

Progress Report
April - December 2011



Project Title:

**Cooperative Orthotic and Prosthetic Enterprise:
Local Rehabilitation Services for People with Disabilities in Lao PDR**
April 2011 – March 2014

Donor:

Australian Agency for International Development (AusAID)
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Ladies waiting in the PMRC clinic for their prosthetic leg fittings, October 2011.
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SUMMARY OF ACTIVITIES

The primary goal of the Cooperative Orthotic and Prosthetic Enterprise (herein COPE) is to **ensure that people with disabilities have local, free access to a quality, nationally managed rehabilitation service**. A range of activities have been undertaken throughout 2011 in support of achieving this goal. The activities under this grant undertaken in April to December 2011 are summarized below.

Objective 1: Knowledge & Technical Skills

To work with the national rehabilitation program and act as a portal for capacity building of clinical rehabilitation skills, including P&O, physiotherapy and occupational therapy, ensuring adequate technical resources are available to provide essential rehabilitation services throughout the country.

COPE has continued to build the clinical capacity of the national physical rehabilitation team, including over 20 P&O staff, 15 physiotherapy staff and thirteen occupational therapy staff from the five centres across the country.

- Three five-day courses have been conducted by the COPE Physiotherapy Mentor for the physiotherapy 'Training of Trainer' participants. The topics were neurological assessment development, management of spinal pain patients and building of clinical reasoning skills. All courses were followed by one-on-one sessions with the ToTs as well as In-Service training sessions conducted by the ToTs for their peers to further share the skills and knowledge gained in the courses.
- Four five-day courses have been conducted by the COPE Occupational Therapist Mentor with the paediatric and adult OTs, key doctors and physiotherapists. The topics covered were OT management for stroke patients, assessment and treatment for paediatrics, and postural management and oral motor skills.
- P&O training courses have been conducted by the Lao national Prosthetic Mentor, including tailored courses in the provinces to meet their immediate skill development needs.
- The quality control and management system in the P&O workshop at the PMRC has been strengthened with the introduction of a more detailed check-out procedure for the devices.
- P&O Audits have been conducted at all centres. The results showed the production is good with consistent or improving quality of devices in all centres.
- Personal development plans have been completed by the COPE Mentors with key PMRC and PRC rehabilitation staff for 2011 and will be reviewed annually.
- Medical English language training has continued throughout the year for 13 PMRC and COPE personnel with review test results showing significant learning for all but one student.
- Trainings on the treatment of clubfoot have been undertaken. A one-day course was conducted by the Prosthetic Mentor and a visiting orthopaedic surgeon for P&Os and PTs from all five centres. This was a part of a five-day training conducted by the visiting surgeon for Lao national surgeons on surgical techniques for neglected clubfoot. Following this the head Lao national orthopaedic surgeon conducted training at Xiengkhoung Provincial Hospital, with the Provincial surgeon who was unable to attend the workshop. A third surgical training was conducted in November with the visiting surgeon returning to conduct a one-week course, throughout which 10 patients received surgery. In addition, a P&O Cat II from PMRC trained Xiengkhoung P&O and PT personnel in casting for club foot in July 2011.
- A clinical governance committee has been established at the PMRC to guide the clinical development of staff, develop protocols and guidelines and facilitate the development of a referral-based and cross discipline approach to rehabilitation medicine. Titled the 'Core Clinical Group' (CCG), it is made up of the head doctors, physiotherapists, surgeons and management

personnel of the PMRC. The group has developed, approved and begun implementing a clinical care pathway for the management of patients with spinal pain that is based on the latest international standards of care. This is the first of a number of care protocols the group is to develop in the coming years.

Work plan for 2012

- Building government rehabilitation staff capacity building, including physiotherapy, occupational therapy, paediatric services, orthopaedic surgery and P&O, through a series of workshops and mentoring sessions.
- Shifting from a medical model of care to a patient-centred structure through multi-disciplinary trainings and the work of the CCG.

Key Challenges

A primary challenge continues to be creating a cultural change throughout the rehabilitation centres that has the patient at the centre of all services, ensuring the patient is well-informed to make proactive decisions about their own health. This will continue to be a challenge that needs to be addressed in 2012. Additionally, updating practise to international standards will continue to be addressed through capacity building trainings and mentoring as well as through the development of evidence-based care pathways for particular conditions by the CCG.

Objective 2: Service Provision

To ensure uninterrupted access to service for PWD by providing materials and meeting patient costs.

COPE continued to support expenses of P&O patients who are unable to pay for treatment and associated costs so that any persons with a disability, regardless of cause, can be confident of receiving rehabilitation care when they present at any of the five centres. From January to November 2011, COPE has provided support to a total of 1,193 persons with disabilities. This includes 730 men, 305 women, 80 boys and 78 girls. Of the total, 634 patients received a prosthetic device and 559 received an orthotic device, including 148 who underwent treatment for club foot – note treatment of club foot includes delivery of one orthotic. One hundred and thirty-seven were new prosthetic patients and 416 new orthotic patients, totalling 553 new patients in 2011. Of the total patients served in 2011, 258 were UXO survivors. The five centres served patients from every province across the country.

Work Plan for 2012

- Support provision of P&O services for those who cannot afford to pay for the services in the five rehabilitation centres

Key Challenges

A key challenge for the organization is increasing access to the services available. General data on disability in Lao PDR indicate that there is a significant number of people with physical disabilities who could potentially benefit from the services we provide yet are not accessing them. While the number of patients, new and returning, has increased throughout 2011 compared to the previous year, there are still members of the population not accessing the services that could benefit from them. As such we are currently conducting a series of village visits around the country to meet PWD to identify the barriers to access they face as well as work together to develop ideas to overcome such barriers. This activity will continue into 2012 and the results used to inform an internal review of the COPE Connect outreach project.

Objective 3: Infrastructure

Upgrading rehabilitation facilities at the five centres currently supported by COPE to ensure the P&O service can meet the increasing demand on services.

To support the continuation of services, COPE has undertaken refurbishments and maintenance of the PMRC and PRC P&O workshops and associated rehabilitation areas. This includes a major renovation of the PMRC P&O building. Half of the building has been demolished to be replaced with a new gait training area, training/meeting rooms, accessible bathrooms and offices for COPE and PMRC personnel. The remaining part of the building will be renovated in early 2012, including renovation to the roof that is a part of this grant.

The PMRC paediatric physiotherapy infrastructure was reviewed in June 2011 and a range of equipment has been provided, including wobble boards, stair units and other mobility equipment. The paediatric area at the Pakse Rehabilitation Centre has been renovated, fixing structural problems with the leaking roof and making it a child-friendly space. The physiotherapy, occupational therapy and paediatric rooms at the Xiengkhoung Rehabilitation Centre have been renovated, painted and fitted out with infrastructure to support improved patient care, such as privacy partitions, mirrors and wall bars.

Work Plan for 2012

- Conduct further assessments of Pakse and Savannakhet Centres for the renovations.
- Develop a schedule for renovations at the PRCs and implement, including; building an improved gait training area in Luang Prabung PRC as well as accessible toilets; and increase accessibility of the Xieng Khoung Centre through addition of hand rails, accessible toilets, privacy curtains and swing doors as well as increase health and safety through the addition of a wall to separate the workshop and patient/administration areas.
- Renovate the roof of the PMRC P&O workshop building

Key Challenges

- Receiving the appropriate approvals from our government partners in each Centre to undertake the highest priority renovations at the PRCs

Objective 4: Outreach

To facilitate referral between the networks of clinical services ensuring people with disabilities in Lao PDR can access the rehabilitation services that will improve their ability to participate in their communities.

The internal evaluation of the COPE Connect outreach project was initiated through a series of workshops of COPE personnel reviewing the successes of the project, areas for improvement and lessons learnt. One key area identified was the need to improve the link between patients being referred at a district clinical assessment and them attending one of the five rehabilitation centres for treatment. As such a survey was designed and has been conducted by the Social Work Graduate in two districts – surveying 18 people in Vientiane Province and 29 in Sekong Province - to engage those referred at clinical assessments in identifying the barriers they face to accessing the centres and also ways we can work together to overcome such barriers. Preliminary analysis of the surveys highlight the need for more detailed information for those referred to the services to take home and read, as well as additional information to build the confidence of those referred that the services will be free if you cannot afford to pay. Both barriers, and others that arise from further survey analysis, will be

incorporated in the COPE Connect evaluation process and the multi-year plan that will be developed in early 2012.

Work Plan for 2012

- To establish an effective and sustainable referral network throughout the country, continue the internal evaluation and review of the COPE Connect model. Implement revisions.
- Research the barriers that prevent people accessing the services through participation of people with disabilities.
- Develop more detailed information tools for people with disabilities to better inform them of the services available.

Key Challenges for 2012

Numerous barriers have been identified that prevent people from accessing the services; from lack of detailed and descriptive information about the services to lack of time to come to Centres, and so on. Addressing each barrier will be a significant challenge in 2012 and beyond to ensure universal access to the services available.

Objective 5: Involvement of Service Users

To promote the involvement and contribution of service users to ensure barrier free service provision

A survey is being conducted with P&O patients at the PMRC to review quality of care and impact of the service on patient's lives. The results will be collated in early 2012 once the surveying is completed.

A series of home visits have been conducted by the Social Work Graduate for paediatric patients in Vientiane Capital that have attended the PMRC for treatment. The visits provide an opportunity for the Social Work Graduate to hear from the patients/parents of patients of the barriers they face accessing the services and ways to overcome barriers. Results will be collated in early 2012 and further visits will be conducted.

Also see the survey discussed above in the COPE Connect evaluation that involves service users in the review/evaluation process.

Work Plan for 2012

- Conduct home visits of paediatric patients, including investigating the barriers to accessing the services
- Conduct surveys and a focus group with P&O patients at the PMRC to further ascertain feedback regarding the service
- Collate all survey results and work with the PMRC to review the services provided and implement positive developments

Key challenges for 2012

Increasing the participation of services users is an important aspect to our work however also offers a significant challenge to be able to create the most appropriate environment to encourage people to participate openly. Ensuring the surveys are cultural sensitive and conducted in a manner that encourages full responses will continue to be addressed in 2012.

Objective 6: Organisational strengthening

Develop capacity of COPE to proactively design, develop and implement sustainable services and fully monitor and evaluate service provision

Following the approval of the COPE Child Protection Policy in April 2011, a workshop was conducted in June for all COPE personnel by the Child Protection Officers from Save the Children Laos introducing the concepts of child rights as well as the new COPE policy and Code of Conduct to the team. All COPE employees, both paid and volunteer, are required to commit to the Code of Conduct upon commencing work with the organization.

The new financial management software has been rolled out in 2011 providing a system with greater management complexities. This will support the organisation to manage and report across a large number of donors and significant sized budgets. The system will be audited for the first time in early 2012.

The COPE Visitor Centre is a central part of the local sustainability strategy of the organisation. It has continued to grow and expand in 2011, reaching more than 1,100 visitors in November for the first time in one month. Donations and sales revenue have concurrently grown throughout the year. The Centre has received over 7,850 visitors from January to November this year and taken in 85,920 USD in donations alone from January to October through in-person and online giving. The Public Relations Mentor has supported the Lao national team to develop a new range of merchandise from local sources, including local disability cooperatives, as well as organize successful events, such as the Adieu Bombie Cup that marked the first anniversary of the Convention of Cluster Munitions entering into force. This grant further supported the sustainability of the Visitor Centre through the provision of funds for renovations to stop the Visitor Centre continually flooding during storms.

Work Plan for 2012

Continue to strengthen the organization capacity of COPE through;

- Adoption of a three-year strategic plan in partnership with our government partner, the PMRC
- Publication of the first COPE Annual Report
- Conduct a COPE Team Building and Planning workshop
- Review the COPE Expatriate Policies and publish a manual for all expatriate staff
- Continue to develop the COPE Visitor Centre as a key educational and fundraising tool of the organization, including beginning to phase out the expatriate role in the daily management of the Visitor Centre.

Key challenges for 2012

The COPE Visitor Centre is currently staffed by a COPE Public Relations Mentor (expatriate position), who manages the development and daily running of the Centre, and three full time Lao national staff. Building on the capacity building that has been undertaken in the past two years, the responsibilities of daily management of the Centre will be handed over to Lao national staff in 2012. An AYAD position is scheduled to support the Visitor Centre team from July 2012 to June 2013, although this role is not intended to be managing the Centre on a day-to-day basis but to support the continued strategic development of the project. This partial transition to local management will be a challenge to complete within 2012 and will be monitored closely to ensure the transition is smooth.

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