

# Kenya and Uganda

## Improving Emergency Services through the Development of Paramedic Services

### Programme Profile



**Sectors** Health, Emergency Relief

**Donors** BMZ, GIZ, DEG, morpho Foundation and private donors

**Partners**

EKMF, KCEMT, MoH, Kakuma Mission Hospital, Amref Health Africa, Masinde Muliro University, County Governments and in Uganda Ministry of Health-Department of Emergency Medical Services, Association of Ambulance Professionals Uganda (AAPU), Lubaga, Nsambya, Kiruddu, Mbarara Hospitals, Lubaga Training Institute, Local District Government in Lwengo and Kasese



Newly equipped ambulances in Nairobi

### Situation in Uganda and Kenya

Injuries and deaths resulting from road traffic accidents, birth complications or internal medicine emergencies which require rapid medical attention are a growing problem in Kenya and Uganda and one of the leading causes of death. Poor safety standards and lack of trained emergency health care personnel and a poor ambulance system mean that accident victims do not receive prompt emergency response and adequate trauma care.



EMS simulation exercise in Kasese, Uganda

Malteser International aims at improving emergency medical services and ambulance services in Kenya and Uganda while making them more accessible. In order to achieve this, MI is working together with the ministries of health as well as training institutions, associations, and partner



EMS simulation exercise in Kasese, Uganda

hospitals. Joint planning and know-how transfer ensure that all social forces in the two countries are involved in order to sustainably improve the care of injured people and all other medical emergencies, regardless of their financial situation.

### Emergency Medical Services (EMS) Program

In Kenya and in Uganda, Malteser International supports the access to improved emergency medical services through establishment of legislation and policies, increased capacities of associations, actors, and academic institutions, and set-up of call and dispatch centers, and trainings of first responders.

The Emergency Medical Services (EMS) program aims at contributing to the realization of Sustainable Development Goal 3 i.e., Contribute to reducing direct and premature mortality and disability due to medical emergencies through improved pre- and early clinical emergency care in Uganda and Kenya. In order to measure its contribution towards SDG3, the project aims at achieving an Improvement of emergency medical care services through national regulation of a functional rescue system, improvement of emergency medical care services by providing qualified paramedical personnel in emergency departments and rescue services, and representation of interests through a professional association, an improvement of emergency medical care services in an operational rescue service by coordinating the rescue service providers and implementation of a call center.

### Other Health Programs in Uganda and Kenya

Malteser International has been working in the health sector on the African continent for over 20 years. Here some current projects: In a physiotherapy project in Uganda Malteser International aimed at providing children with disabilities care and treatment, physiotherapy services, and counselling and basic education sessions. An extension of the project is planned. Strengthening EMS through emergency response tech infrastructure and dispatching ambulance services in Uganda is another planned approach. Malteser International is also active to fight against tuberculosis in the informal settlements of Nairobi. One Health stands for a holistic, interdisciplinary approach that addresses the interaction of humans, animals, and the environment in the field of health. Under this scope Malteser International is currently implementing programs in Kenya, Uganda and the DR Congo.

# Malteser International

Malteser International is an international humanitarian aid organization. It is the relief agency of the Catholic Sovereign Order of Malta and fulfills its mission to “serve the poor and the sick”. Since 1956, our core task has been to improve the health and well-being of suffering and displaced people around the world. We provide emergency and disaster relief in the immediate aftermath of acute disasters and work towards the rehabilitation and reconstruction of afflicted communities. We work on the frontlines to provide immediate and long-term relief to those who need it most. We take a holistic approach to health in our programming, which includes the protection of nature and the environment. We work with local resources and engage local partners, ensuring that vulnerable populations are at the center of our interventions.

In doing so, we extend our support to all individuals in need regardless of gender, political belief, origin, or faith. We are a highly motivated, experienced, and international team, bound by empathy and respect for our diversity. Christian values and the humanitarian principles of humanity, neutrality, impartiality, and independence are the foundations of our work. We are committed to the highest levels of innovation, professionalism, quality, and transparency. Through our work, we experience joy, find greater meaning and a sense of belonging among like-minded individuals. Globally, we are united by the goal of standing alongside the displaced and people in need. Together, we’re working to build a life of health and dignity.



## Our Annual Report 2021



**Malteser  
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# Emergency Medical Service (EMS)

## Programme Profile



<b>Sectors</b>	Health
<b>Donors</b>	German Federal Ministry for Economic Cooperation and Development (BMZ)
<b>Partners</b>	Emergency Medicine Kenya Foundation (EMKF), Kenya Council of Emergency Medical Technicians (KCEMT)
<b>Location</b>	Nairobi and 20 High burden Counties
<b>Volume</b>	3 Million Euro (Kenya and Uganda)
<b>Time Frame</b>	Phase II 2022 – 2024 (Phase I 2019 - 2021)

### The Situation

Kenya continues to suffer from a so-called enormous disease burden – an important indicator that the healthcare system is in urgent need of improvement.

Most of the population has no access to timely medical (emergency) care, which is partly reflected through the high mortality rates. The emergency medical services are poorly developed. Emergencies, such as traffic accidents, birth complications or internal medicine emergencies which require rapid medical attention, remain common causes of death. It is estimated that up to 80 percent of emergency patients in need of help die before reaching a hospital. Thus, compared to countries in the global North, a person in these countries is twice as likely to die before reaching the hospital.

Consequently, there is a great need for a reliable and functioning emergency medical services system: a solid emergency medical system is an effective safety net for people, providing life-saving measures regardless of the cause, and can thus stabilize patients at an early stage and save their lives.



### The Goal

Our goal is a nationwide establishment of a functioning and high-quality emergency medical services system in Uganda and Kenya that is



accessible to all ensuring adequate care for emergency patients. To achieve this, we strive for the following subgoals:

- (1) Improved regulation of emergency medical services in Kenya and Uganda through adoption and implementation of appropriate legislation and policies.
- (2) Improved capacity and deployment of qualified personnel in the emergency medical services system through nationally standardized training courses, consistent certification by qualified training institutions, and mentoring by professional associations.
- (3) Improved and functioning emergency medical care systems.

### The Progress and Future

In our first phase (2019-2021) of the program, in close coordination with state actors, the legal framework was created, and generally binding standards were promoted. At the same time, the needs of the training, hospital and rescue services were identified and in part already met.

In the second phase, we are closing further gaps in the legal framework in close coordination with stakeholders in the emergency medical services system and expanding the already standardized guidelines to additional districts and regions. Building on this, we are extending training opportunities and courses in local academic institutions. In Kenya an operational call and dispatch center is being established, standards for their operation are being defined, and the staff are being trained accordingly.

An exchange between the actors in Kenya, Uganda and Germany helps to transfer knowledge, to deepen and to strengthen the established relationships between professionals in the emergency medical services of the German Malteser Hilfsdienst e.V. and the Kenyan institutions.

Building on the measures of these phases, the training and equipment of the emergency medical services in Uganda and Kenya will be improved step by step, thus enabling high-quality care for accident patients and severely injured persons. Through close coordination and cooperation with the ministries of health, professional associations and training institutions, initial objectives have already been achieved and structures consolidated that will strengthen the emergency system in the long term.

# Strengthening EMS through emergency response tech infrastructure and dispatching ambulance services in Uganda

## Project Profile



Sectors	Health
Donors	DEG develoPPP, rescue.co, MI
Partners	Capsule Ltd. (flare/ rescue.co)
Location	Greater Kampala Area, Uganda
Volume	1.389.866 EUR (half public and private)
Time Frame	04/2023 – 03/2024

### The Situation

The main problem to be addressed by this project is the lack of coordination of resources and unsustainable operations. Despite milestones by the government and the prioritization of EMS in Uganda, systems still rely on analog dispatching (on pen & paper), and therefore often the nearest ambulance is not sent and additionally there is no data to understand where services need to be improved. The planned project may complement and support the goals of the ongoing Emergency Medical Services (EMS) project.



The approach is unique for MI as we will be a part of a DEG develoPPP public-private partnership. We will implement alongside with the private actor Capsule Ltd. (Flare). Direct implementation of activities will be assured by our project partners AAPU and UCMB.



Rescue.co provides premium emergency response services and coordination in partnership with Kenya's largest and most distributed network of emergency response professionals.

### The Goal

Our goal is to introduce a new digital dispatching technology and an operational and scalable infrastructure for emergency response in Uganda.



### Expected Results

- 330 trained ambulance providers - including 19 emergency medical coordinators trained on emergency service protocol, Basic Life Support and Emergency Care Management
- Set up a Flare centralized dispatch center in Kampala or extend service capabilities to Nairobi to coordinate the service
- Standard operating procedures developed for dispatch of emergency services/rescue services; 22 ambulances, capabilities tracked, and on boarded to the Flare System

### Outlook

Once the dispatching technology is in place, the ambulance services in Uganda will be initiated in a streamlined and efficient manner to have a coordinated system where emergencies can be responded to in real time.

# Support to Kakuma Mission Hospital in Turkana County

## Project Profile



<b>Sectors</b>	Health
<b>Donors</b>	German Foreign Office (AA), Sovereign Order of Malta (SOM), Aktion Deutschland Hilft (ADH)
<b>Partners</b>	Kakuma Mission Hospital
<b>Location</b>	Turkana County
<b>Volume</b>	425,000 Euro
<b>Time Frame</b>	Since 2018

## The Situation

The Kakuma Mission Hospital (KMH) is the main referral hospital in Turkana West for a catchment population of over 320,000 people and is located in the periphery of the Kakuma refugee camp. The camp is located on the outskirts of Kakuma town, which is the headquarters for Turkana West District of Turkana County. About 70 % of the refugees come from South Sudan. Ethiopians and Somalis make up other larger shares, and Eritreans, Burundians, Rwandans, Ugandans and Congolese also live in Kakuma.

The KMH is a Faith Based Medical Institution wholly owned and operated by the Catholic Diocese of Lodwar. The overall authority and responsibility for all finances, policies, and actions of the hospital rests with the Local Ordinance and Caritas of the Catholic Diocese of Lodwar (DoL). With a staff capacity of 30 health care providers and 72 in-patient beds, the KMH offers health services to both refugee and host communities, servicing up to 250 inpatients and just over 1,000 outpatients in a month. This is done in close collaboration with the Ministry of Health and UNHCR. Its vision is to promote and improve the health needs of the people of Kakuma Town, Turkana West Sub-County, and Turkana County with compassion while preserving the dignity of the people served.

Since 2018 Malteser International supports the refugees and host community in Kakuma settlements in hygiene and health interventions. With support of German Foreign Office, the Order of Malta and donations we were able to build a new maternity ward. The construction was done with straw panels instead of the traditional fired bricks reducing the carbon footprint which is also a strategic decision by Malteser International.

## The Goals

Our objective: Reducing Maternal and Child Mortality. This project targets expectant mothers from refugee camps in Kakuma and Kalobeyei Integrated Settlement as well as members of the host communities. The working staff at the Kakuma Mission Hospital are also included as part of the target group.

Our objective is to reduce maternal and neonatal mortality rate in the region by increasing the service delivery capacity of Kakuma Mission Hospital to offer quality emergency obstetrical services. We expect that



improved access to and utilization of emergency obstetrical services by pregnant women will contribute to reaching that objective.

Our approach:

- Strengthening infrastructure and sharing knowledge
- Renovation and expansion of the maternity unit of Kakuma Mission Hospital
- Provision of an equipped ambulance with (advanced life support) ALS capabilities
- Training on emergency obstetrics and neonatal care training for health workers
- Provision of equipment and medicines, including Infection Prevention Control (IPCs)

A comprehensive maternity unit should be an important component of the hospital if it is to provide quality emergency obstetric and neonatal care. In addition to a newborn unit, the maternity unit is to include pre-natal, delivery and post-natal wards. Easy access to the delivery room from the pre-natal ward should be guaranteed as well as further entry into the post-natal ward. The newborn unit will allow for extra care for newborns and the opportunity for mothers to breastfeed and provide kangaroo care to their infants in private. To achieve these standards, the current maternity facility will be renovated and expanded.

Healthcare workers from the Kakuma Mission Hospital and other surrounding health centers will receive training on integrated emergency obstetric and neonatal services. This is the first step to address existing knowledge gaps in each of the technical areas of Maternal, Newborn and Child Health in the region.

Important equipment to be procured include, but are not limited to, post-operative beds, patient monitors, infant radiant warmers, resuscitation tables and kits, caesarean-section sets, portable ultrasound devices, mobile patient tables, oxygen concentrators, anesthetic sets, and sterilizers. Supplies that will also be provided for the maternity ward include emergency medications as per government guidelines and international standards.

## The Progress

The maternity was also fully equipped and a new ambulance for referrals is already en route. We further provided trainings on hygiene, on COVID-19 prevention and will start to train the health staff also in emergency medical care including emergency obstetric care. In future it is planned to provide further trainings for Kakuma Mission Hospital staff on emergency medical topics. In the scope of the ongoing drought, we are initiating a small-scale nutrition program focusing on pregnant and lactating women and children under five with moderate or acute malnutrition.



# One Health Program in the ASAL-Region: Kenya and Ethiopia

## Project Profile



<b>Sectors</b>	Health
<b>Donors</b>	German Federal Ministry for Economic Cooperation and Development (BMZ), ADH and Merck Family Foundation
<b>Partners</b>	Pastoralist Community Initiative and Development Assistance (PAC-IDA)
<b>Location</b>	Marsabit County, Kenya and Dirre Woreda Ethiopia
<b>Volume</b>	1,300,000 Euro
<b>Time Frame</b>	11/2022 – 04/2025

## The Situation

Since a large proportion of communicable diseases originate in the animal world and are influenced by ecological circumstances as well as climate change, the holistic view and the link between human and animal health as well as the environment plays a decisive role for us in the prevention and containment of infectious diseases (One Health approach). One Health is a holistic and interdisciplinary approach that aims to connect people, animal and the environment to improve human and animal health in a healthy ecosystem.



Southern Ethiopia and Northern Kenya are essentially arid and semi-arid zones affected by the increasing intensity of climate change. Due to these circumstances, the areas suffer from water shortages and lack of grazing land which leads to migratory movements of the pastoralist's herds, spread of infectious diseases and transmission of zoonoses. Health stations for humans and livestock are mostly undersupplied in terms of medical equipment, vaccines, medicines while the capacity of personnel for humans and livestock are limited. This One health project aims to address the multidimensional crisis through linking the unilateral sectors to jointly work together in improving the resilience of the

target groups and strengthen the local pastoralists communities to better adapt to the changed conditions caused by climate change.

## The Progress

The project is in its initial implementation stages. Some key activities planned for the 1<sup>st</sup> Quarter of the implementation include

- Joint Kick off work to promote cross border approach of the planned and to be implemented activities.
- Mapping exercise to determine the project indicators.
- Quarterly review field visit to monitor program implementation and finances.
- Establish and strengthen two One Health structures in Marsabit (Kenya) and Dirre Woreda (Ethiopia).
- Training of One Health staff from local authorities on One Health (incl. support coordination)
- Conduct mobile outreach services for both animal and human for improved care.



During the implementation, the project will be closely networked with national platform, ILRI/OHRECA and other partners in the field of One Health.

Sensitization and mobilization through education and communication campaigns will expand the understanding of infectious diseases in the population and civil society.

## The Goal

Our goal is to contribute towards improving human, animal and environmental health in Northern Kenya and Southern Ethiopia with a focus on zoonotic diseases through sustainable cross sectorial strengthening of local capacity and control. Our objectives include:

1. Strengthened and established One Health system and structure that can respond to zoonoses and epidemics in a coordinated and appropriate manner.
2. Improved Human, Livestock and environmental health through control and prevention of zoonotic diseases increased food security and applied WASH practices.
3. Integration of One health research components and establishment of two sustainable model farms for training research and best practice in the regions.

# Services for People with Tuberculosis, Leprosy & Lung Diseases

## Project Profile



<b>Sectors</b>	Health
<b>Donors</b>	Global Fund (GF) through Amref Health Africa
<b>Partners</b>	Kenyan Ministry of Health, Nairobi Metropolitan Services, Amref Health Africa, Health Centres in Urban Informal Settlements
<b>Location</b>	Nairobi County
<b>Volume</b>	1,542,000 Euro (Phase I + II)
<b>Time Frame</b>	July 2021 –June 2024 (Phase II, current)

## The Situation

Malteser International has been working in the Nairobi informal settlements fighting Tuberculosis since 2001. Currently funded by the Global Tuberculosis Funds through Amref Health Africa, the project is being implemented in eight sub-counties in Nairobi County since July 2021. The sub-counties include: Dagoretti, Embakasi East, Embakasi West, Kamukunji, Starehe, Roysambu, Ruaraka and Westlands.

## The Goals

- (1) To ensure provision of quality care and prevention services for all people with TB, Leprosy and Lung diseases in Kenya.
- (2) To contribute to the attainment of universal health coverage through comprehensive TB, HIV and malaria prevention, treatment, and care for all people in Kenya.



## Impact targets

- (1) Reduce TB deaths by 90% compared to 2015
- (2) Reduce TB incidence rate by 80% compared to 2015
- (3) Zero families facing catastrophic costs due to TB, Leprosy, and lung diseases

## The Progress

- With the funding, Malteser International supported Community Health volunteers (CHVs) with transport to visit 1000 TB positive patients in their homes. Their household members were offered health education, assessed for TB, and referred to the nearest health facilities for further evaluation by the doctors. Using this approach 50 new TB patients were identified and started on treatment.
- In the last six months, Community Health Volunteers physically followed up (traced) patients who had defaulted taking their TB medication. Through the CHV efforts, 15 TB patients were found and brought back to care and are now adhering to treatment.



- Community Health Volunteers play a key role in creating TB awareness in the community. They need to be updated on the current information so that they pass on the current health information to community members. MI sensitized 245 Community Health Volunteers on TB Preventive Therapy (TPT) – this therapy comprises of antibiotics given to household members living with TB positive patients to kill the inactive TB bacteria in their body/lungs. In turn this will reduce the chances of developing TB disease.
- With aim of reducing TB incidence rate in the country, one of the strategies the National TB/Leprosy Program employs is providing TPT to household members who live/are in direct contact with TB positive patients (diagnosed through sputum testing). Community Health Volunteers referred the household members of TB positive patients to health facilities and 423 were initiated on treatment (TPT) in the last six months.