

**ACCREDITATION REPORT OF PROSTHETIC AND ORTHOTIC
TRAINNING PROGRAMME AT FEDERAL COLLEGE OF
ORTHOPAEDIC TECHNOLOGY (FECOT) NATIONAL
ORTHOPAEDIC HOSPITAL, IGBOBI-LAGOS
(16TH AND 17TH, SEPTEMBER, 2009)**

As a matter of logistics, the adopted sequence for the accreditation exercise is as follows: *preamble, introduction, observations, recommendations and conclusion.*

I. PREAMBLE

The Accreditation team arrived (FECOT) Igbobi by 10:30am on Wednesday 16th September, 2009. They were met in front of the Medical Director's Office by Mr. S. A. Opatade (Programme co-ordinator and Head Prosthetic and Orthotic department) who led the team to the Prosthetic and Orthotic department for commencement of the exercise.

The management team of the hospital led by Dr. Odunubi (Head of Clinical Service), who represented the Medical Director and other key staff members of the Prosthetic and Orthotic department were also on ground to welcome the accreditation team. They all proceeded to the hospitals' board room where proper introductions were made; Mr. Opatade introduced members of the hospitals' management team.

Dr. Odunubi apologized on the absence of the Medical Director (Dr. Yinusa) who was away on an official visit to Abuja. He expressed the hospitals' hope and expectation in making the accreditation team report positive and meaningful. He gave a brief history on the commencement of Prosthetics and Orthotics (P & O) in Igbobi and various efforts put in place by old "Heroes" of the hospital in making the training a reality. He finally charged the accreditation team to be free and fair in their findings.

The Medical Rehabilitation Therapists Board (MRTB) Registrar Mr. J. D. Jogunola also introduced his team members made up of:

Dr. Col P. O. Mogbo (Rtd)

Mr. E. O. Somolu

Rev. M. A. Jaiyesinmi

Dr. Mike Egwu and
Mr. J. D. Jogunola (Reg. /CEO MRTB)

In his introductory speech, the Registrar explained the purpose of the accreditation exercise. . The primary objective is centered on the need to regulate and control the training and practice of Prosthetics/Orthotics not only in (FECOT) Igbobi but also in Nigeria as a whole. He also gave a brief history of the Board MRTB and that the Prosthetic and Orthotic profession, though an arm of Medical Rehabilitation Therapy did not come under the Board's regulation and control until 2006. He further assured the hospital's management team that the accreditation panel wasn't there to "witch hunt" or fault the school setting but rather to assist the hospital proffer solutions to the 'would be' problems facing the school and the best way to make the school an autonomous Institution.

II. INTRODUCTION

The Registrar (MRTB) further gave the break down of the mode of operation for the exercise which included:

- a. Staff accreditation (professional, subsidiary and support staff)
- b. Equipment evaluation
- c. Academic Hullabaloo of students
- d. Ward examination and on the spot assessment of facilities e.t.c

The accreditation and management teams later proceeded on the accreditation exercise, using the programme drawn for it by the co-ordinator of the schools' programme thus leading to the following observations, recommendations and conclusions.

III. OBSERVATIONS

(a) Rector/Head of the Institution

Very importantly the issue of who the leader or overall head of the institution is was not addressed. The present programme coordinator Mr. Opatade is the Assistant Director P & O with the Hospital and was not employed primarily for the school; further more there is no record of his re-deployment from the hospital to the school.

(b) Staff Strength

There were only three (3) professional staff members on ground made up of; one (1) Assistant Director, One Chief and One basic Prosthetic and Orthotic officer. There was over fifteen (15) other

adjunct teaching staff attached to the school. The support staff members were also screened one after the other immediately after the professionals were screened.

(c) **Students**

Details regarding lecture notes, timetable, pre-admission requirements, lecture schedules, practical exposures, reports from external examiners and students' mode of dressing could not be ascertained as the students were unavailable because the school was not in session. What a wrong time to conduct an accreditation exercise

(d) **The School**

There are two (2) classrooms of 25 student's capacity each. It was also observed that re-construction had commenced on the abandoned new school building which had been left untouched for the past 20 years.

(e) **Space Evaluation**

- i. **Offices:-** There are several offices at the department and school adequate for lecturers and other support staff.
- ii. **Workshops:-** - There are three(3) major workshops within the department/hospital open to students. They are adequately furnished and equipped for teaching.
- iii. **Assessment Rooms:-** - The assessment/examination rooms available are only two (2). This is inadequate for students' consumption and teaching.
- iv. **Changing and Fitting Rooms:-** The numbers available are spacious and good enough for the designated purpose.
- v. **Plaster Rooms:-** The department had a plaster room far cast taking and modification.
- vi. **Toilet Facilities:-** There were toilets for staff members, students and patients.
- vii. **Gait Training Area:-** A gait training area was available for patients use. Two (very old) parallel bars were seen at the workshops.

- viii. **Wards and Clinics:-** Visit to the wards, clinics and other key centres in the hospital showed that the various departments, wards and centres were fully equipped and conducive for students.
- ix. **Equipment:-** The list of available equipment given by the department was physically examined and most of the equipment were noted to be adequate, functional and in perfect working conditions except for a few non serviceable ones

IV. **RECOMMENDATIONS**

(a) **Rector/Head of the Institution**

The Accreditation committee enjoins the management of the hospital to employ a full-fledge P&O officer of not less than the directorate cadre in P&O in Nigeria as the Rector/head of the Institution and that the Institution should be seen as an autonomous entity in all ramifications.

(b) **Staff Strength**

For the purpose of training students, there is need for the hospital to employ two (2) or more Prosthetic and Orthotic officers of very high grade the department, for supervision and adequate coverage of student training activities including clinical exposures.

(c) **Students**

No recommendations can be made here as the school was not in session and the students unavailable, but a re-visit may be made by the Registrar (MRTB) in order to look into this area.

(d) **The School**

Speedy reconstruction of the new school building is highly recommended and efforts should be made to accelerate work going on at the new building so as to create a better environment for teaching and learning.

(e) **Space Evaluation**

i. **Offices**

The opinion of the accreditation team is that for now and until the new school building complex is put to use, the existing infra-structural facilities are okay.

ii. **Workshops**

Each of the three (3) workshops are adequately furnished and equipped. They are highly commended.

iii **Assessment rooms**

The team recommends minimum of two (2) additional assessment rooms to allow for more students' exposure.

iv **Changing and fitting rooms**

This also is inadequate and needs to be improved upon in terms of number.

v. **Plaster rooms**

For proper coverage of very many additional features to be displayed, there is need for one (1) or two (2) additional plaster rooms.

vi **Toilet Facilities**

The existing ones are okay for both staff and students but not enough for patients.

vii **Gait training areas**

The available parallel bars are obsolete and in-adequate in number. The authority should make efforts to replace old ones and increase the numbers.

viii **Words and Clinics**

The areas seen and examined by the team appear okay and decent for training and learning process.

ix **Equipment**

Except that most equipment was obsolete, their qualities are okay and functionality okay.

N. B.

To address the issues raised in sections iii^c and iv^c (on students) above, a re-visit tour was embarked upon by the Registrar and one other member of the

accreditation team. The students were not seen as a class, rather a handful bit of less than 10 students were seen who were not in good dressing mood. Few of them were interrogated and interviewed but the opinion could not be taken for general consensus of the students.

CONCLUSION

Sequel to the followings:

- i. The issue of headship of the Institution whose personality/identity and designation has not been spelt out
- ii. The students that constitute the core element of accreditation were not seen in session

The *verdict* from the accreditation team is a *denial of accreditation*. However; the Institution could re-apply after six-months for re-accreditation

Written by:

Mr. J. D. Jogunola
Reg./CEO (MRTB)