









EXECUTIVE LEADERSHIP

IN GLOBAL SURGERY





COURSE OUTLINE

Aim of the course

The course aims to enable leaders in healthcare in the public, private and voluntary sectors to become change agents within their context. Participants will be taught to design and lead evidence-based projects and programmes that improve surgical outcomes in their respective organisations, and countries influencing surgical healthcare on a large-scale basis.

The course is aimed at two groups of people: (1) leaders in healthcare, and (2) executives and administrators who can impact policy and system change. The course provides motivation for what global surgery is and why it matters; how to implement global surgery projects and programmes; and how to support and drive innovation. The course has been designed specific to the African context for participants from low- and middle-income countries.

Target Audience

This course is aimed at leaders in the public, private and voluntary healthcare sectors involved in surgical care as well as policymakers. We intend to have a blended, transdisciplinary classroom with leaders from different spheres who can learn from each other about implementing change in different sectors and contexts.

Who should attend

- Heads of Departments and Clinical units (Surgery, Anaesthesia, Obstetrics and Gynaecology, Nursing
- Public health specialists, Family Medicine, Rehabilitation sciences
- Hospital and facility managers
- Directors and leaders of Non-governmental organisations
- Directors and leaders in Ministries of health
- Directors and leaders of multi-national organisations like WHO
- Chairs, presidents and leaders of surgical societies and colleges

Dates

13 February 2022 – 14 July 2023 Contact week: 27 February – 3 March 2023

Venue

Contact week at the UCT Graduate School of Business in Cape Town (27 Feb – 3 March) Webinars (virtual)

Duration

- 6 months
- February: prescribed reading, preparation and webinars, contact week and project design
- March: Project Design
- April: Project Implementation
- May: Project Implementation
- June: Project Implementation and write up
- July: Submission of report, presentation and certification

Partners

Global Surgery Division, University of Cape Town Bertha Centre, University of Cape Town Programme for Global Surgery and Social Change, Harvard University Global Surgery Foundation, United Nations Training and Research Institute Africa Centre of Diseases and Control and African Union, Ethiopia

Certification

The certificate will be issued by the Graduate Business School at the University of Cape Town.

Course Outcomes

Objective

To provide fellows with the necessary foundational knowledge, critical reasoning and analytic skills to participate effectively in quality improvement, project design, and implementation, of interventions and projects to improve surgical healthcare for large-scale impact.

Learning Outcomes

At the end of this course, the fellows will be able to:

- Understand and apply key concepts in global surgery, surgical health systems, innovation and leadership
- Deepen knowledge regarding leadership principles of leading self and teams in unequal societies and how to bring about change
- Identify opportunities to address health systems challenges through innovation and global surgery implementation interventions at a facility or regional level
- Design, introduce and scale-up appropriate surgical interventions within broader health system, political and financial considerations
- Participate within an international network of global surgeons and practitioners

Course Layout

Programme timetable

Pre-contact week timetable (virtual)

Week	Dates	Programme	Time	Activity
Week 1	13-17	Webinar 1	4-6pm SAST	Introduction to the
	February			course
				Prof Salome Maswime
				The Surgical ecosystem:
				Prof Graham Fieggen
				Introduction to
				leadership
				Prof Salome Maswime

Week 2	20 – 24	Webinar 2	4-6pm SAST	The Lancet Commission	
	February			on Global Surgery	
				Dr Scott Corlew	
				Global Surgery Advocacy	
				Dr Kee Park	

Contact Week (Graduate Business School, Cape Town): 27 February – 3 March

1. Surgical leadership

1a	Introduction to Global Surgery and Leadership Prof Salome Maswime	 What is global surgery and the unmet need for surgery History of Global Surgery Social and structural determinants of health Access and Quality of care Surgical systems strengthening
1b	Introduction to Health Systems Strengthening and financing Dr Kerrin Begg	 Explain structures, functions, goals and objectives of health systems; Analyse the concepts of access, equity, effectiveness, efficiency, responsiveness; Articulate social and financial risk protection Compare financing models for health systems
1c	Health Systems Governance Prof Yogan Pillay	 Introduction to health policy Policy reform Governance frameworks Implementing scalable programmes Surgical systems Geopolitics
1d	Introduction to Surgical Leadership Prof Graham Fieggen	 Leadership Surgical ecosystems Leadership and surgery Leading surgical teams Leading surgical systems Personal leadership

2. Innovation

2a	Systems thinking Dr Charmaine Cunningham	 Explore a conceptual sense-making framework to situate Global Surgery Challenges Introduce concepts of complexity and systems thinking
2b	Social innovation Katusha De Villiers	 What is social innovation in health Components of social innovation Invention versus innovation Principles of innovation Social innovation in a complex system Seeing system impact Types of innovation Design thinking principles
2c	Biomedical innovation Prof Sudesh Sivarasu	 Define biomedical innovation Role of biomedical innovation in surgery Opportunities for social innovation
2d	Psychology of change Dr Charmaine Cunningham	 Scaling up interventions Psychology of change framework Dealing with resistance to change The role of agency Co-designing people-driven change
2e	Models of improvement Dr Charmaine Cunningham	Quality ImprovementModels of improvement

3. Advocacy and Accountability

3a	Asset Mapping A/Prof Richard Chivaka	 Analyse the availability and/or paucity of resources Develop a comprehensive asset map of own organization/department Generate ideas for how to redeploy existing resources within your surgical
3b	Advocacy and community services Dr Jackie Stewart	 department What is advocacy Community services Non-governmental organisations
3c	Safe Surgery and Quality Improvement	 Safe Surgery Quality improvement programmes

	Dr Desalegn Bekele	Implementing national surgical
		programmes
3d	Social accountability and social	Define social accountability
	responsiveness	Framework for social accountability in
	A/Prof Lionel Green Thompson	surgical systems strengthening
Зе	Community Engagement	Community engagement
	Ms Nowhi Mdayi	Leadership structures in the community
		engagement
		Community perspectives of surgical care

4. Management

4a 4b	Leadership vs Management Dr Charmaine Cunningham Theatre Management	 Kotter's model to distinguish between management and leadership Discuss the implications of the above model Human resource management
2	Dr Shrikant Peters	 Prioritising of surgical cases Surgical recovery Organisational culture
4c	Project management Mr Terry van Graan	Introduction to project managementFramework for decision making
4e	Programme management Prof Salome Maswime	 Diagnosis Planning Implementation Monitoring and evaluation Risks Ethics
4e	Fundraising and Budgeting Ms Zoe Boshoff	 Mission and vision Theory of change Budgeting Timelines Fundraising strategy

5. Diplomacy

5a	Introduction to Public Policy and	What is a government
	Bureaucracy	Tiers of government
	A/Prof Zwelethu Jolobe	Local municipalities
		Introduction to public policy and
		administration
5b	Global Diplomacy	• What is Global Diplomacy and its gravitas
	Dr Geoff Ibbotson	on Multilateral Diplomacy

		 Geopolitics and the governance of the United Nations Regional frameworks and global health public policy
5c	Strengthening African health systems Dr Elvis Temfack	 Surgical care in Africa African Health systems Role of NGO and governments Running multinational programmes Roles of Africa CDC and African Union
5d	National surgical, obstetrics and anaesthesia plans Dr Jennifer Hon	 NSOAPs Progress with NSOAPs Framework for NSOAPs

Weekly Schedule

Week	Dates	Programme	Time	Activity
Week 1	13-17	Webinar 1	Feb 14, 5-7pm	Virtual
	February		SAST	
Week 2	20-24	Webinar 2	Feb 21, 5-7pm	Virtual
	February		SAST	
Week 3	27 February	Contact week	8.30-5pm SAST	In person lectures at
	– 3 March			Graduate Business School
Week 4	6-10 March	Project design	Self-paced	Recommended time 4 – 6
				hours
Week 5	13-17	Project design	Self-paced	Recommended time 4 – 6
	March			hours
Week 6	20-24	Project	Mar 22, 5-7pm	Submission of project
	March	presentation	SAST	proposal (5 pages)
				Pre-recorded presentation
				(5 minutes per delegate)
Week 7	27-31	Project	Mar 27, 5-7pm	Pre-recorded presentation
	March	presentations	SAST	(5 minutes per delegate)
Week 8	3-7	Project	Self-paced	Recommended 2-4 hours
	April	implementation		
Week 9	10-14	Project	Self-paced	Recommended 2-4 hours
	April	implementation		
Week 10	17-21	Project	Self-paced	Recommended 2-4 hours
	April	implementation		
Week 11	24-28	Virtual meeting	April 25, 5-7pm	Progress meeting
	April		SAST	

Week 12	1-5	Project	Self-paced	Recommended 2-4 hours
	May	implementation		
Week 13	8-12	Project	Self-paced	Recommended 2-4 hours
	May	implementation		
Week 14	15-19	Project	Self-paced	Recommended 2-4 hours
	May			
Week 15	22-26	Virtual meeting	May 23, 5-7pm	Progress meeting
	May		SAST	
Week 16	29 May –	Project	Self-paced	Recommended 2-4 hours
	2 June	implementation		
Week 17	5-9	Project	Self-paced	Recommended 2-4 hours
	June	implementation		
Week 18	12-16	Project	Self-paced	Recommended 2-4 hours
	June	implementation		
Week 19	19-23	Project	Self-paced	Recommended 2-4 hours
	June	implementation		
Week 20	26-30	Project write-	June 27, 5-6pm	Progress meeting
	June	up and video	SAST	
Week 21	3-7	Project write-	July 4,	Submission of report and
	July	up and video	Submissions	video
Week 22	10 - 14 July	Submissions	14 July, 8 – 5pm	Presentations
				Closing ceremony

Recommended pre-course reading

• Fellows will be expected to read selected materials

Publications

- 1. John G Meara, Andrew J M Leather, Lars Hagander, Blake C Alkire, Nivaldo Alonso, Emmanuel A Ameh, Stephen W Bickler, et al. (2015) Global Surgery 2030: evidence and solutions for achieving health, welfare, and economic development.
- Farmer P, Kim J. Surgery and global health: a view from the OR. World J Surgery 2008;32:533-536 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2267857/pdf/268_2008_Article_9525. pdf
- David Bishop, Robert A Dyer, Salome Maswime, Reitze N Rodseth, Dominique van Dyk, Hyla-Louise Kluyts, et al. (2019) Maternal and neonatal outcomes after caesarean delivery in the African Surgical Outcomes Study: a 7-day prospective observational cohort study.
- 4. Bruce M Biccard, Thandinkosi E Madiba, Hyla-Louise Kluyts, Dolly M Munlemvo, Farai D Madzimbamuto, Apollo Basenero, et al. (2018) Perioperative patient outcomes in the African Surgical Outcomes Study: a 7-day prospective observational cohort study.
- 5. The NSOAP manual The National Surgical Obstetrics Anaesthesia Plan Manual

 CIS 2020, National Policy Development Framework 2020 (Republic of South Africa) https://www.gov.za/sites/default/files/gcis_document/202101/national-policydevelopment-framework-2020.pdf

Videos

7. Launch of the NSOAP manual <u>https://www.globalsurgeryfoundation.org/events/recording-nsoap-launch</u>

Virtual webinars (week 1 and 2)

• Fellows will be expected to attend the 2 webinar sessions

Contact week

5 day contact week at the Graduate Business School in Cape Town

Approximately 8 hours a day = 40 hours (including lunch and tea breaks)

The course format will be a mix of didactic lectures, small and large group discussions and case studies

Thematic Areas

- 1) Global Surgery and Systems
- 2) Innovation and Implementation
- 3) Advocacy and Community Engagement
- 4) Leadership and Management
- 5) Diplomacy

Learning Outcomes

Timetable for Contact week: 27 February 2023 – 3 March 2023

Theme Facilitator Date	Surgical leadership Dr Rowan Duys 27 Feb	Innovation Dr Simon Le Roux 28 Feb	Advocacy and Accountability Ms Jocelyn Park-Ross 01 March	Management Dr Lebo Moloi 02 March	Diplomacy Dr Mary Kinney 03 March
08:00			Registration		
08:30	Introduction to the course Dr Cunningham	Introduction to Systems Thinking	Asset Mapping Prof Richard Chivaka	Leadership versus management	Introduction to Public Policy and Bureaucracy
09:00	Introduction to Global Surgery	Dr Charmaine Cunningham		Dr Charmaine Cunningham	A/Prof Zwelethu Jolobe
09:30	Prof Salome Maswime				
10:00		Biomedical Innovation Prof Sudesh Sivarasu	Advocacy and Community services	Theatre Management Dr Shrikant Peters	Global Diplomacy Dr Geoff Ibbotson
10:30			Dr Jackie Stewart		
11:00			Теа		
11:30	Introduction to Health Systems	Social Innovation Katusha De Villiers	Safe Surgery and Quality Improvement Dr Desalegn Bekele	Project Management Mr Terry van Graan	Strengthening African Health Systems Dr Elvis Temfack
12:00	Dr Kerrin Begg				
12:30					
13:00			Lunch		
13:30					
14:00	Health systems Governance	Psychology of Change	Social Accountability	Programme Management	National Surgical, Obstetrics,
14:30	Prof Yogan Pillay	Dr Charmaine Cunningham	A/Prof Lionel Green-Thompson	Prof Salome Maswime	Anaesthesia Plans Dr. Jennifer Hon
15:00					
15:30			Теа		
15:45	Introduction to Surgical	Models of Improvement	Community Engagement	Fundraising and Budgeting	Closing ceremony
16:30	Leadership Prof Graham Fieggen	Dr Charmaine Cunningham	Ms Nowhi Mdayi	Ms Zoe Boshoff	
16:45		Personal Lead	lership Reflection		

Project Design and Implementation

The fellows will be expected to design and implement a project in their local setting that can be designed and piloted to completion within 3 months. Delegates will be expected to use global surgery principles learnt during the course to design a Global Surgery pilot project.

The project has to address a Global Surgery challenge within the local context, and the principles of leadership, innovation and implementation learnt during the contact week need to be used. This may include stakeholder management, project design, Advocacy and Diplomacy principles should also be applied in the stakeholder mapping and implementation of the project.

The project evaluation will be based on the successful implementation of the project and evaluation of lessons learnt in the process.

Monthly Virtual Meetings

The fellows are expected to attend monthly meetings with the course convener and lecturers to discuss the progress with their projects, in this meeting they will also discuss any challenges they have had and opportunities. Attendance of all meetings are strongly encouraged.

Project Presentations

The project presentations and closing ceremony will be held in a hybrid session on the last day of the course (at Graduate Business School in Cape Town).

Course assessment

For certification the delegates the will be expected to attend

- Attendance of webinars
- 80% Attendance of contact-week lectures
- Attendance of virtual meetings
- Project design and implementation

Course evaluation

The fellows will be expected to submit course evaluations for all the lectures and the course.