# COURSE REPORT

# UNIVERSITY TEACHING HOSPITAL, LUSAKA ZAMBIA

# 17 – 21 March 2014

Report Presented by: Dr. David Snell

## COSECSA Oxford Orthopaedic Link (COOL)

This Primary Trauma Care course is part of a project funded through the Health Partnership Scheme, which is funded by the UK Department for International Development (DFID) for the benefit of the UK and partner country health sectors and managed by the Tropical Health Education Trust (THET). The project is called the COSECSA Oxford Orthopaedic Link (COOL). More information is available at www.ndorms.ox.ac.uk/cool.php.



# **PTC Foundation Course**

University Teaching Hospital, Lusaka. 17-21 March 2014



### Summary

The third PTC course was held in the University Teaching Hospital (UTH), Lusaka. Although the first course in 2013 was also held in Lusaka, given the number of staff in UTH that have not been through the course, as well as the continued intake of interns and nurses, it will be essential to continue to run the course for the Lusaka and surrounding hospitals on a regular basis. UTH receives a massive proportion of Zambia's trauma victims and the continued education of it's medical and nursing staff in trauma medicine is essential to improve the care of these patients.

A total of 38 delegates underwent the course with eight from the first course undertaking the Training of the Trainers course (TOT) and teaching on the second course.

The course was very well received by both groups with excellent feedback and improvement in results. Those that underwent the TOT performed very professionally and made excellent faculty.



#### Venue

The venue for this course was Conference Room 2 in UTH. The initial planned venue was the considerably larger main kitchen hall on the level above. However, the UTH administration held a course that was, at the last minute, extended by another week.

Although the room was a little small, it did not impact on the quality of teaching delivered, either small group or lecture-based.

Dr Kasonka kindly agreed to give the venue for no fee given it was the UTH staff being educated.

#### Preparation

The staff at the Tropical Health and Education Trust (THET) agreed to print all the course material. Dr Rachel McKendry kindly printed and laminated advertisements, signs and any role-play props.

### **Course participants**

We delivered the standard PTC 2:1:2 packages: the two-day PTC course, followed by a one-day Training of the Trainers course, with the newly trained instructors delivering the second two-day PTC course, along with the support of the established faculty.

The delegates on the first course were predominantly physicians with two theatre nurses. Those chosen to attend the instructor course were all physicians (of varying levels and specialties) with one theatre nurse. The delegates on the second course were all physicians. They were all working within the Lusaka area: either in UTH or the military or government hospitals close-by.

#### Content & structure of the course

The course followed that set in the specimen timetable. Lectures were delivered with minimal alterations from the faculty members. The Disaster Management session was led by Dr Snell in each course and consisted of a lecture and role-play. The lecture was based on the one delivered by Prof Snyder in the previous course. The role-play was set in a UTH emergency department-like setting with a multiple-casualty road traffic accident presenting un-announced. The delegates were given roles as emergency department director, emergency department doctors and nurses with the faculty acting as patients with laminated pictures of injuries and observations.

This was a well-received session in both courses, illustrating the challenges and principles of major incident management.



#### Future plans

The next course is planned for 10<sup>th</sup> - 14<sup>th</sup> November 2014 in Livingstone. There is an established anaesthetic department in Livingstone General Hospital. Dr Papytcho Ntambwe is the head of the anaesthetic department and is keen to be involved in courses held in the south of Zambia.

Given the continued enrolment of trainees into the MMed programmes in anaesthesia and surgery as well as the expanding number in emergency medicine, the continued delivery of the PTC in UTH and Lusaka is essential. I hope the course can continue to be run within Lusaka on an annual basis. As more local physicians and nurses are trained as faculty it should become increasingly possible to run the course with minimal external support. For the time being, however, the continued presence of senior UK anaesthetic trainees and consultants (associated with the MMed programme) will provide useful assistance until local faculty increase in number.

#### Learning points for future courses

In hindsight, there seemed to be some miscommunication as to who was directing and coordinating this course. Thankfully, this did not impact on the number of delegates attending or the quality of the course. However, there was a lot expected of the anaesthetic department at an incredibly busy time. For future courses, faculty should conclude roles and responsibilities from the beginning.

Within medicine and surgery, those trainees that have not yet qualified from their MMed programmes will struggle to coordinate and direct these courses without significant external support given their present clinical and academic responsibilities. It is more than reasonable to involve them in the coordination of the course, but the director should be a local post-graduate or consultant ideally, with overall supervision by external faculty if deemed necessary. Drs Shamambo, Zyambo and Patel were invaluable in the coordination of this course will be excellent course directors in the future.

For those course that are to be held in UTH in the future, it is essential to inform the head of each specialty of the date of the course as well as the number of trainees desired from their particular specialty. Dr Snell was under the impression it was the delegates responsibility to apply for leave for the course. However, in UTH it is the course coordinator who should inform the heads of those departments from which trainees are expected to attend. It is paramount that this occurs in good time in the future.

### Acknowledgements

We wish to thank Dr Kasonka for allowing the course to be run within UTH, and for Mrs Munthali for facilitating the smooth running of the course.

## Course faculty

#### **Course 1 and Instructor course**

Dr David Snell	Lecturer in anaesthesia UNZASoM. Honorary consultant, UTH
Dr Rachel McKendry	ST6 Anaesthesia, UK & ZADP trainee
Dr Mitesh Patel	Senior registrar, general surgery, UTH
Dr Naomi Shamambo	MMed 3, anaesthesia, UTH
Dr Masuzyo Zyambo	MMed 2, anaesthesia, UTH
Dr Dennis Sakala	Senior registrar, orthopaedics, UTH
Dr Michael Mbelenga	Senior registrar, orthopaedics, UTH
Dr Michael Mbelenga	Senior registrar, orthopaedics, UTH

#### Course 2

Dr Kad Musas
Sr Cooley Musukwa
Dr Nelson Banda
Dr Chifundu Kapula
Dr Christine Mutelo
Dr Rajesh Parekh
Dr Stanslous Shabbuwa
Dr Keith Simfukwe

MMed surgery, UTH Theatre sister, UTH MMed orthopaedics, UTH Intern, UTH Physician, MSMH MMed surgery, UTH Physician, MSMH Physician, MSMH

Faculty from course 1 also attended and supervised the new faculty.

