

Strengthening pre-hospital care to ensure quality healthcare

Aklilu Azazh^{1*}

Pre-hospital care provides timely care in emergent and urgent health conditions and in so doing it addresses quality, access, and equity. (1) The large burden of acute disease in Africa can be substantially addressed by effective, integrated emergency care systems, of which non-hospital emergency care plays a critical role. (2) In the past decade, FMOH has exerted significant efforts in the development and expansion of ambulance services. Before 2010, ambulance service was being provided only by the Ethiopian Red Cross Society (ERCS). (3) Since 2010, the FMOH allocated fund that was enhanced by additional community mobilization efforts, and as of 2020, it purchased several thousands of ambulances. Besides, there are Private ambulance systems with noticeable development as well as expansion of ERCS ambulances underway. (4)

Despite these visible developments, there are formidable challenges in this domain of practice. Ambulances are mainly giving maternal referral transport services while they hardly respond to other emergency problems. The dispatch and call system is not strong in many areas. As the call system doesn't work and response time is significantly delayed it created public distrust. Consequently, most emergency patients are transported to health facilities with other transport systems.

Human resource development and sustainability issue is another big challenge. Emergency Medical Technicians (EMTs) are operating ambulance services in most of the regions but in Addis Ababa, nurses are leading the care. The attrition of these valuable human resources is alarmingly high due to vague career structure and poor motivating system. As of 2020 out of 2081 EMTs that were trained, only 1089 were at work. In addition, EMTs don't have established medical oversight or mentorship and support system. Furthermore, ambulance drivers also leave their job post after acquiring good driving skills to be hired elsewhere. (4)

Citation: Aklilu Azazh. *Strengthening pre-hospital care to ensure quality healthcare.* PAJEC.2023;1(2): 5-6.

1. Addis Ababa University, Addis Ababa, Ethiopia

Correspondence: Aklilu Azazh
email: akliluem@gmail.com

Received: July 5, 2023;

Accepted: July 5, 2023;

Published: August 11, 2023

Copyright: ©2023 Aklilu Azazh.

This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

There are also challenges related to the ambulance system and resource allocation including lack of uniform ambulance dispatch system in the regions. Mostly, ambulance administration is woreda based. In some areas, the woreda administration is responsible while in others ambulance service is under the woreda health center. This makes the system highly decentralized. MOH and regions make some monitoring and evaluation but do not have direct control or support mechanisms. Ambulance routine operation, medical setup, vehicle maintenance, and addressing benefits of the human resource needs more budget to sustain the service but it can't be covered with the existing woreda budget.

Some recommendations to address the above challenges are the following:

1. It is better to create a mechanism to support and retain ambulance professionals. These professionals should develop their academic career as well as their professional networking among themselves and other related professionals. Medical oversight, mentorship, and quality assurance mechanisms should also be placed.
2. Pay attention to governance and communication system building. Ethiopia, a country with huge potential and a current volume of ambulances, needs an agency or equivalent structure at a national or regional level, to govern and develop the system.
3. Some of the system elements that should be developed in the future include developing a clear dispatch center, centralized call numbers, a quality assurance mechanism, and a sustainable financial management system. By doing so, the public will develop trust, and ambulance service will shift from the current maternal emphasis to all emergency care.
4. As it is practiced in the USA, alternatively, EMT professionals can play the role of ambulance driving and medical care. This may help to create a better incentive system and retain in the profession with good care to the vehicle itself.

Addressing these challenges needs commitment and concerted efforts of stakeholders including the Ministry of Health, regional health bureaus, and ESEP among many others. These partakers should give at most priority to this vital agenda and look at what is on the ground followed by important recommendations.

Conflict of Interest

The authors declare that they have no conflicts of interest for this work.

References

- 1) Aklilu Azazh, Sisay Teklu, Assefu Woldetsadik, et al, Emergency medicine and its development in Ethiopia with emphasis on the role of Addis Ababa University, School of Medicine, Emergency Medicine Department, Ethiop Med J Vol.50 2014 Jul;Suppl 2:1-12.
- 2) N.K. Mould-Millman , R. Naidoo , S. de Vries , C. Stein , L.A. Wallis , AFEM Consensus Conference, 2013. AFEM Out-of-Hospital Emergency Care Workgroup Consensus Paper: Advancing Out-of-Hospital Emergency Care in Africa: Advocacy and Development, AFJEM Volume 4, Issue 2, June 2014
- 3) Ambulance and First Aid Service - Ethiopian Redcross Society <https://www.redcrosseth.org › resource › ambulance-and-f>. June 26, 2023
- 4) Azazh, A. (2023). Emergency and critical care development in Ethiopia: a lot is achieved and yet farther to go, PAJEC Vol.1 No. 1(2023)