The involvement of Clinical Associates in Spinal anesthesia for caesarean section in SA

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Introduction

- South African health systems face many challenges with regards to the shortage of health care workers, mostly doctors and nurses.

- Past studies have shown that the average C-section Rate in SA was 16.1% and varied from a high of 32.5% to a low of 3.2% (2010). One of the reasons for low C-section rates in South African rural areas is the shortage of doctors.

- A mid-level worker model (Clinical Associates) that can contribute substantively to the development of quality district level health care mostly in rural areas was introduced in SA in 2008.
Aims

• To look at the level of involvement of ClinAs in doing the spinal anesthesia for C-section in SA.
• To look at their satisfaction with the training that they received at their Universities.
Metodology

• This was a cross sectional study which was done at UP, among 35 ClinA who attended the ClinA CPD course in June 2014 at UP.
• The study population consisted of ClinAs whom were trained in all the 3 Universities
• Out of 35 ClinA who attended the CPD course, only 25 were present the day the survey was conducted and they all completed it.
• The questionnaire was based on closed ended questions that required ClinAs to choose the statement that best described their anesthetic experience.
Results
Results: Have you done the spinal anesthesia before?” Y/N
5. Do you think you received adequate training on spinal anesthesia as a student?

<table>
<thead>
<tr>
<th></th>
<th>very much</th>
<th>somewhat</th>
<th>not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>3</td>
<td>13</td>
<td>8</td>
</tr>
<tr>
<td>Percentage</td>
<td>13%</td>
<td>54%</td>
<td>33%</td>
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</tbody>
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7. Do you need any extra training in spinal anesthesia?

<table>
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<tr>
<th></th>
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<th>23</th>
<th>92%</th>
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<tbody>
<tr>
<td>a.</td>
<td>Yes,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>No, I am adequately trained</td>
<td></td>
<td>1</td>
<td>4%</td>
</tr>
<tr>
<td>c.</td>
<td>No, I have no desire to train further</td>
<td></td>
<td>1</td>
<td>4%</td>
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</table>
Discussion

• 20% of the participants have experienced complications and 92% feel that they need extra training in this field.
• ClinA should always work under supervision of a medical practitioner. Most of them indicated that there was an adequate supervision, which is a very important finding since the majority of ClinA might not be competent in doing general anesthesia. It is however of concern that 16% answered that they had no supervision at all.
• 33% of the participants indicated that they didn’t receive the adequate anesthetic training as students, which is worrying.
Conclusion

- Most clinical associates are involved in doing spinal anesthesia in SA.
- ClinA anesthetic curriculum should be reviewed by the universities currently training ClinA and by HPCSA.
- ClinA should be trained in diagnosing any complication during spinal anesthesia and be able to do the initial management while they call for help.
Conclusion cont...

- An intervention programme could be designed by districts specialist’s teams to improve the training of ClinAs working in districts hospitals.
- To ensure patient safety ClinA should have done at least 30 spinal anesthesia under direct supervision by an experienced anesthesics.
Acknowledgement

- American international Health Alliance (AIHA)
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- University of Pretoria BCMP staff
- Clinical Associates
- Clinical Associates students
References

THANK YOU FOR YOUR ATTENTION

YESSSSSS, FINALLY OVER!