

COURSE REPORT REGIONAL HEALTH DIRECTORATE, UPPPER EAST REGION,
GHANA 17 - 24 May 2018

Report Presented by: Malvena Stuart Taylor

PTC



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

PTC Ghana Courses
(17th - 18th, Bolgatanga; 21st - 22nd, Bawku; 23rd-24th, Zebilla)
& Instructor Course (25th) Bolgatanga,
May 2018



Candidates at the end of
a PTC course in
Bolgatanga, Ghana
17-18 May 2018



Candidates at the end of
a PTC course in Bawku,
Ghana
21-22 May 2018



Candidates at the end of
a PTC course in Zebilla,
Ghana
23-24 May 2018

Summary

Through a grant generously awarded by the Tropical Health Education Trust (THET), plans were established to increase the pool of trained staff and trained trainers to a) continue improving trauma care in the region; (b) extend this training, using Ghana-trained staff, to their neighbouring region, Upper West which, hitherto, had not received such training.

3 PTC and 1 ToT course were run around the region. 91 candidates successfully completed the 2-day PTC course. 10 of these were selected and successfully completed the 1-day ToT course. A selection of these trainers plus those trained in previous years will go on to deliver PTC in Upper West Region this October as part of an intensive 2-week programme.

Background

Up to this year there had been 5 PTC courses and 2 Training of Trainer (ToT) courses in Upper East Region of Ghana. It was recognised by healthcare staff in the region that capacity building needed to continue but, with further ToT courses, there would be sufficient number of trainers to deliver the courses to their neighbouring region, Upper West, an area that has not had the same training input as Upper East.

An intensive 2-week course was devised whereby 3 PTC courses would be run throughout the region. Due to timetabling of the UK faculty, the ToT course could only be run at the end of this fortnight, therefore the newly trained trainers will require mentoring when they participate in their first teaching experience in October in Upper West.

Preparation and Planning:

The 1st day was dedicated to bringing regional instructors together since there had been 2 years since the last course. This provided the opportunity to allocate lectures and skill stations to individuals since this did not take place remotely prior to UK faculty arriving in Ghana.

Unlike previous years, the local faculty decided it would be more effective to take the training to key hospitals and train local staff together rather than run the courses centrally in the region. The principle and outcome were positive. However, what this change in practice did throw up were the logistical challenges of setting up such an intensive programme in a new venue. Certainly, lessons were learnt by all, including the 2 new Ghanaian course directors:

1. Ensure the room is large enough for 4 skill stations. There was a late venue change by a hospital administrator who may not have appreciated the geographical requirements of such an intensive course.
2. As before washroom facility were sparse and a specific request needed to be made to open up a local facility, given the long days of training and relatively high number of attendees.
3. Impress upon the administrators the importance in recruiting fresh staff to the training (rather than taken them straight from a night duty into the course as happened on a few occasions).
4. Ensure any candidate with young family have identified a carer – it had been assumed that a young baby could be brought in with the mother for the day's training and unfortunately this resulted in one candidate being asked to rebook when child care was available.

5. CPD approval should be sought ahead of time. This is probably best applied for via the country Medical (& Dental) Council since reciprocal approval can follow from other Colleges. However, there is a cost to this, unlike in the UK (e.g. £80 for 1st time approval, plus £80 for a year's recognition. This usually requires a timetable and mini CV of all instructors.
6. Be prepared to teach with electricity cuts (which were frequent). For example, flip-charts and pens became indispensable when faculty were unable to project slides.

Course Participants

The participants were a mixture of local physician assistant (PA) anaesthetists or medical PA's, ICU, theatre and ward staff, including midwives, ENT and Psychiatry. There were no doctors able to join the course which is disappointing but not surprising given the solo role they often have in local hospitals.

Course faculty

Dr. Malvena Stuart Taylor, UK

Course 1 (Bolgatanga May 17-18th)

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

Ms Ruth Fatchu, ICU Nursing Officer, Bolgatanga, UER, Ghana

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

Mr Sule Halifa, PA Anaesthetist, Bawku, UER, Ghana

Mr. Musah Raubila, PA Anaesthetist, Bawku, UER, Ghana

Ms Grace Acheampong, PA Anaesthetist, Sandema, UER, Ghana

Mr. Gilbert Azanto, Senior PA Anaesthetist, Bolgatanga, UER, Ghana

Course 2 (May 21-22nd)

Mr. Musah Raubila, PA Anaesthetist, Bawku, UER, Ghana – Course Director

Mr. Matthew Ayamba

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

Ms Grace Acheampong, PA Anaesthetist, Sandema, UER, Ghana

Mr Sule Halifa, PA Anaesthetist, Bawku, UER, Ghana

Dr. Malvena Stuart Taylor, Retired Consultant Anaesthetist, UK

Course 3 (May 23-24th)

Mr. Jeremiah Tamondo PA Anaesthetist, Zebilla, UER, Ghana – Course Director

Mr. Musah Raubila, PA Anaesthetist, Bawku, UER, Ghana

Mr. Matthew Ayamba

Ms Grace Acheampong, PA Anaesthetist, Sandema, UER, Ghana

Mr Sule Halifa, PA Anaesthetist, Bawku, UER, Ghana

Mr. Gilbert Azanto, Senior PA Anaesthetist, Bolgatanga, UER, Ghana

Dr. Malvena Stuart Taylor, Retired Consultant Anaesthetist, UK

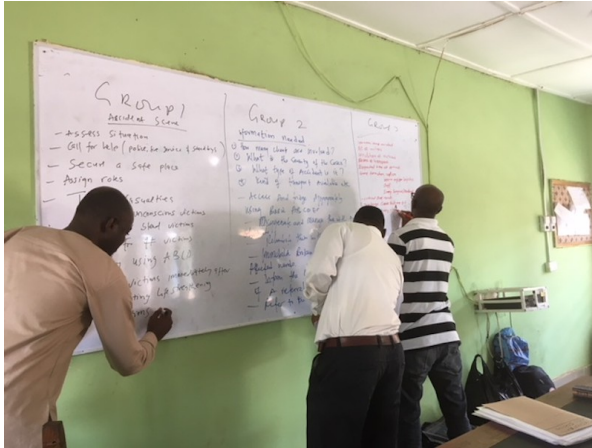
Instructor Course (May 25th)

Mr. Samuel Akolgo, Ghana

Mr. Musah Raubila, Ghana

Prince Ibrahim – ICU Lead Nurse, Bolgatanga, Ghana

Dr. Malvena Stuart Taylor, UK



Candidates involved in Disaster Management Workshop

Local Instructor running Neurological Assessment Workshop



Results & statistics

91 candidates completed PTC training

70 candidates (77%) increased their MCQ score (by 1-9 correct answers out of 20)

8 candidates maintained their score pre- and post-course

10 candidates dropped their score – feedback from a general discussion outlined how MCQ results may have dropped but the candidates had a better understanding of the issue being tested whereas pre-course, much was guesswork.

Confidence increased in 79 candidates (87%) by 0.25-2.5 points (5-point scale)

2 candidates maintained their score

9 candidates dropped their score – this would suggest consolidation of training would be of benefit.

Feedback on the course training was 4.45 (range 1-5) with very positive comments regarding perceived benefit to candidates of training received. Of particular note was the hands-on elements which is a core theme of the course. As on previous courses, there was a frequent request to extend the length of the course which is probably impractical. However, it does suggest that local top-up refresher sessions would help to consolidate and maintain knowledge and skills.

Instructor course

10 new instructors were trained but will need to wait until further courses before they can actually teach as provisional instructors.

Recommendations from the past that were applied to this course:

1. To demarcate training equipment in order that future courses can progress more easily – *whilst this was achieved, there were still training items missing and this made it challenging to provide authentic scenario experience. The final solution was to purchase a large suitcase and storage box clearly labelled for PTC training and only made available to appropriate staff.*
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 – *achieved with this cohort of training.*
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 – *achieved through the THET fund granted this year. I would strongly recommend the Adult Airway Management Trainer Torso (Ref: PP0086) by Simulaid, cost in 2018 £1,265 excl VAT.*
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 – *not yet achieved*
5. Consider a web-based activity with regular scenario practice, leading to annual CPD credits – *not yet achieved.*

Acknowledgements

I am very grateful to the following individuals and organizations:

Tropical Health Education Trust (THET) for their generous grant in supporting the training this year, 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 logistical support.

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 Musah Raubila and Mr. Jeremiah Tamondo who took on the new role of Course Director in their respective hospitals.

Malvena Stuart Taylor
July 2018

Appendix – Class lists (*) = also completed the ToT course

Course 1 (Bolgatanga):

Issah Felicia
Mohammed Mariam
Yinpumongsor Joseph
Froko Charlotte Shemirah
Justina Ayorobila Gockah
Janet Alusia
Prudence Danle
Genevieve Kpanti
Abanga Joel
Avane Matthew
Azumah Frank
Konu Emmanuel Kwaku ()*
Lambon Jafouk Thomas ()*
Ibrahim Ahmed
Ayambire Esther A
Ayinsakiya Isabella
Gifty Tater ()*
Richard Dagba
Akiama Prosper
Ayamga Josephine Lamisi
Akolbire Bismark
Rosemary Yeboah
Abagna Irene
Atsu Mawuli Julius
Alhassan Safura
Kwaning Fred

Michael Amoah Atua () – attended PTC in 2016 but completed ToT this year*

Course 2 (Bawku):

Builari Adamu
John Bosco Kwame
Atambilla Hamidu Salamatu
Moses Ndaago Abumah
Ibrahim Karimu Azumah
Abudu Richard Banima-Njah
Ninten Paul
Joyce Lomokie Adjokatse
Ayaaba Jacob*
Sumaila Gariba, Abubakari
Soter Y Musah
James Manmara
Alhassan Issahaku Modoo
Jackson Malariyo Laar
Andrew Anabah ()*
Karim Tanimu

Martha Osei Gyimah
Agana Timothy
Nyaaba Joseph Akolgo
Konlan Benjamin Kok
Moses Klamdusib Hamidu
Azongo Joshua ()*
Yakubu Iddi()*
Fidelis Sandow Mamboda
Musah Fuseini
Solomon Delwin Akudugu
Akampawine Felicia
Nabor Nathan Kweku
Stephen Azari Asambo
Asaana Salam Alhassan
Adakudugu Atubiga Paul

Course 3 (Zebilla):

Ayamba Kingsley
Aduri Peter
Asebiga Clement Asoya
Bannor Cecilia
Mba Moses Dee
Ayaaba James Azumah
Adombire Raymond
Akalale Darius Ayinbila
Adams Aminatu
Avoka Mary Anane
Adafabla Calvin Crispin Ayinbire
Amenko Apoore Lawrence
Portia Narki Ibrahim
Amiah Nsumah Monica
Tetty Ernest ()*
Kalilim Azumbil Andrews
Alebga Joseph Bopam
Ibrahim Sualihu Alhassan
Awini Nicholas Yirimea
Prosper Namkina Apasera
Adamu Amadu
Awini Jacob Akparibo
Ayembire Elizabeth
Akunaba Anthony
Issah Mbawin Karim
Isaac Agongo Ayariga
Awini Peter Azua ()*
Nsoh Anaba Isaac ()*
Apepeo Emmanuel
Alaro Bashiru Adiboud
Akontiwak Yakubu Moses ()*