

**Report from Primary Trauma Care course**  
**Hoima Regional Referral Hospital, North West Uganda: 18-19 November 2010**  
(Mr N D Rossiter – Course Chairman)



Trauma accounts for 30% of all hospital admissions in Uganda, it is the largest cause of mortality and morbidity among the working population – in 2008 just under 3000 deaths and 13000 major injuries occurred in the largest teaching hospital in Uganda, Mulago, due to Trauma. Trauma care in Uganda to this point has had little systematic structural approach.

The previous Medical Superintendent at Hoima, Dr Emmanuel Moro, and the author have been in discussion for 2.5 years in ways to improve Trauma care nationally. Now retired from his post in Hoima Dr, now Professor, Moro has been appointed to Gulu University, in the north of the country, with a number of national roles: one of which is to improve Trauma care in Uganda. He, the author and Mr Darren Walter, Consultant in Acute Emergency Care from the University Hospital of South Manchester (UHSM), UK (and secretary of the Worldwide Federation of Emergency and Disaster Care) – who have a Link with Gulu, have looked at a number of ways of delivering this. In Gulu a programme for Trauma education has been produced by UHSM – this is extremely similar to the Primary Trauma Care (PTC) programme. Prof Moro and the author decided that a PTC package of education may be more applicable nationally and therefore contacted Dr Doug Wilkinson at PTC in the UK and Dr David Oloruntoba the PTC African co-ordinator.

It was decided that there would be a week of initial PTC activity from 15-19 November 2010. Prof Moro organised a standard 2+1+2 PTC course in Kampala, run at the Namirembe Guest House. The participants were senior clinicians: Surgeons, Anaesthetists and Emergency Medicine "Consultants" from the University and Regional Referral Hospitals (levels 6 and 7 of the 7 levels of medical care) of Uganda. A standard 2 day PTC course followed by a one day Instructor course was run for these people from 15-17 November 2010. This was chaired by Dr David Oloruntoba with three other team members from his hospital in South Africa (Prof Dhaffala, Dr Kingu and Dr Shrivastava) and the team from Basingstoke (see below). The participants then became the Instructors for a further 2 day PTC course in Kampala for more junior clinicians. (A separate report on these three courses is available from PTC). The Basingstoke team left Kampala on 17 November 2010 and travelled 4 hours north west to Hoima to run a further 2 day PTC course there.

Hoima Regional Referral Hospital (HRRH) presently does not have an Emergency Department / Casualty Department / Accident & Emergency Department. One is planned to open shortly under the care of Dr Estella Kisembule, Consultant Anaesthetist – who attended the PTC courses in Kampala. Hoima also does not at present have a resident surgeon. Facilities, staffing and skill levels are felt to be totally appropriate for a PTC approach, as presently initial assessment of a Trauma patient is un-structured and may take up to five days from the actual injury. The author and Mr Rob Bates, Consultant Obstetrician & Gynaecologist and Chairman of the Basingstoke-Hoima Partnership for Health Charity (BHPH), contacted with Dr Francis Mulwany the Medical Superintendent at Hoima (and Consultant Ophthalmologist) and agreed that this initiative constituted a priority and organised the course in Hoima for clinical staff from 18-19 November 2010. The plan was therefore to hold an initial 2 day PTC course run by the Basingstoke team, for Dr Estella Kisembule to then run a PTC Instructors course in Hoima for those on the initial 2 day course, to then to roll the course out to all clinical staff in the hospital, and, subsequently to cascade the course to other medical facilities within the Hoima region and catchment area. This will be facilitated by the HRRH Administrator – Mr Brian Kakuba.

The Basingstoke's team purposes were:

- to stress the importance of a systematised approach to Trauma care and enthuse staff in the delivery of good (initial) Trauma care
- to deliver a PTC course
- to arrange the cascade of PTC

- to meet the present Medical Superintendent and clinicians in Hoima, who had mostly changed since the author's last visit
- to allow other team members a chance to visit HRRH
- to see projects already running from the Link from BPHH
- to visit other medical facilities in Hoima (The Azur Clinic – a Christian run clinic, run by one of the BPHH Trustees)
- to visit an Orphanage (The Mustard Seed) run by one of the BPHH Trustees

### Course participants

(All from HRRH)

Name	Designation
Mulwany, Francis	SMO, Med superintendent
Aseru, Constance	SNO
Atino, Caroline	Anaesthetist
Aliomi, Phillipam	MO
Ndikwaye, Frederick	Psychiatric Clinical Officer
Katwesige, Robina	RN
Atuhauriw, Ilihu	EN
Mbabazi, Rita	Senior Community NO
Nalubega, Anne	NO
Ssemanda, Jonathan	OO
Waiswa, MP	POO
Achayo, Evelyn	NO
Naaliil, Oliver	TH/A
Katorogo, Julius	SPCO
Biraaba, Ruth	MCO/OCO
Boonabaana, Peninnah	NO
Kachope, Stella	Ag SPNO
Amuge, M Goretti	NO
Kabagambe, MaateEdson	MCO
Kakube, Brian	H/A
Abdul, W	Driver
Bitamazize, Denis	MO

## **Course instructors**

Chairman: Mr Nigel Rossiter - Consultant Trauma & Orthopaedic Surgeon, Basingstoke & North Hampshire Hospital, UK (BNHH) [NR]

Mr Richard Harker – Consultant Trauma & Orthopaedic Surgeon, BNHH [RH]

Mr George Cox – Specialist Registrar in Trauma & Orthopaedics, BNHH [GC]

Mr Tim Beacon – ex Operating Department Practitioner and now running an NGO (MedAid) [TB]

## **Kit taken (& left in HRRH for future PTC courses)**

- chest drains x 2
- Guedel airways x 2
- LMAs x 2
- ET tubes x 2
- Ambubags x 2 (1 with adult mask and bag, 1 with paediatric mask and bag)
- Oxygen masks and re-breathing bags x 2
- 20G IV cannulas x 2
- Intra-osseous needle x 1
- Memory stick with all course material – handbooks, lectures, pictures
- Course handbook

## **Summary of MCQ results**

Pre-course: Median result – 9 (range 3 – 18)

Post course: Median result – 20 (range 8 – 30)

## **Evaluation form results**

Almost all (but 3) scores 5 (excellent) or 4 (good). (Only 3 scores of 3 – average, no scores of 2 or 1.)

Comments:

- Excellent (x 11)
- Course too short (x 8)
- Come again (x 8)
- More on Burns
- Disaster management (having seen the median pre-course MCQ results it was decided to leave this out and concentrate on the basics)
- More scenarios (x 6)
- More on ABC (x 4)

No criticisms received.

## **Evaluation of success and relevance, observations and future plans**

The relevance of the course was highly apparent on previous visits by BPHH to HRRH and from discussions on Trauma care nationally within Uganda with Dr Moro and the senior clinicians who attended the initial course in Kampala. The courses, timing and overall plan for Trauma care both at HRRH and nationally seem to have been well received. It will obviously remain to be seen whether these roll out locally and/or nationally and whether the standard of Trauma provision improves. Documentation and audit locally and nationally remain an issue. This was discussed at length in Kampala and hopefully ideas for this will now take fruit and a way of assessing the success, or otherwise, of this plan can be made. The PTC course was certainly enjoyed by the participants, and instructors!