Future Roadmap for Uganda Surgery and Anesthesia Collaborations: Proceedings from the 2nd Annual Conference of Surgery and Anesthesia in Uganda
April 2, 2011 Vancouver, Canada
Goal: Collaborate to ensure that timely, effective surgical care for Uganda patients.

Institutions present:
British Columbia Institute of Technology
Duke University
Harvard University
Johns Hopkins University
Makerere University
McMaster University

University of British Columbia
University of California in Berkeley
University of California in San Francisco
University of Manitoba
University of Toronto
University of Utah
### Priority 1.

**Objective:** Create a local Ugandan coordinator position.

**Rationale:**
A non-medical local Ugandan administrator/coordinator would be responsible to liaising with foreign academic partners on behalf of the surgery, anesthesia and orthopedics departments to arrange academic sessions, clinical visits and provide a link for ethics applications, medical licensing, visitor accommodation and transportation. Ugandan hospital assistance in the development of this position is essential. Office space is currently available in either the GPAS office or the Orthopaedics Department at Mulago Hospital. The position will be paid as a consultant and not through wages. A contract will be signed between the foreign group, hospital/university departments and the selected candidate.

**Timeframe (with deliverables):**
1. **August 2011:** Job description complete.
2. **September 2011:** Funding secured from various institutions through a participation agreement.
3. **September 2011:** Select supervisor committee.
4. **October 2011:** Initiate recruitment process.
5. **December 2011:** Person hired into position.

### Priority 2.

**Objective:** To identify up to three exceptional Senior House Officers in Surgery & Anesthesia Departments and support them as an M.Med Scholars for 12 months to assist their department in research and teaching while they seek a permanent post.

**Rationale:**
A one-year position would be created for up to three recent MMed graduate from Surgery, Anesthesia (including Orthopaedics) equivalent to a “Medical Officer Special Grade”. The positions will initially be funded the foreign group and developed as a stop-gap measure to keep outstanding trainees in the system while they work to secure a university/clinical post. Although funding will initially come from the foreign group, the position will be jointly employed by the university and foreign group. Selection of the individual will use a similar process to what is currently followed by the University/Hospital.

In this role, the person would coordinate research studies within their department with academic support from foreign institutions. This person would coordinate the department teaching schedule, call schedule and joint rounds. A year in the position would provide that person and the Department Head time to lobby the Ministry of Health for a permanent post. The mid-to-long term goal of this priority would be to work towards streamlining the recruitment process to ensure that exceptional clinicians are identified earlier in their training and transition into paid junior faculty positions upon completion of their training.

**Timeframe (with deliverables):**
1. **June 2011:** Review job description
2. **July 2011:** Secure funding for September start
3. **August 2011:** Initiate recruitment process
4. **September 2011:** Person hired into position. 12 month contract signed.

### Priority 3

**Objective:** Assist in curriculum development, scheduling and the implementation of teaching mechanisms to enhance learning with current technologies.

**Rationale:**
This group of academic institutions has the breadth and ability to improve and augment the current surgical and anesthesia curriculum in Uganda. As well, the group could provide additional educational resources through Skype-broadcasting rounds, providing guest lectures (either in person or through platforms such as [www.authorstream.com](http://www.authorstream.com)) to supplement local teaching. With curricula and teaching...
schedules published online, interested groups could supplement teaching content through electronic platforms or through visits. Specific attention must be taken to ensure academic developments are applicable to the current clinical resources available.

**Timeframe (with deliverables):**

1. **July 2011:** Seek sponsorship from a telecom company (MTN, Orange) to provide reliable wifi connection to selected academic/clinical rooms in Uganda.
2. **August 2011:** Evaluate the potential for Regional Hospitals to gain access to available online educational material.
3. **October 2011:** Publish academic schedules for surgery, orthopaedics, anesthesia online.
4. **October, 2011:** Review how partner institutions can augment current curriculum and begin to self-assign Skype-broadcasting rounds, online posting (authorstream.com) and guest lectures.

**Priority 4**

**Objective:** Support infrastructure by establish an infrastructure priority list to ensure resources are then allocated appropriately and support the development of a new Diploma in Biomedical Engineering program at Kyambogo University (http://www.kyu.ac.ug/eeeadvert.html).

**Rationale:**

Each year Mulago and other Ugandan hospitals receive containers of donated supplies and equipment from high income countries. Some of the equipment and supplies are useful in increasing the provision of surgical care in Uganda. However, much of the equipment is unsalable due to being electrically incompatible, being in need of repair or irrelevant to the current environment therefore it collects dust and takes up precious space within the hospitals. Ugandan hospitals currently do not have the biomedical capacity to repair equipment that is not working.

A priority list should be established adhering to WHO guidelines. (http://www.who.int/hac/techguidance/pht/1_equipment%20donationbuletin82WHO.pdf)

Communication with respective departments should be initiated to ensure the need of any equipment brought to Uganda.

**Timeframe (with deliverables):**

1. **September 2011:** List of infrastructure priorities created with input from all surgical departments.
2. **September 2011:** Liaise with local Biomedical Engineering Departments to find staff/materials to support new Diploma in Biomedical Engineering Program at Kyamabogo University.
3. **October 2011:** Publish list online
4. **November 2011:** Consult with groups to assign responsibility for each priority
5. **February 2012:** Seek possible local suppliers for needed equipment
6. **March 2012:** Set up two local supply chains for priority equipment.

**Priority 5**

**Objective:** Get clinical research into policy.

**Rationale:**

Each year research from staff and numerous masters dissertations are completed from the various surgical departments at Makerere University with some of this research having the potential for profound policy implications, clinical practice guidelines and further inquiry. Limited mechanisms for dissemination prohibit this clinical research from realizing its potential. The communication of these findings will allow stakeholders to effectively allocate limited health care resources. Clinical research must be given a needed forum within the Institute of Public Health at Makerere and Ministry of Health.

**Timeframe (with deliverables):**

1. **July 2011:** Develop an online host for Ugandan surgical research papers to be posted.
2. **August 2011**: Create a consortium of 1-2 people from Makerere Surg/Anesth, the Institute of Public Health and Ministry of Health to meet annually to review current research in the field and evaluate possibly implications of implementation.

3. **September 2011**: Mentor and support Ugandan partners to build research as a cornerstone of their practice (see priority 2). A possible project would be to work with an MMed scholar to review previous MMed dissertations and identify potential research with application for public health and clinical quality improvement to present to the Ministry of Health and Institute of Public Health.

4. **February 2012**: Coordinator from Priority 1 to organize a collection of recent dissertations from Makerere Departments relating to surgery/anesthesia and add them to the online host.

### Priority 6

**Objective**: Strengthen university to university and intra-university awareness of Ugandan collaborations.

**Rationale**: Create a semi-annual newsletter to keep interested parties informed of current events. The newsletter will include trip reports and updates on the successes and needs of the Ugandan hospitals.

**Timeframe (with deliverables):**

1. **June 2011**: Ensure visiting groups are adding trip information to “Friends of Mulago” Google Calendar and the Calendar is located in a central, accessible location.  
   https://www.google.com/calendar/embed?src=jucvdd4 dimsmlfla72l6h34l3g%40group.calendar.google.com&ctz=America/Vancouver

2. **October 2011**: Send out first newsletter by email.

2. **April 2012**: At the 2012 conference, one agenda item will be to evaluate whether all university efforts should fall under on umbrella group.

### Priority 7

**Objective**: Advocate for the economy of health care.

**Rationale**: The cost-effectiveness of any intervention must be provided to ensure adequate resources are allocated. Economics departments of involved institutions should be encouraged to begin assessments on the cost-effectiveness of different surgical procedures.

**Timeframe (with deliverables):**

1. **December 2011**: Have two health economists working on cost-effectiveness of surgery research in Uganda.