

# Reflection on my time in Kiwoko as part of the global health fellowship

As part of the global health fellowship programme I worked in Kiwoko hospital which is a mission hospital in rural Uganda. The hospital gets 70% of its funding from donors, a small amount of government funding and the rest of the running costs come from the patients themselves. Kiwoko has a number of volunteer doctors from the UK and Germany who come on a short to long term basis. I worked there for 6 months after the 2<sup>nd</sup> year of my general practice training and after completing a diploma in tropical medicine.

Whilst I was in Kiwoko I primarily worked in the outpatients department which is a mix of both primary care and emergency work (this is the starting point for most admissions but maternity patients and NICU referrals may be admitted directly to the relevant wards). In the outpatient department I saw a variety of patients in the emergency area and the general outpatients. Primarily I was responsible for providing senior reviews for patients the clinical officers had seen but did not know how to manage. Some of my patients had chronic health problems which I would bring back for review with myself on a regular basis. Otherwise I helped with the emergencies or with the queue of patients waiting to see the clinical officers. On a few occasions I also helped in the diabetic clinic or on the medical wards.

This placement greatly increased my knowledge of infectious diseases, I was managing issues that I have rarely seen in the UK such as HIV, TB and malaria. As the medical officer with minimal specialist support available I managed more severe disease that I had in the UK including advanced alcoholic liver disease, rheumatic heart disease and temporal arteritis which would all be referred to specialists in the UK.

Whilst in the outpatients department I was often the most senior clinician present. I learned how to work independently and how to manage risk in patients who were sick but unable to be admitted. I also learned more about being a leader and helping to contribute to running a department. Whilst I was there the hospital introduced a computerised note system. As the senior doctor I brought issues from the staff to the management and the software developers as well as providing support and encouragement to those struggling with the new system.

During my time at the hospital I also spearheaded a quality improvement project to increase the investigations available at the hospital. As a result of an audit of referrals I found that thyroid function tests were the most frequently required test. When the lab had purchased the required reagents and we could perform these tests I delivered a teaching session to our doctors on when to order and how to interpret thyroid function tests. Initial data seems to prove that providing this test will be financially viable as enough are being ordered to prevent expiring and waste of reagents. In the process of this project I had to take the cost implications and business aspects of quality improvement into account, this has helped to develop skills that would be required in management of a GP practice.

Living in another culture has helped me to develop increased adaptability and greater understanding of my own cultural bias's. I think that the experience has made me more confident to tackle unexpected challenges as well as to step outside of my comfort zone. The opportunity to work and live in such a different place has been an experience I will treasure for the rest of my life.

Overall the global health fellowship has been of great benefit to my personal and professional development, and I believe will make me a better GP as a result. I think that sending trainees overseas not only benefits the healthcare facilities they are sent to but also benefits the NHS as they bring back a wealth of experience and a different perspective on the challenges faced in the NHS. I am incredibly grateful for being given this opportunity and to have taken part in this incredible programme.