Caribbean Regional Field Epidemiology and Laboratory Training Programme [CR-FELTP]

12th Meeting
Caribbean National Epidemiologists and Laboratory Directors
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Outline

• FETP/FELTP background
• Building a Caribbean FELTP
• Caribbean Regional FELTP Goals
• CR-FELTP Structure
• Partner Roles and Responsibilities
• Programme sustainability
What is an FETP/FE(L)TP?

• FETPs are in-service, competency-based training schemes in applied epidemiology

• Some integrate public health epidemiology with laboratory practice = FELTP
  – A ‘fellowship’ programme for skilled and motivated public health professionals
  – Builds individual skills in field epidemiology and lab, while strengthening public health work force capacity
  – Trainees learn how to apply epidemiological methods to a wide range of public health problems
  – Prioritize learning by doing
  – 75%-80% of training is on-the-job, in “the field”
FE(L)TPs around the world

- First applied epidemiology training programme—the Epidemic Intelligence Service (EIS)—established in the U.S. in 1951 to address a shortage of skilled epidemiologists in the public health workforce.

- In 1975, Canada established its own two-year FETP and has trained 39 cohorts of Field Epidemiologists.

- In 1980, the government of Thailand requested CDC’s assistance to establish its own programme.

- In 2004, the FETP model was adapted to create a FELTP in Kenya.

- Now more than 55 programmes around the world, affiliated under TEPHINET (Training Programs in Epidemiology and Public Health Interventions Network).
Building a Caribbean FELTP

1990s:
- CAREC member countries express need for training in applied epidemiology

2000s:
- CMO Task force on public health leadership training
- CAREC and partners build capacity development strategy, including FETP

2007:
- Revised International Health Regulations
- FETP vision endorsed

2012:
- CDC Cooperative Agreement funding

2013:
- CARPHA established and FELTP staffed

2014:
- FELTP launched

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Caribbean Regional FELTP Goals

Goals:

• Short term:
  – on-the-job training to provide field epidemiology skills and tools to respond to problems in real time through surveillance, outbreak investigation, and operational research and analysis

• Long-term:
  – healthier people, through increased MOH capacity to implement evidence-based health actions and policies
  – country capacity to meet international obligations e.g. IHR
  – country ownership and long-term sustainability
Value of FELTP

Deliver actionable information for determining public health policy and programming

Build and link the systems that are fundamental to containing emerging health threats that may affect national, regional, or global health
Building individual competency → Building public health capacity

Competency = an integrated set of knowledge, skills and attitudes that support the successful performance of a job function

- **Knowledge**
  - Reading, face-to-face learning

- **Skills**
  - Apply new knowledge in case studies, discussion

- **Competencies**
  - Integrate skills, demonstrate judgement in the field

*acquired on the job*

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CR-FELTP Structure

• FELTPs are traditionally full-time two-year fellowships, in small cohorts:
  – Regional consultation suggested a multi-level approach to FELTP in the Caribbean [basic/intermediate/advanced]
  – Level I for public health professionals from diverse program areas, who may not have formal education in epidemiology

• Trainees remain in their current position while in training
• Each Trainee assigned to an In-country Mentor - technical guidance, supervision of projects and review of outputs
• Trainees and Mentors meet regularly to assess Trainee learning needs, progress
• Trainee projects (“competency products”) should address priority public health issues and provide value to their workplace
CR FELTP Structure

Level I

• Training at introductory level of communicable & chronic disease epidemiology, surveillance and laboratory practice, relevant to region
• Training in core professional skills for public health, including management, leadership and communications
• 10-15 participants per cohort, per country
• ~20 weeks long, with four training ‘modules’
• Trainees produce several ‘competency products’ (field assignments)
CR FELTP Structure

Level II

- Subset of those who successfully completed Level I
- 3-5 persons per country
- Further training in surveillance and epidemiology, public health management, effective communication, laboratory management, and teaching and training
- Hands-on projects to demonstrate competencies at intermediate level
- ~4 months (post Level I or equivalent)
CR-FELTP Partners

- CARPHA FELTP team
- CDC
  - FETP (Atlanta)
  - Caribbean Regional Office (Barbados)
- PAHO
- UWI

Ministries of Health
- Country Coordinators
- Mentors
- Trainers
Partner Roles & Responsibilities

• Many partners already involved in programme design and curriculum development
• CARPHA has dedicated resources for a coordinating team, but 11-country regional programme requires the work of many
• Country ownership is a key aspect of successful implementation and sustainability
• CR-FELTP depends on commitment of Ministries of Health to support Country Coordinator’s role
CARPHA Member Countries: Ministries of Health

**Owners and beneficiaries of the CR-FELTP**

Ultimate responsibility for the implementation and sustainability of the CR-FELTP in country

- Nomination of the Country Coordinators to carry out implementation
- Release of time for Coordinators, Mentors and Trainees to participate in the programme
Sustainability

• Two levels to be considered:
  1) Sustainability of FELTP beyond current Cooperative Agreement
  2) Adaptability of the health system to newly trained and more competent individuals

• Country ownership and ongoing recruitment of Mentors and Trainers
  • Co-ordinated by CARPHA as part of training mandate
  • Mechanisms and strategies for sustainability, especially financial, to be explored with countries and other partners
  • Linkages between FELTP and tertiary training programmes (e.g. MPH and DrPH) to be explored
Questions/Comments?

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