



71 STAFF TEST POSITIVE FOR COVID-19

As of Friday, 19th June, 71 staff of the Hospital have tested positive for Covid-19. This is out of 1,404 staff, comprising all job categories tested.

Out of the positive cases, 26 are males and 45 are females. Their job categories are 12 doctors, 26 nurses, 9 orderlies, 1 pharmacist and 1 radiographer. The rest are 1 records officer, 1 IT officer, 1 lab technician, 1 electrician, 1 security officer, 2 bank tellers and 15 others.

All the affected staff contracted the virus in the line of duty. So far, they are being treated either at the Korle Bu Treatment Centre, Ga East Treatment Centre, Pentecost Convention Centre, Tema General Hospital and UGMC. Some are also receiving homecare.

While some have been treated and discharged home, others are still on admission at their respective treatment centres.

Challenges identified by clinicians in the course of treatment are delay in results for tests taken, limited bed

capacity and designated place to quarantine exposed staff.

The Board and Management of the Hospital are grateful to all staff for your enormous efforts and contributions towards the fight against the coronavirus pandemic. Your hard work, professionalism and sleepless nights have yielded 99% recoveries in all the Covid-19 cases the Hospital has received so far.

In the midst of this contagious and deadly virus, you have remained fearless in the discharge of your duties. Certainly, your hard work and care for the sick is noticed and with you, Korle Bu will continue to blaze the trail as Ghana's premiere health facility.

The *Korle Bu Bulletin* wish all staff who are on admission speedy recovery and encourages all others to take extra precaution in the line of duty.



READ MY POEM ON KBTH FOR RELAXATION KBTH

October 9th 1923
saw your
miraculous birth.

Made manifest
through resilient
efforts of Gordon
Guggisberg

True branches from
your stem came to
reality by Kwame
Nkrumah.

Many cannot
comprehend the fruits
of your labour

Excellence unveils the
innate abilities of your
constituents

As heaven dew falls,
birds of your environs
sing melodiously to
your excellence and
diligence

You embrace all from
near and far exhibiting
good hospitality by
giving life to the lifeless
COVID-19 could not
denature souls on your
soil

Rather stepped on the
neck of COVID-19 as
it keeps pleading I
CANNOT BREATHE

Quality life indeed is
your priority

Your philosophy being
“the patient comes
First all the time!”
reveals who you are

As long as KBTH lives
quaternary care is a
reality

*Charles Boye Quartey-Papafio
Senior Physiotherapist
Physiotherapy Department*

ROTARY CLUB OF ACCRA NORTH DONATES AUTOMATED EXTERNAL DEFIBRILLATOR TO KORLE BU POLYCLINIC/FAMILY MEDICINE

On Tuesday June 9, 2020, the Accra North Division of Rotary Club donated an Automated External Defibrillator (AED) machine to the Korle Bu Polyclinic/Family Medicine to facilitate and enhance quality healthcare delivery.



Officials of Rotary inspecting the machine

At a short ceremony to receive the equipment, the Head of Polyclinic/Family Medicine Sub-BMC, Dr. Priscilla Vandyck-Sey stressed that her department, serving as a gateway to the main Hospital, lacked such an important equipment. This, she said, posed serious challenge to healthcare providers especially during emergencies.

“This life-saving equipment will help resuscitate patients when needed before moving them to the next level of treatment”, she said.



The Automated External Defibrillator

Dr Vandyck-Sey expressed delight and appreciation to the Rotary Club and its partners for selecting the department to be a recipient in their AED Project.

She disclosed further that the donation was inclusive of a fully sponsored training programme for five doctors and three nurses. She implored the trainees to learn hard so that the knowledge acquired could be imparted to other staff in the department.

The President of Accra North Rotary Club, Mr Sowah Tettehfiio in presenting the equipment recognised and appreciated Management and staff of the Polyclinic/Family Medicine for their invaluable services to human kind, especially during the Covid-19 pandemic period.

“The Polyclinic is a key medical facility in the country as patients, far and near visit the facility to seek medical care”, he said.

Mr Tettehfiio appealed to other Non-Governmental Organisations and Corporate Ghana to supplement government’s support to the Polyclinic in its areas of need to ensure quality healthcare services.

He thanked the Africa Partners Medical for their continued support to Rotary Club in their AED project.

The Administrator, Mr. Seth Quaynor and other key staff at the Polyclinic were present at the ceremony.



Staff being trained how to use the machine



KORLE BU GETS NEW MAMMOGRAM MACHINE

The Hospital Management has procured and installed a new mammography for early detection of breast cancers. The machine, which cost 190,000 Euros, was installed by the Africano Healthcare in collaboration with Management of the Hospital to provide enhanced healthcare for both women and men having breast cancers.

The Chief Executive Officer of KBTH, Dr Daniel Asare, said the absence of the machine had for the past years affected operations of the Hospital as patients had to be referred to other health facilities for mammographic breast cancer services. He said the centre would serve as a training ground for radiologists.

The Head of Radiology Department, Dr Klenam Dzefi-Tetty, said the new machine would help curb breast cancer scourge in the country. Breast cancer, Dr Dzefi-Tetty explained, was a major contributor to cancer-related deaths among women worldwide, despite the numerous measures employed to prevent and manage the disease. She stressed that the machine would be of immense benefit to the hospital.

"I will advise women above 40 years with or without

family history of breast cancer infections to do periodic check up to ensure that they are free from the disease as the breast cancer rate is increasing," she said.

Dr Dzefi-Tetty said "some of the breast cancer cases are reported in an advanced stage when the cancerous cells have spread to other parts of the body. When this happens, we refuse to do any surgery and only take patients through chemotherapy treatment just to expand the lifespan of patients," she explained.

Dr Dzefi-Tetty also reiterated the need for survivors of breast cancer to educate others on the disease to prevent them from contracting it since "breast cancer is not a death sentence and can be cured."

She appealed to women with breast cancer to seek early treatment, and assured that the Hospital would regularly maintain the machine.

The General Manager for Africano Healthcare, Mohamed Elikaliouby, expressed gratitude to the Management of Korle Bu for contacting their company for the delivery. The machine has a year's warranty for the Hospital to enjoy after purchase.

DIABETES AND HYPERTENSION CONTRIBUTE THE MOST DEATHS IN COVID-19 PATIENTS, SAYS PRESIDENT AKUFO-ADDO!

The 10th Presidential Address to the Nation on COVID-19, delivered on May 31, 2020, made an important clinical revelation as far as Ghana's COVID-19 deaths are concerned.

President Akufo-Addo stated that *“in the Ghanaian context, it has been established that the cases of comorbidity, i.e. underlying health conditions, that are associated with almost all the COVID-related deaths, are mainly diabetes and hypertension”*.



This simply means good old diabetes and hypertension are the two major conditions that largely account for deaths in COVID-19 patients. This, therefore, implies that now more than ever, the prevention and management of diabetes, hypertension and their sequelae must be taken seriously.

Hypertension is a silent killer. It is mostly asymptomatic. As a result, some patients are only so diagnosed when the condition has far advanced and have suffered one serious complication or another. More importantly, my modest clinical experience has taught me that most hypertensives are not too compliant with their medications and other treatment forms.

Diabetes presents signs and symptoms. However, when improperly treated, its toll on a patient's finances and overall quality of life are grave. Fortunately, the most common form of diabetes is diet and lifestyle-induced. It is therefore mostly preventable and more manageable with therapeutic lifestyle changes (TLC's).

If you're diabetic or hypertensive, seek medical attention or take same seriously if you're already being treated. Most importantly, note that these conditions are mostly lifestyle-related. The (TLC's) – **HEAT**, I call them – are

a sure bet to prevent or treat non-communicable diseases like diabetes and hypertension as confirmed by His Excellency (in slide #24). **HEAT** is:

- **Healthy eating:** Healthy eating is everything good you could do for yourself in this era. It provides you with the best goodies your immune system needs to fight against coronavirus and other pathogens. Healthy eating is also your best bet in the management of diabetes, hypertension, cancers and other diseases; a healthy food is your best medicine.
- **Exercising:** Exercises condition the immune system. Exercises have even been suggested to help flush out some pathogens out of the lungs and airways. Again, they delay the release of stress hormones. Mark you, stress hormones increase one's risk of getting ill.



Photo credit: Ghana Academy of Nutrition and Dietetics

- **Alcohol limitation/avoidance:** According to the World Health Organization (WHO), alcohol consumption is linked with a number of communicable and non-communicable diseases and mental health disorders, which can make a person more vulnerable to COVID-19. Particularly, alcohol compromises the body's immune system and increases the risk of adverse health outcomes.



Photo credit: Department of Health, South Africa

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DIABETES AND HYPERTENSION CONTRIBUTE THE MOST DEATHS

- **Tobacco avoidance:** COVID-19 is an infectious disease that primarily attacks the lungs. Smoking impairs lung function making it harder for the body to fight off coronaviruses and other diseases.



Tobacco is also a major risk factor for non-communicable diseases like cardiovascular disease, cancer, respiratory disease and diabetes, which put

people with these conditions at higher risk for developing severe illness when affected by COVID-19. Available research suggests that smokers are at a higher risk of developing severe disease and death.

TLC's are best administered by a dietician. Now, more than ever, the dietician must be your friend. **FOOD IS ALWAYS YOUR BEST MEDICINE.** Let's all do our best to fight this albatross called COVID-19. We'll win this! #StaySafe #EatWell

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ZONTA CLUB OF ACCRA DONATES TO MOTHER'S HOSTEL

The Zonta Club of Accra has presented medical items and foodstuffs to the Hospital's Mother's Hostel as part of its social responsibility drive.

The items included eight (8) cartons of detergents, 10 gallons of hand washing soaps, 13 packets of tissue and toilet roll and 6 gallons of hand sanitizers. The rest were six (6) bags of rice, four (4) cartons of cooking oil and packs of facemasks.

The President of the Club, Mrs. Florence Ohene Kyei, said the presentation was to support the hostel stem the spread of Covid-19. "We are donating not only to cater for the hygiene management of the hostel but also to the mothers who come from different parts of the country and stay here because they have a sick child on admission", she added.

Mrs Ohene Kyei narrated that the Club in the past had had the idea of building a hostel for mothers who have nowhere to stay during hospitalization of their babies and young children. The Club therefore decided to support Korle Bu's Mother's Hostel when one of its members had her child admitted.

Mrs Ohene Kyei announced that the Club "will engage the Hospital's Management to support in the refurbishment of the Hostel" in the coming months.

Mrs Esther Tetteh, the Administrator of Child Health Department, thanked members of Zonta Club of Accra for their donation and assured them of Korle Bu's preparedness to collaborate with the Club to provide quality healthcare to all patients and their relatives.



Zonta Club of Ghana donate to the Hospital

COVID-19 SHOULD NOT SCARE YOU FROM HOSPITALS – DR SEREBOE

Dr. Lawrence Sereboe, the Director of the National Cardiothoracic Centre has said Covid-19 should not scare people from accessing health facilities when they are sick.

He said that as a result of the fear of Covid-19, a patient with heart condition failed to report for urgent medical attention and subsequently died, stressing that “people with heart diseases need to be extra cautious and strictly observe the safety protocols”.

“We don't need to be afraid of the Hospital because of Covid-19. We all must make sure we observe the protocols and everyone will be just fine”.

The Director of the Centre gave the advice during a presentation by the White Chapel Holdings Limited to the supplement the efforts of government and corporate entities to help frontline health workers in the management of patients amid the Covid-19.

White Chapel Holdings Limited presented 4,000 face masks, 30 thermometers, respirators and hand wipes.

Dr Sereboe expressed gratitude to White Chapel Holdings for showing concern towards fighting the disease, saying they would be of great help especially the respirators which he said were costly.

He said the disease had come to stay, therefore, it was only prudent that the nation braced itself to live with it, adding that: “We can't run away from it.”

“The items, would enable the healthcare personnel to attend to patients with confidence”, he said.

He advised the public to prioritise wearing of face masks in their daily outings if they wanted to stay safe amid Covid-19.

“The wearing of face masks is essential. The face mask is not a chin mask and even though it is uncomfortable to wear, it plays a pivotal role in helping to prevent contraction,” he said.

Mr. Prince Noel Danquah, the Director of Strategy, White Chapel Holdings, explained that his office had presented the items to support Cardio provide enhanced care in the midst of Covid-19.

“We found out the needs of the Cardio Centre through Nana, Otuo Siriboe, the Chairman of the Council of State and we came with our widow's mite to support”, he said.

Mr. Danquah called on other bodies and individuals who had not joined the Covid-19 fight to do their best to help government to contain the respiratory disease.



Mr. Prince Noel Danquah, the Director of Strategy, White Chapel Holdings handing over the items to Dr. Sereboe

A LOOK AT ST. LUKE'S CATHOLIC CHURCH-K'BU'S SPIRITUAL WING

Over the years, staff and the general populace of the hospital have resorted to using departmental conference rooms and other available venues for their religious and other social activities. But did you know it was established as a church for the Hospital? That religious activities such as funeral ceremonies, religious seminars/ symposia, staff religious related activities etc. can be held at the St. Luke Catholic Church? Do you know where it is located within the hospital?

This prompted the *Korle Bu Bulletin* to interview the Hospital's PRO, Mr. Mustapha Salifu. He revealed that he was not in the position to comment on the origins of the church. Our interaction with Mr. Salifu, he asked us to seek clarifications from the Catholic Chaplain, Rev. Fr. Theodore Quaye.

In an interview with the *Korle Bu Bulletin*, Rev. Fr.

Quaye, caretaker of the Church, noted that prior to the establishment of the church, catholic priests came to pray with patients in the various wards. Some of the priests came from the Martyrs of Uganda Catholic Church and other nearby catholic churches. They also offered other spiritual support to staff and clients who visited the hospital.

This necessitated the establishment of the St. Luke Catholic Church in 1992. It was a collaboration between the Christian Council and the Catholic Church, Ghana, with major funding from the Catholic Church.

Though the name suggests that it is for only members of the catholic sect, the purpose is to serve the spiritual needs of all Korle Bu staff and patients who patronize our services. Thus, sacraments, communion, last rites are performed for patients who request for them. The place also serves as a place for depressed staff.

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SUCCESSION PLANNING PRACTICES AMONG NURSE MANAGERS AT KORLE BU TEACHING HOSPITAL

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Abstract

This article presents the findings of a study conducted on the Succession Planning Practices of Nurse Managers at Korle Bu Teaching Hospital. The study found out that, nurse managers do not explicitly practice Succession Planning but rather depend mainly on the ranking system of progression in nursing, in the appointment of potential successors. Challenges nurse managers encounter or perceive to encounter in the practice of succession planning include; frequent reshuffling, the tendency to generate conflict, a lack of incentives for nurse managers, and the ranking system of progression in nursing. Strategies that can be used to enhance the practice of succession planning include; promotion with preparation, provision of incentives for nurse managers, transparency in the succession planning process and talent identification. Potential nurse managers need to be identified at an early stage in their career and given the necessary preparation through a structured succession planning program to ensure efficiency and effectiveness when they assume managerial roles.

Introduction

Research has characterized the frontline nurse manager role as frustrating, overwhelming and demanding –(Wendler, Olson-Sitki, & Prater, 2009). Nurse Managers are faced daily with roles ranging from managerial to clinical, social and even interpersonal domain. Nurse Managers need to be skilled and knowledgeable in almost all the facets of management to help them attain the operational goals of the organization. New nurse managers are however, often promoted within direct care nurse ranks, with limited or no formal training but are expected to work effectively and efficiently –(DeCampi, Kirby, & Baldwin, 2010 ; Marrelli & Hilliard, 2004). The advantage of having a succession-planning program in place has been described by some authors. –Kim & Thompson (2012) asserted that, high-performing healthcare organizations make use of leadership succession-planning programs to retain intellectual capital by identifying and supporting employees with potential for promotion. A study conducted by Asamani et al., 2013 on

“Challenges of being a Nurse managers in Ghana”, revealed that, the number one challenge of nurse managers in Ghana is a lack of managerial preparedness. There is therefore the need for potential nurse leaders to assume the nurse manager role by succession, thereby ensuring that, they are well groomed and prepared for the position. The study consequently, sought to explore the practice of succession planning among nurse managers at the Korle Bu Teaching Hospital and also ascertain their existing pipelines of succession.

Materials and Methods

The exploratory descriptive design was used for this study. The study was conducted at Korle Bu Teaching Hospital, which is situated in the nation's capital, Accra. The target population for this study was all nurse managers who work at the Korle Bu Teaching Hospital. A sample size of 12 nurse managers with not less than three years' experience in their current position gave enough information to explain the succession planning practices among nurse managers in the Korle Bu Teaching Hospital. A purposive sampling technique was used to select the participants for the study. To obtain data for this study, an in-depth interview was conducted using an interview guide prepared in English, made up of open-ended questions. It had main question areas in line with the research questions and also contained probing questions to elicit clarification, in order to obtain accurate information.

Results

The study found out that, most nurse managers do not explicitly practice Succession Planning but depend on the ranking system of progression to choose potential successors. Nurse Managers however asserted that, the ranking system of progression is not always reliable because, people pushed to the top by virtue of their rank are sometimes not the best for the job. Nurse Managers again agreed to a lack of adequate preparation for managerial positions. Some advantages of succession planning found were; an increased sense of career planning, retention of intellectual capital and organizational vision attainment. Some perceived

WORLD SICKLE CELL DAY CELEBRATED

The Ghana Institute of Clinical Genetics marked this year's World Sickle Cell Day with a number of activities such as public education and tree planting exercise. The Institute also

received a number of donations from organisations. This year's celebration was under the theme: **“Combating Sickle Cell Disease through Stakeholders Support”**.



Coalition of Sickle Cell Disease NGOs donated PPE's and other items



More donation from coalition of Sickle Cell Disease NGOs.



This girl will not be left out of the tree planting exercise



Tree planting exercise to mark the Day



Helena Adom donated Gh¢400

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SUCCESSION PLANNING PRACTICES AMONG NURSE MANAGERS AT KORLE BU TEACHING HOSPITAL

challenges associated with succession planning found include; frequent reshuffling, lack of incentives and the tendency to generate conflict. Some strategies found, that can be used to enhance succession planning include; promotion with preparation, transparency in the succession planning process and talent identification.

Conclusion

The findings of the study indicate that, Nurse Managers depend largely on the ranking system of progression in

the appointment of potential successors. This system however, as asserted by most participants, does not always bring forth individuals who have the ability to handle this pivotal role.

Potential nurse managers need to be identified at an early stage in their career and given the necessary preparation through a structured succession planning program to ensure efficiency and effectiveness when they finally assume managerial roles.

COVID DONATIONS



GIVE BACK GHANA

Give Back Ghana donated 200 masks to the Laboratory Sub-BMC to protect members of staff and enhance the discharge of their duties in the fight against Covid-19.



GIZ/GHANA HEART INITIATIVE

GIZ/Ghana Heart Initiative presented examination gloves, protective goggles, protective gowns, face shields, surgical masks and respirators to the Hospital.



MELCOM FOUNDATION

Melcom Foundation donated 11,000 pieces of Jamaa soap to the Hospital.



LION'S CLUB INTERNATIONAL

Lion's Club International donated liquid soap, parazone bleach, tissue paper, face mask, goggles sanitizer and hand gloves to the Child Health Department.



FAN MILK GHANA LTD

Fan Milk Ghana Limited in collaboration with University of Ghana and School of Pharmacy donated hand sanitizers to the Department of Medicine and Therapeutics.

CREATING A MENTALLY HEALTHY WORKFORCE; THE HEALTH WORKPLACE AND COVID-19 CRISIS

The arrival and the rapid spread of COVID-19 pandemic has reinforced the importance of mental health and the critical need to create a mentally healthy workplace for the workforce.

Health care providers and managers in the healthcare industry cannot ignore the mental stress that covid-19 has presented to the workplace adding to the already existing psychological and emotional challenges faced by healthcare workers. Today, the healthcare industry especially traditional care providers are experiencing one of the most disruptive periods in time.

The health workforce has over the years suffered both emotional and psychological stress related to providing care and restoring health of the sick and vulnerable in addition to the physical, biological, and chemical hazards they face in their daily work.

The healthcare work environment is dangerous and exhausting and there is a 'tough guy' mentality which may discourage healthcare workers from discussing issues pertaining to mental health because of the false assumption that they can handle their mental health challenges better than any other group of workers.

Many workers experience damaging levels of stress due to problems they experience in their home or work lives. These challenges may result from marriage and relationship, the time and energy required to care for old parents or young families, financial stress, legal matters, career related challenges, working in teams, significant role changes and challenges that come with people management.

In addition to the above, health care workers are faced with the stress of caring for patients with terminal ailments or in critical conditions, children born with complicated congenital defects, patients with co-morbidities and their families in the midst of unavailability and insufficient supplies to help in delivering quality care.

These aggravate the stress faced by health workers, impacting negatively on their mental and emotional health. Like all other workers, the mental wellbeing of health workers inversely determines productivity levels and quality of care hence the urgent need to prioritize the mental wellbeing of the workforce.

In this era of Covid-19, health workers are faced with fear of the unknown as they work tirelessly everyday in the frontline to provide care to patients suffering from the infection. However, the health system continues to face the

heavy burden of communicable and noncommunicable diseases, leaving workers with high workload and eventual burnout.

This creates huge levels of fear, anxiety and agitation among workers in hospitals and unions in the healthcare industry. There are several instances where workers have threatened to leave their work, some units in hospitals have been temporarily closed down while a number of them also have had to deal with stigmatization from family and society because of being infected with the coronavirus in the course of offering care, or just the fact that they work in hospitals, covid-19 treatment or isolation centers.

To reduce the impact covid-19 has on the mental health and wellbeing of frontline health workers, some have had to isolate for days from their families, others have had to send their children to stay with their extended families rather than to risk exposing them to covid-19. One of the doctors in my covid-19 frontline team says "I swore the oath to protect and save lives myself and alone, my wife and children have not sworn that oath and I can't risk endangering their lives should I be exposed".

However, separating from family and friends in pandemics like we face now can also introduce different levels of stress and anxiety.

The World Health Organization estimates that for every \$1 invested into the treatment and support of mental health related issues, there is a return of \$4 in improved health and productivity. This indicates a

high-level Return on Investment (ROI), a good business sense to ensure the mental health of employees.

In achieving a mentally healthy workforce, these are recommended in hospitals and health care facilities.

Mass testing of critical staff and provision of timely and directed psychosocial support, which may include pre-test counselling, which extends to cover periods when tested staff awaits their results, confidential communication of test results, adherence counseling and support for family and contacts as well as timely contact tracing and isolation is one highly recommended intervention in hospitals.

Programs such as the employee assistance program which offers around the clock psychosocial support and professional assistance to employees is one of the very effective workplace interventions to improve the psychological and emotional health of employees.



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CREATING A MENTALLY HEALTHY WORKFORCE;

It is critical to also provide, make available, and ensure use of adequate Personal Protective Equipment (PPE's) for health workers per their various job roles. In addition to PPE's, it is very essential that facilities for safe and proper hand washing are provided at vantage points in hospitals and at the various work areas with reinforcement of Infection Prevention and Control (IPC) measures that keep healthcare workers and their patient's safety.

Again, appropriate systems must be created in the healthcare setting to enable healthcare workers monitor their health more closely and get immediate access to testing during an exposure. This reduces the mental stress that exposed staff might suffer. Poor testing among healthcare workers with inadequate protective equipment puts not only the lives of workers at risk but the entire community of patients and their relatives.

To reduce the emotional stress on workers who might test positive for the coronavirus, it is important that hospitals provide an inhouse isolation bays/centers for both symptomatic and asymptomatic staff. Though this may be ideal, many have also argued the fact that inhouse isolation accommodation may breach the laws of confidentiality and may be the starting point of stigmatization and discrimination. While this point remains debatable, I go for the former as a significant number of positive health workers I have encountered preferred to be cared for within their own facilities by their colleagues provided the needed logistics and supplies are available.

Lastly, it is imperative to create a positive culture which is conducive for healthy conversations. We should formalize the fears and anxieties we are going through and create a safe platform where in the work environment we can all discuss these fears as we normalize the feelings and seek appropriate help.

The general world of work is undergoing dramatic changes with the insurgence of COVID-19 and these changes will continue post COVID-19.

Industries that will be well positioned to manage the distractions and shocks presented by the covid-19 crisis will be those that are resilient. The design of work needs to address worker safety, health and well-being as well as attending to the needs of individual workers and foster support from both co-workers and managers. Though hospitals might have some programs in place to deal with improving the mental health of the employees, there is a lot of opportunity for improvement as we deal with the NEW NORMAL.



Hannah Adjei-Mensah
*Occupational Health and Safety professional
Employee Assistance Program Practitioner*

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A LOOK AT ST. LUKE'S CATHOLIC CHURCH

Rev. Fr. Quaye said majority of St. Luke's financial support is from the catholic church. Though there are plans in place to give the facility a facelift, it has dragged for sometime due to the lack of intensive capital to commence the long term project. He noted that a lot could also be done by the hospital management and individuals from the general public who would like to support the church's activities and upkeep.

He also appealed to Management to assign a security personnel to the church. This will enable easy access by anyone who would like to use the facility anytime.

Speaking to the Korle Bu Chaplaincy, they said there was not enough staff awareness on the use of the place. They noted that they are always available to organize religious activities such as baptism, last rites, blessing etc at the Church for interested staff, from all denomination, if they inform the Chaplaincy Unit.

Still wondering where the St. Luke Catholic Church is located? Great! It is located adjacent the Medical Block and the Psychiatry Department. Pass by anytime you are in that area.

It is the wish of the *Korle Bu Bulletin* to see all staff, from all denomination, use the place for all their religious activities. For enquires kindly contact the Chaplaincy Unit at the Main Administration Block.



The Church premises

TRIBUTE FOR MRS EVELYN TAY FROM THE BOARD AND MANAGEMENT OF THE KORLE BU TEACHING HOSPITAL



Evelyn
TAY (MBE)
1936 - 2020

Mrs. Evelyn Tay has been associated with Korle Bu Teaching Hospital for a long time and has made significant contributions in the growth and development of the Hospital. Her contributions are unique and highly impactful.

The first notable contribution of Mrs. Tay to the Hospital was in mobilizing both human and material resources for the establishment of the Reconstructive Plastics Surgery & Burns Centre of the Korle Bu Teaching Hospital. This has enabled the local training of plastics surgeons and the eventual establishment of other plastic surgery units and centres across the country and within the West African sub-region.

Mrs. Tay was also instrumental in mobilizing and paving the way for the construction of the Moorfields Eye Centre. This Centre was conceived as a sub-regional hub for the training and treatment of an estimated 2.6 million blind people within the West African Sub-region.

She was working for the commissioning of the Centre just before the outbreak of the Covid-19 pandemic. Even at a time that Mrs. Tay had lost some of her infectious energy in organizing and mobilizing resources, she also accepted an offer to work as a Trustee of the Korle Bu Teaching Hospital's Trust Fund.

She has also made numerous donations of medical equipment and consumables for the running of the Hospital particularly at times that some of the items were difficult to come by.

The last donation of such items was when she worked with staff of the British High Commission to donate assorted items to the Paediatric Oncology Unit in 2018.

The foregoing contributions of Mrs. Tay are indicative of the fact that she was a true friend of Korle Bu. Her name will be indelibly etched in the annals of the Hospital as someone who came and contributed in a unique way to the progress of the Korle Bu Teaching Hospital. May she rest in perfect peace.