# PTC COURSE REPORT: 2<sup>nd</sup> & 3<sup>rd</sup> NOVEMBER 2017: CECILIA MAKIWANE HOSPITAL: EAST LONDON: EASTERN CAPE: SOUTH AFRICA

## Prepared by Dr Howard J Kingu

#### Purpose of the visit

As part of the Eastern Cape Department of Health initiative for continuous empowering the Eastern Cape Province health caregivers for the years 2017 - 22, the Regional Training Centre of the department of Health and the Primary Trauma Care - Africa region organised a 2 Day PTC foundation course for the 2<sup>nd</sup> and 3<sup>rd</sup> November, 2017 at Cecilia Makiwane Hospital (CMH), East London in the Eastern Cape Province of South Africa.

#### **Executive summary**

The Eastern Cape Province is located between the more affluent Western Cape, Northern Cape, Free state, and Kwa Zulu Natal provinces of South Africa and Lesotho. About 7 million people (12.6% of the population of South Africa) live in the Eastern Cape province. Of this population, approximately 5.3 million people reside within this mostly rural Eastern region of the Eastern Cape (Statistics South Africa 2016). The scattered health facilities provide health services to patients involved with Motor Vehicle Accidents, assaults and other trauma conditions from this part of South Africa with a total surface area of 168, 966 km². These patients come first to a district or regional hospital for stabilisation prior to referral to tertiary health facilities for definitive management.

#### Key staff involved in planning and co-ordinating

The course was initiated by Dr Jayakrishnan in his capacity as the Head of the Department of Surgery at Cecelia Makiwane Hospital. This activity was scheduled as an in- reach programme and included the staff from Nelson Mandela Central Hospital and doctors from various district hospitals apart from the doctors in the surgical and emergency services in Cecelia Makiwane. The course was fully funded by the Department of Health Eastern Cape. The other key people involved in facilitating the course were Dr Xamlashe the CEO of Cecelia Makiwane Hospital, Dr Yose - Xasa, Dr Nozipo Jaxta, Senior Manager for Regional Training and Ms. Vara, Senior Manager in charge of the Health Resource Centre, the venue that was utilized for the activity.

#### Professional aspects of the visit

The course was undertaken as part of the in reach activity of the Department of Surgery at CMH. The main expectations from the course were to introduce the staff to a protocoled approach to the trauma patient and to recognise the importance of team work. The course helped the doctors from various hospitals to share their challenges as

well as experience in managing the trauma patient. There is also a proposal to incorporate nurses and paramedics to the training platform since in our district hospitals they are actively involved in the management of trauma patients. It also helped the participants to build a rapport with the doctors in the referring centre.



Dr Nozipo Jaxta and Dr Yose - Xasa





Dr Jayakrishnan

Dr Xamlashe

#### **Course instructors**

- 1. Professor Adupa Dhaffala: Professor: Walter Sisulu University
- 2. Dr Howard Kingu: Consultant General Surgeon & Senior Lecturer: Walter Sisulu University
- 3. Dr Radhakrishnan Jayakrishnan: Consultant General Surgeon: Cecilia Makiwane Hospital
- 4. Dr David O Oloruntoba: Consultant Orthopedic Surgeon: Mthatha Eastern Cape.



Dr David O Oloruntoba



Dr Howard Kingu



Professor Adupa Dhaffala



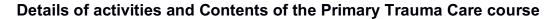
Dr Radhakrishnan Jayakrishnan

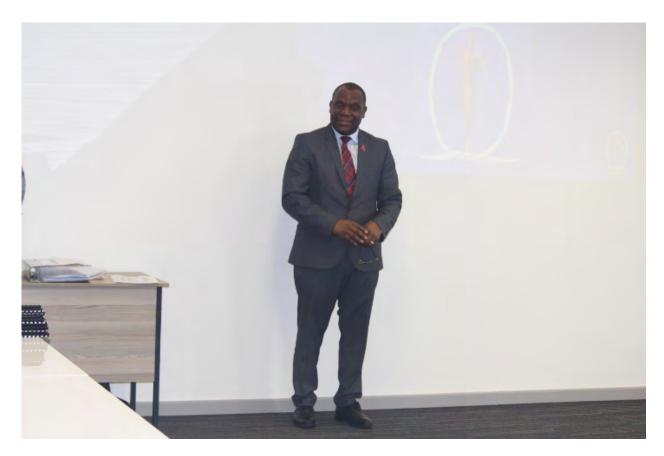
Professor A Dhaffala, Dr David O Oloruntoba and Dr Howard Kingu travelled from Mthatha on the 2<sup>nd</sup> November, 2017. We had a brief meeting with the host Dr R. Jayakrishnan whose good office as the Head of the Department of Surgery at Cecelia Makiwane Hospital had arranged for the invitations, the venue, teaching materials, catering and accommodation for the visiting instructors. After inspecting the venue, planning the activities, all was set for the 2 day PTC foundation course scheduled on the 2<sup>nd</sup> and the 3<sup>rd</sup> of November, 2017

By 7:30 the next day eager participants were already assembled at the venue site and registration had started. This was completed by 8:00 and course started on schedule with a brief introduction and MCQs. The CEO of Cecelia Makiwane Hospital Dr Xamlashe officially opened the PTC course at 9:00 am.

# Course participants

SURNAME & INITIALS	MP NO	HOSPITAL
KELA LO	53479963	CMH
YUSUF RA	55471901	GREY
SONGABE	0714178	NMCH
SF		
GEBE NB	0699330	NMCH
ADENIYI OV	0644145	CMH
KHARED TR	0429198	CMH FAM MED
MJIKWA N	0737399	STUTTERHEIM
PONA-	0804320	CMH
NABELA S		
THOMAS N	0794279	CMH
SIFUBA S	0367516	CMH
NDZABELA V	0737828	CMH
MATANDA K	0811217	CMH
GAJU NP	0691864	NMCH
MPIKASHE M	0668443	NMCH
EKPEBEGH	0600016	NMCH
DC		
MSIKINYA N	0691658	MMMH
MABINDLA B	0595136	ST BARNABAS
MNYANDA	0526959	CMH A&E
YJ		
NOGEMAWE	0547573	DVDH
K		
TITI V	0723894	NMCH A&E
MABIJA S	0782653	BUTTERWORTH
MITRA A	0426016	CMH
MANTSHONGO F	0785628	NGANGELIZWE
TSHETE SS	0797545	NOMPUMELELO
JAXA N		BISHO ECDOH
BLUNDELL R		





Dr Xamlashe: CEO of Cecelia Makiwane Hospital officially opening the course and welcoming participants and instructors.

## 2 DAY PTC COURSE PROGRAMME: 2<sup>nd</sup> & 3<sup>rd</sup> November 2017 CECILIA MAKIWANE HOSPITAL: EAST LONDON: EASTERN CAPE.

TIME	TOPIC		INSTRUCTOR
8.30	OPENING		
9.00	15 minutes	Introduction	Mr. Kingu
9.15	30 minutes	Local trauma perspective and MCQ	Prof. Dhaffala
9.45	30 minutes	ABCDE of Trauma and Primary survey	Mr. Kingu
10.15	45 minutes	Airway and Breathing	Dr. Oloruntoba
11.00	15 minutes	BREAK	
10.15	45 minutes	Circulation and Shock	Mr.Jayakrishnan
12.00	80 minutes	Skill stations Airway	Dr. Oloruntoba

		Cervical spine	Prof. Dhaffala
		Chest drains	Mr Jayakrishnan
		IV access	Mr. Kingu
13.20	40 minutes	LUNCH BREAK	
14.00	30 minutes	Secondary survey	Dr Kingu
14.30	15 minutes	Demonstration Scenario	All
14.45	60 minutes	Scenarios	All
15.45	15 minutes	BREAK	
16.00	30 minutes	Chest injuries	Mr Jayakrishnan
16.30	15 minutes	Overview and summary	Dr Oloruntoba
DAY 2			
9.00	30 minutes	Head and Spinal injuries	Prof. Dhaffala
9.30	30 minutes	Abdominal and Limb injuries	Mr Jayakrishnan
10.00	30 minutes	Paediatrics and Obstetrics	Dr Oloruntoba
10.30	15 minutes	BREAK	
10.45	30 minutes	Burns	Mr. Kingu
11.15	80 minutes	Workshops Analgesia	Mr. Kingu
		Transportation	Mr Jayakrishnan
		Paediatrics	Dr. Oloruntoba
		Neurological assessment	Prof Dhaffala
12.35	55 minutes	LUNCH BREAK	
13.30	30 minutes	Disaster management	Dr. Oloruntoba
14.00	30 minutes	Demonstration scenarios	All
14.30	60 minutes	Scenarios	All
15.30	15 minutes	BREAK	
15.45	15 minutes	Multiple choice paper	All
16.00	15 minutes	Summary and evaluation	Dr. Kingu
16.15	15 minutes	Certificates and close	All



Eager and attentive participants



Airway and Breathing



Head and spinal injury lecture



Skill station: Airway



Log roll



Analgesia

# Subsidiary activities:



Teamwork and interaction with colleagues of different disciplines and cadres



Catering services



Execution of scenarios: participants



Execution of scenarios: participants

# Feedback:





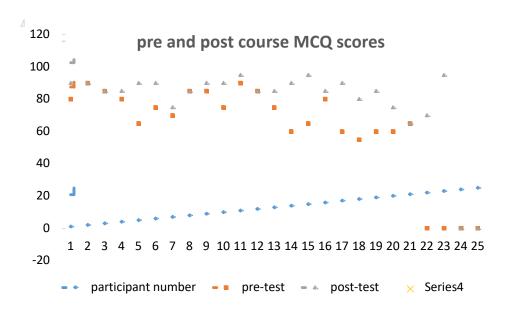


The majority of the participants were confident and expected a huge improvement in trauma care at their place of work in the future after this PTC course.



Dr Yose-Xasa, Senior Manager Medical Services handing over closing remarks on this very successful PTC course.

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



#### PRE-COURSE CONFIDENCE MATRIX

Please put a "X" in the box that best applies to you

1 = not confident at all

5 = completely confident

	How confident do you feel in managing:	1	2	3	4	5
Α	A 5 year old child with a fractured pelvis					
В	A 30 year old pregnant woman with a fracture femur					
С	A 25 year old man with a knife in his abdomen					
D	A 60 year old female with 40% burns					
Ε	A 50 year old man unconscious with a fixed dilated pupil					
F	A 20 year old male who is conscious but cannot move his legs					
G	A 2 year old child with major haemorrhage from a traumatic					
	amputation of his leg					
Н	A 50 year old man cyanosed from a tension pneumothorax					

## **Pre-course Trauma management questions**

1	What <b>TWO</b> things would you like to learn from this course?	
2a	What was the <b>last</b> trauma case	Traumatic Brain Injury due to MVA (5) Blunt Abdominal injury (2)

	that worried you?	Penetrating stab R eye ball (1) Blunt chest trauma with diaphragmatic
		rupture (1) Haemorrhagic shock (2)
		Spinal injury (4) Left femur fracture (1)
2b	How did you manage it? (25 words max)	Lon formal madrate (1)
2c	What concerns did you have with this case?	
5a	How many trauma admissions per year (approximately) does <b>your</b> hospital manage?	
5b	How many trauma admissions per month (approx) are you involved in managing?	
6	How did you hear about the PTC course?	

#### **PLEASE NOTE:**

Being a recent addition to the PTC report, the PTC pre-course Participation Form was not distributed to the participants before the course began and therefore regrettably it was not filled.

#### POST-COURSE CONFIDENCE MATRIX

Please put a "X" in the box that best applies to you

1 = not confident at all

5 = completely confident

	How confident do you feel in managing:	1	2	3	4	5
Α	A 5 year old child with a fractured pelvis			2	14	10
В	A 30 year old pregnant woman with a fracture femur				8	15
С	A 25 year old man with a knife in his abdomen			2	7	13
D	A 60 year old female with 40% burns			1	12	9
Е	A 50 year old man unconscious with a fixed dilated pupil				10	12
F	A 20 year old male who is conscious but cannot move his legs			1	9	12
G	A 2 year old child with major haemorrhage from a traumatic			2	9	9
	amputation of his leg					
Н	A 50 year old man cyanosed from a tension pneumothorax				3	19

#### 3. Post-course Trauma Questions

- a. What is the most useful thing you have learned on this course?
  - Systematic approach in terms of urgency (12)
  - Trauma management in Paediatrics and Obstetrics (7)
  - Current operational guidelines in managing injured patients (3)
  - Getting workable strategies used in management of trauma (1)
  - Use of analgesia in shock patients (1)
  - Care of the spine and log-roll (3)
  - Appropriate triage and preventing complications (2)
  - Management of spinal shock (2)
  - Call for help when not coping (1)
  - Fluid management in trauma (1)
  - Managing burns (1)
  - Importance of re-assessment of the deteriorating patient after good initial response (1)
  - Intubation skills (1)
  - Remaining calm (1)
- b. What **TWO** things do you plan to change in your trauma management as a result of this course?
  - More team involvement (5)
  - Put up protocols and posters with GC Score, drug dosages and fluids for resuscitation in A&E (2)
  - Adopt the systematic approach in trauma patient management (9)
  - Care of the cervical spine (2)
  - Give O<sub>2</sub> to trauma patients (1)
  - Triage of patients (1)
  - Resuscitation trolley always ready (2)
  - A&E resuscitation drills (2)
  - Exposure to all trauma patients (1)
  - Re-assessment of the deteriorating patient after good initial response (3)
  - Fluid management in trauma (1)
  - Use of analgesia in trauma patients (3)
  - Secondary survey (1)
  - PR examination (1)
  - Improve availability of necessary equipment and drugs (2)
  - More nurses and doctors to attend PTC training (2)
  - Refine paediatric management (2)

- Call for help when not coping (1)
- Transfer only stable patients for definitive care (1)
- Determine blood gases (1)
- Burns management (1)
- Interosseous access (1)
- c. Thinking about the last trauma case that you worried you (described in the precourse questionnaire at the beginning of this course) would you change anything in your management? Please explain.
  - Secondary survey (4)
  - C-spine care and log-roll (5)
  - Prevent secondary brain injury (1)
  - Systemic approach in trauma patient management (12)
  - Pain management in trauma (1)
  - Correct size of ET tube (2)
  - Fluid management in trauma (5)
  - Early intubation (3)
  - Refer only when the patient is stable (1)
  - Management of spinal injury (1)
  - Early surgical consultation (4)

#### 5. Course Feedback Questions

a. We would be very grateful for your feedback on the course so help us to improve the course in the future. Please put a cross 'X' in the most appropriate column

	Very Poor 1	Poor 2	Average 3	Good 4	Very Good 5
DAY 1					
Local trauma perspective			1	10	11
The ABCDE of trauma and				5	17
Primary					
Survey					
Airway and breathing				5	17
Circulation and shock				5	17
Skill stations				7	15
Secondary Survey			1	5	16

Demonstration scenario by		4	18
instructors			
Scenario Practice		4	18
Chest trauma		3	19
DAY 2			
Head trauma		4	18
Spinal trauma		3	19
Abdominal trauma		3	19
Limb trauma		4	18
Trauma in children		6	16
Trauma in pregnancy		6	16
Burns		3	19
Workshops		6	16
Disaster management		6	16
Scenarios practice Day 2		4	18
MCQ Exam	1	3	6

#### What was the best part of the course?

- Scenarios (13)
- Skill stations (1)
- Workshops (1)
- Very great instructors (2)
- Team work (3)
- Primary survey (1)
- Excellent course generally (2)
- Spinal injury management (1)
- Paediatric trauma management (1)
- Interactive sessions (1)
- The whole course was done perfectly (1)

## What would you change?

- 2-day course to be 3-day course (4)
- Catering (1)
- More time for scenarios (1)
- Avoid running a course on Friday (1)
   Air conditioning in the venue (1)
- Increase time for skills stations (1)
- Better organization (1)
- No change (12)
- More doctors and nurses to be PTC trained (1)

- Stiff dummies for intubation (1)
- Include imaging training (1)
- Increase number of mannequins for practical practice (2)

#### NOTE:

Figures in brackets and those shown in cells is the number of participants giving such a feedback

#### **Certificates**

1. ...

The following participants were given the PTC 2-day foundation course certificates for their active participation and completing the course

2. .... 3. ..... 4. ..... 5. ...... 6. ...... 7. ..... 8. ..... 9. ..... 10..... 11..... 12..... 13..... 14..... 15..... 16..... 17..... 18.....

19..... 20.... 21.... 22.... 23.... 24....



Dr Yose-Xasa (Senior Manager Medical Service) handing over the PTC 2-day foundation course certificate to Dr Yusuf RA from Greys Hospital



Group photo of newly PTC trained care-givers and their instructors

Observations and recommendations for future visits in your speciality and suggestions as to how such visits could be modified to contribute further to the projects objectives

- 1. This activity was scheduled as an in reach programme including from Nelson Mandela Central Hospital staff and doctors from various district hospitals.
- 2. This activity was meant to build a Trauma Care Training capacity for the Eastern Cape Hospitals centered at Cecilia Makiwane Hospital to identify and train a fresh team of PTC instructors who will continue instructing all health care givers in the province
- 3. Keeping the course basic, simple and reproducible which is very crucial even for the practicing surgical specialist continuous carrier development
- 4. The course may be escalated to include radiology sessions as most Eastern Cape province HEALTH FACILITIES have the available infrastructure.

Department of Health Eastern Cape paid for the instructors and participant's accommodation (except those provided for by the district / the province/departments) Venue and Catering. Department of Health Eastern Cape also provided all the stationary used as well as paying for printing of the PTC manuals and certificates. Cecilia Makiwane Hospital, EMS Buffalo City District, Walter Sisulu University and PTC Africa provided all the equipment used in teaching the course.

#### Sent to

- 1. The Primary Trauma Care Head Office,
- 2. A copy to all participating instructors,
- 3. A copy to <a href="mailto:admin@primarytraumacare.org">admin@primarytraumacare.org</a>.
- 4. A copy must be sent to the course co-coordinator who organized the Primary Trauma Care programme in that country
- 5. The organization funding it.