

The Zambia Anaesthesia Development Project (ZADP)

Outline of the OOPT/E (ST6) programme in Anaesthetic Education and Development in Zambia

This document outlines the educational framework for the OOPT/E unit of training “Anaesthetic Education in a developing country” at the School of Medicine in Lusaka, Zambia. The Module is delivered as a 6 month secondment for senior UK trainees (ST6 and above) to the University Teaching Hospital in Lusaka, where trainees will work in parallel with the MMed in Anaesthesia, and deliver educational outreach projects to rural hospitals in partnership with the AAGBI’s Lifebox project. The MMed Anaesthesia is delivered by a UK faculty of Consultant Anaesthetists and administered through the Tropical Health and Education Trust (THET).

Prospective approval must be obtained from a trainee’s Programme Director, the Royal College of Anaesthetists (RCoA), the Postgraduate Deanery and the GMC (if the time is to count towards a CCT/CESR[CP]) before an out-of-programme (OOPT/E) post is commenced. The RCoA training committee has granted educational approval for the ZADP placements in principle based on the information and educational framework provided in this document. The set goals and aims of the OOPT/E are fundamental to the success of the ZADP. Trainees are reminded that the process of applying for educational approval, should they wish to take the position with the ZADP as an OOPT, is lengthy and can take up to 12 months. The organisation of an OOPT/E post abroad is an arduous and difficult process, it is our aim to simplify this process and provide the necessary assistance to ensure a seamless transition for trainees from their UK training post in and out of the Zambian OOPT/E programme [1].

The ZADP is supported by the AAGBI, the Zambia-UK Health Workforce Alliance, THET, Faculty of the Zambian MMed Anaesthesia and the Medical School of the University of Zambia:

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I. Background:

A unique opportunity has arisen for UK trainees to participate in an anaesthetic teaching programme in East Africa, a MMed in Anaesthesia developed and delivered by UK Consultant Anaesthetists, which had its first intake of students in June 2011 at the Medical School in Lusaka, Zambia. The aim of the MMed programme is to produce specialist practitioners who will have the knowledge, skills and attitudes to practice anaesthesia independently and to a high quality, with the emphasis on empowering the indigenous Anaesthetic department to become a self sufficient teaching facility in time. The object is to address the shortage of anaesthetic personnel in this underdeveloped country, a shortage so severe that, in some areas, only 10-15% of the surgery that should be performed, can be performed.

The ZADP will increase awareness of the valuable personal and professional experiences to be gained by working in the developing world, and may become a template and additional training resource to similar projects in neighbouring African countries. The OOPT/E unit of training at the UTH is the cornerstone of the ZADP and is supported and supervised by both on-site and remote UK Consultant Anaesthetists to provide and adhere to all requirements for training as per the 2010 Curriculum for training in Anaesthesia.

II. Goals and benefits:

There are several related benefits to the OOPT/E programme, which include: the MMed Anaesthesia students, the UK trainee, the wider anaesthetic community, and most importantly, the people of Zambia who undergo anaesthesia.

a. The MMed Anaesthesia Programme, Anaesthetic Clinical Officers & Anaesthesia as a Speciality in Zambia:

“Increased availability of lifesaving healthcare through an improved range and availability of quality anaesthetic services, greater health worker capacity and improved training resources” (THET)

Training Zambian anaesthetists is the ultimate goal. Through the ZADP/OOPT programme and the continued presence and commitment of a senior UK trainee, the MMed students and Clinical Officers will benefit from wider training opportunities to enrich their professional and personal development – sharpening skills, learning new techniques and broadening their experiences to include research and audit. UK senior trainees’ focus on patient safety initiatives, will enhance skills and knowledge beyond that in anaesthesia, reaching a wider group of healthcare workers to include surgeons, obstetricians, midwives, nurses and ancillary staff, which will improve standards of practice and staff morale.

The focus will be on building long-term skills and capacity of health workers, and long term sustainability by creating and establishing systems for training and delivery of safe, quality anaesthesia. The ZADP/OOPT programme will aim to provide continuity of support through 6 month placements of senior trainees and help to develop the Zambian anaesthetic department’s processes in clinical governance, and development of protocols and guidelines. The UK trainee will encourage and conduct audit and research valuable to their specific environment. The UK trainee will foster mutual trust, respect, and solidarity.

b. The UK trainee:

Trainees will have the opportunity to take part in anaesthetic practice appropriate to a developing world context, initially under close supervision. The emphasis will be on teaching and learning techniques which maximise patient safety in a resource poor setting. They will become experienced in the relevant anaesthetic techniques and practices suited to the local environment of a developing country’s healthcare system. They

will maintain their logbooks and complete DOPS, A-CEX, ALMAT, CBD and MSF as per the curriculum requirements. The 6 month OOPT, recognised and approved for training by the RCOA and the GMC, will form part of their modular training according to the 2010 Curriculum Annex D (section 13.7, Anaesthesia in developing countries) and Annex G (teaching and training, audit and management).

The trainee will experience and teach the delivery of safe anaesthesia in an environment where there are severe constraints in expertise, facilities, equipment, availability of drugs and skilled healthcare workers. They will be trained and inducted by an experienced UK Consultant Anaesthetist familiar with the local environment and have the benefit of the intermittent presence of such a consultant throughout their OOPT/E. The OOPT program will ensure that educational standards are met as per the RCOA 2010 Curriculum for CCT in Anaesthetics. The Educational Supervisor to the trainee will be the UK Head of Programme of the MMed in Anaesthesia, but he/she will also have the benefit of a UK Consultant Anaesthetist working alongside the University of Zambia's Department of Anaesthesia to provide mentorship, regular feedback and appraisal.

The OOPT/E is an opportunity to enhance supervision and teaching skills, since the trainee will be expected to actively participate in the MMed training program. This includes delivering training workshops, supervising the local trainees during theatre lists and providing support and mentorship to the Zambian MMed students. He/She will also be expected to organise and provide clinical governance structures in the form of audit (both their own projects and supporting students in the audit process), developing guidelines and protocols, and training of other healthcare workers such as the anaesthetic clinical officers. Specific projects may be suggested to the trainee by the local Department of Anaesthesia or their supervising Consultant according to local need.

Trainees will also develop problem-solving skills and the ability to think creatively, improving their awareness and understanding of developing health systems. The trainee will develop communication and team working skills, in addition to the rich cultural and personal experience of travel.

The trainee will be supported in establishing communication with the hospital to be visited and will have a clear idea of what can be achieved during their time there. THET will provide support through the local programme manager whilst in Zambia and the UK Director of the ZADP will ensure pre-departure assistance with arrangements as needed, i.e. visas, travel immunisations and health advice etc. (See Logistics) The AAGBI, as an organisation with excellent links and a long and successful history in delivering educational programmes in the developing world, will provide clinical and organisational guidance, educational resources and programmes (Lifebox and Safe Obstetric Anaesthesia).

c. The Royal College of Anaesthesia and the wider Anaesthetic community:

High profile reports make it clear that the benefits of training in a resource-poor environment such as Zambia extend beyond those experienced by the UK trainee or Zambian student [2, 3]. The NHS will ultimately benefit from a workforce with a greater appreciation of the sustainable use of finite healthcare resources, who practice more resourcefully and display a deeper understanding of the global nature of healthcare. Participation in the Zambia MMed programme will also help achieve the stated aim of the Royal College of Anaesthetists to support trainees to "widen their clinical skills and knowledge" [1].

III. Trainee entry requirements for the OOPT/E programme

On commencing OOPT/E the trainee must be in a GMC approved training programme having completed the basic and intermediate levels of training *in their entirety*. This does not preclude setting up and planning OOPT during intermediate level training. The trainee must have completed higher units of training in ICM, general

surgery, urology and gynaecology, obstetrics and paediatrics [and, ideally, trauma]. This would equate with at least a ST year 6.

The trainee will have undergone a successful selection interview; the interview panel will include the educational supervisor with experience of the working conditions in the country where the OOPT/E is to be undertaken [an additional person may be nominated by the RCoA].

The trainee will have supporting references from previous trainers.

Following successful appointment to the OOPT/E programme, the trainee will attend an induction program in the UK and will commit to attending any further training courses as deemed necessary by the UK Head of programme. The trainee will need to demonstrate knowledge and skill acquisition at a level suitable for independent practice. A further induction period and training will be provided locally in Zambia, and the trainee will need to be signed off as "competent to practice" by a member of the MMed Faculty. Specific training in the educational requirements and the standards to be achieved by Zambian students in the MMed programme, will also be provided by the UK faculty.

Although trainees will be supported by visiting MMed Faculty, interim and ongoing expert clinical and personal support will be provided through a secure online forum, which will link the OOPT/E trainee with the MMed Faculty members via instant messaging. The same forum can be interrogated by a predetermined and select group of administrators (including the ZADP OOPT/E trainee, the ZADP Director and the UK Head of MMed Faculty) to provide surveillance data and can be used to survey the impact of the development project (i.e. feedback on specific courses and training sessions).

On return to the UK, the trainee will provide the AAGBI, RCoA, ZADP and the Faculty of the MMed Anaesthesia Zambia, with:

- A written report of the experience including a description of how the objectives were achieved;
- A report from the educational supervisor;
- An appraisal report;
- A log book maintained to the same standard as that required during training in the UK;
- A record of the assessments of skills as required by the GMC, including DOPS, A-CEX, ALMAT, CBD and MSF;
- Evidence of teaching medical and paramedical staff and students;
- Results of audit and research performed; and
- Results of impact studies and training surveys.

IV. Delivery of Training

The OOPT programme is mapped to competencies as identified in the Higher/Advanced CCT programme. To ensure learning outcomes are met and the standards of training upheld for UK trainees, the Unit of Training in Zambia is overseen and appraised bi-annually by Prof John Kinnear. A yearly report on the training experience and achievements will be submitted to the RCoA Training Committee from both the trainees' and Prof Kinnear's perspective, independently.

a. Anaesthesia in developing countries

Learning outcomes:

- To gain knowledge, skills and experience of the peri-operative anaesthetic care of patients in a developing country.

- To support the speciality of anaesthesia by providing teaching and training to anaesthetists, theatre staff and medical students in a developing country.
- To understand the level of competency, skill and support that is required to sustain safe and effective provision of anaesthesia in a resource poor setting.

Knowledge:

- Describes the anaesthetic equipment used in developing countries, and its maintenance.
- Lists anaesthetic drugs commonly used in developing countries in the peri-operative period.
- Describes health delivery in the country or countries to be visited and the associated challenges.
- Describes the politics, customs and culture of the country or countries to be visited.
- Lists the diseases occurring in the country or countries to be visited which may influence delivery of anaesthesia and peri-operative care.
- Explains the difficulties and opportunities delivering education to medical and other health workers.
- Describe the factors which contribute to or detract from the safe conduct of surgery and anaesthesia in Zambia.

Skills:

- Demonstrates ability to teach and train anaesthetic clinical officers, doctors, theatre staff and medical students with limited educational resources.
- Demonstrates understanding of provision of high quality care in a challenging environment.
- Demonstrates the ability to assess the clinical environment, suggest appropriate changes, and work towards implementing them.
- Demonstrates Peri-operative management of patients undergoing a wide range of surgical procedures, including paediatrics, obstetrics, trauma, emergencies and sick patients requiring post-operative care in an HDU/ITU environment.
- Demonstrates Peri-operative management of patients with concurrent morbidity including infectious diseases such as HIV, TB and malaria.
- Demonstrates the use of anaesthetic equipment used in resource poor contexts (eg draw-over apparatus) including simple maintenance.
- Demonstrates the use of alternative systems for oxygen delivery, including oxygen concentrators.
- Demonstrates the use of drugs such as ketamine, diazepam, pancuronium and halothane.
- Demonstrates the safe administration of regional anaesthesia and peripheral nerve blocks using limited resources.
- Demonstrates safe peri-operative monitoring of patients with limited resources.
- Demonstrates management of a recovery area with limited resources.
- Demonstrates the management of acute pain with limited resources.
- Demonstrates the management of patients for surgical and medical conditions in a high dependency/intensive care environment with limited resources.

- Demonstrates the appropriate use of asepsis, infection control and sterilisation of equipment.
- Demonstrates safe application of cross matching blood and transfusion.
- Demonstrates ability to maintain a high standard of documentation in an unfamiliar clinical and cultural environment.
- Demonstrates awareness of issues surrounding safety and security in the country to be visited.

b. Teaching and training, Audit and Management

Learning outcomes, Skills and Knowledge as per the RCOA 2010 Curriculum Annex G.

At the end of this unit the trainee will:

- have undertaken teaching and training to personnel from diverse cultural, linguistic and educational backgrounds.
- have experienced working and living in a multi-cultural and, frequently, multi-lingual environment and will have developed an approach to planning and practice which emphasises effective communication and team management.
- be able to provide safe anaesthesia in a challenging environment with limited resources to a wide variety of patients, including those with extreme and very advanced pathology.
- have enhanced his/her experience and competence in the fields of paediatrics, obstetrics, trauma, and critical care medicine.
- have developed management skills and gained experience of introducing clinical governance to a resource poor environment, with enhanced understanding of the systems and processes that ensure quality and safety in anaesthesia

V. Contract of employment:

Place of work: University Teaching Hospital, Lusaka, Zambia

The trainee will be offered an honorary "Visiting Lecturer" contract by the University Teaching Hospital (UTH) for which registration with the Zambian Health Professions Council will be required. This is essential to confer practice rights and to qualify for professional indemnity underwritten by the UTH. The university will also formally appoint the trainee as a visiting lecturer. The post does not currently attract salaried remuneration and the trainee will be committed to self fund their ongoing financial commitments in the UK and abroad. However, financial assistance is available in the form of a monthly living allowance. Suitable accommodation is available (see VI Logistics) should the trainee wish to make use of it, at a cost of \$800/month and provision is made for the cost of the accommodation in the living allowance.

The trainee will be entitled to 15 days annual leave during the 6 month placement, which should be taken in weekly blocks, the dates to be approved in advance by Dr Feruza Ismailova and the Director of the Zambia Anaesthesia Development Project. The trainee will not be entitled to UK bank or religious holidays during the 6 month placement and the hours of work and a personalised job plan are described in full in the "Job Description". Trainees will not be partaking in the UTH Anaesthetic on-call rota, and are not obliged to undertake pure service provision work on a regular basis, although reasonable participation to help ease the

work commitments of the department is allowed, provided such participation does not interfere with delivery of the project aims (see Job Description and individual TOR for full details).

The employment contract will be subject to CRB clearance and occupational health clearance. Standard immunisations and personal insurance will be the sole responsibility of the appointed trainee. The trainee should discuss professional indemnity insurance with their respective organisations (i.e. MDU or MPS), though trainees will be covered by the UTH contractual indemnity for employees. The ZADP will assist with Insurance costs to a maximum of £250 for the 6 month secondment.

The trainee will be expected to agree to the stipulations of the employment contract of the University Teaching Hospital and the ZADP rules of conduct as stated below:

a. OOPT/E Zambia Basic Rules of Conduct:

The ZADP and the OOPT/E programme in Anaesthesia in developing countries offers assistance to the School of Medicine of the University of Zambia, the University Teaching Hospital in Lusaka, and selected rural hospitals through the ZADP outreach projects, and in doing so, to the populations these facilities serve, without discrimination and irrespective of race, religion, creed or political affiliation.

The ZADP trainee undertakes to respect and adhere to the professional code of ethics of the host and to maintain complete independence from all political, economic and religious powers.

As a volunteer, the ZADP trainee will be aware of the risks and dangers of the undertaking, and have no right to compensation for themselves or their beneficiaries other than that which is afforded by their own insurance arrangements for the period of the undertaking.

ZADP trainees agree to adhere to the following basic rules, and that he or she will:

- Act in accordance with the GMC code of conduct and the ethical principles it incorporates, both in the exercise of his/her professional functions and private life during the time spent in Zambia
- Conform to any guidance on attitude and behaviour as well as instructions and directives given to him or her by the ZADP, the AAGBI, THET, the host facility and their educational/clinical supervisor(s)
- Actively participate in the programme and contribute to team dynamics and cohesion, on which the success of the OOPT programme and the ZADP depends
- Respect the laws, decrees and regulations of Zambia as the host country, having understood that if this is not the case, he/she can expect no support from the organisers or participants in the programme
- In no circumstances carry or use arms and/or ammunitions
- Exercise no other employment in Zambia, whether remunerated or not, nor participate in any financial venture or personal commercial commitments, nor instigate a collaboration of any nature in Zambia during the duration of his/her stay
- Exercise the utmost discretion and, in particular, publish or communicate nothing on or regarding the host facility or participants in the programme without prior agreement of the association, including once he/she has completed their placement and returns to the UK, and to respect the same with regards to the MMed and ZADP's internal documents and communications
- Maintain an imperative and strict respect for the rules and security orders as defined by the hosts, bearing in mind that these security rules are essential for ensuring the individual and collective security and continuation of the ZADP. This common commitment, on which the good name and continuation of the programme is dependent, should be implemented in proximity with the hosts and with respect for all concerned

- Respect the rules regulating the use of equipment and drugs, and not use such equipment or drugs outside his/her functions
- Bear in mind the context in which he/she is intervening, considering that he/she represents the AAGBI, ZADP, Faculty of the MMed, the Royal College of Anaesthetists and the GMC whilst exercising his/her functions.
- Inform his/her Educational Supervisor, the Director of the ZADP or the visiting UK Consultant of any significant changes in his/her personal or family situation that could have impact, even if he/she finds it insignificant, on their ability to perform and practice independently at the standard expected.

****Please note that all involved UK organisations, including the Royal College of Anaesthetists (RCOA) and the AAGBI Foundation in its capacity as the UK Health link partner for the ZADP, award grants, provide educational resources and organisational support only on the basis of the quality of the individual applications from ZADP participants and the value of the project to the local healthcare setting. The AAGBI and the RCOA have no responsibility for the arrangements or administration of the project, nor for the travel arrangements or safety of the applicants.***

VI. Logistics

Resources:

There is minimal guaranteed financial support for trainees undertaking the OOPT/OOPE through a grant awarded by the Department for International Development to the ZADP. The ZADP will fund most expenses incurred by ZADP doctors as volunteers during their 6 month stay in Zambia, i.e. return flights, Insurance (up to a maximum of £250), HPC registration, visa and work permit, accommodation, communication expenses (£40/month) and a living allowance (£125/week).

More useful advice may be obtained from the GAT Handbook "Organising a Year Abroad – Out of Programme Experience from the GAT Committee" [4]. Helpful advice for working and training overseas that is not specific to anaesthetics can be found at: www.goingoverseasnetwork.org Useful information relevant to the practice of anaesthetics and the context of training in challenging environments can be found in the *Anaesthesia* supplement 'Anaesthesia in Developing Countries' [5].

Visiting Lusaka:

All information relating to visiting and staying in Lusaka is available in the THET document 'Zambia Trip Guide', which will be made available as an information pack to any trainees interested in this project.

Registration and work permit application:

Registration with the Health Professions Council of Zambia, visa and a non-resident's work permit are essential in order to have practice rights at UTH. Trainees should be aware that this can be a rather protracted process, with the following requirements;

Certificate of Good Standing

Certified copy/copies of professional qualifying certificates, diploma or degrees

Completed HPC application form

Completed visa and work permit application forms

Four passport size photographs

Up to date CV

Criminal Records Bureau check

THET Zambia will provide administrative assistance with the HPC registration process, CRB check, the visa, the work permit and the employment contract with the UTH and the UNZASOM.

References

1. Royal College of Anaesthetists CCT in Anaesthetics Aug 2010 Ed2V1.3
2. Aspiring to excellence: Final Report of the independent enquiry into modernising medical careers. Professor Sir John Tooke. 2007.
3. Global Health Partnerships. The UK contribution to health in developing countries. Nigel Crisp. Department of Health 2007.
4. Paul A (ed). Organising a Year Abroad. Out-of-programme advice from the GAT Committee. Available at: http://www.aagbi.org/sites/default/files/organising_year_abroad09.pdf
5. Anaesthesia in Developing Countries. *Anaesthesia* 2007; 62(S1): 1–119

ZAMBIA ANAESTHESIA DEVELOPMENT PROJECT: JOB DESCRIPTION for the OOPT/E PROGRAMME

** This document outlines the general job description and educational goals for the ZADP OOPT/E programme. It is complemented by each individual trainee's unique and separate terms of reference and project plan, which will be agreed upon before pre-departure training commences.*

The University Teaching Hospital (UTH) in Lusaka is host to the Medical School of the University of Zambia, and the only tertiary referral centre in the country serving a total population of 13.8 million people, with over 2 million people in its own catchment area, the capital city of Lusaka. UTH is the principle medical training institution in the country for Medical Students, Interns and Postgraduate Doctors. It also provides training for Nurses through the Nursing School located within the hospital grounds, as well as Clinical Officers in Anaesthesia through their college located at the Chainama Hill College Hospital.

UTH has approximately 1600 beds and 250 baby cots. It provides a full range of primary, secondary and tertiary health and medical services on both an inpatient and outpatient basis. The Department of Anaesthesia currently consists of 3 trained specialists, 2 staff grade anaesthetists, 16 postgraduate degree students (1st year and 2nd year students of the MMed Anaesthesia programme) and a varying number of Anaesthetic Clinical Officers. The department of anaesthesia services a wide range of surgical specialities (Paediatrics and Neonates, Neurosurgery, General Surgery, ENT & Maxillofacial surgery, Orthopaedics, Urology, Obstetrics & Gynaecology) and provides support to the Adult Intensive Care Unit.

Post Title	Visiting Lecturer in Anaesthesia (Referred to in this document as the ZADP trainee or UK trainee)
Grade	ST 6 +
Hours per week	7.30 am to 4.30 pm, Monday to Friday (45 hours per week) (No on-call commitment. Courses may occasionally be delivered on weekends to minimally impact on service provision and achieve maximum local participation. Total number of hours worked per 4 week period will not exceed an average of 48 hours/week. The UK trainee will not work more than 1 in 6 weekends, or 4 weekends during the 6 month OOPT/E.)
Accountable to	Dr Feruza Ismailova - UTH Anaesthesia, Head of Department & line manager Prof John Kinnear - UK Head of Faculty MMed, Educational Supervisor In-country member of MMed Faculty – Clinical Supervisor

The project acknowledges support from the following organisations



Dr Iain Wilson, President of the AAGBI – Lead UK Paired Institutional Partner
AAGBI International Relations Committee – Financial / Administrative support
Dr Carin Dear - Director, Zambia Anaesthesia Development Programme
The Royal College of Anaesthetists (OOPT) and the GMC

Key working relationships

All members of the UTH Anaesthetic Department & Theatres

MMed Faculty

MMed Students (currently 8 first year and 8 second year students, with a 3rd intake in August 2013)

Anaesthetic Clinical Officers & students

Mr Chipoya & Mr Banda, Clinical Officers' Training Programme

UTH Department of Surgery

UTH Critical Care Unit and Dr Craig Oranmore-Brown (Lead Clinician)

UTH Department of Obstetrics and Gynaecology

Sophie Reshamwalla (AAGBI Safebox and Surgical Safety projects)

Emily Measures (Project Manager for THET in Zambia)

Katherine Barrett (Project Manager for THET Anaesthesia Programmes in Zambia)

General Duties

MMed Students:

Training Zambian anaesthetists is the ultimate goal. The post holder will through their continued presence and support, provide the MMed students with clinical supervision, and aim to enrich their professional and personal development – sharpening their skills, teaching new techniques and broadening their experiences to include Clinical Governance, Patient Safety, Research and Audit.

Anaesthetic Department:

The focus will be on building long-term skills and capacity of health workers, and long term sustainability by creating and establishing systems for training and delivery of safe, quality anaesthesia. The ZADP trainees will develop the Zambian anaesthetic department's processes in clinical governance. The post

The project acknowledges support from the following organisations



holder will develop best practice protocols and guidelines relevant to the specific environment, and encourage and conduct locally targeted audit and research to this effect.

Equipment, Resources & Governance:

The ZADP doctors will coordinate the MMed Faculty's Equipment Aid programme, by setting up and managing the equipment and drugs inventory to help ensure the availability of essential equipment at the point of care (including reinforcing safe practices such as daily theatre team briefings, equipment checklists and surgical safety checklists). The trainees will evaluate and monitor the impact of the development programme on theatre efficiency, outcomes and patient safety, i.e. set up serious untoward incident and "near miss" reporting systems and conduct root cause analyses where required, reporting back to all stakeholders (MMed Faculty, THET, AAGBI and the UTH Anaesthetic Department and Dr Feruza Ismailova). The trainees will assist with the development of the data collection systems required to support these governance activities in anaesthesia.

The Medical School of UNZA and the UTH:

The UK trainee will foster mutual trust, respect, and solidarity, enhancing skills and knowledge in anaesthesia beyond the MMed programme, by delivering training and mentoring to a wider group of healthcare workers to include anaesthetic clinical officers and resident staff. They will aim to improve standards of practice and staff morale across the spectrum of anaesthetic practitioners.

Activities will include:

- Bi-weekly Journal Club meetings
- Monthly Morbidity and Mortality meetings
- Bi-weekly workshops / lectures / CBD to support training and education of Clinical Officers
- Compile anaesthetic theatre equipment and drugs checklists, deliver the training sessions to sustain these practices to include all anaesthetic practitioners, and perform impact assessment and monitor change.
- Leading the MMed students and Zambian anaesthetists on Patient Safety Initiatives: identifying local safety champions and developing local leadership in audit practice and clinical governance; encouraging multidisciplinary and cross-speciality participation, including Orthopaedics, General Surgery, Paediatrics and Critical Care. Audit will be initiated with the support of UK faculty, but with the view of developing Zambian expertise in clinical governance.

The project acknowledges support from the following organisations



- Coordinating and assisting with the SAFE Obs and WHO theatre checklist / Lifebox Surgical Safety training courses, in collaboration with the AAGBI. These courses are to be delivered to the UTH once every 6 months and as an outreach project to Livingston / Monze hospitals during the 1st year and to Ndola / Kitwe hospitals during the 2nd year of the project.
- Anaesthetic Data collection

OOPT/E Educational Programme

Prof John Kinnear (UK Head of Faculty, MMed Anaesthesia Programme) will be the Educational Supervisor for the post. The post is recognised by the Royal College of Anaesthetists for training in anaesthesia under the 2010 Curriculum should the trainee wish to take the post as an OOPT, by submitting an application to the Royal College Training Committee in advance. The post holder will receive pre-departure orientation and training, and a period of local induction supervised by a UK anaesthetist familiar with the local environment and practice of anaesthesia.

The trainee will receive regular appraisal and feedback:

1. Assessment and Appraisal following the local induction period (after 2 – 4 weeks)
2. Mid-term appraisal
3. Final appraisal at 6 months and feedback to the Royal College of Anaesthetists and the AAGBI
4. Interim appraisal to be arranged by trainee or Prof Kinnear as required, should any difficulties or problems arise.

Trainees will have the opportunity to take part in anaesthetic practice appropriate to a developing world context, initially under close supervision. The emphasis will be on teaching and learning techniques which maximise patient safety in a resource poor setting. They will become experienced in the relevant anaesthetic techniques and practices suited to the local environment of a developing country's healthcare system. They will maintain their logbooks and complete DOPS, A-CEX, ALMAT, CBD and MSF as per the curriculum requirements. The 6 month OOPT will form part of their modular training according to the 2010 Curriculum Annex D (section 13.7, Anaesthesia in developing countries) and Annex G (teaching and training, audit and management).

Trainees will also develop problem-solving skills and the ability to think creatively, improving their awareness and understanding of developing health systems. The trainee will develop communication and team working skills, in addition to the rich cultural and personal experience of travel.

At the end of the 6 month placement, the trainee will:

- have undertaken teaching and training to personnel from diverse cultural, linguistic and educational backgrounds.

The project acknowledges support from the following organisations



- have experienced working and living in a multi-cultural and, frequently, multi-lingual environment and will have developed an approach to planning and practice which emphasises effective communication and team management.
- be able to provide safe anaesthesia in a challenging environment with limited resources to a wide variety of patients, including those with extreme and very advanced pathology.
- have enhanced his/her experience and competence in the fields of paediatrics, obstetrics, trauma, emergency and critical care medicine.
- have gained broad management experience, including managing change and service development.

On return to the UK, the trainee will provide the MMed Faculty and all stakeholders of the Zambia Anaesthesia Development Project with:

- A written report of the experience including a description of how the objectives were achieved;
- A report from the educational supervisor;
- An appraisal report;
- A log book maintained to the same standard as that required during training in the UK;
- A record of the assessments of skills as required by the GMC, including DOPS, A-CEX, ALMAT, CBD and MSF;
- Evidence of teaching medical and paramedical staff and students;
- Results of audit and research performed;
- Evidence of the newly developed guidelines / protocols; and
- Impact studies following the implementation of these guidelines/protocols.

Scope of Practice and Responsibility

Trainees are reminded to adhere to the GMC guidelines on “Good Practice” and only engage in the practice of anaesthesia where and when they feel appropriately skilled and experienced to do so, taking into account patient factors, environmental factors, patient safety and risk at all times. When faced with a case or situation beyond their own competence they are to inform the Head of Department, Dr Feruza Ismailova or visiting UK Consultant member of the MMed Faculty immediately. If they are not contactable, trainees are to ensure the most senior local anaesthetist available is informed and that all reasonable efforts are made to hand the case over to an appropriately skilled member of staff of the UTH.

Remuneration

The ZADP OOPT/E posts are not salaried to UK standards, however every effort is made to cover all work related expenses incurred by the volunteers. The ZADP has received limited funding from DFID and a

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monthly stipendium will be paid to the ZADP doctors. This “living allowance” should cover accommodation (\$800/month), living costs (£125/week) and communication expenses incurred on behalf of the ZADP (£40/month). In addition the ZADP will expend an allowance towards the costs of one return flight to Lusaka, visa and work permit requirements, Insurance, HPC registration and costs incurred whilst travelling to deliver the outreach projects mentioned above. Selected ZADP doctors will need to fund all personal travel whilst in Zambia, extra “pocket money” and ongoing financial commitments in the UK themselves. Further grants are available for international volunteers in healthcare and the director of the ZADP will assist where possible, should prospective ZADP doctors wish to apply for further funding to support their secondment.

Annual Leave, Study Leave and Sick/Compassionate Leave

Trainees will be entitled to 15 days of annual leave. Application for annual leave will need to be submitted and agreed in advance by Prof Kinnear and Dr Ismailova and should fit in with the planned schedule for the MMed Programme and planned courses. Although this may not always be possible, we strongly urge trainees to submit their annual leave applications before or within 1 month of commencing their post.

Trainees are entitled to 5 days study leave during the 6 month placement, applications for study leave need to be submitted to Prof Kinnear, Dr Ismailova and Dr Dear at least 6 weeks in advance and will be subject to approval.

Trainees are entitled to 5 days self certified sick leave, after which a doctor’s certificate will be required.

Compassionate leave will be at the discretion of Prof Kinnear and Dr Ismailova.

Logistics and pre-departure arrangements

The trainee will be supported in establishing communication with the hospital to be visited and will have a clear idea of what can be achieved during their time there. THET will provide support through the local programme manager whilst in Zambia and the UK Director of the Anaesthesia and THET London offices will ensure pre-departure assistance with arrangements as needed, i.e. flights, visas, travel immunisations, insurance and health advice etc.

Communication

A secure web-based forum is being created which will provide clinical support (instant messaging to MMed Faculty members with clinical questions posed on the forum for discussion), aid in data collection and impact assessment of the ZADP, and aid the collection of feedback from MMed students and Clinical Officers on training sessions and courses delivered. The forum will be password protected to allow the OOPT doctors to send confidential patient information and photographic material for senior clinical advice and support. It will have separate domains which will collect anonymous feedback from participants in the ZADP.

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The OOPT doctor will be issued with a local mobile phone and dongle for mobile internet connectivity, and receive an allowance of £40/month towards communications expenses.

Accommodation

Suitable accommodation has been secured on behalf of the trainees, which they are at liberty to decline the use of should they wish to make their own arrangements. The cost of the accommodation is \$800/month, for which there is an allowance in the ZADP budget.

Health and Safety

Trainees are reminded of their responsibility to take care of their own personal safety and others whilst at work.

Infection Prevention and Decontamination of Equipment

Trainees are reminded of their responsibility to adhere to UTH and Departmental Infection Prevention Policies, including policies for the cleaning and decontamination of equipment, in order to protect their own health and that of other employees, visitors and patients. All ZADP doctors will be provided with Post-exposure prophylaxis to prevent infection with HIV following sharps or other high risk injury.

Child Protection/Safeguarding

In providing services to patients and children, trainees are reminded of their responsibility to adhere to UTH and Departmental Child Protection and Safeguarding policies, including pre-employment checks.

Confidentiality

Trainees are reminded of the need to treat all information, particularly photographic, clinical and management information, as confidential. Any publication of material relating to the ZADP or the THET MMed Programme has to be sanctioned by Prof Kinnear and Dr Dear, regardless of the nature of the publication or distribution of such material.

Any employee who willfully disregards UTH and Departmental policies may be liable to serious disciplinary action including dismissal. Trainees are reminded to refer to the OOPT Programme's Rules of Conduct.

This job description will be reviewed yearly as part of the bi-annual individual performance reviews, to ensure that it reflects the responsibilities of the post. No interim changes will be made without full consultation with the post holders.



Dr Carin Dear MBChB FRCA, Director of the Zambia Anaesthesia Development Project

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The Royal College
of Anaesthetists

