

*A Report on the PA equivalent  
in Uganda and Kenya:  
A documentary and Interviews*



# Who We Are



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# Disclosures

Sean Smith, Marie Meckel, and Katie Rincavage have no relevant commercial relationships to disclose



# Learning Objectives

## Appreciate and Understand

- The global presence of our international colleagues in Uganda and Kenya
- How the implementation of community engagement and public health better serves the most vulnerable populations
- How accreditation and regulation impact our profession globally
- The potential we have together as a profession and how we can unite globally!





# Why we went to East Africa

The AMTC - Accelerated Medically Trained Clinician (PA, Clinical Officer, Clinical Associate, etc.) is one of the major health care providers worldwide!

- We wanted to meet our colleagues in their workplaces
- We attended the GACOPA (Global Association of Clinical Officers and Physician Assistants) Conference in Rwanda in 2020 for AMTCs around the world







# Our Colleague- Annette Namugosa



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Austin Odior

Charlotte Nsubunda

Yvonne Mujakizi

Peter Ntshingwa

Republic of Uganda

Uganda Ministry of Health

Republic of Kenya

Republic of Rwanda

DACOPA International

<https://youtu.be/oZ-8nRGgV-8>

# What is an AMTC ? Who are we?

- The PA and equivalent has a huge presence throughout the world
- In East Africa they are known as clinical officers
- The Accelerated Medically Trained Clinician (AMTC) is found in 53 nations
- We are a workforce globally of one million strong
- AMTCs are the main source of primary care worldwide in rural underserved areas
- Approximately 40 million new health care jobs will be needed in 2030
- Predicted shortage of 18 million health workers needed globally
- Biggest loss in low and middle income countries





# AMTC - Accelerated Medically Trained Clinician

- We have 61 distinct cadre titles
- We all share similar health care roles
- 75% of world wide AMTC cadres have primary care in their scope of practice
- 37% report surgical specialty in their scope of practice
- A surgical trained AMTC is a life saving cadre in rural underserved low and low middle income countries
- The density of the AMTC is higher in low and middle income countries worldwide
  - In Kenya the AMTC per population is 3.1 per 10,000 compared to physician at 1.57 per 10,000

# Where does the AMTC practice?

Afghanistan  
Angola  
Australia  
Bangladesh  
Botswana  
Bulgaria  
Burkina Faso  
Canada  
Cape Verde  
Ethiopia  
Fiji  
Gabon  
Germany  
Ghana  
Guinea Bissau  
Guyana  
India  
Ireland  
Israel

Kenya  
Liberia  
Madagascar  
Malawi  
Mauritius  
Marshall Islands  
Mozambique  
Mongolia  
Myanmar  
Nepal  
Netherlands  
New Zealand  
Papua New Guinea  
Russia  
Russia Post USSR - Armenia,  
Kazakhstan and Kyrgyzstan,  
Uzbekistan

Rwanda  
Kingdom of Saudi Arabia  
Scotland  
Senegal  
Sierra Leone  
South Africa  
Republic of Southern Sudan  
Taiwan  
Tanzania  
Togo  
Tonga  
Ukraine  
Uganda  
United Kingdom: England  
Zambia

# Examples of our Titles

Physician Assistant

Medical Assistant

Community Medical Officer

Health Assistant

Baga Emch / Feldsher

Tecnicos de Medicina

Physician Associate

Clinical Associate

Medex

Clinical Officer

Community Health Officer

Health Officer

Community Health Care Officer

Assistant Medical Officer

Doctor Assistant

Medical Licentiate

Tecnicos de Cirurgia

# Uganda

## History and Development of the Clinical Officer

- The profession started in 1918 - one of the oldest in the world
- Christian missionaries Sir Albert Cook and his wife (nurse)
- Recognized the importance to train lay people in treating patients
- 1929 the Ugandan government recognized the importance of this healthcare profession and created an official training school for clinical officers
- The initial title of this profession was medical assistant, and it was changed to clinical officer in 1996



# Uganda Clinical Officers Training and Accreditation

- Official curriculum was established in 1975
- Public health is heavily incorporated into the curriculum
- 10 weeks in rural communities learning environmental health rural health concerns, irrigation, hygiene, and public health issues
- The 1st-year students spend 40% of their time in clinical settings and 60% of their time in lectures
- Last year of training consists of 80% of their time in a clinical setting
- Clinical Officers can further their education by specializing
- 8 + programs



# Kenya

## History and Development of the Clinical Officer

- Training started in 1927 at King George Hospital, now Kenyatta hospital
- 1952 - state of emergency- British doctors left! Fear of reprisal by Kenyan natives
- Crisis occurred in health sector, CO's filled the gap!
- Training halted temporarily - Kenyan Doctors protested "no one but a doctor should use a stethoscope"
- 1962 - COs asked for recognition
- 1969 - role of CO is fully recognized
- 1971 - COs become registered
- First specialty - Leprosy
- Over 20,000 COs counted between 2018-2020

# Uganda and Kenya Clinical Officers

## Specialties

- Primary care
- Clinical leadership
- Ophthalmology
- ENT
- Cataract surgery
- Oncology
- Orthopedics
- Anesthesia
- Pulmonary
- Dermatology
- General surgery
- Reproductive health
- Virology



# Accreditation and Regulation

## Accreditation - Seal of Approval

- Education standards
- Quality assurances of education programs
- Establish code of conduct
- Ensuring health workforce quality and sustainability
- System to ensure continuing professional development as well as disciplinary action
- Identification of scope of practice
- Systems of licensure
- Maintenance of registrar

## Regulation - The Rules

- Certifying that an organization or individual has met the standards established by accreditation organization
- A way of proving that the standards were met



## Why is this important? How it Impacts our Profession Globally

- Health professional regulatory systems and their capacity are under stress in many low and middle and high income countries
- COVID-19 pandemic has exacerbated this
  - Rwanda

# Accreditation and Regulation Discussion

## Uganda

- Schools are accredited by the Ministry of Education (our ARC-PA)
  - Recognized and supervised by the regulatory body - Allied Health Professionals Council Uganda (our NCCPA)
- After graduation one can apply for their registration certificate from the Allied Health Professionals Council Uganda
- Practicing license issued annually

## Kenya

- 1962: Kenya Clinical Officer Association
- CO registered in 1981
- Goal: Bring CO together to gain recognition through an act of parliament
- Initially limited in drug prescribing rights
- 1988: Cap 260 laws in place - president was impressed by treatment of Malaria by a CO
- Ministry of Health regulates the training and practice of CO at the institutions and approves syllabi of the universities and colleges

## Why is this important for American PAs?

- We can learn from our international colleagues
- We can learn to incorporate more robust and patient centered care by deeper community involvement and better use of public health in our health care delivery systems
- We as PA's have a huge role in primary care in this country
- We can learn from our international colleagues how to better implement community surveillance, public health and community engagement into practice

# Take Home Points

1. We are the main source of primary care worldwide
2. We serve in rural and underserved areas worldwide
3. We need to appreciate and learn more about our international colleagues
4. We need to collectively work together to bolster our profession to bring about global change!
5. We need to understand how accreditation and regulation are important but can prevent our profession from expanding globally





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# Questions?



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