

A stylized Rod of Asclepius is the central graphic element. It features a vertical orange staff with a solid orange circle at the top. A green snake is coiled around the staff, with its head facing right. Several colorful, glowing orbits in shades of purple, green, yellow, and blue swirl around the staff, creating a sense of motion and modernity. The background is a gradient from light blue on the left to orange on the right, with faint, larger-scale versions of the Rod of Asclepius and the colorful orbits.

Caribbean
Public Health
Agency

CARPHA

Preventing disease
Promoting and protecting health

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

12th Meeting
Caribbean National Epidemiologists
and Laboratory Directors
September 17, 2014

Lisa Hansen
Programme Coordinator, CR-FELTP



Preventing disease, promoting and protecting health



Outline

- FETP/FELTP background
- Building a Caribbean FELTP
- Caribbean Regional FELTP Goals
- CR-FELTP Structure
- Partner Roles and Responsibilities
- Programme sustainability



Preventing disease, promoting and protecting health



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”



Preventing disease, promoting and protecting health



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)



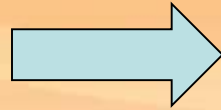
Preventing disease, promoting and protecting health



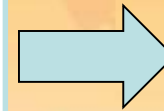
Building a Caribbean FELTP

1990s:

CAREC member countries express need for training in applied epidemiology

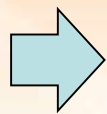


CAREC and partners build capacity development strategy, including FETP

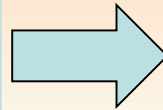


FETP vision endorsed

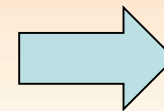
2000s:



CMO Task force on public health leadership training



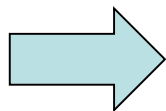
CAREC Directing Council resolutions



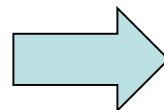
Revised International Health Regulations

2007:

2012:

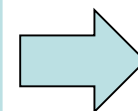


CDC Cooperative Agreement funding



2013:

CARPHA established and FELTP staffed



2014:

FELTP launched



Preventing disease, promoting and protecting health



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



Preventing disease, promoting and protecting health



Value of FELTP

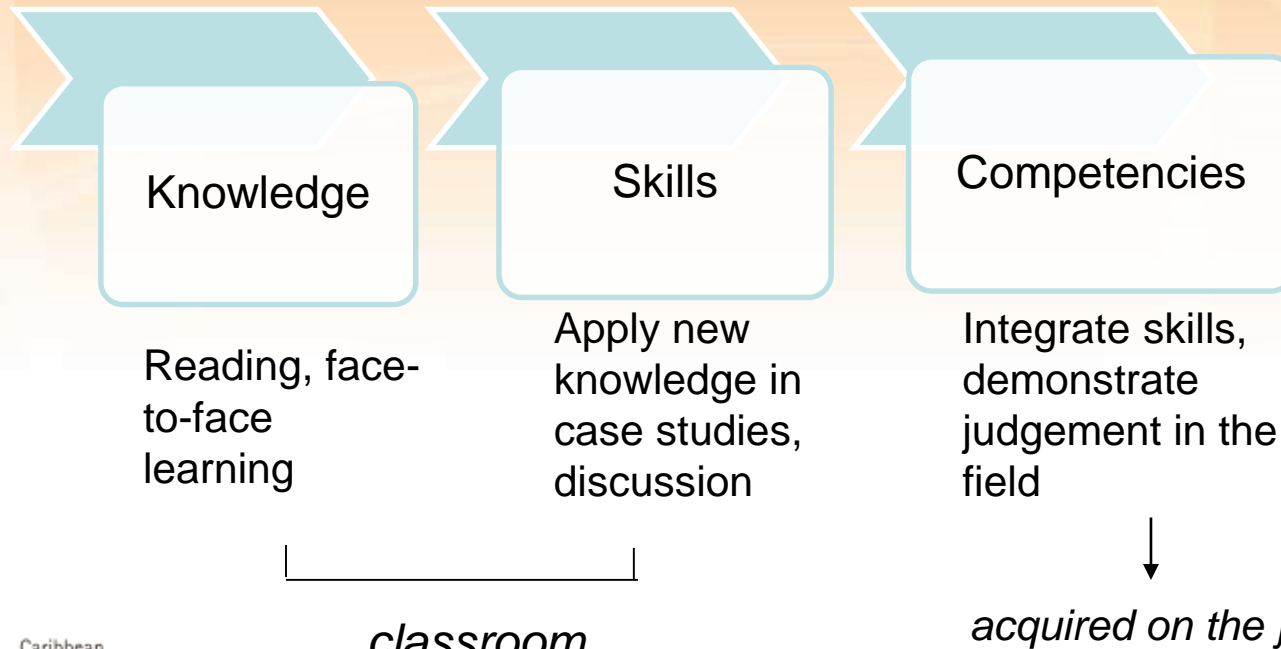
Deliver actionable information for determining public health policy and programming

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



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)



Preventing disease, promoting and protecting health



CR-FELTP Partners

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

Ministries of Health

- Country Coordinators
- Mentors
- Trainers
- Trainees

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



Preventing disease, promoting and protecting health



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



Preventing disease, promoting and protecting health



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?



Preventing disease, promoting and protecting health

