

## **The *Alba* Critical Care Course, Addis Ababa, December 2012**

There is a pressing need to improve peri-operative management for surgical patients in Africa.

*Alba Critical Care Course Design* is a registered charity that has developed structured, systematic training in critical care aimed at three groups- healthcare technicians, surgical and anaesthetic trainees and consultants. The principles and practice remain common across these groups, although the detail may vary. We teach a systematic approach based on “A,B,C” principles, combined with emphasis on non-technical skills such as communication, teamwork and decision- making. We specifically design and deliver our course to meet the training needs of the delegates, aware of the resources available, aiming to be relevant for their daily practice. We think that this approach, aiming to teach local care providers, both medically-trained and rural healthcare officers, provides the greatest opportunity to extend our educational reach.

Our Faculty have written a series of review articles for the “Ptolemy Project”. These form part of “Surgery in Africa Reviews”, free internet-based resource supported by the University of Toronto and the Canadian Health Institute. Our courses are based on the content of these articles and provide the background reading for the delegates.

We were invited to provide a course for surgeons and anaesthetists as part of the CME programme for the COSECSA (the College of Surgeons of East, Central and South Africa) meeting in Addis Ababa in December 2012. With Mr Dreyer, Consultant Surgeon at my hospital in Dumfries as Director, there were six Faculty (a mixture of anaesthetists and surgeons) with Prof. Andrew Howard from Toronto as visiting Faculty. There were 24 registered delegates (9 surgeons, 15 anaesthetists), but others arrived by word-of-mouth. We gave a series of lectures, small-group teaching and a practical session on Life Support. Topics covered included management of airway and ventilation, circulatory support (including resuscitation), shock, pain, fluid and vasopressor therapy, paediatric and obstetric emergencies. Non-technical skills training included communication training with the “SBAR” format (Situation - Background - Action- Response), safety and care of the dying. Most teaching was done for small groups using relevant scenario-based discussions. All delegates were assessed and all received a certificate of successful completion. Delegates assessed our contributions with a five-point rating scale. All scored every part over four, “very good” or higher. We surveyed all anaesthetists about monitoring available during anaesthesia. All reported access to pulse oximetry.

This is our fourth course and now has recognition for training by COSECSA and is endorsed by the Association of Surgeons of Great Britain and Ireland. Our contribution to the Ptolemy Project forms the syllabus for surgical training in critical care and is a component of the COSECSA examination in surgery.

Our course will now combine with a three day practical surgical skills training as a DFID (Department for International Development) funded programme of MSE training (Managing Surgical Emergencies) in the COSECSA region starting in 2013. Our aim is to recruit and train local faculty so the course can become self-supporting after three years.

*Many thanks to the IRC of the Association for funding to help provide this course.*

David Ball, Consultant Anaesthetist, IRC Travelling Fellow, Trustee of *Alba* Critical Care Course Design

