

REPORT
PRIMARY TRAUMA CARE (PTC) COURSE
Honiara, Solomon Islands
Nov. 30th -1st Dec. 2015

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Introduction.

PTC was introduced in the Solomon Islands during the early days of the ethnic tension in 1999 by Dr. Douglas Wilkinson with the assistance of Dr. Rob McDougall and the late Dr. Stephen Swallow. Then, about 18 participants were trained. The following year, there was a political coup in the government so the course was deemed unsafe to run until 2003 when another course was organized and coordinated by Dr. Kaeni Agiomea. The course instructors then were Prof. Eddie McCaig, Dr. Wyne Morris, Dr. Eloni Tora and Dr. Chester Kuma, a local surgeon. A total of 27 participants were trained during this course. No instructors' course was held at that time.

It would take another five years before another course was organized, this time by Dr. Kenton Sade who had meanwhile been groomed as another PTC instructor for the Solomon Islands. On 6-8th August 2008, 1 primary course and 1 Instructor course were held at the National Referral Hospital in Honiara organized by Dr. Kenton Sade with the assistance of Dr. Wyne Morris and Dr. Georgina Phillips. 36 participants and 12 instructors were trained during that course. The participants for the provider course included 15 doctors, 17 nurses, 2 anaesthetic nurses and 2 police officers.

The course was then taken out to Gizo in the Western Province. Since then, Dr. Kenton Sade had also taken the course to Malaita Province, Isabel Province and Makira Province in 2009.

Since the inception of PTC in the Solomon Islands, a total of 169 participants have been trained including twelve instructors. Unfortunately, due to lack of proper coordination and local funding, there was another long spell for the last 5 years until we decided to run another course in late 2015.

Purpose of running the course.

This is the 9th PTC course to be held in the country since its inception in 1999. The main aim of running the course was to teach our young graduates from Cuba and Fiji who are currently doing their RMO training at the National Referral Hospital in the Solomon Islands a system of managing trauma since they will be among the first-line staff to attend to such cases in our hospital.

In just over a year's time, they will also be completing their RMO rotations and will be posted out to the rural hospitals where they will be working alone without the immediate help of specialists. As such, they will be the first ones to attend to the trauma cases that present to the rural hospitals. A prior knowledge of trauma management will greatly help them deal with situations where the lack of such knowledge will make trauma management such a daunting and challenging task.

It has been decided by the training committee of the Hospital that the PTC provider course will be one of the standard courses to teach all our young graduates during their RMO training here in the Solomon Islands from now on. This was the first time for this to be done for our newly graduate doctors during this time in their carrier.

A deliberate decision was made for us to do just one provider course for these trainees. The usual 2-1-2 day course plan was modified to just the first 2-day provider course in view of this decision; the reason being that these young doctors still needed more practical experience to make good instructors. The other reason was that we would prefer to have a resource person from the PTC Foundation involved in the training of our instructors. This is being considered for 2016 if and when we plan to run the course for the more senior hospital staff.

We did not plan to include any other medical or nursing staff in this training as the number of trainees had already exceeded the maximum number required per course.

Key staff involved in planning and coordinating.

As alluded to previously, the National Referral Hospital Training Committee in the Solomon Islands under the leadership of Dr. Aaron Oritaimae had come up with the decision to make the PTC course mandatory for our new Medical graduates during their RMO rotation.

Course Director/Organizer: Dr. Kaeni Agiomea, Head of Anaesthetic Services, NRH.

Course Coordinator/Organizer: Ms. Suzanne Pohlner, Hospital Training Committee.

Course Instructors.

1. Dr. Kaeni Agiomea, Head of Anaesthetic Services, NRH.
2. Dr. Bataboni Anigafutu, Specialist Anaesthetist, NRH.
3. Dr. Dudley Baerodo, Head of Surgery, NRH.
4. Dr. Douglas Pikacha, Specialist Surgeon, NRH.
5. Dr. Patrick Houasia, Head of Orthopaedic Department, NRH.

Course participants: There were a total of 26 participants trained during this course (see photo).

Course Venue.

Regional Eye Centre Tutorial Room, National Referral Hospital, Solomon Islands. (Picture)

Details of activities.

The course was held over 2 days; on Monday 31st November and Tuesday 1st December, 2015.

There was no formal registration. However, the course participants were asked to fill in their names on a register on both days to make sure that they actually did the full course to make them eligible to get the certificate of attendance.

Monday 31st November 2015:

We began with a word of prayer which was offered on behalf of the group by Dr. Douglas Pikacha at 0830am.

This was followed on by the welcome and pre-course MCQ's and filling up of the pre-course assessment forms by the participants. We did not have to formally introduce ourselves as everyone knew each other quite sufficiently. This was overseen by Dr. Kaeni Agiomea.

Following that, Dr. Patrick Houasia gave the group a local perspective of trauma during which time he presented a sample of five different trauma cases managed by his department over the last few months in the hospital. That gave the participants an idea of the types of trauma they will be seeing during their practice.

Dr. Kaeni Agiomea then gave the talk on the overview of PTC following a short history on the work of PTC training in the Solomon Islands since its inception in 1999.

The rest of the course was done as outlined in the timetable (see copy attached).

During this first day, we ran overtime by half an hour due to lack of proper time-keeping as we failed to appoint someone to do it. However, the participants did not seem to notice as they were thoroughly engaged in the discussions and skill stations.

We then closed with a word of prayer for the day.

Tuesday 1st December 2015:

We began the day well on time at 0830am with another prayer.

The course actually ran on schedule as outlined in the timetable. We also engage a time-keeper this time so there was more order in the running of the course on this second day.

The day ended with the post-course MCQs followed by presentation of certificates by the course organizers, Dr. Kaeni Agiomea and Ms. Suzanne Pohlner.

The final remarks were made by Dr. Kaeni Agiomea to thank the course participants, the course lecturers and Ms. Suzanne Pohlner for coordinating the whole course.

The course ended at 5 pm, Solomon Island time.

Summary of multiple choice questionnaire scores before and after the course:

Pre-course MCQ results: The score ranged from 9/20 to 19/20. The average score was about 13.5.

Post-course MCQ results: The score ranged from 12/20 to 20/20 with an average score of 17.8.

The most improved candidate scored the lowest in the pre-test. He improved by 45%. Two candidates did not show any improvement in score at all. They scored the same marks in both the pre- and post-tests. On average, the group showed a 21.5% improvement.

It was noted that there were some confusions over some of the questions. Some course participants may not have picked up some of the principles taught to them and seemed confused. This was revealed by the fact that they had the correct answer pre-course but answered wrongly in the post-course MCQ. We were not sure what the issues were, but the course was made as simple as possible for people to understand, even discussing some aspects of the course in Solomon Island Pidgin.

Course Feedback:

The majority of participants preferred the scenarios and skill stations and would prefer to have more scenario practice. One candidate suggested giving more time to do secondary surveys.

Despite the apparent confusion about some of the MCQ answers, there was an improvement in the confidence level within the group as indicated by the answers to the pre- and post- confidence matrix cases and questions. Overall the group indicated that they were helped by the course.

Setbacks:

We did not have an intubating manikin so participants did not have a chance to practice intubation skills. In any case, they will have a chance at intubating real patients during their anaesthetic rotation. It is also quite difficult to organize for animal parts such as tracheas to be provided for practice in Honiara.

Future Plans:

Acquire 2 intubating manikins and one manikin with inflatable lungs for our skill stations. If possible, acquiring some models for practicing IV cannulation and chest tube insertion would also be very useful. Otherwise, we may have to be creative in improvising and creating our own models for use during some of the skill stations.

This group and subsequent groups should go through the course again after about 2 or 3 years and get some of the candidates to do the instructor course then.

Acknowledgements:

I would like to acknowledge the assistance rendered by Suzanne Pohlner in getting the RMOs together and in organizing for the catering and printing of the course manuals and certificates.

A further acknowledgment is made to the Drs. D. Pikacha, D. Baerodo, P. Houasia and B. Anigafutu for instructing at the course and to Dr. Claude Posala, Head of Ophthalmology Department for allowing us to use the Regional Eye Centre Tutorial room for those two days.

**Prepared by Dr. Kaeni Agiomea
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Primary Trauma Care Course Programme

Day 1	Duration		Presenter
8.30	30'	Welcome and Introductions and MCQ	Agiomea
9.00	15'	Local Trauma Perspective	Houasia
9.15	15'	PTC Overview	Agiomea
9.30	30'	ABCDE of Trauma and Primary survey	Baerodo
10.00	10'	BREAK	
10.10	40'	Airway and Breathing	Anigafutu
10.50	35'	Circulation and Shock	Agiomea
11.25	35'	Chest Injuries	Pikacha
12.00	45'	LUNCH BREAK	
12.45	80'	<i>Skill stations</i>	ALL
	(40')	<i>Basic / Advanced Airway</i>	Anigafutu/Agiomea
	(20')	<i>Cervical spine / Logroll</i>	Baerodo
	(20')	<i>Chest drains</i>	Pikacha
14.05	10'	Break	
14.15	50'	Abdominal, pelvic and Limb injuries	Houasia/Pikacha
15.05	15'	Demonstration Scenario	ALL
15.20	70'	Scenario Practice (in groups)	ALL
16.30	5'	Overview and summary	Agiomea/ALL

Primary Trauma Care Course Programme

Day 2			
8.30	45'	Head and Spinal injuries	Houasia
9.15	30'	Trauma in Children and Pregnancy	Pikacha
9.45	30'	Burns	Baerodo
10.15	15'	BREAK	
10.30	80' (20') (20') (20') (20')	Workshops <i>Analgesia</i> <i>Transportation</i> <i>Paediatric trauma</i> <i>Neurological assessment</i>	(ALL) Agiomea Anigafutu Pikacha Baerodo
12.00	30'	Secondary survey	Baerodo
12.30	40'	LUNCH BREAK	
13.10	50'	Disaster management	Anigafutu
14.00	80'	Scenarios (in groups)	ALL
15.20	10'	Break	
15.30	15'	Repeat MCQ's	Agiomea
15.45	20'	Summary. Feedback and Evaluation	Agiomea/ALL
16.05	15'	Close and discussion/planning of instructor day	Agiomea/ALL
16.20		Certificates	ALL