

COURSE REPORT REGIONAL HEALTH
DIRECTORATE, BOLGATANGA, UPPPER EAST
REGION, GHANA 3 - 7 October 2016

Report Presented by: Malvena Stuart Taylor



G.A.S Partnership
Collaborating for health in Northern Ghana

PT

PTC Ghana Courses (3rd – 4th; 6th – 7th) &
Instructor Course (5th) Bolgatanga,

October 2016



Summary

The fourth & fifth PTC courses were held for a total of 42 candidates who came from the Regional Hospital of Bolgatanga, Upper East region of Ghana. From this 7 instructors candidates (IC) were identified and all successfully completed the 1-day Training of Trainers course which was held one day later. 6 of these IC's taught on the 2nd course over the next two days. From that course a further 5 candidates were identified for future training as trainers.

Background

The first two PTC courses and ToT course for Ghana, (indeed for the West of Africa) were established in 2015. Recently 2 of the trained Ghana instructors have been invited to teach on the 1st Accra course.

At the beginning of this year a review of trauma services in UER identified the need to train up a bigger critical mass of staff to work in and train others within the Region's main trauma centre at Bolgatanga. Therefore this time the courses focused on training healthcare staff from that hospital. It is anticipated that there will be (a) an increased likelihood for a trained member of staff to be available to lead a team to manage a major trauma case; (b) sufficient trainers to cascade training to other local and regional staff, using either the PTC formula of 2-day courses or using a modular format delivered over several weeks. Funding was provided through the Ghana-Africans-Southampton (G.A.S.) partnership which is very grateful for funds provided from THET and the Association of Anaesthetists of Great Britain & Ireland.

Unique to previous courses, members of the Radiography Department were invited to sit in on the course during the 2 mornings of the PTC course. The rationale lay in the fact that training was being concentrated on healthcare staff of the Region's largest hospital where trauma services are undergoing significant development. Of particular value to the course candidates was an outline by the Principal Radiographer on which imaging could help in the diagnostic process of trauma cases. In addition the radiography team learnt the value of, and technique of safe log-roll in trauma victims with potential spinal cord injury. Prior to this knowledge the radiographer would not have recommended Anterior-Posterior films of, say the chest, abdomen or pelvis. Once they could see how safe transfer of a trauma patient could be made onto an XRay plate, this opened up diagnostic options. It also emphasized the team-working required in managing these complex cases – for example there was emphasis on trauma care staff to provide relevant information when requesting imaging *and* also the value of diagnostic opinions provided by the radiography team based on their experience of viewing images each day.

Preparation & Venue

The Regional Hospital was the venue for all courses. The size of the teaching room and provision of snacks and meals were fine. Candidates were identified before the UK faculty arrived in the area and all attended at the allocated time

which made keeping to time much easier than in the past. Due to limited funds much of the printed material was prepared and shipped over from the UK. USB pens were provided to candidates to file the course manual. Trained instructors were also able to download their teaching material and slides.

Despite collating relevant training equipment from previous courses, some items were missing and these needed to be replaced at late notice. Also washroom facilities were very limited despite being in a principal teaching hospital. Finally an intubating mannequin (Ambu® Airway Management Trainer) was purchased through G.A.S. Partnership funds but this proved to be not adequate for teaching advanced airway management (it is not intended, disappointingly for basic airway control) – we would not recommend this model in the future.

Course Participants

The participants were a mixture of local physician assistant (PA) anaesthetists or medical PA's, ICU, theatre and ward staff with 1 physician on each course.

Course faculty

Course 1 (October 3rd & 4th)

Mr Samuel Akolgo – Course Director (PA Anaesthetist and G.A.S. Ghana lead for Anaesthetics & Theatres, Sandema, UER, Ghana)

Mr. Jeremiah Tamondo PA Anaesthetist, Zebilla, UER, Ghana

Dr. Malvena Stuart Taylor – Course Director mentor [Consultant Anaesthetist (*)]

Dr. Tsitsi Madamombe [Consultant Anaesthetist (*)]

Dr. Nadeam Mujtaba [ST5 Trainee in Anaesthesia, Wessex]

()University Hospitals Southampton NHS Trust, UK*

Instructor Course (October 5th)

As above with the exception of Mr. Tamondo who was required to return to his hospital, being the sole PA anaesthetist there.

Course 2 (October 5th & 6th)

Mr Samuel Akolgo – Course Director

Moses Adimazoya Ayelegum, Physician Assistant Anaesthetist (IC)

Rosemary Yeboah, Staff Midwife (Instructor Candidate)

Bugre Felicia, ICU Nurse (IC)

Billey Mohammed, Staff Nurse, Male Ward (IC)

Ruth Fatchu, ICU Nursing Officer (IC)

Gilbert Azanto, Principal Physician Assistant Anaesthetist for the region (IC)

Mentors:

Dr. Malvena Stuart Taylor, UK

Dr. Tsitsi Madamombe, UK

Dr. Nadeam Mujtaba, UK

Results & statistics

Course 1

20 participants trained in PTC

7 candidates were selected to complete the Training of Trainers course the following day

MCQ average increased from 52% to 66%

Confidence matrix result increased from 64% to 90%

Instructor course

7 new instructors trained using the new (2016) instructor course materials & programme

Course 2

21 participants trained in PTC

MCQ average increased from 54% to 72%

Confidence matrix result increased from 64% to 84%

Recommendations for the Future

1. To demarcate training equipment in order that future courses can progress more easily.
2. To have more PA anaesthetists in the region to facilitate other trained instructors to support courses (this increase in staffing is already underway but typically the hospitals in this region have only 1 anaesthetists (PA) and there are no medically-trained anaesthetists within 100km.
3. Fund an appropriate training mannequin for basic and advanced airway since Bag-Valve-Mask ventilation is such a pivotal skill in the hands of staff caring for trauma victims this cannot be easily taught without one.
4. Support to encourage local modular training to increase the number of trained staff *and* to provide refresher training for those already trained in PTC.
5. Consider a web-based activity with regular scenario practice, leading to annual CPD credits.

Acknowledgements

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Ghana Health Services, UER, Ghana for their continued support and logistics in running these courses (in particular Felicia Bawa)

Afrikids Charity for their trust, encouragement and day-to-day needs (in particular Raymond Ayinne)

Southampton & Salisbury Hospitals for helping us to configure our work schedules back in the UK during our absence (for which we promise to make up clinically)

Association of Anaesthetists of Great Britain and Ireland for their generous IRG grant

THET for supporting our G.A.S. Radiography training.

My final thanks go to Mr Samuel Akolgo, PA Anaesthetist, without whose leadership and hard work, such courses would not have been able to take place and to Mr Jeremiah Tamondo who provided excellent training during the 1st course.

Malvena Stuart Taylor
October 16th 2016

Appendix – Class lists (names in blue identified as potential instructors)

Course 1:

Amoah Anetu Damien
Vida Anafo
Moses Adimazoya Ayelegum
Ayobi Capiere Theresah
Alidu Muniratu Nabubie
Adubia Comfort
Selina Akongya
Rosemary Yeboah
Muniratu Is-Haq
Anyimadu Enoch
Dr Gibil Bertha Volematome
Ayine Eric Anafo
Bugre Felicia
Adombila Atambila Patrick
Ayisha Uthman
Billey Mohammed
Nsobila Thomas Adongo
Emmanuel Y. Mankubasi
Issahaku Moro Sandah
Ruth Fatchu
Gilbert Azanto (observer, having completed PTC in 2015)

Course 2:

Apotogra Samuel Aduko
Achana Hilda
Saeed Atou-Karim
Veronica Akurigo Lamisi
Atumolga A. Anthony
Danikuu Albert
Abdulai Adam
Agnes Addy
Asampana Pricilla
Oppong Esther
Kolog Judith Dok
Adjei Lydia
Naaba Victoria
Emmanuel Geyevo
Issahaku Ibrahim Abu
Abdul Korah Martin
Felicia Issah
Kardiri B Osman
Solace Essiam
Ernestina Addah
Ayendago Ben

RADIOGRAPHY STAFF

Saeed Ibrahim Bamporimbu (day 1)
Hamza Labaran (day 1)
Yamba Lawrence (day 1)
Abu Imoro (both days)
Anafo Abeenaba Vincent (both days)
Awindago Awudu (day 2)
Awini Paul (day 2)
Ayolga Joeseph Ayaaba (day 2)