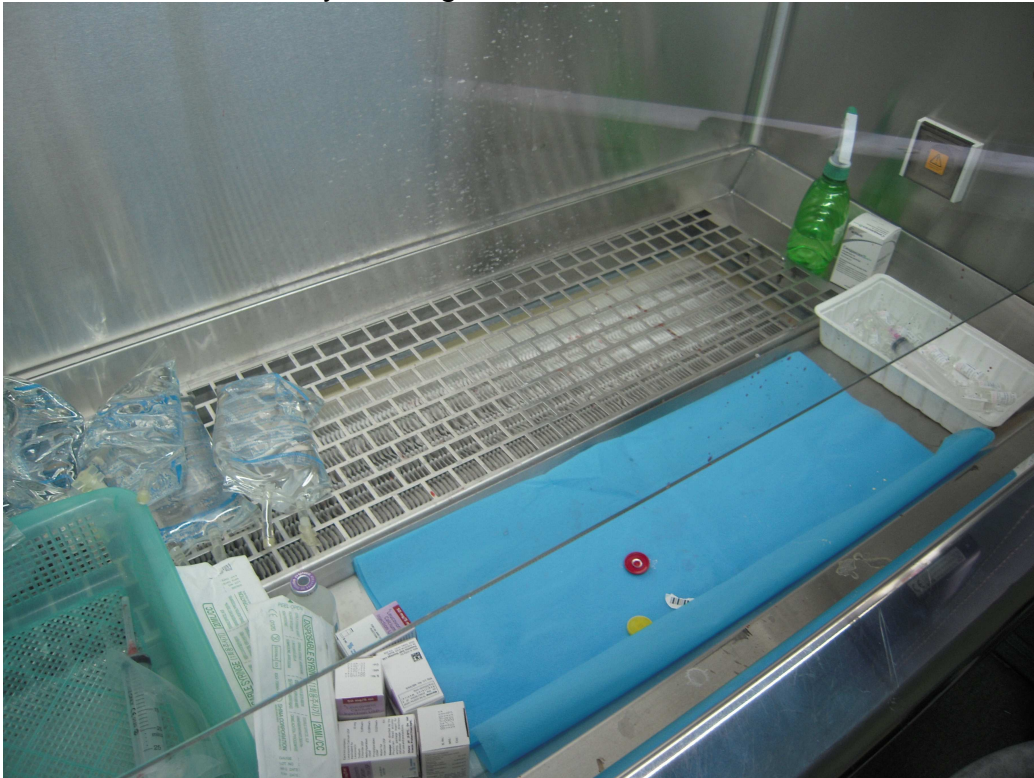
On the chemotherapy ward, the workbench is not working and did never work.



Above all Cisplatin and Fluorouracil are used, also ports are available. Cytostatics are prepared on a table:



In the central pharmacy, the working bench is working but showing a “failure” notice which obviously was not seen by anyone. Also the condition of the working bench does not indicate that is really working.



At a whole, in the hospitals up to 15 different cytostatics may be used, up to 3 may be given in the same time to a patient.

Also **Monos** lab was visited by Prof. Walter and Michael Roßburg. A small animal lab is available there.

The visit to **Shastin hospital** was very short. There is a wish that training should be given there, mostly to the surgeons. We recommend to do this by the help of epidemiologists (like Dr Myadagma and others) who got a train the trainers training in the MeshHp project.

Also there is a wish to get a retired cardiac surgeon who might work as senior surgeon for 1-2 years there. It is not realistic to search for someone in Germany – they want to relax or earn a lot of money.

The renovation of the operating theatre within the Luxemburg project stopped because of money issues (renovation more expensive than expected).

Regarding **Chingeltej District Hospital**, it was reported that the renovation started last summer.

There will be new equipment available soon, also laundry and laboratory will be renovated, an internal web is built up, also including hygiene plan, also more training of link nurses and doctors is planned.

The hepatitis B vaccination stopped at the moment and the hospital is waiting for free vaccine from WHO which might come soon.

Training and presentations

Michael Roßburg and Prof. Walter gave presentations at the 34th Annual Scientific Conference of Hospital No 2.

Michael Roßburg gave a 3 hours training in National Central Hospital regarding microbiologic labs.

Prof. Walter gave a training on hepatitis B in Emergency Center 103. He was told that vaccination is given there for free but a lot of staff do not want it until now.

Prof. Walter gave a presentation about Indicators of hygiene in the Public School of Health:



Meetings

There was a meeting with Claude Bodart and Dr Altantuya from **ADB** and Prof. Walter announced that he is thinking about to visit all Health 5 project hospitals in 2013. Claude Bodart hinted that costs might be taken over by ADB and also some staff might join, eg Dr Altantuya.

There was a meeting with the **Department of Microbiology and Immunology** of the Health Science University of Mongolia. There are contacts to the Microbiologic Department of University Düsseldorf. The student teaching material from there is translated in Mongolian language at the moment.

The department tries to become a reference center for certain bacteria on a national level.

Library of university:



Prof. Walter met Mr. Kosemund from **GIZ**. Mr. Kosemund will translate the questionnaire of the state inspectors and Prof. Walter will have a look whether hygiene questions are adequate or might be improved. Also a workshop about that with inspectors might follow in 2013, financed by GIZ.

Prof. Walter had a meeting with **MedClean** who plan to import German disinfection and healthcare products.

The German guys and Dr. Navchaa had a short meeting with new **Health Minister Dr. Udval**.

There was a 30 minutes meeting with **Vice Health Minister Dr. Amarsanaa**. He asked Prof. Walter whether he could take part in a commission about disinfection policy (yes, he can) and proposed to stay in close contact.

Also there was a meeting with **Dr. Tuul from the UB Health Department**. Next visit there should enable a training for all district hospitals about hand hygiene, sorts of disinfections and sterilization units. She reported that there are problems in a maternal hospital of UB with a lot of infections. It was concluded that more data will be delivered to the German partners and perhaps then a visit will be during the next visit. A visit to the microbiologic lab there only will make sense when Michael Roßburg will come again. Also a visit to Essen is planned for 2013, there especially to the Essen City Health Department and Fire Brigade. One issue might be the policy of Public Health Service.

Wrap up meeting

The following decisions were made:

- Hepatitis B vaccination policy should go on in all hospitals like in National Central Hospital and like it is done in National Cancer Center since longer time.

- After completion of vaccination of all staff a control of immunity (antibodies) should be done in all vaccinated staff as around 5 % of non responders are expected.
- There remain 10 - 20 % of staff who are chronic carriers and are not vaccinated. It must be discussed whether a therapy of them should be done in the future, especially in risk staff for patients, like dentists or cardiac surgeons. This will be done in the MeshHp project but also the ADB Project Health 5.
- Regarding other hospitals, there are wishes to become a member of the MeshHp project. It was decided that no more pilot hospitals should be defined. Perhaps during the next wrap up meetings, hospitals who have been visited during the visit could also be invited. Perhaps it would make more sense to have a meeting with all interested hospitals during each visit to discuss about open questions of interest (like the meetings with epidemiologists which have taken place once or twice).
- Regarding wishes for training other hospitals, they should be hinted to the train of trainers concept of MeshHp project which means that trained epidemiologists are available now in UB like Dr. Myadagma, Dr. Bolor, Dr. Uyanga and others. They should contact them and they should give training, best of all for money.
- Also training might be asked for from Ajin Ujin company or MedClean company.
- The questionnaire of the state inspectors will be translated by GIZ and it will be seen whether a workshop will take part during 2013 about the quality of the hygiene questions there.
- Michael Roßburg will make an own report about his visits to microbiologic labs.
- He will also prepare a paper with typical photos and explanations what is done wrong on them.
- Perhaps in the next 1 or 2 years a technician from his lab might come with him and do practical training in UB. The opposite is possible, too.
- Michael Roßburg will come again perhaps in 2013 and then stay in labs for a whole day each.
- Preferably in May 2013, there will be the next symposium about hospital hygiene in UB. All MeshHp guys have to think about the agenda. One issue might be nosocomial infections. Michael Roßburg should give a longer overview about microbiologic quality and equipment. And also another issue might be improvement of detection of hospital acquired infections.
- Prof. Walter was hinting to the survey of IFIC about human waste management which is available on the MeshHp website.
- The next visit to UB will be from 2 until 9 March, 2013. Prof. Walter and Dr. Birgit will come, Jörg Spors is not clear.
- The next visit of a Mongolian group to Essen will be a more official one including politicians, administration people, perhaps ministry level. Dr. Uka, Dr. Ariunbolt and Dr. Navchaa will plan it.
- The website had 8,000 visits since March which is rather good.



There are around 50 presentations for download now on the website!

It was decided to put all the reports also on the website.

- Prof. Walter announced that he will do a more private visit with some other German people during Nadaam in July 2013. Dr. Uka, Dr. Ariunbolt and Dr. Navchaa will help to plan it.
- Prof. Walter announced that he will try to visit all Health 5 hospitals in the ADB project during 2013 in perhaps 2 separate visits.
- During the following wrap up meetings, it should be tried that also administration guys and quality managers take place.
- During the next visit German guys should spend more time in the pilot hospitals.

Jörg Spors (Emergency Center) and Michael Roßburg (laboratories) will write own reports which will follow.

Walter Popp, 18 October, 2012