



GHANA MEDICAL HELP ANNUAL REPORT 2021 – 2022

September 1, 2023

WHAT IS GMH TODAY?

GMH Vision: Equal opportunity to adequate healthcare throughout Ghana and worldwide.

GMH Mission: To support locally driven needs-based projects that advance health equity and improve health and wellbeing in under-resourced communities.

GMH Areas of Strategic Focus in Ghana:

1. Improving rural health infrastructure in northern District and Regional Hospitals
2. Medical training and education of northern healthcare workers
3. Equitable access to healthcare services in northern Ghana
4. Public health education and poverty alleviation in remote farming villages
5. Bridging local ideas to resources in rural northern District Hospitals

Activities Within Each Area of Strategic Focus:

1. Improving rural health infrastructure in northern District and Regional Hospitals

Development of a biomedical Medical Equipment Management System

- a. We created a standardized method and system for improving the efficiency, resource availability and capacity at a given hospital.
- b. 2022 pilot at Bolgatanga Regional Hospital – started Jan 2022, concluding Sept 2022
- c. Stepwise expansion beginning Sept 2022
 - i. Navrongo District Hospital in Oct/Nov 2022
 - ii. Wa Regional Hospital in Feb 2023
- d. Mixed methods case study – led by Prof Millicent Akaateba
- e. We will present the project findings at international healthcare conferences and at stakeholders' workshops, involving local, regional, and national stakeholders and healthcare officials.
- f. UBC Medical School – Year 1 & 2 students have the option to choose a global health project to work on throughout their academic year, with 4 weeks allocated in May for site visits.
 - i. GMH had 2 students assigned to this project in 2022. Lit review will be included in email with meeting minutes.



- ii. GMH will provide the opportunity for 1 new student(s) to work on this project in 2023.
- g. Project difficulties: volunteer time limitations, technical challenges (i.e., software variations)

Development of a web-based platform that enables the MEMS to be stored on a central server and be accessed easily through a web browser

- h. In Aug 2022, we finished creating the inventory component of this online platform. The development for the maintenance component is Jan 2023.
- i. This platform will be essential for the large-scale uptake

Annual Clinical Engineering Training Conference

- j. There's been a clinical engineer hiring boom in the UWR.
- k. In May 2022, we hosted 31 UER and UWR engineers to a 4-day training conference in Wa. At this time, we provided basic engineering toolkits to engineers without one, and provided repair parts/tools for hands-on repair workshops.
 - i. Review conference evaluation
- l. In May 2023, Dr Bill Gentles and Martin Poulin are planning on traveling from Canada to attend as guest trainers for our next training conference (dates TBD).
- m. Project difficulties: cost – high because in addition to direct conference workshop expenses, GMH needs to provide transportation, lodging and meal stipends for all attendees and trainers. As well, we provide the toolkits and repair parts that will be needed for the workshops. This requires a minimum budget for \$20,000 to be run well.
 - i. Ideally, we can get corporate sponsorship for 2023. Looking for volunteers to help create promotional CSR packages.

2. Medical Training and Education of Northern Healthcare Workers

Community Service Agenda (CSA)

- a. GMH runs a weekly blended virtual/in-person CSA presentation to allow for continued medical education throughout the year. Organized and facilitated by Dr Dominic Akaateba. Open to all healthcare workers in northern Ghana and posted on GMH's website/YouTube channel for ongoing access. Attendees can claim official CME credits.
- b. This program for continuous professional development has received acclaim and attention across Ghana, including an award from the National Ghana Medical Association.



- c. Impact:
 - a. Patient management has improved across the UWR because physicians are better trained
 - b. Improved job retention: In one year, the CSA has helped significantly increase the presence of physicians in the UWR. When it began, there were 5 physicians in Wa (including Dominic); today, there are 20 physicians working under Dominic alone. In the past, physicians would decline UWR postings. Now it is a desired posting site.
 - i. The patient:physician ratio was 1:12,000 in 2021 and is 1:10,000 in 2022 in the UWR.
 - c. This project has established a new local physician network and chain of referral for managing complex patient issues.
 - d. Project report including CSA assessment will be included in meeting notes.
- d. One UBC Medical Student was assigned to these two projects in 2022. Project report will be included in meeting minutes. She is applying to present the project study findings at several global health conferences in 2022/2023. We will provide UBC the opportunity for one new student to join the project in 2023, under the mentorship of the previous student.
- e. Annual budget: \$6732 CDN

Clinical Training Conferences

- a. These are considered a part of the CSA
- b. In May 2022, GMH ran a full-day basic emergency medicine training workshop for 171 healthcare workers in the UER and UWR over 2 days. The program was open to all healthcare workers in the regions and was available to live-stream over Zoom. See attached report.
 - i. Our GMH Ambassadors repeated the training workshop at their base hospitals
 - ii. The UWR Ghana Health Service intended to use the trainers who were produced through our workshops for repeating the program every 6 months.
- c. GMH plans to run this training program annually

UBC Global Health Resident – International site opportunity

- f. GMH is now a site option for UBC Global Health Residents for their 8-week international block. During this time, they are to work clinically while providing educational training for local healthcare workers in their area of interest.
- g. Piloted in May/June 2022 – Special interest in PH. Some logistical issues, but overall a success and desired by both parties to continue.



- h. The R3 coming in Oct – Nov 2022 has a special interest in Point of Care Ultrasound in the emergency environment and will run a series of educational programs across the Upper Regions related to this topic.

3. Equitable access to healthcare services in northern Ghana

The GMH Medical Specialty Services Centre

- a. In Ghana, there is a two-tier healthcare system for accessing life prolonging investigations and treatments, such as dialysis in renal failure. This reinforces the disparity in health status affecting most of the population. We want to establish a Specialty Services Medical Centre in Northern Ghana that provides these life prolonging services to all people. This facility will be run by Dr Dominic Akaateba (who has recently established the first dialysis unit in the Upper Regions (will be operational as of Nov 2022). We will charge an increased fee for individuals with private coverage, and this additional cost will cover the expense of providing the same service to an individual who otherwise would be unable to afford it.
- b. Estimated budget: \$380,000 USD
- c. GMH's 5-year goal: initiated the business plan with one speciality service offered; Will build stepwise from there in services offered q1-2 years.
- d. GMH's 10-year goal: the business is generating an ongoing revenue, such that we can create a trust that can be used to fund GMH projects in the future.

4. Public health education and poverty alleviation in remote farming villages

S.H.E.E.P

- a. Ongoing maintenance organized by Joe Abobtey – professionally too strained to organize the public health programs in 2022. Plan to restart them in 2023.
- b. > 150 sheep supporting impoverished farming families – common areas of feedback include enables 3 meals/day during the dry season, enables NHIS healthcare coverage, and enables kids to afford uniforms and books such that they can attend school.
- c. Plan to conduct project evaluation in Jan/Feb 2023.

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ADMINISTRATION

- GMH continues to operate as a 100% volunteer run charitable organization.
- Website updates scheduled for winter 2023 to reflect current operations
- Financial review (audit) summary:
 - Total revenue: \$93,528
 - Total expenditures: \$100,951
 - No issues and continuing to meet Canadian accounting standards

A handwritten signature in red ink, appearing to read "Kelly Hadfield".

Dr. Kelly Hadfield, MD CCFP MSc BSc
Founder/Executive Director
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