

Field epidemiology Capacity
Building in the Pacific by
utilising Pacific experience

DDM-FETP

A model Training for PICTs

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Training — Formal (A or NA) /informal

- Infection Control (PRIPPP)
- Entomology training/ VBD surveillance
- Plan Testing (orientation exercises, drills, table top, simulation, Real Time)
- Surveillance & Outbreak Training – subregional, regional,
- Others: POLHN, FSMed
- DDM-FETP

Background

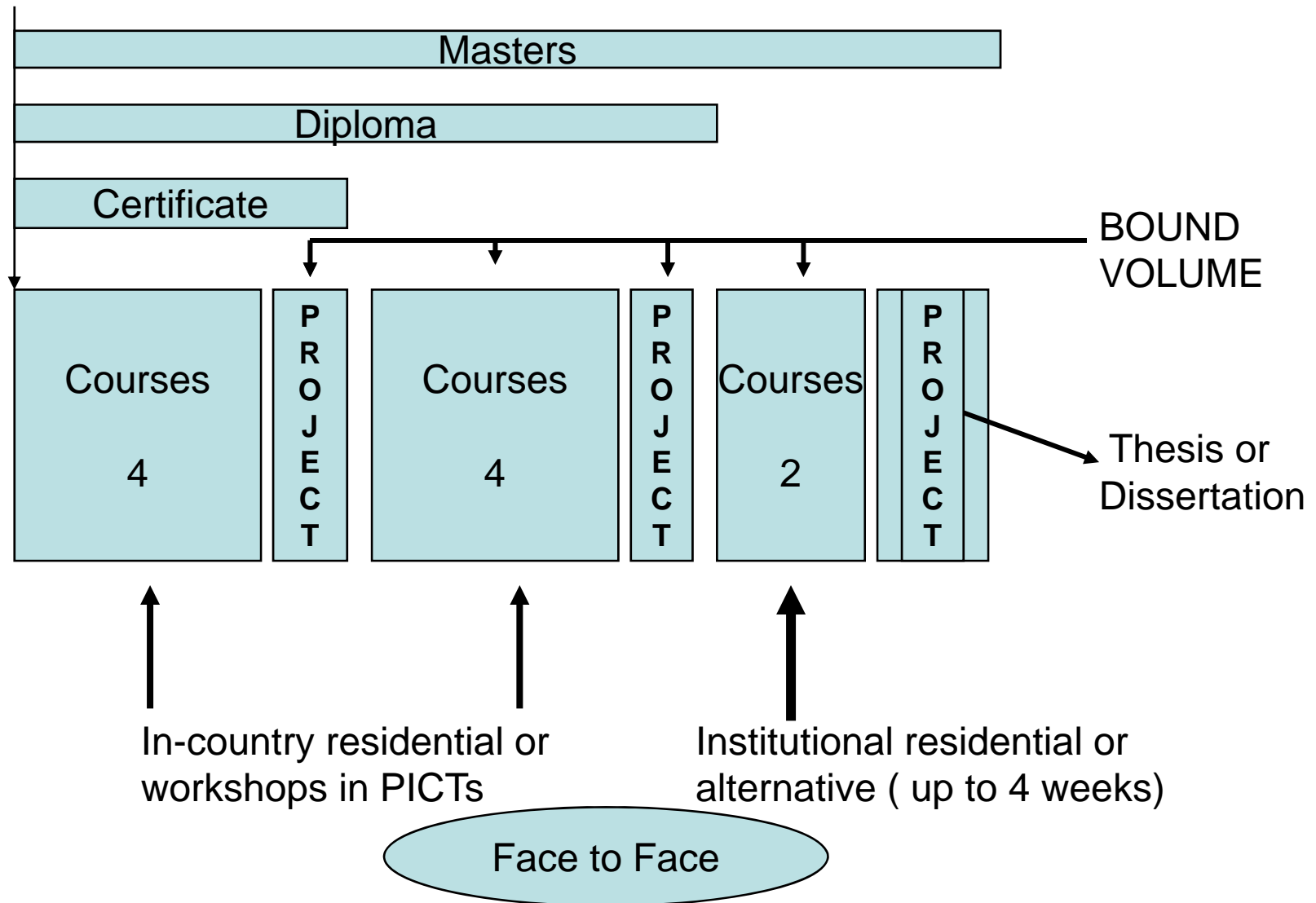
- Lack of Epidemiologists/Epi capacity amongst HW in PICTs.
- Small numbers of HW – removing them from PICTs for training is loss from service...SIS perhaps don't need Epidemiologist but EPI-multi-skilled workers – supported by Regional EPINET
- PH Training around the region did not fill the gap in last several decades
- MPH more effective in HSM, PH administration etc due to many barriers including HS issues
- Health System or health information system continues to create data cemeteries(not used for policy, intervention , programming, budget) - Current surveillance system suffers from “collection mode paralysis”
- Many regional and subregional training –not producing the desired change – in CD surveillance and response in PICTs

Background- new approach – take training to PICTs

- Based on:
 - regional Institutional experience FSMed/PNG,
 - PPHSN (SPC-WHO) subregional/regional training experience and Strategies to address identified capacity gaps and issues
 - Service oriented training recommendations to PPHSN,
 - FETP experience elsewhere
 - TEPHINET,
 - MAE-ANU approach,
 - CDC-DDM approach,
 - Hands on - Saipan(CNMI) trial of DDM with WHO & PIHOA and others in 2005 & 2006, and
 - institutional accreditation req's – SPC training specialist designed a Pacific training model to address a capacity gap in the Pacific.
 - A doable Pacific Model of DDM – “middle road” for FETP training for PICTs

Data for Decision Making (DDM) Training - Pacific model of Field Epidemiology Training Program (FETP) Structure

Duration : 2 years



Certificate Level – level one training-curriculum

- FE/PH711 -Introduction to Field Epidemiology
- FE/PH715 – Computing for Public Health Practice
- FE/PH712 – Public Health Surveillance
- FE/PH713 – Outbreak Investigations
- FE/PH7114- Surveillance Project

Coordinated by SPC with contribution/
collaboration from PPHSN partners, agencies
and institutions

Curriculum

- Spiral building of knowledge and skills
- Basic concepts – descriptive epidemiology (must know)
- More advanced concepts- good/nice to know (for next levels)
- Case studies used (pacific examples)
- Hands on practicals
- Supervision – field or project work

Accreditation

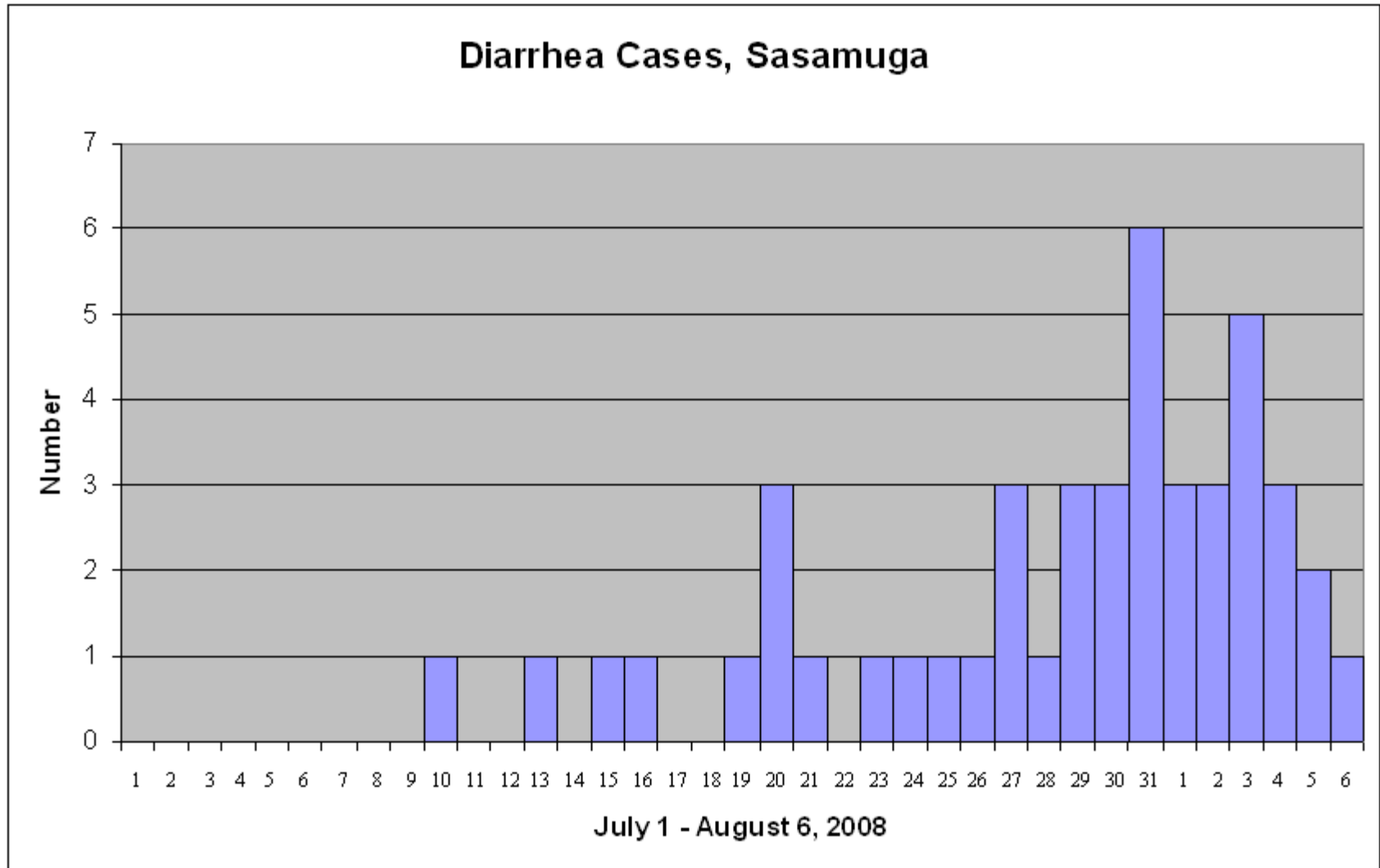
- History : agree in 2004 then retracted
- Finally – level 1 (certificate) accredited 2008
- SNAP, Course Prescription/curriculum- 2007



Real time Field Investigations- Sali Village -Sol Islands



Diarrhea Surveillance, Sasamuga Health Centre, Choiseul Province



Dr James Auto

Opportunities for integration with other training (multiple uses-including maintenance training)

- WHO/FSMed training on POLHN (Moodle)
- Even greater features on moodle could be used for existing DDM training materials
- Open (Peoples) University courses or approach?
- Integrated delivery with or without residentials like ANU (? Continuation)
- CDC, Emory, others?
- NB. DDM face to face enables to address learner specific issues, barriers and improves health system – particularly by systematically addressing CD surveillance issues in PICTs, thus brings health system improvements
- It requires health system and Government commitment and donor funding

DDM level one success

Training Course	Date of delivery in country	Number of participants	Resource persons	Number passed
Introduction to Field Epidemiology (FE711/PH711)	5-9 th May 2008	29 26 took assessments 3 audited	Dr Narendra Singh (SPC)	22
Computing for PH Practice FE715/PH715	14-19 th Jul 2008	25 candidates All assessed	Dr Justus Benzler (SPC) Michelle Mcpherson (ozfoodnet)	25
Public Health Surveillance FE712/PH712	11-15 th Aug2008	26 candidates 24 assessed 2 absent	Dr Narendra Singh Dr Sonia Harmen (JCU) Dr Tom Kiedrzyznski	23
Outbreak Investigations FE713/PH713	3 rd -7 th Nov 2008	26 candidates 3 audited 5 absent 21 assessed	Dr Narendra Singh Dr James Wangi	19
Surveillance Projects FE7114/PH7114	10 th – 14 th Nov 2008	23 attended	Dr Narendra Singh	All continue
“ ASSESSMENT	17 th -18 th November 2009	17 presented	Dr Ilisapeci kubuabola Tony Kolbe Dr Narendra Singh	14 passed Others need to meet specific requirements

Success –DDM Solomons

- Health system recognised CD surveillance as issue-appointment of MO CDC – being done under health sector reform and need separate CD surveillance aside from HIS system.
- Candidates recognised DD outbreaks on 2 different occasions and investigated
- Projects showed many things that were not often recognised - learnt the value in local data: eg.
 - Main means of suicide/parasuicide is Antimalarial drugs

Projects/Outcomes

Suicide and Parasuicide in Solomon Islands

Cerebrovascular Accidents/Stroke in Malaita province from 1998 to 2008

Influenza like Illness Surveillance in Honiara Solomon Islands

STI surveillance in Solomon Islands 1998- 2008

Surveillance of Diabetic admissions to surgical Ward at national referral Hospital

Surveillance of malnutrition in children <5years in Solomon Islands 2003-2007

Study of Fever Outbreak in Lale Village 2nd-28th January, 2008 Western Province

Malaria Surveillance in Malaita Province

Early Neonatal Death and Still Births and attendance by health Personnel in Solomon Islands 2005-2008

Diarrhoeal Disease Outbreak investigation in Guadalcanal and Honiara Provinces September -November 2008

Tuberculosis Surveillance in Solomon Islands

Review of Maternal Mortality in Zone 3 of Western province 2005-2009

Success rates in Diploma in nursing program 1996-2006

Cervical Cancer in Solomon Islands-an early hospital-based surveillance

Malaria in Makira Ulua Province

Success

Dependent on :

- **Sufficient Funding** – beyond PRIPPP (project-FSMed, SPC, WHO) – concept paper-near ready for circ.
- PICT government- health system commitment
- PPHSN partners' commitment & coordination/ resources
- Accreditation (already) & future Institutionalisation of training - FSMed or others
- Local career path – discussion with civil service
- Annual EPINET conference – PH forum to show and tell
- Networking the trained and Attachments-CSR units, WHO,SPC,CDC, FSMed
- Epidemiology & Public Health publication or Journal./ conference