#### COURSE REPORT

#### **MOZAMBIQUE**

27 th - 31st October 2014

Report Presented by: Dr. Amaia Arana

#### 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 COURSES REPORT TETE MOZAMBIQUE 27-31 OCTOBER 2014

#### PURPOSE OF THE VISIT

Fifth visit of the UK PTCF team to Mozambique as part of the COOL African project.

This time the courses where in Tete, to continue the implementation of the program through out Mozambique and facilitate the expansion to the most remote areas. Tete is located in the middle region of the country, on the Zambezi river. The region is very rich in natural resources; Tete province is regarded geologically as the largest undiscovered coal province in the world, attracting a lot of national and international investment

In this occasion the two instructors from the UK worked in collaboration with five other new PTC instructors from previous courses in Mozambique

#### SPECIAL GUESTS

- Dra Mulawassa Simango, Medical Chief, assisted to the first day Opening Ceremony of the courses given an introductory lecture. She also attended the Closing Ceremony during the last day.
- Dra Carla das Dores Mosse Lazoro, Provincial Director of Health, attended and gave a speech during the Closing Ceremony of the courses
- Mr Charles Clayton, PTCF Chief Executive, joined the last day of the courses and gave a speech during the Closing Ceremony
- Dr Armando Gouveia, as representative of the PTC in the middle region of Mozambique, as well as been an instructor during the courses, gave opening and closing speeches during the Ceremonies

## **MEDIA COVERAGE**

The fifth and last day of the courses TV reporters were invited to come into the venue and interviewed Dr Lino Manguelicão, coordinator of the courses in Tete, and Mr Charles Clayton, Chief Executive of PTCF.

## **KEY STAFF IN PLANNING AND CO-ORDINATION**

As in previous occasions the Ministry of Health has been heavily involved in the organization and implementation of the PTC courses as one of the measures to improve the trauma situation in the country. Dr Otilia Neves, although unable to attend the courses in this occasion, has been in continue close coordination with the UK link Dr Arana in everything related to any requirement for the courses. She is also in charge of assuring the organization and economical provision for the candidates' travel and maintenance, and the expenses for the venue, food, materials, documentation ...

Dr Helder De Miranda, original COSECSA member contacted for the COOL project in Mozambique and subsequently elected as the representative of PTC courses in the middle region as he is based in Beira, has resigned in his role in the project stating that he is too busy with other issues. Unfortunately, this left the middle region without

representation and named organizer at short notice, which have had an adverse impact during the organisation of the courses in Tete. Dr Lino Manguelicão was assigned to fill the role. Dr Neves in Maputo was aware of the deficiencies in the organization and in an attempt to cover the gap sent Dr Marta Jaime Abudo from Nampula (who was the organizer of the courses in Pemba) to help Dr Manguelicão during the week before the courses started. Dr Abudo's contribution has been much appreciated.

From the UK, Dr Amaia Arana has been in charge of the organization logistics, arranging the UK faculty and the contact person with Mozambique. Annette Clack and Charles Clayton from PTC in Oxford have been of great help from the administrative point of view.

As well as all those involved in the main organisation of the COOL project.

#### COURSE INSTRUCTORS

Local faculty has been composed of five instructors, all from the middle region of the country:

- 1.- Dr Lino Manguelicão physician, and coordinator of the courses in Tete . Based in Tete Tete province. He attended the courses in Beira in February 2014, and this has been his first experience as instructor.
- 2.- Dr Jorge Vicente surgeon, based in Chimoio Manica province. He attended the courses in Maputo in March 2013, and although he is got teaching experience this has been his first time as PTC instructor
- 3.- Dr Armando Gouveia anaesthetist, based in Beira Sofala province. He attended the courses in Maputo in March 2013, and he was a PTC instructor in Beira in February 2014, this has been his 2<sup>nd</sup> time as PTC instructor.
- 4.- Gomez Zinoveira licensed in surgery, based in Tete. Attended the courses in Beira in February 2014. He is got some teaching experience but this was his first time as PTC instructor.
- 5.- Marilia Caetano Reiss licensed in surgery, based in Quelimane Zambezia province. She attended the courses in Beira in February 2014, and this has been her first experience as PTC instructor.

The overseas faculty was formed by two instructors:

- 6.- Dr Emma King ST7 trainee in anaesthesia. She had previous PTC experience as one of the instructors in the first courses in Maputo in March 2013. In this occasion she has been in the role of "Geek for a week" data gathering.
- 7.- Dr Amaia Arana paediatric anaesthetic consultant. Previous PTC experience. Team lead

Dr Manguelicão, Dr King and Dr Arana met on Sunday, the day before the courses started, to organise the venue, check that the documentation was in order and to finalise the last details. Later that evening the rest of the faculty joined for a meeting to allocate the teaching sessions for the following day. Interestingly, none of the instructors brought their own copies of the course manual or instructor's manual given to them when they originally did the courses, neither they have electronic copies of the slides. As there were excess copies of instructors' manuals they received one each so they could prepare their talks for the following day.

Instructors for the second course were all the above-mentioned plus all the candidates of the first course, who also attended the instructors' course and were in the courses for the 5 days duration.

Every evening, at the end of the working day, a faculty meeting was held to evaluate the events of the day, react upon the points mentioned by the candidates during the feedback session and planning the following day. As the new instructors became part of the faculty they did also took part in these meetings.

#### **COURSES**

The courses were planned in a 2-1-2 model.

All courses were given in Portuguese.

The first day of both standard courses an introduction about the COOL and PTC project was given to the candidates by Dr Arana

#### **Candidates**

The Ministry of Health together with the local health administration selected the candidates, also arranging the logistics and covering all the expenses for their transport and accommodation during their stay in Tete.

There was clear differences in the background of the candidates, same medically qualified doctors having had the opportunity of attending elective periods abroad in contrast with locally trained clinical officers.

There was an issue with the amount of candidates recruited for the courses. Originally, 17were selected for the 1<sup>st</sup> course and 13 for the second. Following arguments by Dr Arana related to the waste of training opportunity and contacting Dr Neves about the problem a total of 36 candidates were finally recruited to attend the courses: 19 and 17 respectively.

#### First course and instructors' course

19 candidates attended the first standard course and the instructors' course, becoming subsequently instructors during the second course. All of them attended the 5 days of the courses and it was clearly noticeable the candidates' increase in motivation, self-confidence and role-playing as the week advanced. Of them 6 were medically qualified, 6 nurses and 7 technicians (similar to clinical officers in neighbor countries). Of the 6 doctors 5 were females and 1 male, of the nurses 3 were females and 3 males, of the technicians 2 were females and 5 males. Interestingly, the 6 doctors were not from the area but they were sent from Maputo.

A short session was held with the new instructors about how to mark the MCQ's, give exam feedback...and they did these tasks for the second group

The majority of candidates have never been involved in teaching, and they found challenging and scary to become teachers overnight having not practiced ever before

#### Second course

During the second course were 17 candidates, 16 males and one female. There were no doctors in this group. The candidates in this group did the standard course but no the instructors' course. The newly qualified instructors who attended the first course taught them with the help of the first course instructors. Of note: two of the candidates attending this course attended also the same course in Beira in February (??)

A more detailed information about the candidates, their professional background and scores has been send by Dr Emma King to Dr Noel Peter to be analysed in his database

#### Feedback from candidates

Both, the standard and the instructors' courses were valued by the candidates. The practical aspects of the courses were very appreciated, and the recognition of the need of such courses in Mozambique was expressed. Enthusiasm and involvement was increasing as the week was passing by and they knew each other better. Shortage of time was the more consistent comment: the course as a whole is too short, and the time for practical sessions is too short also.

#### Positive:

- \* The fact that the courses were delivered in Portuguese was very important for them
- \* Practical and dynamic
- \* Different specialties working together as a team knowing each other's role better
- \* ABCD structure systematic approach helping not to miss anything
- \* Important points made clear focused methodology
- \* Good review of knowledge
- \* Taking the theory to practice
- \* Practical sessions: small group discussions/interaction, scenarios and workshops very useful and helpful to build bounding
- \* Attitude of instructors helpful and positive
- \* Instructor's course workshop were very well rated

#### To be improved:

- \* It would have been very helpful to have the pack (including manuals, program and more detailed information) ahead, well before coming to the course
- \* Not enough time for practical sessions, skill stations, scenarios.... Course too short
- \* Time keeping and punctuality- we worked hard on this with variable success
- \* Videos to show demonstrations would be useful
- \* Lack of equipment locally
- \* More on trauma patients' transport
- \* Some candidates could not understand neither shared the house keeping rule of not answering/ reply the mobiles, or limiting the amount of times people was going in and out of the room, till break times
- \* To become a teacher overnight is a bit pretentious
- \* Not enough time to fill the paperwork and MCQ's. More time needs to be allocated to fill up the pre- and post- course forms.

Despite increasing the time allocated to complete the paper work and MCQ's in each course, it never seems to be enough time. In these courses the time given was increased to 45 minutes, but the majority of the candidates were needing to be catch up during breaks in order to complete the documentation, finalise MCQs,...

#### Venue

The courses were held in the Riverside Lodge in the center of the city. We ere allocated a very big spacious room where we were able to organize all lectures and practical

sessions quite comfortably. There were also plenty of tables and chairs. Do to the big size of the room acoustics was not always so good, it was an attempt to organize some microphones but during their use interferences were occurring with another course being held in another near by room in the lodge and the idea was abandoned.

Lunch and coffee breaks were held in the lodge's restaurant around the corner from the room and some times "al fresco", Drinks and snacks were provided during the morning and afternoon breaks

Due to the deficiencies on communication between the local organisers and the UK link previous to the courses, we were not given information about the venue till 3 days before coming from the UK, neither we obtained suggestion of possible accommodations, therefore we find ourselves in the position of needing to arrange our own accommodation through the web without knowing where the courses were going to be held. As it happens, we chose a hotel located 7 km from the venue which caused a few problems with transport arrangements and time consuming.

## **Teaching Material and Documentation**

As the number of candidates originally arranged were less that the amount the courses could hold and eventually were increased, even the amount of copies of the documentation which they managed to organize was insufficient.

Again due to the complete lack of communication between the local organizer and the UK link previous to our arrival to Tete, several documents were not ready:

- There not copies of the standard course manual. Unfortunately we didn't manage to organise copies till the 3<sup>rd</sup> day, that is the candidates of the 1<sup>st</sup> course did the pre-course assessment test as well as the post-course assessment test on the 2<sup>nd</sup> day without having had the opportunity of seen the manuals.
- There were 40 copies of instructor's manual, when there were only 20 needed.
- There were no copies of instructor's course post-course paper forms
- There were no certificates organized

Needing to arrange all these copies at the last minute was cause of much unnecessary distress, as it is not an straight forward process

All the teaching material and documentation was provided in Portuguese.

All the candidates received eventually hard copies of the standard manual in Portuguese, and the new instructors also received the instructor's manual

Identification badges were wore by everybody

It was noticed that several candidates didn't fill the email address slot, when asked about it they said they do not have any

Dra Carla das Dores Mosse Lazoro, Dr Lino Manguelicão and Dr Amaia Arana signed the certificates

# **Equipment**

The equipment in the kit box provided by the PTCF at the beginning of the project was the main source. The box was brought by Dr Abudo from Mampula. The contents of the box have changed remarkably compared with its original items, some have been

broken (eg IO needles), and others disappeared. Dr King and Dr Arana brought some more extra equipment for the scenarios and practical sessions (ETT, stylets and bougies, LMAs, cannulas...). A hard board and several neck collars were brought from Maputo

The projector used was the one supplied by the PTCF for the project, and was brought from Maputo by the candidates coming from there. The security padlock has been lost.

There were no black boards, but flip charts were brought from the hospital.

As well as the intubating and the baby manikin provided in the kit box, human volunteers were used for the practical sessions, which worked well.

We had two goat carcasses (cabrito), one for each standard course. They worked well for the chest drains demonstrations, but unfortunately the goats were slayed through the neck (despite several advises not to do so), the larynx were totally damaged and we couldn't practice surgical cricothyroridomy on them.

At the end of the courses the equipment kit was checked by the new instructors, and together with the projector were taken back to Maputo.

#### WHERE TO GO FROM HERE

Following the closure of the courses a meeting was held on how to plan the future of PTC courses in the Tete province. All the faculty and the new instructors attended the session.

There were few suggestions not only regarding future PTC courses but how to organize trauma services for the region. Some dates for future meetings were mentioned. Many people expressed their desire to be involved.

#### **VISIT TO MINISTER OF HEALTH**

Following the courses in Tete, Mr Charles Clayton (PTCF Chief Executive) and Dr Amaia Arana (Mozambique COOL project link) went to Maputo to meet the Health Minister-Dr Alexandre Manguele.

Dr Manguele received Dr Otilia Neves and us to converse about the need of PTC in Mozambique and ideas to promote its sustainability. The Minister seemed very supportive of the project and listened attentively to our recommendations.

## **OBSERVATIONS AND RECOMMENDATIONS**

Planning ahead is a difficult concept for the locals to understand. Emphasis on this was attempted to be transmitted during the courses

The time allocated in the program to complete documentation, answer the MCQ's, matrix... is far too sort. Even doubling the time didn't allow all the candidates to answer everything.

In order to be self-sufficient economically for the organization of the courses the Mozambicans have accepted sponsors from different sources. In this regard, a 45 minutes talk was accommodated during the last day of the courses on "gender violence" delivered by a charity organization that sponsored the courses. There was also some money given by US-Aid to pay for the copies of the instructors' manuals.

## **EXECUTIVE SUMMARY**

The courses in Tete were a success.

All local instructors and candidates enjoyed and valued the courses, and were happy to take part.

Although Dr Otilia Neves wasn't able to attend the courses in this occasion, she phoned several times to make sure the courses were running smoothly. Her commitment and role are invaluable for the implementation and long-term sustainability of the project in Mozambique.

Some things involving the local organisation of the courses could have been done better with improved communication and a bit more dedication to planning.

Thanks to every one. Obrigada

Dr Amaia Arana PTC contact Mozambique COOL Project October 2014