

Better Use of Lay Personnel

By

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The efficient running of a hospital is a most complex business, and requires ceaseless effort, to maintain professional and technical efficiency at its highest possible level. It should be, and I am sure it is, our constant endeavour to keep pace with the latest developments in every branch of medical and surgical sciences. This would normally imply regular and diligent study, refresher courses periodically held and occasional study weeks.

But besides all this, in our hospitals there is yet another and perhaps more engaging problem, to which, I feel, little or no attention is paid—and it is the HUMAN problem—the problem of the human beings with whom we rub shoulders and frequently bump into—the doctors, the nurses, the patients and the menials, persons upon whom, to a large extent the efficient running of a hospital depends.

In the daily routine of hospital work these human elements fit in as so many cogs, big or small, in the intricate machinery of the hospital set-up. Each one, with some sense of professional consciousness carried out his or her duty, more or less well. It is nevertheless a duty—the performance of which is an obligation, this is rendered necessary, partly because of the remuneration received. Quite often, it does not go beyond the frontiers of obligation and so each performs as a simple human machine.

What we in our Hospitals should seriously think about and concern ourselves with is the laying of greater stress on this human element—the lay personnel. Get ourselves accustomed to thinking of them as men and women of flesh and blood, endowed with an immortal soul and with the most powerful potentialities of mind and heart. We have to accustom ourselves to something more than mere spotless uniforms and starched

coats flitting about the hospital corridors or moving in a most mysterious, and to us patients, in a most suspicious manner in the theatres. We must endeavour to realize and see in those who work with us in our hospitals, the vital human elements that can make a powerful contribution towards the betterment and uplift of the standards in our hospitals and of the public at large.

In order to do this, it is first of all necessary to arouse in the lay personnel a deep sense of confidence in us, nay more, a sense, I'd say, even of attachment. Confidence is created by means of the personal touch and personal contact and interest in an individual as an individual, not merely as theatre sister so and so, or sister tutor so and so, or theatre assistant so and so. The more they realize that we no longer consider them as soulless cogs in a machine, but that we are really and deeply interested in them, then the finer and nobler sentiments in their hearts and minds will awaken to a new life. It is through this living and personal contact between two human hearts that there will be struck the spark of a more efficient programme of work and co-operation among all who work with us.

Once this mutual confidence has been created, the next step is to engender in the minds and hearts of the lay personnel working with us a sacred sense of duty. By means of personal contacts and a spirit of mutual understanding, help them to see things in a more human manner rather than merely from the purely technical and professional point of view. Now and again, have a moment of intimate conversation that does not savour of medicines, injections, charts, diet and theatre postings. Make a point of duty to inquire, at least once a day, into the lives and work of those with whom we labour thus giving them to understand that it is not just rigid

impersonal duty that we expect from them. It is hard to imagine what an informal question, a tender personal inquiry put here and there can do to break down the stubborn barriers that are often put up by protocol, routine or cold rigid duty. This personal touch works very often like a magical button, the least pressure of which opens up a heart that would otherwise have remained closed and perhaps, even suffocated itself to death.

This initial opening up can and must be further developed by affording suitable and frequent opportunities to our lay personnel, to evolve their own spiritual, intellectual, moral, professional and psychological individuality. Plan and arrange organized programmes of activities especially extracurricular. Too often such things are left to the members of the staff, and more often than not through sheer lack of planned and organized effort, little or nothing comes of it. A good library, with a wide choice of good healthy reading—let us not be afraid of including some really good religious books for fear that they might not be popular.

Let us provide recreational facilities, both indoor and outdoor. All these little things do much to create a congenial atmosphere in which the lay personnel of any hospital can develop a healthy and generous attitude, that can well serve in its turn, to raise the general moral tone of both the staff and the hospital.

The ideal at which we should aim in our hospitals, is that everyone, bring his little contribution or do his little bit, towards the noble endeavour of making the medical and nursing profession not only a means of alleviating human suffering, but also, of alleviating human life and ideals.

It is, I agree, a gigantic effort, but one worth our best energies since its initiation and implementation must necessarily bring a betterment of the standard of efficiency in our hospitals and make of them veritable heavens, where broken bodies are healed and shattered spirits remade and souls raised above the humdrum duties or daily existence to the sublime heights of God Himself and of alive lived for Him, in Him and with Him.

Cross Infection in Hospitals — (Contd. from page 159)

medical examination and chest X-ray on entry to the hospital. The members of the hospital staff should be adequately protected by immunisation against small-pox, typhoid, diphtheria, tuberculosis etc. Contact with the disease against which immunization is being undertaken should be avoided until immunity has had time to develop.

All members of the staff who suffer from chronic or any minor ailment should report themselves and must receive bacteriologically controlled treatment. Where it is impracticable to exclude them from duty while sick, they must be kept from contact with infants, maternity, and surgical patients and should not prepare infant feeds and other food. Particularly kitchen and food handling staff should report even minor gastro-intestinal disturbances. Sick leave should not be deducted from holidays nor should it entail financial loss. After convalescence

from diphtheria, typhoid, dysentery or tuberculosis staff members should not resume work until they cease to be carriers of the casual organism.

To all those safe guards for prevention and control of cross infection, there must be added a good standard of personal hygiene among those concerned with the patient and the hospital work and the careful maintenance of an adequate aseptic and antiseptic technique.

Notifiable Diseases

The medical officer of health of the district should be notified in case of any occurrence of diseases notifiable under statute, in the hospital. At all times his cooperation and assistance to control other infections should be available. The administrators should have a clear understanding of the notifiable diseases.

(To be Continued)