

Report

Emergency Care and Life Support Program

January -February 2017

Introduction

The Emergency Care and Life Support Program held in Agadir, Morocco, was the result of an initial 2016 needs assessment from the senior management of the Moroccan Ministry of Health, in collaboration with University of Utah Global Partners. The Ministry of Health of Morocco identified emergency medicine as an area of need.

Global Partners

The University of Utah School of Medicine combines excellence in teaching, research, and clinical expertise to train tomorrow's health professionals for the rapidly changing world of medicine. The Global Partners Program brokers the university's resources by connecting with corporate, academic, and humanitarian organizations. At the request of the Moroccan Ministry of Health, Global Partners developed the 2017 Emergency Care and Life Support Program as an academic corporate partnership to meet health needs in Morocco.

Over a 1 ½ year period of time, Global Partners developed the infrastructure and logistics for the course in collaboration with the Moroccan Ministry of Health, and the emergency medicine faculty from the University of Utah. Obtaining appropriate and sufficient equipment dedicated to the hands on training portion of the course was a lengthy enterprise, as well as the logistics of transporting the equipment to Morocco. Another interesting aspect was the translation of materials for a dual language ppt presentation and printed handout.

The Emergency Care and Life Support Program is one example of a Global Partners Project to meet global health needs through education and clinical care. Other examples of Global Partners projects have included:

- [Skill Enhancement Program](#)
- [Faculty Enhancement Program](#)
- [Burmese Health Worker Training](#)

Emergency Care and Life Support Program. Agadir, Morocco

Emergency Medicine is a new and growing field in Morocco. Currently, however, Moroccan medical school curricula have a minimal emphasis on emergency care and students have little hands-on skills training in emergency resuscitation. Despite this lack of emergency care training, many of these medical graduates are dispatched to staff rural clinics after graduation, where they are commonly presented with critically ill or injured patients.

University of Utah instructors held the four- day Emergency Medicine Course in Agadir, Morocco in early 2017. The program occurred over a two-week timeframe. The instructors held the four- day Emergency Medicine Course during the initial week, and repeated the same

4-day course during the following week. The target audience was the health worker public sector consisting of emergency medicine, general practice and occupational medicine doctors; registered nurses, nurse anesthetists, and nurse midwives. The Agadir Minister of Health chose the participants who hailed from various small and large health centers, both rural and urban, some as far a distance as a couple hour drive. With 20 and 18 participants expected, upon arrival, the Minister of Health reported that twenty-five participants were planned to attend each course. Ultimately, 25 health workers participated in the first course, and 21 attended the second course. Four Moroccan health workers who had mastered the material during the initial week's course assisted with the second week's "hands on" sessions. Corporate Social Responsibility (CSR) of Chevron Morocco Exploration Limited provided funding for the courses coordinated by Global Partners from the University of Utah Department of Family and Preventive Medicine, USA.

The goal of the training was to upgrade skills in emergency medicine; in particular, the curriculum addressed **recognition of critical illness and injury, stabilization, and safe transfer.**

Specifically, the topics included:

- Recognition of Critical Injury and Illness
- Emergency Airway Management
- Emergency Trauma Management
- Emergency Burn Management
- Emergency Pediatric Management
- Neonatal Resuscitation
- Emergency Obstetric Management
- Emergency Cardiac Management
- Emergency Toxicology and Animal bites

In partnership with the Ministry of Health in Agadir, Morocco, this evidence-based emergency care curriculum was tailored to the locale of the participants and the context of Morocco. The program was scenario-based, combining lectures and skills based hands on training.

Some of the major equipment transported for the hands on portion of the courses included CardioPulmonary Resuscitation, intubation, and trauma mannequins; airway equipment, an interosseous training leg, equipment for placement of chest tubes, and cricothyrotomies.

Morocco Ministry of Health partners:

Dr. Nazih El Kouartey, National Ministry of Health, Rabat
Senior management of the Ministry of Health, Rabat, Morocco

Dr. Abdelmoula Boulamizat, Health Regional Director of the Souss Massa Draa area within the Health Regional Department

Regional Agadir health management team/senior leadership, Agadir, Morocco

Course instructors:

“Train the Trainer” course in emergency medicine Team from the University of Utah School of Medicine:

Dr. Peter Taillac, Professor of Surgery, University of Utah Healthcare

Dr. Vijayabhaskar Reddy Kandula, Associate Professor (Adjunct), Department of Family and Preventive Medicine

Dr. Michael Morgan, Fellow in Emergency Medicine, University of Utah Healthcare

Don Pedersen PhD, PA Emeritus Professor, Department of Family and Preventive Medicine

Steve Sugerman, MPAS, PA-C, Lead Advanced Practice Clinician, Division of Emergency Medicine, University of Utah Healthcare

Kathy Pedersen MPAS, PA-C, Associate Professor, Department of Family and Preventive Medicine

Results:

The participant pretest yielded varying scores all of which improved on the posttest.

The average pretest scores for course 1 and 2 were 61% and 60% respectively. The average posttest scores were 77% and 87% for the same groups. In the first group were 14 physicians, 4 nurse midwives, 3 nurses, and 3 nurse anesthetists. In the second group were 11 physicians, 8 nurses, and 2 midwives. All participants passed the practical hands on and case based portions of the final exam.

Participant expectations identified at the onset of the course were: head injuries, toxicology, pediatric emergencies, obstetric emergencies, hemophilia, polytrauma and pre hospital care, drowning, and intoxication. Most of these topics were already in the curriculum, and the additional topics were discussed as well. General discussion ensued during the courses on the Moroccan system for recognition of critical illness and injury, stabilization, and; in particular, safe transfer. Based on feedback from the participants the French translations of the slides will be reviewed and updated.

Summary

In summary, the training to upgrade skills in emergency medicine “..really, really came off well. Several of the participants told us "it wasn't long enough" which I thought was interesting since [each course] was four whole days!” stated Dr. Peter Taillac, lead University of Utah emergency medicine instructor for the courses. The educational effort included seminars, hands on learning, demonstration, and testing out participants via life-size mannequins. Instructors established competence with concepts via written pre and post tests by participants, as well as a practical portion with case scenarios. Simultaneous projection of French and English slides, and use of an in country coordinator, enhanced the educational offering for the Moroccan healthcare worker participants. Participants and instructors deemed the Emergency Care and Life Support Program a success.