

Primary Trauma Care course, Vanuatu 2016

Title: PTC Course Vanuatu

Venue: Hospital Library & Conference Room, Vila Central Hospital, Efate

Date: 14-15th and 18-19th July 2016

1. Introduction

Primary trauma care was first taught in Vanuatu in 2009. This is the 7th and 8th course to be run in Vanuatu with local instructors and fully funded by Ministry of Health, Vanuatu under the auspices of the PTC Committee Pacific Committee.

PTC courses are aligned with the Ministry of Health's strategic plan to provide safe and appropriate care in all areas in Vanuatu and to strengthen clinical services through local capacity building. PTC courses are an essential training as part of the disaster risk management approach for all Ministry of Health officers and pre-hospital services officers.

1.1 Participants

This course was aimed at training and capacity building for members of the pre-hospital and hospital services in Port Vila and the attendance on both courses included:

There were 13 officers who attend the first course and 8 who attended the second course. The composition was as follows:

- **Nursing**

Paediatrics: 2

Medicine: 2

Accident and Emergency: 3

Surgical: 3

General Outpatients: 3

- **Medical Officers**

Paediatric Intern: 2

Internal Medicine Registrar: 1

Visiting Emergency Medicine Trainee: 1

- **Pre-Hospital Services**

Army: 2

Fire: 2

1.2 Instructors

The instructors for the course were:

1. Dr Andy Ilo, Medical Superintendent, NPH
2. Dr Basil Leodoro, Consultant Surgeon, NPH

2. Day 1 - 14th July 2016

The course commenced after an hour's delay due to the arrival of course participants, some of whom had been on the evening shift, the day before. The course started at 9 am. Acting Medical Superintendent of VCH, Dr Trevor Cullwick, was present to give some opening remarks and talk about the local trauma perspective, using the recent multi-trauma incident involving two mini-vans and over 20 injured tourists and ni-Vanuatu. There were 3 deaths and most of the participants had been part of the hospital response. It was a unique opportunity and set the mood for the course.

2.1 MCQ summary and results

The majority of participants scored poorly in the Pre-course MCQ. This was likely due to the late arrival of the printed manuals from the government printers, which meant that participants had limited time to read the manual completely.

2.2 Scenarios

Due to adequate numbers, the demonstration scenarios were run with only two groups using scenario 2. The scenario practice was done in two groups as well with each group taking turns at performing and observing the scenario. Scenarios 1, 4 and 11 were used for the practice scenario.

3. Day 2 - 15th July 2016

Participants arrived in a timely fashion for Day 2. There was ample time for discussion during the MCQ review and all participants scored above the 50% cut-off. The disaster scenarios were handled well with each group presenting their discussion points and generating good ideas and discussion. Due to the composition of the groups, there were detailed descriptions of army, fire, police and hospital responses in the setting of a disaster. This was very encouraging as it was one of the first times many of the officers had a chance to train together.

Participant feedback indicated the course was well received, however, a few did mention the need for more training and practical sessions.

4. Day 1 - 18th July 2016

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The course commenced on time with fewer participants than expected. Unfortunately, there was some confusion as to the location of the training course by the Police HR Manager. Instead of sending the 10 officers who were to be participants to the hospital library, they mistook PTC to mean "Police Training College" and ended up missing the morning session. Due to prior commitments, all 10 police officers were withdrawn from the course and we hope to run a separate session for them later this year. As the group was smaller, there was more time for one-on-one instructor-candidate interaction.

4.1 MCQ summary and results

The majority of participants scored poorly in the Pre-course MCQ, again, likely due to the late arrival of the printed manuals from the government printers. There was marked improvement in the post-course MCQ.

4.2 Scenarios

Due to adequate numbers, the demonstration scenarios were run with only two groups using scenario 2. Scenarios 1, 4 and 11 were used for the practice scenario.

5. Day 2 - 15th July 2016

The disaster scenarios were handled well with each group presenting their discussion points and generating good ideas and discussion.

Participant feedback indicated the course was well received, however, a few did mention the need for more training and practical sessions. The catering was also complimented.

6. Summary of Recommendations

4.1 Resume PTC courses in Vanuatu with two planned for this year. One in Santo and one in Vila

4.2 Arrange for PTC Vanuatu team to assist Tuvalu team seeing as Dr Christian Leepo is permanently based in Vanuatu until December 2016. He will need locum cover if he is to be released to attend PTC in Tuvalu.

4.3 Run an extra PTC for all Interns (there are 18 interns this year and 10 interns next year). Likely to be in mid-2017.

4.4 Ensure all printing of manuals and certificates is done at least two months before the courses to allow for logistics of travel and participants to have access to the manuals.

4.5 Plan to run PTC for Army and Police recruits and officers separately.

7. Summary of Participant Feedback

Participants feedback was generally good with a few suggestions on having more time for practical sessions and combined training. Otherwise, it was a relevant and satisfactory course for all participants.

Special mention should go to one of the participants/observer. Dr Deb Lognathan is an emergency trainee who joined us from Perth, Australia for the duration of the first course. She was keen to learn from a developing country setting about the challenges and solutions to establishing a PTC faculty and course in Somaliland, Africa. It was a privilege to host her at the course and we wish her every success in her plans to introduce PTC to Africa.

8. Acknowledgements

Ministry of Health

Director General of Health – Mr. George Taleo
Finance Manager – Jameson Mokoroe

Vila Central Hospital

Heads of Department of Internal Medicine – Dr Sereana Natuman

Head of Department of Paediatrics – Dr Annette Garae
Acting - Medical Superintendent – Dr Trevor Cullwick

Nursing Services Manager – NP Honore Maurice

Clinical Nursing Supervisor – RN Barry Sanieel

Nurses In-Charge – Paediatric, Surgical, A&E, Operating Theatre, Medical

Pacific Catering and Ms Tema Bakeo

Ms Asha Sine and Mr. Honore Lingtamat, MoH Clinical Services Coordinator

Primary Trauma Care, Pacific Committee