



# Mongolian Emergency Service Hospital Hygiene Project

MeshHp.mn

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## Report of the visit to Ulaanbaatar 11 - 18 May, 2019

### Participants:

Prof. Dr. Walter Popp, HyKoMed, Dortmund  
Adelheid Jones, DGSV, Köln  
Kirsten Wegener-Haas, Essen

This was the second visit in the project (2018-2020) “**Primär- und Sekundärprävention sowie aufsuchende Prävention bei Hepatitis B/C und Tuberkulose in der Mongolei**“ („**Primary and secondary prevention as well as visiting prevention of hepatitis B/C and tuberculosis in Mongolia**“) funded by German Ministry of Health.

The project includes visits and interviews in different hospitals and health care units in Ulaabaatar as well as 4 aimag center hospitals and different sum hospitals. Detailed results of these will be given in a separate report, presumably in the first half of 2020.

So within this report we only mention important results and informations out of the project topics.

### Hospitals

We had a 4 day trip to **Choibalsan**, capital of **Dornod aimag**.

There we visited **Dornod aimag center hospital** and had a talk with director Dr Doljin Dendeu and Dr Gangantsetseg (epidemiologist). Also we met Mrs Nyamsuren, president of Mongolian Nurses Association (MNA) and the local representative Mrs Ariunaa.

The hospital is a big inter-province hospital with 250 beds and 500 workers. They will be involved in Health V project in a second step of the ADB project.

In CSSD, they still use a very old ethylene oxide (EO) sterilizer once a month. Vials with EO are broken inside by hand. We hinted that use of EO is not allowed in

Mongolia since some years and recommended to stop EO use and make a blood cell determination of all staff working on it every year.

In endoscopy, there is only gastroscopy done. Reprocessing is done in much too small buckets with only very little cleaning/disinfection solution on the bottom!



Brushes are not used, so channels are not disinfected at all. Also no air drying. The rinsing bottle is washed once a day with alcohol, the pipe from rinsing bottle to endoscope never – so there might be a thick biofilm in it. We tried to explain that a lot must be changed.

They showed a new half automatic washer-disinfector for endoscopes from Turkey which shall be used soon. The seller had told them that they do not need disinfectants and cleaners, household cleaning solution from kitchen shall be enough – never!

Obstetrics and neonatology was very well renovated and very nice.

In dentistry, hand pieces are only cleaned outside once a day, nothing is done re channels.

On Tbc isolation ward we talked with different staff members, also well experienced ones. They get 10 % more salary since years because of risk, from this year on 30 % more. All of them were positive in skin test last year.

Also here, like in Selenge, they wear FFP2 masks for one week. We were told that this is recommendation of NCCD which is hard to believe. Anyhow, the masks are single use only and cannot be reused because they would pose a big risk to staff members.

Also we had a talk with director Chilhaa Oyunaa of **Dornod aimag health center** and co-workers.

We visited **Bulgan sum hospital** and talked with different workers. The sum has 1,800 people, the hospital has 6 beds and 10 workers, including 4 doctors.

Another visit was to **Hulunbur sum hospital** and we had a talk with director who is very well organised.

The sum has 1,800 people in 500 families. They have 21 workers, one of it is a doctor and 7 are nurses. The hospital has 9 beds and was built in 2003. The director told that ADB was there and soon all staff shall be tested for antibodies against Hep B after vaccination. This would be a very big step forward! The director makes a map with all patients they have to care for every three months – very nice:



Back in **UB**, we visited **Hospital No 2** and talked with director Dr Bayasgalan and Dr Uyanga.

Health V project:

Basically very nice renovated and very big equipment in microbiologic lab! Also CSSD is very nice renovated and improved. There are 2 new autoclaves and 2 washer-disinfectors and 1 plasma sterilizer. Not all rooms are renovated, eg storage of gas bottles is old situation. One of the new autoclaves is not really working. Some technician shall come from China in some time and have a look for it.

Everywhere are enough air cooling units – very good.

But: The surgeons make pressure to resterilise single use goods.

When we were there, also there was a 2 days training of the Canadian consultants.

It is not clear for us how many goods are going through washer-disinfector and how many are only manually reprocessed. It seems that there is pressure of surgeons to have short times – and manually is shorter as we always hinted (and there is shortage of instruments as Health V project did not include new instruments).

Washer-disinfectors do not have a printer – so no documentation!

It is an open question whether there is budget for maintenance, repair and chemicals (in lab) in the future. So time will show in 1-2 years.

We also visited **Khuree Maternity Hospital** (No 2) and talked with Dr Jargal (director) and Dr Oyuntsetseg (deputy director). A new hospital is built by MoH near the airport: 300 beds for births, gynecology and children. 9 OTs, 4 with mechanical ventilation. So the size of the hospital will increase from 1,200 to 32,000 m<sup>2</sup>! Also they think they will have 2-3 times more staff. Opening may be end of year.

We had a visit at the construction site:



Heating units at the wall seem rather small. It was said that there is additional heating by air in every room. The air channels seem rather small – so we have some doubts whether all the air can go through them in the needed amount. Air central is on top of building.

Oxygen will be at every bed.

We have some doubts whether doors are big enough for beds. It was said that beds are 80 or 90 cm and doors are 110. But in future (hospital will work over decades!) beds will get bigger and bigger (as like us).

We saw the plan for OT. We would not make separate floor for waste but instead for sterile products. Reprocessing of instruments should not be done in basement (first part) and OT level (sterilization) but in one area only.

We visited **Chingeltej district hospital** and met director Dr Lkhagva and Dr Uka. We were shown the plan for new hospital which shall be built soon.

Also here we had a look at Health V project:

In lab equipment as usual in the project. They added some old equipment (reason unknown).

The CSSD was renovated, very narrow.

There are not enough cooling units (in Hospital No 2 were enough).

Two loading cars for washer-disinfector are standing outside because rooms are too small to use them (planning mistake).

They got one new autoclave and have an old one, too, which is working.

No new instruments or containers.

The new washer-disinfector is not working. They said that a technician will come and repair.

At the moment, everything is done by hand. There are only 2 sinks and one ultrasound.



They could not explain how they do cleaning, rinsing, disinfecting, rinsing (4 steps in 2 sinks) – neither sequence nor products used.

### Training and presentation

This year, **hygiene symposium** was not in UB, but one of two (next in September in Southgobi) in Dornod. It was organized by MeshHp, MedClean, Aimag center hospital and MNA:

Time	Topic	Name
10.00-10.10	Opening	Dornod hospital director/
10.10-10.30	BMG project introduction	Popp
10.30-11.10	Ethik	Popp
11.10-11.40	Photo /Coffee break	
11.40-12.20	Struktur der Ausbildung der Krankenschwestern in Deutschland, auch post graduate Kurse	Kirsten
12.20-13.00	Hepatitis B und C und Tbc: Impfungen, Arbeitsschutz, Arbeitsmedizin, Unfallversicherung usw. Speziell für nurses	Kirsten
13.00-14.30	Lunch	
14.30-15.10	CSSD	Jones
	Endoscopy	
15.10-15.30	Nurses in IPC	Nyamsuren
15.30-16.00	Coffee break	
16.00-16.30	Medclean LLC contribution in IPC	Gantumur
16.30-17.00	Discussion	
17.00-17.10	Closing	Dornod hospital director/Popp

There were 170 participants:



Prof Popp's small German handbook of hospital hygiene was translated to Mongolian and adapted to Mongolian situation by Dr Gantumur and is freely distributed by MedClean. The **first modern textbook of hospital hygiene in Mongolia**:



## Meetings

There was a **MeshHp meeting** in Emergency Service. The MeshHp group coming was postponed to January 2020.

## Social life

We had a nice Saturday with our friends outside UB, visiting some relatives and see a **horse raise**.



We saw typical Mongolian singing and dancing at **Tumen Ekh**.

## Next steps

Next trips to Mongolia in 2019:

Time flight from Germany and back	Visit to	Participants
13 – 22 June 2019	Khovd Aimag	Walter Popp, Heike Martiny, Jan Kehrmann
6 – 16 September 2019	South-Gobi	Walter Popp, Peter Renzel, Heike Kamphusmann, Adelheid Jones, Christine Schoppe, Prof. Simonis, Jörg Spors, Michael Rossburg

A **group of nurses** from **Mongolian nurses association** will come from 19 - 26 October, 2019, including

- Mrs Nyamsuren,
- 3 nurses,
- Dr. Gantumur (translator).

A **group of MeshHp nurses** will come to Germany in January 2020. Topic will be mainly education of nurses, also with regard to hepatitis and tb. Members will be

- each one nurse from Maternity hospitals No 1-3,
- one from Sukhbaatar district hospital
- one from Chingeltej district hospital,
- Dr. Gantumur for translation.

A **private trip** will be done in July 2020, organised by Dr Purevdash and Dr Gantumur, starting with Naadam, going to Kharkhorin, Erdene zuu, Arkhangai aimag and to the north. Prof Walter will organize the German participants.

Prof Walter, Jörg and others from Essen Fire Brigade and City Department are invited to **90 years anniversary of Emergency Center 103** on 20 October, 2020.

We talked with MNA to make a one week **training** in 2020 to get **hygiene link nurses** (train the trainers).

Walter Popp, 29 May, 2019

By the way: From a restaurant in Choibalsan (left) you can see the Eiffel Tower in Paris:

