STRENGTHENING EMERGENCY MEDICAL CARE IN VANUATU: DELIVERY OF THE EMERGENCY-LIFE-SUPPORT (INTERNATIONAL) COURSE AND THE SERIOUS-ILLNESS-IN-REMOTE-ENVIRONMENTS COURSE

In December of 2014, a team of emergency doctors headed to Vanuatu to complete the project: Strengthening Emergency Medical Care in Vanuatu: Delivery of the Emergency Life Support International Course and the Serious-Illness-in-Remote-Environments course.

This project entailed running the ELSI course for doctors in Port Vila, and the SIREN course for nurses in both Port Vila and Santo. This course was in keeping with the strategy for emergency medicine improvement produced in consultation with the Ministry of Health in 2010.

#### **ELSI**

The ELSI course ran from Thursday 4<sup>th</sup> to Friday 5<sup>th</sup> December. The first morning of the course was held in the hospital board room. Thereafter it was run in the nursing school (in the morning the nursing school facilities were needed for the nursing graduation ceremony and after-party).

The course was completed by eight candidates. On the first day, eleven turned up (including the local dentist), but there was some attrition. The need to provide ongoing clinical services in the hospital also impacted attendance at times.

Pre-course and post-course assessment was performed. Generally the pre-course assessment suggested a solid level of emergency medical knowledge. Post-course the mean score had improved, with five of the eight showing an improvement in their scores. All feedback was positive. The feedback and score breakdown can be found in appendix 1.

#### **SIREN**

The first sitting of SIREN was held in the nursing school on Monday 8<sup>th</sup> and Tuesday 9<sup>th</sup> December. Fifteen nurses completed the course. Participation was enthusiastic, and the feedback universally positive.

The second sitting of SIREN was held on the Island of Santo, in the nursing school at Vanuatu's second major hospital. Attendance at this course was disappointing, with only five candidates completing the course. The feedback from participants remained overwhelmingly positive.

The consensus from all participants is that they would like the course to be run again.

Running this project was challenging in many ways. A detailed breakdown of the difficulties follows. Many of these difficulties boil down to a common factor – the lack of a local champion determined to drive the course forward and negotiate any obstacles. Dr Trelly, the emergency registrar, would have been the logical choice for this role; however he was in Port Moresby for his emergency specialist training. In his absence the local champion role was "handballed" between three or four people, most of whom showed little enthusiasm for the project, and frequently failed to answer correspondence.

Couple this with several changes of management within the hospital between when the project was conceived and when it was delivered, and it is unsurprising that challenges remained.

At one stage it looked likely that the project would not be able to run at all. I flew to Vanuatu and managed to resurrect the project, although ongoing challenges remained. I also arrived in Vanuatu several days before the scheduled start of the project to attempt to resolve issues. This was not entirely successful.

The aspects of the project which I would advocate replicating include.

- Incorporating a Solomon Islands doctor as faculty. Dr Trina Sale excelled as an educator, and it will have aided her own professional development to attend in that role. The credibility she added to the course should not be underestimated. Similarly, facilitating links between emergency departments through the Pacific has the potential for long term dividends.
- The ELSI and SIREN format. This is a really strong course, and the ability to deliver to nurses
  as well as doctors using the same instructors and equipment is a compelling advantage. I
  would support delivering this course again in other environments.

#### The difficulties encountered include:

- Funding shortfall. The funding received was 1/3 of that requested. The project delivered was
  not and could never have been the project as described in the grant application, although it
  remained as true to the grant as it could. The rules of the committee have since changed to
  prevent this occurring.
- Equipment transport.
  - Transporting the gear to Vanuatu was much more difficult and more expensive, than anticipated, and a much greater time frame was needed than had been allowed.
  - Once the equipment arrived in country, actually taking possession of it was troublesome, with multiple administrative and logistical challenges. The equipment was only just available in time for the teaching sessions in which it was needed.
  - Transporting the equipment back to Australia was also surprisingly difficult, with unanticipated costs and administrative barriers not experienced with previous courses held in the Solomons and PNG.
- Scheduling. The initially planned May sitting of the course had to be cancelled due partly to
  freight and also to Dr Trelly becoming unavailable due to rescheduling of his study
  commitments. December was the only available time period allowing these things to come
  together, that still fell within the grant period. Unfortunately December is the beginning of
  the festive season, with implications for course delivery.
- GST implications of the grant had not been fully recognised. This became apparent for this
  grant where it had not for others, as the money was held by an incorporated body pending its
  being spent.
- Unanticipated administrative workload on ELS Inc. (and I thank Sandra from the bottom of my heart for all her hard work)
- Venue in Port Vila. The difficulty in finalising a venue to deliver the course was surprising, but probably was a function of deeper patterns within the health service rather than being related to our course per se.

- Attendance of medical staff. Total numbers for the course were disappointing. The December scheduling probably contributed, as did the funding shortfall.
- Running the project across two sites. This increased the complexity of the project, although it was unavoidable. Attendance at the second site was poor. Nurses in Santo were largely unaware the course was on, despite multiple attempts by me over the preceding months to ensure publicity for the course. This was further exacerbated by the timing coinciding with the end of contracts for Solomon Islands nurses working there. The loss of those nurses limited the capacity for the remaining nurses to attend. The enthusiasm displayed by those who did attend was exemplary with some attending straight after night shifts and then returning to work that evening.

I would like to thank Dr Andrew Bezzina for the many hours he devoted to ensuring the success of the project – both here in Australia, and as course convener in-country.

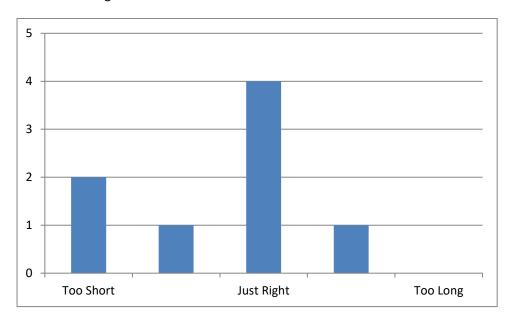
I would like to thank the fellow members of the faculty for donating their time, knowledge, and most importantly their sense of humour and enthusiasm.

I would also like to thank ELS Inc for their many years of hard work developing such a high quality course, and their eagerness to share this with others, as well as the many hours of administrative support put into this project.

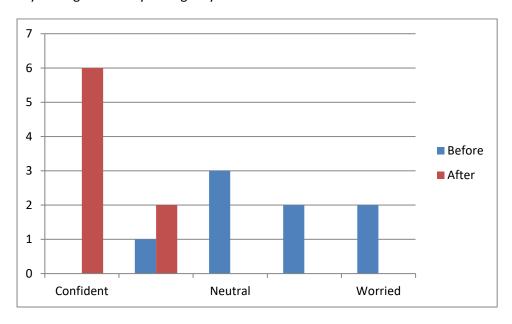
Lastly I would like to thank ACEM for the funding opportunities provided to myself and the other grant recipients to aid the development of emergency medicine throughout the region.

# ELSI participants' feedback

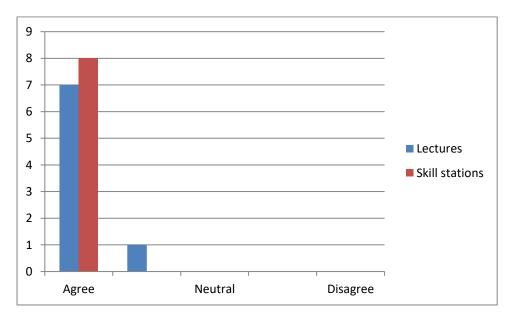
I found the length of this course to be?



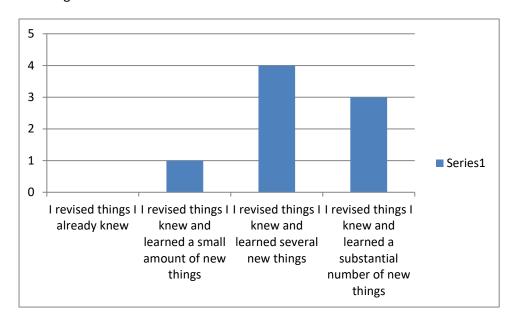
## My feelings about my emergency skills: before and after the course



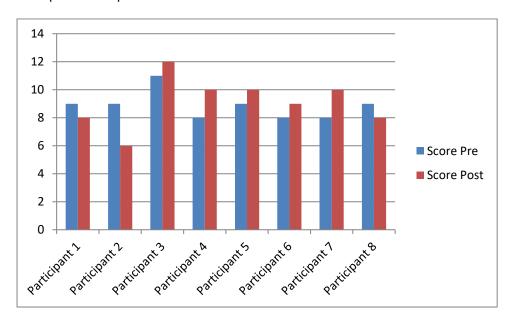
## The lectures/skill stations were relevant to my emergency work



#### Learning estimation.



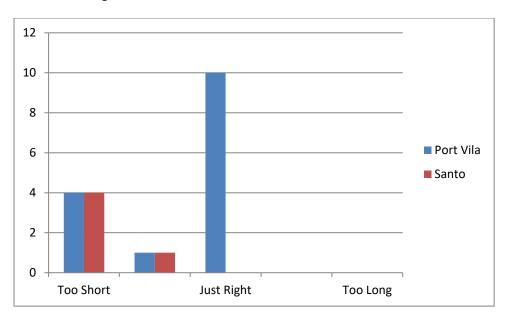
#### Multiple choice questions



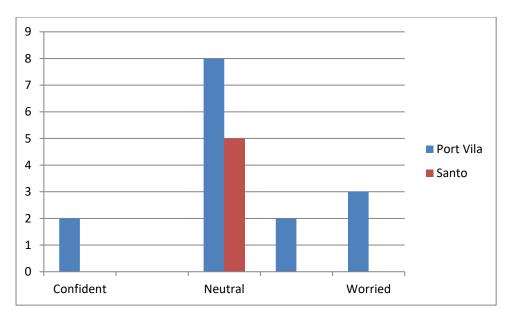
The mean score improved from 8.8 to 9.1, and five of the eight participants improved their score.

# SIREN Course Participants' feedback

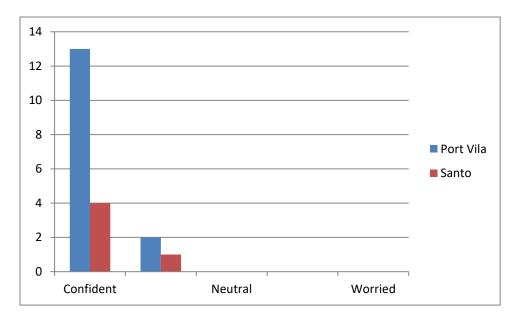
I found the length of the course to be?



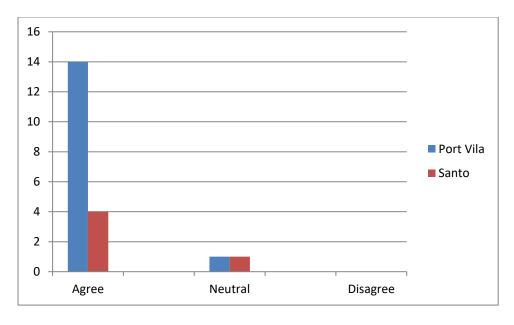
Before the course my feelings about my emergency skills were?



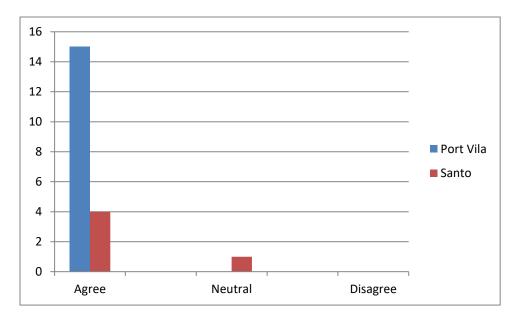
# After the course my feelings about my emergency skills were?



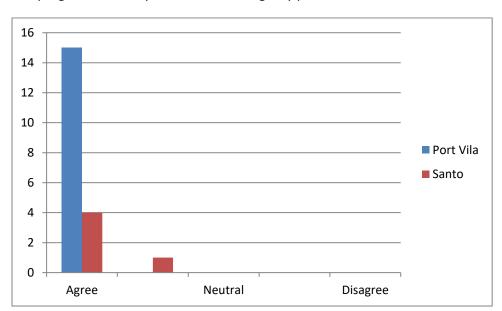
# The lectures were relevant to my work in Vanuatu?



# The skills stations were relevant to my work in Vanuatu?



## The program meets my needs as an emergency practitioner in Vanuatu?



## Learning estimation

