PRIMARY TRAUMA CARE FOUNDATION

Assessment visit to Jordan
6 – 10 January, 2011

Delegation:
Sir Terence English, Patron
Dr Jeanne Frossard, Instructor
Mr Charles Clayton, CEO

PURPOSE

The purpose of the visit was to prepare for a possible series of PTC courses in Jordan.

Hosted by the Jordanian Royal Medical Service (JRMS), the delegation's activities included meeting hosts and prospective local partners, reviewing facilities and equipment, exchanging relevant information, advised in the selection of trainees and signing a mutually agreed Memorandum of Understanding.

NOTES OF MEETINGS

Thursday 6 January

The PTCF delegates travelled from London to Amman on flight RJ112, arriving 11:05 pm; met at Queen Alia International Airport by Colonel Dr Rateb Abu Zaid and driven to Le Royale hotel in central Amman.

Friday 7 January

09:30 Tour of Madaba, Mount Nebo and the Dead Sea with Dr Rateb Abu Zaid.

20:00 Dinner at the Zad El Khair restaurant with:

• Brig. Gen. Dr. Husam Faraj (Makhamreh), Senior Consultant in Anaesthesia, King Hussein medical Centre, and Director of the RMS Professional Training Department
• Brig. Gen. Dr. Issa Hazza, Cons. Pediatric Nephrologist, and RMS Director of Planning
• Dr. Laith Abu Nowar, Sen. Cons. Cardiothoracic & Vascular Surgeon, Islamic Hospital
• Maj. Gen. Dr. Hassen Malkawi, Gynaecologist, Director of Medical Field Professionals
• Brig. Gen. Dr. Alaa Al Haresh, Rheumatologist, RMS Professional Training Department
• Brig. Gen. Dr. Salah Halasseh, Consultant Hepato-biliary Surgeon and Head of General Surgery at the King Hussein Medical Centre
• Dr. Daoud Hanania, Cardiac Surgeon and Director (retired) of the Royal Medical Service.

Saturday 8 January

0830 Meeting at the National Emergency Medical Services Centre (NEMSEC) and Royal Medical Service College for Allied Health Professionals with:

• Brig, Gen, Dr. Raqqad Salah, Acting Director of the Marka Medical Centre (polyclinic) – a Family Physician with 27 years’ service in the army.
• Col. Oraib Tawil, Obstetrician and Gynaecologist, Chief of Instructors at the College since 2009.

Dr. Raqqad Salah explained that 200-250 candidates are selected from about 1,000 applicants each year. Two years’ general training are followed by the National Comprehensive Examination and a further two or three semesters allows them to sit for a Bachelor’s degree. The success rate in the last two years has been 100%. Currently they have about 300 male students and 300 female students, i.e., a total of 600 of which about 200 are nursing students.

Jordan has 10 military hospitals and a further 10 Primary Health Centres (polyclinics). Each polyclinic has a minimum of a General Physician (responsible), a dentist and some nurses. Often there is a part-time paediatrician and part-time gynaecologist.

Trauma cases are treated at polyclinics and then transported to the nearest military hospital.

A paramedic training centre was established with assistance in curriculum development from George Washington University and USAID.

The existing courses are a joint programme with the Royal Medical Service (RMS), the Civil Defence Department (CDD) and the Ministry of Health (MOH). There are four phases of education: didactic, laboratory, clinical/field and “summative field internships”, culminating in the National Comprehensive Examination and a requirement for completion of 200 ambulance field operations.

Most of the advanced paramedics are male. The criteria for training are: at least 18 years old, completed high school, able to carry 35Kg unassisted, able to assist in carrying 100Kg, maintain a greater than average speed when walking over 2Km carrying 35Kg, and a successful personal interview.

Currently they are also training 50 people from Oman and 4 from Bahrain. The curriculum includes the following training packages:

- Pre-Hospital Trauma Life Support (PHTLS)
- Basic Training Life Support (BTLS)
- Tactical Medical Course lasting 50-60 days (TMC)
- The American Heart Association’s Advanced Cardiac Life Support (ACLS) – covering just the Provider Course; they have 4 instructors who have completed the General Instruction Course
- Advanced Care Trauma for Nurses (ACTN)
- Disaster Management Program (DMP)
- Neonatal Resuscitation Program (NRP) for nurses, midwives & doctors in the ped. unit
- 12 Lead EKG Interpretations for healthcare professionals (a 2-3 day course)
- Pediatric Advanced Life Support (PALS)

There was discussion about the course content, followed by a tour of the facilities. There are four training rooms, two of them with full audio-visual equipment and all with training aids such as mannequins.

Overall the group was extremely satisfied with the standard of facilities and equipment which could be available for PTC courses.
11:00 introductory meeting at the King Hussein Medical Centre with Brig. Gen. Dr. Husam Faraj, Director of the RMS Professional Training Department, Brig. Gen. Dr. Alaa Al Haresh of the Professional Training Department, and Colonel Dr Rateb Abu Zaid.

It was clarified that Dr. Al Haresh is our main contact on behalf of the surgeons.

11:30 Presentations and signing of the MOU at the King Hussein Medical Centre.

This was hosted by Major Gen. Dr. Abdelateif Wreikat Director RMS and attended by 12 senior military personnel plus the PTCF delegation.

Brig. Gen. Dr. Husam Faraj Makhamreh, Senior Consultant in Anaesthesia, introduced the guests.

Sir Terence English thanked the hosts and gave introductory remarks about the scope of the PTCF worldwide and its typical resources and involvement in a national PTC training programme.

Dr Jeanne Frossard presented a summary of the PTC course with slides & illustrations. Dr Frossard explained that the PTC course is used to train all kinds of health professionals such as doctors, nurses and paramedics in the acute management of severely injured patients. The PTCF’s philosophy is to devolve responsibility and control to local instructors quickly and systematically. The best candidates come from the fields of Emergency Surgery, A & E, and Anaesthestiology. To date the course materials have been translated into 13 languages including Arabic.

Dr Frossard explained that a key element of the pedagogy is to ask the newly trained instructors to lead the next two-day course literally the following morning, accompanied by the PTCF team.

There was a short discussion about the course processes and multiple choice questions (MCQs). Jeanne explained that certification was normally given for attendance alone as all candidates are usually highly attentive, but it was also possible to give certification on the basis of knowledge assessment if so desired.

Dr Husan Faraj expressed appreciation for the presentation and for the work of PTCF, and he commented that the RMS hoped to expand their PTC courses to include the Police, Civil Defence and other regional centres.

The Memorandum of Understanding was then signed in triplicate by Lt.Gen. Abdelatif Wreikat, General Director of the Jordanian Royal Medical Service (JRMS) and Mr Charles Clayton, Chief Executive of the Primary Trauma Care Foundation. Dr Wreikat presented commemorative plaques to Sir Terence English and to Charles Clayton for the PTCF.

12:30 follow-up meeting with Dr Husam Faraj

It was agreed to hold the first course at the JRMS training centre 7 – 11 May 2011, ie:

- Thu 5 May: PTCF Trainers arrive in Amman
- Fri 6 May: Preparation time; no formal activities
- Sat-Sun 7-8 May: First training course for 20 – 24 candidates, led by PTCF
- Monday 9 May: Instructors training day
- Tue-Wed 10-11 May: Second training course for 20 – 24 candidates, led by JRMS
- Thu 12 May: PTCF Trainers depart
Dr Frossard explained that, after the first courses and with one double course every two months over the following six months, a total of nine courses could be run. This could mean training for 160 – 180 candidates.

Dr Frossard gave Dr Rateb Abu Zaid electronic versions of: the PTCF basic course training slides in English and Arabic; the PTCF instructors course training slides in English and Arabic; notes on the MCQs; notes of her own talk; and an outline of an assessment tool for instructors.

12:55 Visit to the Paediatric Hospital, King Hussein Medical Center

Dr Isam Haddadin, Consultant Paediatric Oncologist and Chief of Paediatric Services, hosted the PTCF delegation on behalf of the Hospital’s Director Dr Moyin Habashne.

Dr Haddadin conducted a tour of several wards including A & E admissions, Premature ICU, and a sample of one of the six 28-bed sections of the hospital. The group was impressed by the size, scope and equipment of the facilities. There are 200 beds in total, including 18 ICU and 16 Nephrology.

13:50 Meeting with Dr Ramy Farraj, Physician to His Majesty the King, at the King Hussein Hospital.

The delegation asked Dr Farraj for advice on the possible involvement of the Ministry of Health. Dr Farraj explained that this is a matter of choice for the MOH itself and would be helped if the PTCF had a ‘champion’ there. The MOH is able to visit NEMSEC.

No matter how much the MOH is involved, the RMS will promote NEMSEC as a centre of learning and the RMS could provide trainers for the MOH. Dr Frossard suggested that a PTCF instructor could accompany an RMS instructor on such occasions.

Dr Farraj commented that he would personally like to attend the first PTC course, an idea which Sir Terence warmly endorsed.

14:15 return to the hotel

19:30 Informal family dinner at the home of Dr. Laith & Mrs Madiha Abu Nowar with guests including Dr. Daoud Hanania and Dr. And Mrs Salah Halasa.

Sunday 9 January

11:00 meeting with the Deputy Minister of Health, Dr. Thaifellah Al-Lowzi.

Also present were:

• Dr. Ahmad Kuitaitat, Director of Hospital Administration.
• Dr. Jamal Qunash, Orthopaedic Consultant and Head of Outpatient Clinics & Emergency Departments.
• Dr. Radi Jawarna, Assistant Director of Public and International Relations.
• Dr. Wasan Al-Alwani, Health Attaché with the Embassy of Iraq in Jordan.

Sir Terence English introduced the PTCF and explained that we had now completed discussions with the JRMS, signed an MOU, and would begin the first training course in May
2011. He stressed that, because of resource limitations, the course would not be available to the MOH until it was first established at the JRMS.

After a brief discussion in which CPR was mentioned by the hosts, Dr. Jeanne Frossard clarified that the PTC training is not about CPR but is a comprehensive way to deal with trauma using locally available resources. She compared it to the Advanced Trauma Life Support (ATLS) course which is excellent but relatively expensive and inflexible. The PTC course was designed in response to a WHO request in 1996. She gave a copy of the training manual (blue cover) and described the range of teaching methods used by the PTCF such as lectures, workshops, scenario work and practice sessions.

Discussion followed about the successes and failures in various countries, and about the importance of localisation. A current example of success is the China programme which is running 106 courses with approximately 2,000 trainees.

Dr Al-Lowzi expressed the MOH’s keen interest in having PTC training courses. Sir Terence reiterated that this would be possible after completion of the JRMS courses and meanwhile they would be welcome to send observers to the first JRMS course in 2011. Charles Clayton confirmed that the dates will be 7-11 May 2011.

Dr Al-Lowzi confirmed that the PTCF’s principal contacts in RMS will be the Director Dr Abdelateif Wreikat as well as Dr. Husam Faraj.

13:00 Each member of the PTCF delegation had different lunch appointments.

17:00 tea with Dr. & Mrs Lt. Gen.(ret) Daoud Hanania, Consultant Cardiovascular Surgeon.

Also present were Dr. & Mrs. Salah Halasa, Hepatobiliary Surgeon and Head of General Surgery at the JRMS, and His Excellency Mr. James Watt, Ambassador of the United Kingdom.

20:00 dinner at the Reem Al Bawadi restaurant with Dr Wasan Al-Alwani, Health Attaché with the Embassy of Iraq. Also present were Dr. Imad Al-Tameemi and Dr. Ghada N. Al-Baladawi of the Health Dept. of the Embassy of Iraq, and Dr. Abdulaziz H. Alnezi, Health Attaché of the Embassy of the State of Kuwait.

In this informal discussion the group endorsed the prospect of future PTC training in Jordan being a centre of excellence, with a lead role being taken by the JRMS.

Monday 10 January

0900 PTCF delegation departed.

These notes were provided by:
Charles Clayton, Chief executive,
Primary Trauma Care Foundation
10 January 2011