

## COURSE REPORT

NAMPULA, MOZAMBIQUE

11<sup>th</sup> – 15<sup>th</sup> November 2013

Report Presented by: Dr. Amaia Arana

### **COSECSA Oxford Orthopaedic Link (COOL)**

This Primary Trauma Care course is part of a project funded through the Health Partnership Scheme, which is funded by the UK Department for International Development (DFID) for the benefit of the UK and partner country health sectors and managed by the Tropical Health Education Trust (THET). The project is called the COSECSA Oxford Orthopaedic Link (COOL). More information is available at [www.ndorms.ox.ac.uk/cool.php](http://www.ndorms.ox.ac.uk/cool.php).



PTC



# **POST PTC COURSES REPORT**

## **NAMPULA MOZAMBIQUE 11-15 NOVEMBER 2013**

### **PURPOSE OF THE VISIT**

Second visit of the UK PTCF team to Mozambique as part of the COOL African project. The courses were in Nampula, the north region of the country, to continue the implementation of the program throughout Mozambique and facilitate the expansion to the most remote areas. In this occasion the two instructors from the UK worked in collaboration with three other new PTC instructors from the previous courses in Maputo

There was an introduction session by:

- Dr Otilia Neves, representing the Mozambican Ministry of Health. She explained why there is a need to develop a government strategy to promote a greater commitment to obtain an affordable and sustainable improvement in trauma care in Mozambique and the role of the PTC courses as part of such strategy. She also emphasized the compromise of going beyond that and act in other areas such as development of infrastructure, legislation, disaster management planning ...
- Dr Marcelino Vasco, director of the Central Hospital in Nampula, orthopaedic surgeon by training who was also a candidate and became an instructor during the first PTC courses in Maputo in March this year. Dr Vasco focused on his own experience about the courses and his compromise to support and facilitate the courses in Nampula and the north region as a whole
- Dr Amaia Arana, link person of the project for Mozambique, did an introduction about the PTC concept and PTCF philosophy and how it fits within the COOL African project

### **MEDIA COVERAGE**

Trauma, and in particular the huge increment of road traffic accidents (as well as other social problems related to the rapid increase of vehicles in the urban cities) is a big political issue in Mozambique. The Ministry of Health has been heavily involved in the organization and implementation of the PTC courses and, taking advantage of the political momentum, has presented the courses to the public as one of the solutions the government is introducing to ameliorate the problems and improve the situation

During the third day of the courses TV reporters were invited to come into the hospital and filmed some of the ongoing workshops. They interviewed Dr Otilia Neves (organizer of the courses and in charge of the Emergency and Trauma services within the Ministry of Health), Dr Henry Burnand (UK PTC instructor) and several candidates. The interviews were relayed in the TV news that evening

### **KEY STAFF IN PLANNING AND CO-ORDINATING**

Besides all those involved in the main organisation of the COOL project.

The Ministry of Health, represented by Dr Otilia Neves in charge of the Emergency and Trauma services within the Ministry, has taken the implementation of the PTC courses through the country under its umbrella. Dr Neves is the key person for the program to become a reality in Mozambique, her influence and role within the Ministry of Health is proving to be of paramount value. She, in conjunction with the elected regional coordinators, is in charge of selecting the candidates for the courses making sure that the most appropriate and effective candidates with the view of developing the program will attend. She is also the one assuring the organization and economical

provision for the candidates' travel and maintenance, and the expenses for the venue, food, materials, documentation ... to be covered. Dr Neves is in continue close coordination with the UK link Dr Arana in everything related to any requirement for the courses and the program to be successful

Dr Murgue Mandara Mohamed Jamur - anaesthetist, based in Nampula and coordinator of the project in the north region of the country. Murgue has been very busy during these courses, she was not only involved on the selection of the candidates together with Dr Otilia Neves but she was also the one arranging the venue and catering locally, helping with the accommodation and other issues of the overseas candidates,...and dealing with every day little details that were not just happening as planned. She has done an extraordinary job and all of us were very grateful.

From the UK, Dr Amaia Arana has been in charge of the organization logistics, arranging the faculty and the contact person with Mozambique. Annette Clack and Charles Clayton from PTC in Oxford have been of great help from the administrative point of view.

## **COURSE INSTRUCTORS**

Local faculty, formed by three instructors:

- 1.- Dr Murgue Mandara Mohamed Jamur - anaesthetist, based in Nampula and coordinator of the project in the north region of Mozambique
- 2.- Dr Luis Mendes – general surgeon, based in Lichinga – Niassa province, northwest of Nampula province
- 3.- Dr Antonio Luis Assis da Costa – orthopaedic surgeon from Maputo, who travelled to Nampula for the courses.

The overseas faculty was formed by two instructors:

- 4.- Dr Henry Burnand – orthopaedic surgeon registrar. He had no previous PTC experience but has worked in many African countries. Henry speak Portuguese which has been extremely useful
- 5.- Dr Amaia Arana – paediatric anaesthetic consultant. Previous PTC experience. Team lead

The faculty arrived two days before the courses started and meet to see the venue, allocate teaching sessions, check that all the documentation was in order, and finalise the last organizational details

Dr Otilia Neves, who was in Nampula during the full length of the courses observing and helping with logistic aspects, did not hesitate to change roles and help as an instructor when one of the overseas instructors felt indisposed and was unable to attend the course one day

Instructors for the second course were all the above-mentioned plus all the candidates of the first course who also attended the instructors' course and were in the courses for the 5 days duration.

Every evening, at the end of the working day, a faculty meeting was held to evaluate the events of the day, react upon the points mentioned by the candidates during the feedback session and planning the following day. As the new instructors became part of the faculty they did also took part in these meetings.

All the instructors were very enthusiastic and committed. It has being very rewarding to witness the increase understanding of the PTC idea by the local instructors and their compromise to develop programs of expansion of the courses in their own regions

## **COURSES**

The courses were planned in a 2-1-2 model.

All courses were given in Portuguese.

The first day of both standard courses an introduction was given as mentioned above

### **Candidates**

The ministry of health together with Dr Murgue very carefully selected the candidates from different provinces of the region, also covering all the expenses for their transport and accommodation during their stay in Nampula.

There were a total of 42 candidates during the week.

### First course and instructors' course

22 candidates attended the first standard course and the instructors' course, becoming subsequently instructors during the second course. All of them attended the 5 days of the courses and it was clearly noticeable the candidates' increase in motivation, self confidence and role playing as the week advanced.

Of them 12 were medically qualified and 10 were technicians (similar to clinical officers in neighbor countries) or nurses. There were 5 females and 17 males; all females in this group were doctors

Distribution by province:

- Cabo Delgado province - 4 candidates: 1 doctor and 3 technicians
- Niassa province - 5 candidates: 2 doctors and 3 technicians
- Nampula province – 13 candidates – Nampula city: 10 candidates: 6 doctors and 4 technicians
  - Nacola Porto: 1 doctor
  - Ribaue: 1 doctor
  - Moma: 1 doctor

### Second course

During the second course were 20 candidates: 3 doctors and 17 technicians or nurses. There were 4 females in this group of whom 1 was a doctor and 3 were technicians. The candidates in this group did the standard course but not the instructors' course. The newly qualified instructors who attended the first course taught them with the help of the first course instructors

Distribution by province:

- Cabo Delgado province - 5 candidates, all technicians
- Niassa province - 4 candidates: 2 doctors and 2 technicians
- Nampula province – 11 candidates: 1 doctors and 10 technicians

### MCQ's score

**First course**    *Minimum score*    *Maximum score*

*Pre course*            *6/30*                    *26/30*

*Post course*            *11/30*                   *28/30*

<b>Second course</b>	<i>Minimum score</i>	<i>Maximum score</i>
<i>Pre course</i>	<i>5/30</i>	<i>25/30</i>
<i>Post course</i>	<i>12/30</i>	<i>28/30</i>

A short session was held with the new instructors in how to mark the MCQ's, give exam feedback...and they did these tasks for the second group

### Feedback from candidates

Both, the standard and the instructors' courses were highly rated by the candidates. There was unanimity on the value and practical aspects of the courses, and the need of such courses in Mozambique. Enthusiasm and involvement was increasing as the week was passing by and they knew each other better.

Shortage of time was the more consistent comment

Positive:

- \* Practical and dynamic
- \* Different specialties working together as a team – knowing each other's role better
- \* Opportunity to be in the course
- \* ABCD structure – systematic. Helping not to miss anything
- \* Important points made clear – focused methodology
- \* Good review of knowledge
- \* Small group discussions/interaction and workshops very useful and helpful to build bonding
- \* Scenarios – putting things together in practice
- \* Use of Portuguese language
- \* Attitude of instructors – helpful and positive

To be improved:

- \* It would have been very helpful to have the pack (including manuals, program and more detailed information) ahead, well before coming to the course
- \* Not enough time for practical sessions, skill stations, scenarios...
- \* Not enough time to fill the paperwork and MCQ's. More time needs to be allocated to fill up the pre- and post- course forms
- \* Logistic and communication problems during the pre-course organization and information: getting the money to travel on time ,...
- \* Disseminate the course, should be taken to the provinces – *hopefully coming*
- \* Food not ready on time
- \* Time keeping and punctuality– *we worked hard on this with variable success*
- \* Videos to show demonstrations would be useful
- \* Lack of equipment locally

### **Venue**

The courses were held in the Central Hospital of Nampula. The lectures were given in the amphitheater and the practical sessions were divided between the amphitheater, the library and the meetings-room.

Lunch was organized in the library, and coffee, drinks and snacks were provided during the morning and afternoon breaks

## **Teaching Material and Documentation**

All the teaching material and documentation was provided in Portuguese, except the “volunteer agreement” form, which was explained to and signed by the newly qualified instructors.

Folders containing photocopies of all the documentation, the already printed certificates ...were brought from Maputo by Dr Otilia Neves. She also brought with her the equipment kit and projector which were left in Maputo in March; at the end of the course she took them back with her to be sent to Beira in February 2014 where the next courses are programmed to happen

Although it was advised to send the standard manuals to the candidates few weeks in advance, due to some logistic problems only few candidates received them. During the feedback sessions was emphasized by the candidates the desirability and advantages of receiving the manual before coming to the course

All the candidates received hard copies of the standard manual in Portuguese, and the new instructors also received the instructor’s manual

Even though the time of the original program of the course was changed to start at 8:30 am in order to increase the time allocated to complete the paperwork and MCQs to 45 minutes, it was still considered not enough time and no everybody managed to complete all the documentation

Identification badges were wore by everybody

It was noticed that several candidates didn’t fill the email address slot, when asked about it they said they do not have any

Dr Otilia Neves and Dr Amaia Arana signed the certificates

## **Equipment**

The equipment in the kit box provided by the PTCF at the beginning of the project was the main source. Dr Murgue and Dr Arana brought some more extra equipment for the scenarios and practical sessions (ETT, laryngoscopes, LMAs, cannulas...). A hard board and several neck collars were brought from Maputo

The projector used was the one supplied by the PTCF for the project

Apart of the intubating and the baby manikin provided in the kit box, there was one other intubating manikin but mainly human volunteers were used for the practical sessions, which worked well.

Power points facilities and flip charts were all available and widely utilized very effectively

During the first course was some logistic problems to obtain the goat carcass (cabrito) and we couldn’t practice surgical cricothyroidomy, however as compensation we had two cabritos provided during the second course and everybody had the opportunity to practice cricothyroidotomy and chest drains on them

At the end of the course the equipment kit was checked by Murgue and Henry, and together with the projector were taken back to Maputo by Dr Otilia Neves

## **WHERE TO GO FROM HERE – SETTING A COMMITTEE meeting**

Following the closure of the courses a meeting was held on how to plan the future of PTC courses in the north region. Dr Otilia Neves, the faculty and the 42 candidates attended the session.

Decisions taken:

- Dr Otilia Neves will continue as the National Coordinator of the PTC program in the country
- Dr Murgue Mandana Mahomed Jamu is the North Region Coordinator at present, however she is planning to return to Maputo by March 2014, so she was need to pass over her position
- Dr Marta Jaime Abudo, a newly qualified instructor based in Nampula, has taken the role of North Region Coordinator as well as coordinator of the Nampula province
- The need for a North Region subcommittee was expressed, and the representatives for the different provinces were elected:
  - 1.- Niassa province – Dr Luis Mendes
  - 2.- Cabo Delgado province – Dr Augusto Ntubate
  - 3.- Nampula province – Dr Marta Jaime Abudo

The next courses for the North Region will be probably in Pemba, Cabo Delgado province, around May-June 2014

The PTC Oxford contact, Dr Amaia Arana, will coordinate the organization of further PTC faculty coming from the UK to help them with the implementation of the courses during the length of the COOL project, which should be finalised by the end of 2014.

As the courses will be in Portuguese, translator to assist the overseas faculty might be need.

In the mean time the North Region Committee might try to organize courses locally utilizing the newly qualified instructors

## **SUBSIDIARY ACTIVITIES**

The last day of the course the faculty and some candidates met for dinner, and some of them extended the fun going to a night club afterwards

Murgue and Amaia went to Ilha of Mozambique and the beach for the weekend to recover after the hard working week. They had a great time, buying cashew nuts and mangos on the way, and having the opportunity to try the unusual cashew nuts juice a local delicatessen

## **OBSERVATIONS AND RECOMMENDATIONS**

Planning ahead is a difficult concept for the locals to understand, and although there is still room for improvement they have tried and it was better than during the courses in Maputo. Hopefully that will improve with time

The time allocated in the program to complete documentation, answer the MCQ's, matrix... is far too short. Even doubling the time didn't allow all the candidates to answer everything. Adjustments on the program timing might be needed to accommodate that

Dr Otilia Neves informed me that she is working to organize the first locally driven courses in Maputo in the near future with the instructors formed last March. She will keep us informed as how things develop

Next year is going to be a difficult year for Mozambique as they will have government elections programmed by the 15<sup>th</sup> October 2014. Apparently, the country as a whole becomes totally concentrated on the election campaigns for about 2-3 months around the date and there is very little chance to organize anything else. Taking that into account, and summer months being difficult for UK faculty to obtain leave, we will try to organize the remaining of the project courses by June/July 2014 if possible. The next course will be in Beira, central region during the 2<sup>nd</sup> week of February 2014

## **EXECUTIVE SUMMARY**

The courses in Nampula were a success.

The local instructors were top of the range. They have really grasped the idea and their confident building and teaching abilities are improving by the day.

Even the more skeptical candidates were on board by the end of the week, and almost everybody enjoyed the courses, feeling involved and very much part of it

The involvement and support of the Ministry of Health, and the role of Dr Otilia Neves in particular, is invaluable for the implementation and long term sustainability of the project in Mozambique

Few things involving the organisation of the courses will still need to be toned up, but they have clearly improved since last time

Thanks to every one

Obrigada

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