**F: FACILITATOR**

**R: RESPONDENT**

F: Chabwino, nde mmene ndanenera kumayambiliro kuja kuti cholinga chathu ndi chofuna kudziwa maganizo a chipatala pa nkhani, anthu ogwira nthito ku chipatala pa nkhani ya mmene chipatala chinakhonzekelera kulimbana ndi matenda a Covid, nde mungandilongosolereko zina zimene inuyo mukudzidziwa zimene achipatala anakhadzikitsa kapena achipatala mmene anakhondzekelera kuti alimbane ndi matenda a Covid komanso kuti atetedze anthu ogwira nthito kuchipatala.

Okay, so as I have already said ealier on, the aim of this study is to understand from the perspectives of health care workers about the implementation of Covid19 response strategies of the hospital, so can you tell me about some of the things which you know that the hospital had put in place or how the hospital was prepared to respond to covid19 as well as to protect health care workers.

R: Okay, itayamba Covid, kunali ndithu kukonzekera ndithu kunali kutiphunzitsa kusamba m’manja,kuvala ma mask, komanso anatipatsa zovala zozitetedzera ma PPE, zonsezo zinachitika komanso tinakonzekera kukonza ma ward amene ma staff amene angapedzeke ndi Covid adzikagona m’menemomo. Nde kumenekokonso kunali PPE yabwino ndithu, yokwanira, kuvala kwabwino kuti wina aliyense asangatenge Covid.

When Covid had just started, there was preparedness, they trained us about hand washing, masking up and we were given the PPEs, all that happened and we had also prepared the wards for staffs that would be comfirmed Covid positive, to be using that ward. So there was adequate proper PPE, dressing properly so that no one shoud contract Covid.

F; okay, mukati kunali ma training kukuphunzitsani, inuyo ngati munthu inuyo ngati ward clerk, munapitako ku training?

Okay, as you are saying that there were trainings and you were trained, as a ward clerk, have you attended the training?

R; Yeah, tinapita kukaphunzira.

Yeah, I went for training.

F; Kuti kumeneko?

Where?

R; timapangira ku college of medicine.

It was done at college of medicine

F; Inali training yayitali bwanji?

How long did the training take?

R; Inali training ya 3days.

It was for three days.

F: three days?

R: Yeah.

Yeah.

F; nde inuyo did you feel kuti munamva kuti I think training yi yandipatsa information yokwanira bwinobwino kuti ndithu ndikudziwa komanso nditha kupanga kudzitetedza ndekha komanso kutetedza anthu ena training inali sufficient bwinobwino m’mene anakukonzekeleranimo.

So, did you feel that you understood, as in, feeling that the training has given me adequate information to the point that you have a feeling that you can protect yourself and you can also protect others, was the training sufficient based on how they had prepared you.

R: training inali yokwanira ndithu kungoti nanga mmene mulili unabwelera aliyense anangokhala ndi mantha kuti kodi mmene zichitikiremu zikhala bwanji, zitachitika ndithu zitayamba tinayamba ndithu kudzisamala,kuvala china chirichonse chokwanira, training inali yokwanira, tinakwanira ndithu anthu tinaphunzira.

The training was adequate only that everyone was in fear looking at how this pandemic came in, and looking at how things will be like, so when it happened, we started taking care of ourselves, dressing properly, the training was adequate, it was sufficient and we got trained.

F: Ndi anthu angati…ndi ma training angati amene munapitako okhudzana covid?

How many people…how many trainings did you attend with regard to Covid?

R; awiri.

Two.

F; mwapanga attend ma training awiri?

You have attended two trainings?

R; Awiri.

Two.

F; kusiyana kwake kunali kotani?

How did they differ?

R; yoyambilira amkafotokoda za mavalidwe mmmene tingamavalire, yachiwiriyi amafotokodzanso ndi mmene zinthu zimasinthira, amatiwudza kuti zinthu zasintha, tiyerekedze zoti maliro azikayika azibale chani chani , zonsezo zatani zasintha, mwina zokuti maliro sakalowa ku mortuary zonsezo amatiwudza mu training yachiwiri kuti zonsezo zasintha monga ngati mmene amatiwudzira training yoyamba chifukwa yoyambilira amatiwudza zakavalidwe ndikuti maliro azikayika achipatala nde training yachiwiri amatiwudza kuti zasintha maliro azikayika okha achibale, zikachitika azikalowa kaya ku mortuary kenako kukatenga kumapita kuti, kumene angakayike abale koma poyambilira achibale samayika amayika achipatala.

The first training was addressing the issue of how we can dress, the second one addressed the changes that had happened, they told us that, things have changed for example, that the dead bodies will be handled by the relation, perhaps that the dead body will not go to mortuary, we were told in the second training that things have changed because in the first training, we were told about how to dress and that the dead bodies will be buried by the health workers. So in the second training, we were told that, things have changed, relations will be burying the dead bodied and the dead body can even be put in the mortuary and the relations can come and get it, and burry him/her but initially the relations were not burying the deceased, the health workers were the ones who were burying him/her.

F; okay.

Okay.

R; yeah

Yeah.

F; okay, mukudziwa ngati pali committee kapena team imene achipatala anakhadzikitsa. Yoyang’anira kapena kuyendetsa nthito za Covid pachipatala pano?

Okay, do you know if there is a committee or team here at the hospital whih was set for the management of Covidd19 here at the hospital?

R: Team imeneyo iripo koma singalephere ikuyenereka kukhalapo chifukwa chokuti zinthu kuti zikhale pamenepa sizidzingalephere,

There must be that team because for things to come up like this, I think there must be a team.

F; Smiles…

R; Smiles…

F; ndifunse kuti ngati mukuyidziwa inuyo kapena ngati m’mmene mukunenera kuti singalephere kuti mwina mukungoyankhula ngati kuti mwina kungoganiza kuti mwina iripo komano to your knowledge, munawudzidwapo kuti committee iyi, ma chairman ma member ndi awa amene akuyendetsa za Covid pachipatala?

As in, I am asking if you know of a team like the way you are saying that, there must be a team, you are talking as if you are just thinking about its existence, but to your knowledge, were you told that this is a team, these are the chairman, members responsible for Covid19 here at the hospital?

R: Committee ilipo koma ma members nde sindikuwadziwa amene akuyendetsa ndi ndani nanga si ifeyo ndi ongoyitanidwa kuti tiyeni ku meeting mukaphunzire tiyeni uku mukaphunzire, ma matron ndi amene amatiwudza kuti mulowere uku mukaphunzire za Covid.

The committee is there but I dont know about its members responsible for it because they just call us to go to a meeting to learn something, metrons are those in charge of telling us where to go and learn about Covid.

F: komano mu nthito zake zimene akugwirazo mukudzidziwa bwinobwino mu anthu a acommitee?

But do you know about the roles that the committee do?

R: A committee?

A committee?

F: eeh

Yes.

R; A committee ndi ma matron, ma metron ali nawonso mu committee.

Metrons are metrons, metrons are also in a committee.

F: eeh, komano okay chabwino. Nde mmene mukuneneramo kuti munaphunzitsidwa mavalidwe a PPE, kusamba m’manja, nthawi zambiri, ndinene kuti kuphunzitsidwako kumakhalapo eti komanso kuchita kumakhalaponso nde mukawunikiramo, osati mudziwunikile nonkha komano ndi anzanu onse amene mumagwira nawo nthito pachipatala pano mukhutha kuwona kuti akutha kutsatira zimene zinaphunzitsidwa kuti kusamba m’manja kawirikawiri, PPE, ma distance chani chani, if you look pakati pama staff zimene zinaphunzitsidwazo akudziyika mu practise kuti akudzichita kapena penapakebe akuziwona kuti ngakhale tinaphunzitsidwabe koma pali anzanthu enabe okuti zinthuzi sakudzitengera serious?

Yes but, okay, alright. So as you are saying that you were trained on proper PPE, washing hands, so most often times, I should say that, you get trained, right, and then there is also implementation, so if you look at how you and your collegues do your work here at the hospital, do you think that they are following what they were training with regard to washing hand regularly PPE, distancing and the like, if you look at the staffs are they practising what they were trained at or somehow they feel that though we were trained but there are others who are not taking it seriously?

R; ngakhale tinaphunzira koma pali zinthu zina upedzeka kuti mask, kusamba m’manja nde timayesesa koma social distance nde sitiyesesa sinanga si timapedzeka kuti mwina ukumuwudza chinthu mnzako, unong’onedze, utani, iih takhala mu office tonse tikufuna tidzidya. Social distance nde sitheka koma na ku nkhani yokuti kusamba m’manja, ma mask, zovala, tikumayesesa ndithu.

Although we were training but there are certain things that we follow like masking up, washing hand but for social distancing, is difficult because you might sometimes tell your colleague something by whispering into his ears and sometime we sit together in the offices while eating. Social distance has been a failure but washing hands, masking up and proper PPE, then we really try.

F: mmh

Okay.

R: Eeh

Yes.

F; okay.

R; yeah.

F; Ndi liti limene munaphunzitsidwa zimenezo?

Okay, so when did you learn about that?

R; Za PPE?

About PPE?

F: Eeh, ku training kumene munapitako unali mwezi wanji umenewu?

Yes, which month did you attend the training?

R; Munali mu May.

It was May.

F; mu May.

In May.

R: Yeah.’

Yeah.

F: Nde china chimene ndinganene chimene ndingafune kufunsa ndi chachidziwikire kuti miyezo ngati ya March, April, May, eamh, kutsika m’musi kumafika kuno mu Ocotober, zinthu zambiri zasintha?

So the other thing that I would like to ask is something very obvious tha from March, April, May, amh, going down until October, a lot of things have changed?

R: Eeh zinthu zambiri zasintha.

Yes, a lot of things have changed.

F; Emh, nde ndikufuna kuti muwunikire kuti mmene analili anthu nthawi imene ijayi anthu ataphunzitsidwa ndi panopa, mukuwona ngati kuti zinthu zikusintha kuti staff ilibe serious ndi zinthu ngati zimenezi kapena angowona kuti aamah, zinthu zasintha?

Emh, so I want you to look at how people were acting after the training and now, do you think things are changing as in, are staffs still serious with things like these or they just feel like amh, things have changed?

R: nthawi yoyambilira imene timkaphunzira kumbuyoko anthu amawona ngati Covid kulibe eti.

Previously, people thought that there was no Covid when we got trained in the beginning

F; mmh

R: Timkangowona kuti iih basi anthu akungonene akungonena tinayamba kudzindikira anthu atatu agonekedwa ndi pamene tinayamba kudzindikira kuti mmh, kani.

We thought that people are just saying but we then realised when the three patients were admitted and we realised that mmh, is it so.

F; Atagonekedwa kuno kuchipatala?

When they got admitted here at the hospital?

R; Eeh. Atagonenekdwa kuno kuchipatala ndi pamene tinayamba kudzindikira kuti Covid watani? Covid wabwera. Tinayambano kukhala chani, kukhala serious pamene paja nde kenako apapa ma staff tatayilira kwambirri tikamalowa pa gate po sitikumayedzetsetsa ma temperature ma galimoto amangolowa. Tikakhala mu office upedza kuti wachosa mask basi ukungopanga zako basi ukakhala kuti ukutuluka ukukawonana ndi patient ndi pamene umavala mask. Koma ma staff ambiri nso mu corridor amangoyenda opanda ma mask. Nde apapa tatayilira ndinthu kaya chifukwa chokuti tikumamva kuti dzuwa nde tatayilira nkhani ya PPE ya Covid.

Yes, when they got admitted here at the hospital, that’s when I realised that Covid has come in and then we became serious but now staffs have relaxed, when we are passing the gate, we noo longer check our temperatures, cars just get in and when you are in the office, you remove the mask and you just do anyhow, you wear the mask only when you are going to meet the patients and most of the staffs just move in the corridors without masking up. So I think we have relaxed now maybe because its summer and we have relaxed with the issue to do with PPE.

F; ndimafuna ndikufunse kuti mukuwona ngati kuti chapangitsa anthu kuti ka mantha kapena kukhulupilika kumene anali nako poyamba kwachepano? Chingakhale chani?

I wanted to ask about what has made staff’s fear or the dedication they had to minimize? Why is that so?

R: koyambilirako timakhulupilika chifukwa chokuti ma figures amakwera

We were dedicated in the beginning because the figures were increasing.

F: ma figure amakwera

The figures were increasing.

R; koma panopa m’mene tikumvera ma figure kuti iih iyayi ali apa, ali apa nde aliyense wangokhala ngati kuti tangokhala relex kuti aah Covid watani, Covid watha.

But as of now, as we are hearing about the estimates figures so everybody has relaxed feeling that Covid had come to an end.

F: mmh

R: Yeah, koma poyambilira iih zimavuta ndithu.

Yeah, but it was really difficult in the beginning.

F: mmh

R: mmh

F: okay, munagwirapo direct ndi ma nurse kapena ma ward kapena ku tent ko ndi anthu amene akugwira direct ndi anthu a Covid?

Okay, have you worked direct to the ward or to the tent with those that are working direct with Covid patients.

R; yes, ndinagwirapo, ndinali ku ENT.

Yes, I have worked, I was at ENT.

F; okay, ku ENT mwakhalapo nthawi imene kunali ma patient.

Okay, you worked at ENT when there were patients?

R: ndikumene ndimagwira chifukwa chokuti kunoko tinatseka.

That’s where I was working because it was closed here.

F; Okay, kunoko munatseka.

Okay, you closed here.

R; Eeh .

Yes.

F; nde enanu anakutumidzani kumeneko?

So, some of you were posted there?

R; Kunoko tinali anthu atatu amene tinapita uko koma enawa anali kunyumba.

Three of us were posted there and the rest went home.

F: Mmh.

Mmh

R: Eeh.

Yes.

F: ah, okay, nde chimene ndikufuna ndione, muone muwunikire chipatala chathuchi eti, m’mene chinamangidwira ndi mmene timasamalira anthu a aCovid, tikanakhla kuti, mwina sitinafike pa size imeneyo, koma tikanakhala kuti tafika pa size yokuti ma number akuchuluka kwambiri ngati mmene alili mayiko akunja maiko azungu mukuwona ngati kuti m’mene chilili chipatala chathuchi, infrastructure yi ma room chani chani chinali prepared, ndi chokwanira kupanga handle ma number ochuluka ama cases a covid kapena ngati sichili chokwanira mukuwona ngati ma challenges ali pati ndi pati pa structure chimene chilili chipatalachi?

Ah, okay, so, what I would like to know is that, you should look at our hospital, right, the way it was built with regard to the management of Covid patients, had it been that, perhaps we didn’t reach that size, had it been that the numbers were increasing like the way it is in abroad, in European countries, do you think the way our hospital is, the infrastructure, the rooms and the like was prepared, is prepared to handle the high numbers of covid cases or if it is inadqeate, where do you think are the challenges in terms of the structure of this hospital?

R; Ndi m’mene ulili mulili wa Covid, chipatala chi chimachepa chifukwa chokuti tinali sitikukonzekera kumapedzeka kuti ma ward akuchepa, ma patient kusowa powayika koma kukonzeka tinakonze koma sikuti tinakonzeka kuti zida zogwirila nthito zinali zokwanira ayi, zida tinalibe zinali zopelewera timachita kumapemphapempha anthu kumatithandidza koma pa ife tokha tinalibe zokwanira.

The way Covid pandemic is, the hospital was small because we were not prepared and the wards were few, and there was no place to put the patients, we were of course prepared but the resources were inadequate, we never had enough resources and we could ask people to support us but we never had resources on our own.

F; mmh

R: Yeah, komanso malo amene analipo anala ochepa kuti ma patient ena athanso kukhala pansi mwamwayi kuti tinadzatsegula ma ward awiri, tinachita kukapemphanso ku ward ina kuchotsako ma patient ena kupititsanso ku ward ina.

Yeah and the place which we had could not accommodate the patients because some patients could be put on the floor but luckily, we opened two wards but we had to ask for that ward and we had moved patients from that ward to another ward.

F;Ku ward yanji imeneyo?

Which ward?

R; ku 3A chifukwa chokuti ku ENT kunachepa then anadzatsegula ku 3A kuchotsa ma patient a TB kuwaphatikidza ku ward ina choling achokuti space yavuta eti.

3A because ENT was full and they opened 3A where TB patients were shifted from their ward and they mixed in another ward because there was a challenge of space.

F; Ma number a anthu ogwira ntchito kumeneko mungawalongosole motani kuti kukwanira kwake?

How can you explain about the numbers of the staffs there in terms of their sufficiency?

R: Pa number ya?

The number to do with?

F: Tinene kuti mukuona kuti panali vuto pa anthu ogwira nthito pamenepopo in terms of kuti anali okwanira kapena ayi?

As in, so you think that there was a challenge for staffs in terms of their sufficiency or not?

R: ma staff?

Staffs?

F; Ma staff

Staffs.

R: ayi ma staff sitinali okwanira tinali ochepa sitimakwanira nde timadzafika kuti mmalo mokuti ukapume sumapuma nde ndinali ochepa.

The staffs were insufficient, we were few and it reached an extent that instead of going to rest, we could not rest, so, we were few.

F; Okay, nde mukati munali ochepa pamenepo ndi pamene ndikufuna ndimvetsetse kuti kodi si ma staff ake omwewo amene nthawi zonse mumagwira kuchipatala?

Okay, so, when you say that you were few, that’s where I would like to understand as in are you not the same staff working at the hospital?

R; yeah, tinali tomwefe.

Yeah, the same staff.

F: Okay, tsopano chinachititsa ndi chani kuti nthawi imeneyoyo kuti mupange feel kuti ma staff ndi ochepa?

Okay, so what made you feel that you were few during that time?

R; Chifukwa nthawi imeneyoyo Covid imkayamba anthu amakana kukagwira kumenekoko aliyense anali ndi mantha eti nde munthu amene anapita kumeneko anadzipereka ndi mtima wake wonse kuti ineyo ndikufuna ndikagwire nthito imeneyo nde chinthu chodzipereka ndi chinthu chochita kusankha ndi zinthu zosiyana nde ndi mmene mulili unalili aliyense anali ndi mantha nde nafe tinangodzipereka kuti ife tikatani tikagwira. Nde modzipereka kupedzeka kuti staff ija yathani, yachepa. Eyetu.

People were refusing to work there when the Covid had just started, everyone had fears and people who were working there, were very willing that they want to work there. So, something that you do willingly differs from something that one chooses. So, based on how the pandemic was, everyone was scared, so, we also worked there willingly. So, since we worked willingly, the number of staff got reduced. Yeah.

F: Nde chimene mukutanthaudza ndi chokuti kuchepa kwa ma staff kunali chifukwa chokuti enano samafuna?

So, you mean to say is that, the insuffiency of staffs was due to the fact that others were unwilling.

R; Amawopa

They were scared.

F: Amaopa

They were scared.

R: Eeh, anthu amayiwopa.

Yes, people were scared about it.

F: nde amene anali willing kuti ine ndipita anali ochepa?

So, those who were willing to go there were few/

R; eeh.

Yes.

F: koma sikuti kunalibe ma staff iyayi?

But that doesn’t mean that the staffs were not there?

R; Iyayi ma staff analiko, analipo of course eti komanso si tonse kuti tingakagwire kumenekoko ndekuti nonse kuti muchoke ndekuti ma department nde kuti ma ward anthu ena asafala. Apopo pakusonyedza kuti staff ndiyochepa ndekuti sikutani, sikukwanira.

The staffs were there, of course, they were there, but all of us cannot work there because if all of you go there then other departments, other wards, other people will suffer. And that shows that the staffs are insuffient, its not enough.

F: okay.

Okay.

R: ee

Yes.

F: Okay, Staff imeneyo mukuti sikukwanira mukuwinira ma nurse okha kapena ma carders onse?

Okay, so those staffs which you are saying that, do you refer to the nurses or all carders?

R: ma carders onse.

All carders.

F; okay, nthawi imene mwakhala mukugwira kumeneko olo panopa kuti mukugwra kunono, munapedzako, munamvapo kapena kukumana ndi nthawi yokuti ma patient a Covid kapena kuti mukusowa mankwala chifukwa chokuti chipatala mankwala akufuna kuti awapatse kulibeko?

Okay, during the time you were working there or even now, that you are working here. Have you encountered, heard or experienced a time whereby there was no medication to be given for Covid patients.

R; Kumvako?

Heard about it?

F; eeh, kuti makamaka nthawi imene mumagwira ku ward nthawi imeneyoyo munayamba mwakumana nawo kapena kumva mwina ma nurse akukambirana kuti ma patient wa mankwala awo kulibe?

Yes, when you were working in the ward, have you experienced or have you heard nurses discussing that medication for Covid patients is out of stock?

R; Ayi, palibe tsiku tinakambirana zimenezo.

No, there is not time we had discussed about that.

F; Chabwino, my funso langa lomaliza pa section imeneyi yoyambilirayi ndiyonena kuti mukawunikirapo pa zonzezo zimene mwandilongosolerazo eti, ndi chani chimene mukuwona kuti chinali challenge chachikulu ndi mmene chipatala chinakhonzekelera kapena ndi mmmene mumasamalira anthu odwala Covid. What was the biggest challenge?

Okay, so my last question in this section is as follows, overall, what do you think was the biggest challenge based on how the hospital was prepared or when you were managing the Covid patients, what was the biggest challenge?

R; like?

Like?

F; kuti mavuto akulu kwambiri amene mukuwona ngati kuti chipatala chikuyenera kuti chikonze ndi mmene anakhodzekekera nthito yosamalira ma parient a Covid? Chinthu chake chingakhale chani?

Like the biggest challenges that you think the hospital needs to address with regard to how the hospital got prepared in managing Covid patients, what could be that thing?

R: mavuto ambiri analipo nanga si matendwa ngati anabwera mwadzidzi eti nde chipatala chinali chisanakhonzeke one, zovala zimatichepela, two, zida zogwilira nthitonso zimachepa kumakhala kuti kulibeko, zima PPE zimene timakatenga pena kupedzeke kuti kulibe, tivale pena mmene tingavalire, choncho ndi mmene zimakhalira.

There were so many challenges because this pandemic just came suddenly so the hospital was prepared enough because firstly, there were inadequate clothes, secondly, the resources were also few because sometimes we could not get the PPEs and in so doing, we could just dress anyhow, so, it was happening like that.

F: nde amenenewo ndi ma challeneges ena amene mumakumana nawo.

So, so those are some of the challenges you were facing?

R: ,mmh

Yes.

F: Chabwino, mafunso anga achiwiri, ndiokhudza chisamaliro chimene chimaperekedwa kwa ma patient, ndanena kale kuti mwina sitinafike pa level yokuti ma patient achuluka kwambiri, eti?

Okay, my other two questions are asking about the care for the patient, I have already said that, we did not reach an extents whereby the patients were not many, right?

R; mmh

Yes.

F; Komano mukayang’ana ndi mmene chilili chipatala chathuchi, tikanafika level imeneyoyo kuti ma patient kuchipatala kuno ayamba kudzadzaa kuposelanso mulingo umene achipatala akanatha kusamalira ma patient, mukuwona ngati kuti chikanachitika ndi chani komanso achipatala akanachita chani, amayenera kuchita chani kuti ngakhale ma patient achuluka koma wina aliyense akulandira chisamaliro mokwanira?

So, looking at the way our hospital is, had it been that we had reached an extent whereby our patients were coming a lot here at the hospital and is exceeding the limited number that could be managed by the hospital in managing the patients, what do you think could have happened and what could the hospital do, what were they supposed to do despite that the patients are many and they are all receiving adequate care?

R; Chimene chimafunika kuti ma patient aja achuluka kuti alandire chithandizo chokwanira pamafunika kuti staff ichuluke, kukufunika kuti staff ichuluke alembereponso ma nurse ena, ma ward clerk kaya ndi ma patient attendant kuti ndithu ma patient adzilandira chithandizo chokwanira chifukwa mulili umenewu umafunika kuti ndithu ma patient azilandira mankwala okwanira bwinobwino, ma eqeuipment akhaleponso okwanira bwinobwino kuti ndithu ma patient alandire chithandizo chokwanira.

For the patient to receive adequate care when they are many, there was a need for the staffs to be more, they should employ more nurses, ward clerks, patients attendants to enable the patients to receive enough care because with this pandemic, patients were meant to receive enouh medication, there als has to be enough eqipments for patients to receive enough care.

F; Komano ngati ma patient akanati achululuka kapena kuti kutsogogolo kuno kuti…ndikudziwa kuti apapa patient wina aliyense amabwera ku Queens, zipatala zina za private sidzimasunga ma patient a Covid, mukuwona ngati kuti chikuyenereka kuchitika ndi chani kutati kutsogolo kunokonso kwabwera mulili ngati umenewowo, mukuwona ngati anthu amene ali ngati ma VIP, eti, anthu amene ali ngati olemekedzeka m’ma ujeni mwathumu, m’amadera mwathumu, chisamaliro, pachipatala panopa pakuyenereka chisamaliro kukhala bwanji kwa anhu ngati amenewowo?

But had it been that the patients were more or if in the near future……I know that every patient was meant to come to Queens and no any other private hospital could admit covid patients, what do you think should be done in the future if there is another outbreak, what do you think about VIP, people of high profile in our communities, how can people like these be treated here at the hospital.

R: Chimene chikufunika ndi chokuti mwina bwenzi patapedzeka malo mwina ndikumanaga chipatala china, chipatala kumanga special for mulili umenewu wa Covid, eya akamanga chipatala chimenechocho alembetso anthito ena kuti cholinga chithandizo kwa ma patient chidzichitika chifukwa panopa palibe malo kumene kumachitikirako ndikokuti ndikochita kupempha ku ENT, ndi chipatala cha eni ake, komanso ku ward kumene tinasunga ma patient ena kupita ena ndi ward nso yama patient nso enawo nde zikuwoneka kuti malo palibepo bola atamanga chipatala china special for mulili wina uriwonse umene ungabwere kuti anthu azikatani, azikagona ngati kumenekoko.

I think what is needed is that; there would have been an existence of the hospital special for Covid, and after they have built the hospital then they should employ more staffs to help manage the patients because there is no space here and the place that we are using here belongs to ENT, it is their hospital and this other ward also belongs to other patients. So, it seems like we don’t have a space, so there is a need to build a special hospital for any pandemic that will come in the future so that people should be put there.

F: komano funso langa linali lokhunzanso kuti mukuwona ngati kuti anthu omwe ali olemekedzeka akuyenera kulandira chisamaliro mosiyana ndi anthu enawo a wamba akabwera kuno kuchipatala?

But my question was about the VIPs, do you VIP should be treated differently with local people at the hospital?

R; mmh, chisamaliro chimayenereka kukhala chofanana chifukwa moyo wa munthu wina uriwonse ndi ofunikira. Eeh pasakhale kusankha kuti uyu ndi bwana uyu ndi munhu wamba , aamh, chisamaliro ndi chimodzi tiyenera kupanga attend ngati patient aliyense ngati munthu basi.

Okay, the care needs to be equal because each one’s life is important. There should be any discrimination among people that, this is a VIP and ths is a local person, amh, the care should be the same , we need to attend all of the patients as human beings.

F: gawo lina limene ndikufuna ndikufunseni, inuyo mukamagwira nthito pachipatala pano molingana ndi m’mene ulili muliliwu wa Covid komanso ndi m’mene chipatala chinakhonzekera kutetedza anthu, ma staff ndi odwala, kugwira nthito pachipatala pano ndi nkhani ya Covid, mumawona ngati kuti moyo wanu uri pachiopsezo kapena ayi, mungalongosole bwanji pamenepo?

The other section that I would like to ask you is that, when you are working here at the hospital and considering the level of preparedness of the hospital to protect people, staffs and patients with regard to Covid outbreak, do you think your life is at risk or not, can you explain to me on that?

R: Kugwira nthito pachipatala ndi mmene mulili ulili sikuti moyo wanga uri pa chiopsezo. Zikakhala zida zogwilira nthito bwinobwino sikuti iweyo ungakhale pachiopsezo. Kufunika zida ndithu, tivale bwinobwino, tidzisamalira mmene timanenera kuti tisambe m’manja chani, tivale ma mask penapaliponse sikuti moyo wanga ungakhhale pachiopsezo.

Working here at the hospital during the Covid outbreak does not mean that my life is not at risk. If the resources are adequate, you cannot be at risk. There is a need of having the resources, dress properly, taking precautions like washing hands, masking up anywhere, then my life cannot be at right.

F: mmh

R: mmh

F: komano mmene mukulongosoleramo mukunena kuti patakhaal kuti pali zida zonse zozitetedzera zokwanira moyo wanu sungakahle pachiopsezo.

But you are saying that your life cannot be at risk provided that there are necessarly epuipments for protection.

R; mmh

Yes.

F; Chimene ndikufuna kuchidziwa ndi chonena kuti panopa mukamawona mmene chilili chipalatalachi, zida zimene ziri nazo kapena kukhonzekera kumene achipatala anakhonzekera, mukuwona kuti moyo wanu uli pachiopsezo?

What I want to know is that, if you look at the way the hospital is, its resources or the level of the hospital’s preparedness, do you think your life is in danger?

R: yeah, panopa moyo wathu iri pachipsezo chiifukwa chokuti zogwira nthito zina ndi zina palibepo ndi mmene ma department mwina ndi mwina mulibe, mulibe zida zogwilira nthito nde pali chiopsezo kwa moyo wa ma staff.

Yes, my life is at risk because we still have shortages of some equipments and in some departments, there are no resources so the life of staffs is at risk.

F: Okay, inuyo ngati data clerk, mukuwona kuti moyo wanu uri pachipsezo motani chifukwa inuyo nthito yanu kwenikweni si yongolowesa data ndikupanga zina ndi zinazo. Nde mukuwona ngat…chifukwa anthu atha kumaganiza kuti munthu amene ali pachiopsezoo kuchipatala ndi nurse ndi dokotala.

Okay, as a data clerk, how risky is your life because your work is just about entering data and other things. So, what do you think……because people might think that those that are at risk in the hospitals are the nurses and the doctors.

R: No, ifenso ma clerk, timakhala contact ndima patient chifukwa ifeyo ndi amene timatenga information kwa patient yonse yofunikira yachipatala, ma data onse omwe anthu amafuna ife timakhala close ndi patient nde ifenso tiri pachiopsezo chifukwa ifenso ma clerk tilibe zida, ifetu zida nde tilibilite pamenepa nde timango…nanga si timagwiranso book la patient komanso tiyankhulane naye, zonsezo tilibe nde timangokhala mmene tavaliramu nde ifenso tiri pachiopsezop ndithu.

No, as clerks, we are also in contact with the patients because we are the ones who take the needful information of the patients here at the hospital and all the data needed by people. So, we become close to the patients and we are at risk because as clerks, we don’t have any resources and we just…..becuase we touch a patient’s book , we talk to the patients, so, we dont have all that and we just be like the way we have dressed here so, we are also at risk.

F; nde mukuona ngati kuti ma clerk kuti nawonso atetedzedwe m’chipatla munomo mukuwona ngati kuti ndi chani chimene chikuyenerea kuchitika?

So, what what do you think needs to be done to protect the clerks here at the hospital?

R: chimene chikufunika ifenso nafe atipatse PPE yose yokwanira nafenso tidzivala mosamalira.

There is a need to supply the PPE to us, the full kit, we should also be protected.

F: Okay, koma as of now chimene mumapatsidwa ndi chani?

Okay, as of now, what are you are you supplied with?

R: Ifeyo timangovala mask kukamwa ndi ma glove basi.

We just wear masks and gloves.

F: Mmh, zimenezozo kuti tsiku ndi tsiku zimapedzeka?

Okay, are those available everyday?

R: Zimenezo ndi za tsiku ndi tsiku ndi za daily zimenezo olo Covid isanabwere ndi zimene timatani, timavala, timapanga.

Those are available everyday and we are also doing that, wearing that even before the outbreak of Covid.

F: Mumavala.Okay, mukamakhala panopa nkhawa yanu kwambiri imakhala yotani? Kapena ma fears amene mumakhala nawo mukamagwira nthito yanu tsiku nd tsiku, muli ndima fears, muli ndi ma fears ngati muli ndi ma fears, ma fears ake amakhala otani?

You were wearing that. Okay, so what are your greatest fears now? What are your fears that you have when you are working everyday, do you have feras, do you have fears, If you have fers, what are those fears?

R: Nkhawa yathu imakhalapo nanga si chifukwa chonena kuti panopa kwambiri kuyeza pa gate po kwasiyidwa.

We also have fears because as of now, they have stopped doing the screening at the gate.

F: Pa gate sakuyedza?

They are not doing screening at the gate?

R: I think ndinene kuti pa gate po sakumakhalapo a night ndiye ma patient aja ena amalawilira kuti ndikakhale kutsogolo nde amapedzeka kuti alowa kale ali mkati nde apa gate aja akamabwera ampedzeka kuti anthu aja alowa sanatani, sanayedzedwe nanga si aliyense amafuna kuti akakhale kutsogolo nde akamabwera 8 oclock amapedza kuti anthu ena alowa kale, ma guardian nso alowa mchipatala akawona ma patient atuluka, asanatani, asanayedzedwe nde pamenepo ndi chiopsezo chachikulu.

I think I should say that, no one stays at the gate during the night so some patients come early to the hospital so that they should be the first ones to seek medical attention, so, they will enter and when those doing the screening come, they will find out that more patients have already entered without being screened since everyones needs to go early and get help eary so when they are coming 8 oclock, they find that some people have already entered, the guardians have already entered to visit their patients and left without being screened so, that’s the biggest risk as well.

F: mmh, ndekuti amatha kukupedzani uku, amatha kukupedzani kuno pamene pa gate angodutsa osayedzedwa.

Okay, so they might find you here while they have just passed through the gate without being tested?

R: Eya, pa gate anangodutsa nanga si amafika half seven pa gate pamene munthu wachoka kutali walawilira eti walowa six oclock pamene wapagate sanabwere timadzawapedza ali pa line koma ukuku sanatani, sanayedzedwe. Nde chimenecho ndi chiopsezo chachikulu chifukwa sitikudziwa kuti kodi anthu amene aja ali bwanji.

Yes, they just pass through the gate because they arrive at half past seven and yet the patient has come ealier to that time maybe he/she come at six oclock yet the one at the gate hasn’t come. So we get them here and they haven’t been screened. So that is also a biggest risk because we don’t know about their status.

F: Yeah.

R: Ehmhm.

Sure.

F: Mukayang’ana moyo wanu before covid ndi isanabwere Covid ndi mmene mumagwilira ntchito ndi m’mene chiyambire Covid mukuwona kuti pali kusintha kulikonse mu nthito yanu?

Looking at your life before Covid outbreak as in how you were working and looking at it after the commencement of Covid, is there any change in your work?

R: Mu nthito yathu ifeyo pali kusintha chifukwa chokuti si tikumagwira mwa mantha chifukwa chokuti tilibe zida mmh, tasiyana ndi mmene timkagwrlira covid asanayambe kuti aah tikugwira nthito bwinobwino koma panopa kungobwera mulili umenewu tikugwira ndi mantha chifukwa chokuti zida ndi zosakwanira.

There is change in our working because we are working with fears because we don’t have resources unlike the time we were working before Covid, because we could just work knowing that its part of our work but after the Covid outbreak, we are working with fears because we don’t have enough resources.

F: okay, komano ngati inuyo mmene munadziperekera kuti ine ndikagwira ku ward ya Covid ku ENT, ndi chani chimene chinakulimbitsani mtima pamene anthu ena amawoneka kuti anali ndi mantha, inuyo mantha munalibe?

Okay, but you willingly said that you will work at Covid ward at ENT, what gave you the courage to do so yet others were scared, were you not afraid?

R: ineyo mantha ndinalibe ineyo cholinga changa….

I was not scare because my aim….

F; kuseka…

Laughs…

R; ineyo mantha ndinalibe ndinali okuti aah ndikathandidze anthu kumenekoko chifukwa ine nthito yanga ndiyachipatala, nanga tikapanda kupita azibale athu, ena andi ena nanga aziwathandidwa bwanji.

I was not afraid because my aim was to help people there because I am a health personnel and I was like, if I don’t go and work and help people, who will then help them.

F: koma anthu kunyumba anadziwa kuti asisi kaya ndi a mom akugwira nthtio ku ward ya Covid?

But people at home knew that our sister or our mom is working in the Covid ward?

R: Eeh, amadziwa.

Yes, they knew.

F; Anadziwa?

They knew?

R; eeh, anadziwa.

Yes, they knew.

F: Anzanu enanso ndi ena anadziwa?

Your friends also knew?

R; eeh.

Yes.

F; anthu amakhala ndi maganizo otani…kapena relationship yanu ndi anthuwo inali yotani kapena kuti anthuwo anadziwa kuti inu mukugwira kuchipatala, ku chipatalako kuli anthu a Covid .

What were their thoughts….what was your relationship with people when they knew that you are working at the hospital and there are covid patients.

R; Azinzanthu ena amathawa eti, kuti eeh wa Covid wa Covid pena pamafika kuti ku church osatani, osapita, iih Covid covid amkangoti achipatala kukhala ngati kuti tiri ndi Covid anthu amayankhula choncho eti nde tikayenda tikakumana ndi azinzanthu azibale chani amangoti iih achipatala muli ndi Covid, iih achipatala muli ndi Covid, anthudi amakhala ndi mantha komanso amadandaula kuti kodi mupulumuka koma ifeyo tinadzipereka monga mogwira nthito kuti tikagwire nthito kumenekoko.

Our friends were running away from us, they could say that you are a covid person, and sometimes I could not go to the church, they were saying that health workers have covid, people were saying that, so when we go out, our friends and relations could say that health care workers have covid, that we have covid, soo people were afraid and were concerned if we would survive but we had willingly gave ourselves to work there.

F: okay, nde panopa ndi mmene mukugwilira nthito komanso molingana ndi panthito yanu ngati inuyo clerk wa ku ward, support imene mungafune yokhudzana nthito yanu kuti ikhale ngati mudzipanga feel kuti muli protected bwinobwino kuti mugwire nthito ndi mtima momasasuka ngakhale kuli Covid, support, chinthu chimodzi chimene mungafune kuti to support you pa nthiyo yanu chingakhale chani.

Okay, so, as you are working, what kind of support would you need so that you should feel that you are well protected so that you should work freely despite that there is Covid, What is the one thing that could be done to support you in your work?

R: monga ifeyo ma clerk akanatipanga support kuti one, atipatse chovala ngati chi gown, ma mask ndi omwewo tiri nawo komanso ma glove ndi omwe timavalawo koma chimene chikuvuta ndi chi gown choti tipamge cover kunja ndi chimene zikukhala ngati kuti zikutivutilapo.

I think the first thing that they should support us with is that gown, of course we use the same masks and the same gloves but our challenge is the gown that will enable the coverage of our clothes.

F: okay, so you feel kuti mukufunikabe osati zovala zanuzi koma mudzikhala ndi gown.

Okay, so you feel like you need a gown and not using your clothes?

R; Ayi osati zovala zathuzi koma tidzikhala kuti tasintha tidzikhala ndi chi gown pamwamba. Yeah.

No, not our clothes but we need to change to put a gown on top. Yeah.

F: ma staff amene akugwira ku Covid ward ndi madera enawo kusiyana kwawo ndi kotani interms of kutsatila njira zopewera Covid akamagwira nthito?

What are the differences between staffs working in the ward and those that are working in other wards in terms of following the preventive measure of Covid?

R; ifeyo monga ku Covid ward timatsatila njira mavalidwe timavala bwinobwino, timakhalanso social distance bwinobwino, china chirichonse timayesesa kupanga ngakhale zida zambiri kunalibe koma timayesesa ndithu kuti Covid tisayitenge.

As for us in the covid ward, we take care of the measure, we dress properly, we observe the social distancing, we are supposed to follow everything although we didn’t have resources but we were trying to avoild the contraction of Covid.

F: pamene ma ward enawa kapena ma department mwinamu?

What about in other wars, in other departments?

R: ma department mwinamu iwonso amavala koma sikuti mavalidwe akewo amafanana ndi ifeyo amene tinali direct. Iwonso amavala ma gown chani chani ndi zina zimene amawona kuti iwo angazitetedzedzere koma sidzinali zosiyana ndi ifeyo.

In other departments, they were also putting on but their dressing could differ with us who were working directly. They could also put in the gowns and other things which they felt like it will protect them but it was also not different with what we were wearing.

F; Koma kusiyana ndi amene ali ku ward.

But it was different with those of the wards?

R; yeah, amene anali ku ward

Yeah, it was different with those at the ward

F; okay, munachedzako ndi ma patient ndikumva za experience yawo mmene amawapangira test, testing ena amapanga ya mphuno, ena ku throat mkamwa munayambapo mwinanso inu anayamba akuyedzani experience yanu ya testing imene ijayo ndi chotani?

Okay, have you chatted with patients and hear their experience about how they were tested, there is nasal testing and throat testing perhaps you might have been tested as well, what has been your experience?

R: aah ineyo sanandiyedzepo koma ndinangomva kuti amalowetsa kenakake mphuno, kamalowera cha mkati mkati umo kenakake ndikatali ndithu koma sindinawona kuti kodi amayedza bwanji nanga si ifeyo ukuku timalandira zoti zachitika kale kupita kumusi

I havent been tested before but I heard that they insert something dip inside your nose, something which is long but I didn’t see how they test because we just record what has already been done going down.

F :koma simunamvepo ma patient wo akulongosola kuti kaya feeling yawo amafila bwanji?

But you haven’t heard the patients about how they felt like when testing?

R; akuti ka test kameneko ndi kowawa kamapweteka

They said its painful

F; kamapweteka

It painful.

R; mmh, koopsa akuti kamafunika kuti kapena ulire ukapanda kulira ndekuti sanafikepo..

Yes, very painful because they said that you must cry, if you don’t cry then it means that they haven’t reached where they want to take the sample from.

F:Kuseka…

Laughs

R; mmmh

Yeah.

F; kuseka…oh

Laughs..oh!

R; eeyetu

Yeah.

F; Okay,

R; Ndithu.

Sure.

F; Chabwino, Funso langa lomalidza, mukawunikira mmene chipatala cha…mwandilongosolera zambiri, munapita ku training, zovala, mukawunikira mmene chipatali mmene chinakhonzekerera kulimbana ndi Covid, panopa ma number atsikilapo.

Okay, my last question, looking at how the hospital of……you have told me so many things, you went for trainngs, the PPE, looking at how the hospital was prepared to respond to Covid19, the numbers have reduced now,

R; Mmh

Yes.

F; Koma titati ma number aja akweranso kapenanso pabwera mulili wina ndi chani chimene mungawalangidze achipatala kuti polimbana ndi mulili umenewu mukuyenereka kukonza kapena chimene mukuyenereka kupanga priotize kuwonetsetsa kuti chilipo ndi chakuti chakuti mutandipatsa zinthu ziwiri kapena zitatu zimene achipatala akuyenera kuchita.

Assume the numbers have risen again or there is another outbreak, what could be your priority recommendations to the hospital to responding to this pandemic, what should they improve on, what could be your priority, if you ciuld give me two or three things about what the hospital needs to do.

R; Apapa chimene chikufunika kuchita ndi pamene mulili wacheperako pangonopo ndi pofunika kukonzekera chifukwa sitikudziwa kuti kutsogolokoo kubwerenso zotani eti, kukufunika kuti one, tikanakonzekeratu kufuna malo, malo akulu, kuyikamo zida zoyenelera mmenemomo komanso mankwala akhale okwanira komanso zovala zikhale zokwanira komanso china chiri chonse chofunika covid zikhale zokwanira.

I think what needs to be done right now is to get prepared since the pandemic has now lessen because we don’t know what might come in the future, so firstly, I think we need to prepare a place, a bigger place, put it necessary equipments, enough medication, enough dressing, and whatever is needed for Covid should be set.

F; basi zomwezo? Kumwetulira…

That’s all? Smiles…

R; kumwetulira…..iih koma abale.

Smiles…mmh, but….

F: Sindikudziwa muli ndi…apapa nde tafika pamapeto kwa mafunso amene ndinali nawo amene ndimafuna kuti ndikufunseni sindikudziwa ngati mungakhale ndi ndemanga ina iriyonse kapena mawu ena aliwonse otsilidza kapena chirichonse chimene sindinakufunseni koma mumafuna mutayankhula.

I don’t know if you….This is the end of the questions I had, I don’t know if you have any comments or any last words or anything that you feel that I haven’t asked you but you wanted to say something.

R: Ah ine chimene ndingalimbikitse apapa aah basi apapa boma lingokhala lonkonzeka I think mwina mulungu watipatsa ka grace period kuti tikhale ngati tikukonzekera bwinobwino mmene sitimafikira boma liyenerka kuti lifikire, mzipatalamu agawe zinthu zokwanira bwinobwino ndithu sitikudziwa kuti kodi mvula ikagwa kukhonza kuwonekanso zotani chifukwa choti kukadzidzira figure imakwerako pangono panopa figure yatsika chifukwa chokuti kwatentha nde apapa chimene tikupempha ndi chokuti boma likhale ndithu okhonzeka kuti mulili umenewu ukabwerenso kaya ndi December kupita uko tikhale kuti tiri ready.

Ah, I think the government needs to get ready because I think God has just given us a grace period for us to get prepared enough and the government needs to work on areas where we had a challenge. The hospital needs to be supplied with enough resources because we don’t even know what will happen when the rain comes because the figures rise up when its cold and the figures have dropped now becuuase it hot. So I think the government needs to be very well prepared so that when the pandemic comes maybe in December going forward, we should be ready.

F; Okay.

R: ndithu.

Sure.

F: ayi, zikomo kwambiri.

Ah, thank you so much.

R: thank you.

**THE END.**