CAPE COAST TEACHING HOSPITAL

CCTH PHYSIOTHERAPY DEPARTMENT (CLUBFOOT PROGRAMME), GHANA

Supported by Pas à Pas/Step by Step charity

TREATMENT AND COUNSELLING REPORT FOR THE YEAR 2024

EXECUTIVE SUMMARY

This comprehensive annual report presents the operational overview of the CCTH Physiotherapy Clubfoot Programme for 2024 at the Cape Coast Teaching Hospital in Ghana. This encompassing administrative structure, patient demographics, clinical activities, programme accomplishments, operational challenges, strategic recommendations, and future development initiatives.

ADMINISTRATIVE STRUCTURE

The Clubfoot Programme operates under the auspices of the Physiotherapy Department at Cape Coast Teaching Hospital, with Mr. Benjamin Ridley Frimpong, Department Head. The specialized multidisciplinary team directly involved in clubfoot care is outlined below:

Table 1: Clinical Team Composition and Responsibilities

Staff members	Designation	Clinical Responsibilities
David Adjei Ampofo	BSc	Clinical supervision, casting procedures,
	Physiotherapist	tenotomy assistance, therapeutic
		mobilization, comprehensive assessments,
		patient reviews
Maxwell Effah	Diploma	Casting application, clinical assessments,
	Physiotherapy	tenotomy support, therapeutic mobilization,
	Technician	patient review
Godffrey Anning	Diploma	Casting application, clinical assessments,
	Physiotherapy	tenotomy support, therapeutic mobilization,
	Technician	patient review
Dorcas Arkorful	BSc	Mobilization therapy, brace application and
	Physiotherapist	adjustment, clinical evaluations
Charlotte Danso Sybil	BSc Rehabilitation	Mobilization therapy, brace application and
	Specialist	adjustment, clinical evaluations
Naphtali Rockson	Counselor	Patient and family counselling, initial
		treatment education, follow-up coordination,
		home visit programmes

PATIENTS DEMOGRAPHICS

Table 2: Annual Patient Statistics Comparison

YEAR	BOYS	GIRLS	TOTAL
2023	48	55	103
2024	56	68	124

NUMBER OF PATIENTS

There were **one hundred and twentyfour** (124) patients who were undergoing clubfoot treatment at the physiotherapy Unit of Cape Coast Teaching Hospital from January to December 2024. Fifty-six (56) of these are male while the remaining Sixty-eight (68) are female. **Sixty-eight (68) patients were new cases**. A total of forty-six (46) percutaneous tenectomy were done and Seven (7) had recurrence after tenotomy. There was a total of about Eight hundred and twelve (812) clinic visit (Casting, mobilization and brace reviews) in the year 2024. Complete discharges were Seven (7) with extended reviews.

The programme experienced an 20.39% increase in patient enrollment from 2023 to 2024, demonstrating expanding service reach and community awareness.

CLINICAL ACTIVITIES

Patient care is structured through individualized appointment schedules determined by treatment phase requirements and clinical progression milestones.

PROGRAMME ACHIEVEMENTS

Clinical Outcomes

- Successfully maintained running the clinic by the physiotherapists on a weekly basis despite operational challenges
- Achieved 85% adherence rate among patients completing initial casting phases
- Established systematic follow-up protocols improving long-term outcomes
- Implemented comprehensive parent education programmes enhancing treatment compliance

Service Delivery Improvements

- Enhanced multidisciplinary collaboration between physiotherapy and orthopedic services
- Developed structured counselling frameworks for family support
- Created standardized assessment protocols ensuring consistent care quality

Community Impact

- Increased community awareness through outreach initiatives
- Strengthened referral networks with primary healthcare providers
- Developed cultural sensitivity training for staff improving patient relationships
- Established support networks among families affected by clubfoot

OPERATIONAL CHALLENGES

- 1. Patient Compliance Issues: Treatment adherence remains problematic, with some families discontinuing scheduled appointments despite regular follow-up interventions and educational counselling sessions.
- 2. Economic Barriers: Significant financial constraints affect numerous families, creating barriers to consistent treatment access. Transportation costs and other medical expenses present substantial hardships for economically disadvantaged households.
- 3. Treatment Protocol Adherence: Parental non-compliance with prescribed procedures poses clinical risks. Issues include improper cast care and maintenance resulting in moisture damage and associated skin complications, leading to treatment delays. Additionally, inconsistent brace utilization undermines therapeutic effectiveness despite ongoing educational interventions.
- 4. Resource Limitations: Limited funding restricts program expansion capabilities and equipment modernization efforts, potentially impacting service quality and accessibility.

STRATEGIC RECOMMENDATIONS

- 1. Financial Accessibility: Establish comprehensive financial assistance programmes including sliding scale fee structures, transportation subsidies, and complete fee waivers for qualifying families based on socioeconomic assessment criteria.
- **2.** Treatment Compliance Enhancement: Develop intensive parent education workshops incorporating hands-on training, visual aids, and peer support mechanisms to improve adherence to treatment protocols.

- **3.** Community Outreach Expansion: Implement targeted community awareness campaigns utilizing local media, traditional leaders, and healthcare workers to promote early detection and treatment seeking behaviors.
- **4. Staff Development:** Provide continuous professional development opportunities including specialized training in pediatric orthopedics, family counselling techniques, and cultural competency to enhance service delivery quality.
- **5. Infrastructure Development:** Seek funding for facility improvements, equipment upgrades, and technology integration to optimize patient care environments and clinical outcomes.

FUTURE DEVELOPMENT INITIATIVES

Immediate Objectives (2025)

- Organize comprehensive stakeholder meeting facilitating open dialogue between families, clinical staff, and program administrators
- Launch pilot financial assistance program for identified vulnerable families
- Implement enhanced parent education curriculum with multimedia resources

CLUBFOOT EXPENSES FOR 2024

ITEM	COST (GHC)
POP	67,417.00
SOFT BAND	21,071.00
BRACE	26,160.00
OTHO BOOTS	9,250.00
MISCELLANEOUS	29,002
COUNSELLOR ALLOWANCE	4,800
TOTAL	GHc 157,700.00

BALANCE IN ACCOUNTSDEC 2024: GHC 12,673.36

SAVIOR'S SURGERY

- MONEY FROM CLUBFOOT ACCOUNTS: 4080,00 (initial payments/Pre surgery)
- MONEY TRANSFERRED = 97,600.00

ITEMS	COST(GHC)
FIRST SURGERY + MEDICATIONS	45,430.00
SECOND SURGERY + MEDICATIONS	36,800.00
MISCELLANEOUS	9,400.00
TOTAL	GHc 91,630.00

CONCLUSION

The 2024 operational year demonstrated significant progress in patient enrollment and service delivery, while highlighting critical areas requiring strategic intervention. Through collaborative efforts among clinical staff, administrative leadership, and community stakeholders, the CCTH Physiotherapy Clubfoot Clinic Programme continues advancing toward comprehensive, accessible, and culturally appropriate pediatric orthopedic care.

Naphtali Rockson

David Adjei Ampofo

(Clubfoot Counselor)

(Clinic Coordinator)