

Global Partnerships Project Report
Sierra Leone 16th - 24th November 2024

BSSH

Mr David Dickson (Lead) - Orthopaedic Consultant, Bradford Royal Infirmary
Mr Zakir Shariff - Plastic Surgery Consultant, Bradford Royal Infirmary
Mr Obi Onyekwelu - Plastic Surgery Consultant, Queen Alexandra Hospital, Portsmouth
Miss Kajal Gohil - Plastic Surgery Registrar, Thames Valley / Wessex Deanery
Dr Paul Stonelake - Consultant Anaesthetist, Bradford Royal Infirmary
Dr Andy Baker - Consultant Anaesthetist, Bradford Royal Infirmary

BAHT

Ms Pascale Smith (Lead) - Queen Victoria Hospital, East Grinstead
Ms Kirsty Doswell - Queen Victoria Hospital, East Grinstead
Ms Roberta Brincat - MSK Services MATT team, Bognor Regis

Improving the quality of hand surgery management in Sierra Leone is a goal of the BSSH Overseas Committee. Since 2010, BSSH has been involved with Sierra Leone in collaboration with ReSurge Africa. This is the third trip out since the COVID-19 pandemic and we were able to deliver hand trauma training and provide hand surgery services to the population with our multidisciplinary approach. Primarily based at Holy Spirit Hospital (HSH), Makeni (3 hours inland from the capital Freetown) we also carried out hand therapy training to the local physiotherapists from Masanga and Freetown. From the trainee perspective, I write this report to summarise my involvement as well as the experiences encountered from the application process to the trip itself and the impact it has had since my return.

Eager to be involved with another global surgery trip after having a great experience out on the BSSH LION project in 2023 - I applied to volunteer on the Sierra Leone trip in June 2024 and was kindly welcomed on to the trip by Mr Mike Waldram (Project Lead). Virtual meetings on a fortnightly basis were conducted in the lead up, alongside email correspondence readying the team preparation as there were a number of important items to address such as applying for temporary medical registration via the Medical and Dental Council of Sierra Leone. Behind the scenes, extensive collection of useful clinical paraphernalia and donations occurred from our respective bases - temporarily causing concern for the team and our strict baggage allowance! A bleary eyed start to the trip, we all finally met at London Heathrow and a strong team unit formed to put us a in good stead for the week ahead.



Figure 1. (L) Arriving in Freetown, Sierra Leone (R) The BSSH and BAHT Team outside Holy Spirit Hospital

The week commenced with myself joining the BAHT team to partake in MDT-led Physiotherapist Training in Masanga Hospital, a rural hospital previously used to treat leprosy patients. The remainder of the team stayed at HSH and conducted clinic seeing 45 patients and triaging operative cases for the week. It was a privilege to join the training element of the project as hand therapists are an invaluable resource both home and abroad. 25 delegates each laden with a course manual partook in a productive training period learning basic hand anatomy, theoretical content and splinting techniques.



Figure 2. (L) Masanga Training Class Photo (R) POSI Splinting Practise

The remainder of the week was predominantly theatre based with majority of cases being upper limb burn contractures for scar release +/- grafting due to open fires being a key feature in social environments. We were all invited to dinner by Dr Patrick Turay (HSH Medical Director) and he shared his story and experiences of the progression of medical care in Sierra Leone as well as an insight to life following the end of the civil war in 2002 and the Ebola epidemic in 2014.



Figure 3. Surgical Team at Holy Spirit Hospital

Other events of the week included a tour of the ITU department at HSH (**Figure 4**), a visit to St Joseph's School for the Hearing Impaired (**Figure 5**), further training at Connaught Hospital (**Figure 6**) as well as a Reconstruction & Burns Unit Planning Day in Freetown (**Figure 7**).



Figure 4. Holy Spirit Hospital ITU in development



Figure 5. Donations for St Joseph's School for the Hearing Impaired received by Sister Amala



Figure 6. Splinting training at Connaught Hospital



Figure 7. Reconstruction & Burns Unit Planning Day, Freetown

The trip naturally led to reflection on a number of factors with the main feature of shifting from NHS infrastructure to local frameworks and integrating into a different healthcare culture as respectfully and efficiently as possible. It was key to be mindful of resource management and what was possible while prioritising patient safety, understanding follow ups may be challenging within the week stay and beyond. With regards to my NHS practice, even since my last global surgery trip, I have become incredibly conscious of sustainability and aware of the extent of UK-based resources we should be vigilant with utilising in the effort to reduce waste. This is demonstrated within the Green Surgery Report which presents an account of reducing the environmental impact of surgical care. Be it saving the opening of a light handle to ensuring no sutures are opened until actually necessary, these are a few examples of the small steps I've taken to be more sustainable as I operate. My training has also been influenced as I further focus on patient appropriateness for surgical management. Through case based discussions with seniors in my NHS role, thorough review of patient social circumstances (considering the large population covered too), is vital in making safe patient plans. If there was another opportunity to join the trip, I would not forget my headlight (!) otherwise I felt fairly prepared particularly with the thorough behind the scenes co-ordination by the team.

I would like to thank Dr Patrick Turay and the Holy Spirit Hospital team for their gracious hospitality and camaraderie throughout this BSSH visit.

Miss Kajal Gohil