Field Epidemiology Training Program of Papua New Guinea (FETPNG) Intra action review: Advanced FETPNG fellows involvement and readiness for COVID-19 response

aFETPNG Intra Action Review Protocol Version 1.0 Feb 16, 2022

Title: Field Epidemiology Training Program of Papua New Guinea (aFETPNG) intra action review of select graduates (advanced fellows) involvement and readiness for COVID-19 response

Aim: To assess participation within, and understand experiences of, Papua New Guinea's public response to COVID-19 by graduates of FETPNG in order to inform the development of training materials to assist epidemiologists in the field.

Key stakeholders: National Department of Health in Papua New Guinea, FETPNG faculty, FETPNG graduates

Contact:

James Flint

james.flint@health.nsw.gov.au or james.flint@uon.edu.au

Mob: 0405 675 875

Executive Summary

Since its inauguration in 2013, the Field Epidemiology Training Program of Papua New Guinea (FETPNG) has graduated over 90 fellows to develop a cadre of epidemiological and public health experts in Papua New Guinea (PNG). FETPNG is an initiative to strengthen the public health workforce in PNG and the health systems within which this workforce operates. FETPNG has developed an innovative approach of equipping health practitioners currently embedded in the PNG health system with knowledge, skills and tools to strengthen disease surveillance and response (traditional field epidemiology practice) while undertaking operational research with a health security focus.

The advanced FETPNG workshop planned for March 2022 presents an opportunity to conduct a facilitated After Action Review with aFETPNG graduates that have undergone additional training as future public health leaders in PNG. A facilitated after action review with root cause analysis of challenges and enablers experienced by advanced FETPNG fellows is likely to yield invaluable recommendations for the FETPNG training curriculum as well as for leadership in the PNG national response.

FETPNG Background

FETPNG commenced in April, 2013, with the following eight objectives:

- 1. Build public health capacity by developing a cadre of health professionals with advanced skills in applied epidemiology;
- 2. Increase national and sub-national capacity to respond to public health emergencies such as outbreaks, natural disasters, and other unusual public health events;
- 3. Strengthen national surveillance systems;
- 4. Prepare FETPNG Graduates to take part in the leadership of health departments at national, provincial, and district levels as well as other health related institutions;
- 5. Contribute to research activities on priority public health problems;
- 6. Improve communications and networking of public health practitioners and researchers in the country and throughout the region;
- 7. Promote the sustainability of the FETPNG; and
- 8. Assure active collection and dissemination of public health data for decision making

The FETPNG is housed and owned by the Papua New Guinea National Department of Health. ETOGN supports an intermediate (9 month) and advanced (18 month) program and is looking to commence a frontline (3 month) program in 2022. The advanced program (aFETPNG) commence in 2019 and is schedule to conclude in June 2022. There are 18 graduates of the intermediate program currently enrolled in aFETPNG.

The curriculum of aFETPNG is geared towards developing knowledge and skills that are (i) retained, (ii) applied and (iii) lead to measurable impacts. The unique, intervention-based FETP model has been highly commended amongst global FETPS especially due to the number of tangible public health improvements in PNG (Ropa, 2019).

Evaluation Objectives and Key Evaluation Questions

The key evaluation questions (KEQ) for the aFETPNG intra-action review are as follows:

- KEQ1: What proportion of aFETPNG fellows contributed to the emergency public health response to the COVID-19 pandemic, and what activities did they undertake?
- KEQ2: What were the primary challenges FETPNG graduates encountered in their response to COVID-19?
- KEQ3: To what extent did aFETPNG fellows feel equipped to support or lead key activities in the COVID-19 response?
- KEQ4: What could FETPNG do better to prepare fellows and graduates for an infectious disease emergency response?

Methods

All aFETPNG fellows will be eligible to participate in the brief survey and facilitate after action review group discussion.

aFETPNG fellows will be provided Information Sheets and Written Consent forms at the beginning of the session and provided time to review. Any fellow who does not wish to consent to the study will be given the option to observe the process or be excused from the activity entirely.

Those participating in the study will engage in a facilitated intra-action review (group discussion and an online survey.

Facilitated Group discussion

The facilitated group discussion will be incorporated into the aFETPNG workshop and will take place on Mar 14-15, 2022. The group discussion will be facilitated by James Flint with support from aFETPNG faculty (from the PNG National Department of Health and the University of Newcastle). The process for the group discussion outlined in a facilitators guide (Annex A). In brief, it includes small group discussions using flipcharts and stick notes. Participants will be divided into the following 4 thematic groups which correspond to one or more of the 8 pillars of the COVID-19 response as defined by the World Health Organization.

Group 1: Risk communications and community engagement (Pillar 2)

Group 2: Surveillance, case investigation, laboratory (Pillar 3 & 5)

Group 3: Case management and Infection Prevention and Control (Pillar 6 & 7)

Group 4: Operational support and logistics (Pillar 8)

There will be 4 discussion sessions; each will involve individual reflections recorded on sticky notes, flip charts, small group discussion and/or large group discussion. The first will focus on what went well and did not go well in the COVID-19 response. The aFETPNG fellow will reflect on their own personal observations and experience of the COVID-19 response. The next session will focus on developing conducting a root cause analysis on the top 2 things that worked well and the top 2 things that did not work well. The third session will focus on developing recommendations to improve the response, and the final session will focus on the role of aFEPTNG in the response.

Facilitators will encourage key discussion points to be captured on the flip charts. The sticky notes and flip charts will be photographed. The feedback will be groups into common themes and summarised in a written report.

Survey

The survey will be administered as an online survey at the advanced FETPNG workshop in March 2022, with an option being made available to complete the survey using a paper form.

The consenting aFETPNG fellows will be provided the survey link via email and will have an opportunity to complete the survey during the session or in their own time. Non-respondents will be sent reminder emails at 1 and 2 weeks following the initial email being sent.

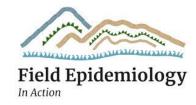
The survey questions are contained in Annex B. Data will be collected through KoBo Toolbox, a data collection, management and analysis tool that is directed to not-for-profit organisations working in demanding contexts. Features include online-offline functionality of surveys and questionnaires during data collection, with data synchronised at times of internet connectivity. Data is synchronised via Secure Sockets Layer (SSL) ensuring it cannot be read by third parties. Kobo Toolbox is hosted by the Amazon Web Services at a secure data centre in Ireland. Data can only be accessed through password-protected accounts hosted by the researchers on this proposal. Following survey completion, analysis and distribution of mobile phone credit, data will be de-identified and saved in the personal account of James Flint at Hunter New England Local Health District/University of Newcastle, in a password protected account. Raw data will be deleted after the initial analysis, both on James' local account and the KoBo Toolbox application.

Descriptive analysis will be conducted using Microsoft excel.

FIELD EPIDEMIOLOGY TRAINING PROGRAM OF PAPUA NEW GUINEA







Workshop 2 COVID REVIEW

Facilitator Guide

Module overview

Background

This module guides fellows through a structured reflection on the COVID response and the role of FETPNG in supporting their activities.

Instructions for facilitators

Setup Room set up with 4 tables to facilitate small group activities 4 x Flips charts, blue-tack and markers Sticky Notes and pens Sticker-dots

Session 1: Introduction and group assignment

Time: 10 min

Session overview: Provide a session overview and evenly divide fellows into 4 thematic groups

Group 1: Risk communications and community engagement (Pillar 2)

Group 2: Surveillance, case investigation, laboratory (Pillar 3 & 5)

Group 3: Case management and Infection Prevention and Control (Pillar 6 & 7)

Group 4: Operational support and logistics (Pillar 8)

Allow fellows to group based on interest/experience, and then move fellows as necessary to even out groups.

Session 2: COVID-19 response: What went well? What didn't go well? Why? (small group activity)

Time: 90 mins

Resources: flip charts, blue tac, sticky notes, markers, pens, sticker-dots

Session Objectives:

- Reflect in the COVID-19 response and identify things that went well and did not go well under each of the 4 thematic groups
- Fellows will reflect their own personal experience and/or observations of the COVID-19 response
- The fellows will focus on <u>what</u> happened and <u>why</u> (not who was responsible for what happened)

Session Overview:

Step 1 [5 min]: <u>Title Flipcharts:</u> Each group will have two flip chart pages, one titled

'What went well' and the other 'What did not go well'.

Step 2 [15 min]: <u>Sticky Notes brainstorm:</u> Fellows will individually write down their

experiences of what went well and didn't go well on sticky notes (one colour for thighs that went well, another colour for things that did not go well); they can then stick their notes on the appropriate flip chart

page

Step 3 [15min]: <u>Discussion and grouping of sticky notes</u>: The facilitates will group the

sticky notes which address the same issue and then summarise the feedback to the small group. The facilitators will then lead a discussion to seek any clarification and add any additional issues the group

collectively identifies

Step 4 [40min]: <u>Carousel brainstorm</u>: the groups ensure their two flip charts with sticky

notes are taped to the wall in 4 locations around the room. The group facilitator stands by the flip charts and when each group comes around, they provide a brief summary and solicit input for any additional things that worked well/didn't work well. The facilitator captures new input on sticky notes. The groups of 10 minutes on each flipchart before

rotating to the next flip chart.

Step 5 [15 mins] Prioritization: each fellow is given 24 sticker-dots; they go to each of

the flipcharts and place a sticker alongside the top 3 issues they consider as most important (for both things that worked well and things

that didn't work well).

Session 3: COVID-19 response: Root Cause Analysis (small group activity)

Time: 40 mins

Resources: Root cause analysis word document (preferable printed A3)

Session Objectives:

• Conduct a root cause analysis on the top 1-2 things that worked well and 1-2 things that didn't work

Session Overview:

Step 1 [40 min]: Root cause analysis: Each group will complete the Root Cause Analysis template for the top 2 things that worked and didn't work well. They should start with the top thing that did not work well, and move on freo there as time allows. During this session, facilitators should apply Root Cause Analysis principles to progressively unpack the reasons as to why something did or did not happen. This includes asking "why" repeatedly (up to 5 times) to explore the deeper reasons why something did or did not happen, to reveal the root cause.

An example of how a Root Cause Analysis may play out in conversation:

Participant: One of the biggest issues was that we weren't getting the specimens back from the labs fast enough

Facilitator: Why did that happen?

Participant: Well we weren't able to arrange transport to and from the labs

Facilitator: Why was that, did you have no vehicles?

Participant: No, we had vehicles available

Facilitator: So why couldn't you use them for transporting the specimens?

Participant: We could, but they had no fuel

Facilitator: Why was that?

Participant: Funds weren't made available as the petty cash limit was too low

So the problem was not transporting specimens, however, the root cause was the lack of

petty

cash for fuel.

Session 4: Improving the Response (small group activity)

Time: 60 mins

Resources: flip chart paper

Session Objectives:

• Identify 3 recommendations to the top thing(s) that worked/didn't work well, based on the root cause analysis.

Session Overview:

Step 1 [40 min]: <u>Recommendations</u>: On flip chart paper, each group writes the thing that worked/didn't work well, the root cause, and brainstorms the top 3 recommendations. Each group should aim to have 4 flip chart pages completed, as per template below:

Step 2 [20 min]: Report back: each group nominates a spokesperson to present the recommendations to the larger group

#1 thing that worked well:	#2 thing that worked well:	#1 thing that did not work well:	#2 thing that did not work well:
Root cause(s):	Root cause(s):	Root cause(s):	Root cause(s):
Recommendation 1 2 3	Recommendation 1 2 3	Recommendation 1 2 3	Recommendation 1 2 3

Session 5: FETPNG's role in the response

Time: 60 mins

Resources: flipcharts, pens, sticky notes

Session Objectives:

- This session will specifically look at the impact of the FETPNG and aFETPNG training on the COVID-19 response; the following key evaluation questions will be addressed through group discussion and a survey
 - KEQ1: What proportion of aFETPNG fellows contributed to the emergency public health response to the COVID-19 pandemic, and what activities did they undertake?
 - KEQ2: What were the primary challenges FETPNG graduates encountered in their response to COVID-19?
 - KEQ3: To what extent did aFETPNG fellows feel equipped to support or lead key activities in the COVID-19 response?
 - KEQ4: What could FETPNG do better to prepare fellows and graduates for an infectious disease emergency response?

Session Overview:

Step 1 [5 min]: <u>Title Flipcharts:</u> Each group will have two flip chart pages:

- 1. 'Examples of how FETPNG and aFEPTNG prepared fellows and graduates for an infectious disease emergency response
- 2. 'What could FETPNG do better to prepare fellows and graduates for an infectious disease emergency response'

Step 2 [15 min]: <u>Sticky Notes brainstorm Q1:</u> Fellows will individually write down their response for question 1 and place on the flipchart paper

Step 3 [15 min]: <u>Sticky Notes brainstorm Q2:</u> Fellows will individually write down their response for question 2 and place on the flipchart paper

Step 4 [30 min]: Online Survey and thematic grouping: Fellows initiate a voluntary online survey while the facilitators review the sticky notes and groups into themes. Fellows can complete the survey in their own time.

Step 5 [25 mins]: <u>Group Discussion</u>: The facilitators provide a summary of the feedback for the two questions and lead a group discussion on ways to enhance FETPNG's role in preparing fellows and graduates for public health emergencies.

Advanced FETPNG fellows involvement and readiness for COVID-19 response

CONSENT

The PNG National Department of Health and the University of Newcastle are conducting an intra action review of select graduates (advanced fellows) involvement and readiness for COVID-19 response

The information you provide will be used to improve the current program and to inform future programs and projects.

Participation in this survey is voluntary, and you don't have to participate if you don't want to. Please review the following points before consenting to participate:

- I agree to participate in the above research project and give my consent freely.
- I understand that the project will be conducted as described in the Information, a copy of which I have retained.
- I understand I can withdraw from the project at any time, and do not have to give any reason for withdrawing.
- I consent to completing a questionnaire.
- I understand that this survey is anonymous and my identify will not be known to researchers.
- I have had the opportunity to have questions answered to my satisfaction.

Do you	consent to participate in the following survey? [] Yes [] No (end survey)
1.	Have you at any time been involved in the COVID-19 response? [] Yes [] No (skip to Q8)
2.	Approximately how much of your work time was spent on COVID-19 response in 2021? [] Rarely: 1-2 days per month [] Occasionally: 1-2 days per week [] Often: 3-4 days per week [] Full time working on the response: 5 days per week
3.	What was your role(s) in the COVID-19 response?
4.	How many people did you typically supervise at any given time while working on the COVID-19 response? (if none, specify '0')
5.	Besides FETPNG and aFETPNG, did you receive any training to help you with the COVID-19 response? [] Yes [] No

	[] Don't know
	If Yes
	Please specify all relevant trainings you attended
6.	Did you conduct any training to support others in the COVID-19 response? [] Yes [] No
	[] Don't know
	If Yes,
	How many trainings did you conduct in 2021? Approximately how many people in total did you train in 2021 What did you train people to do?
7.	What were the 3 biggest challenges you faced during the COVID-19 response? 1 2
	3
8.	How confident did you [would you] feel in <u>supporting</u> these activities for the COVID-19 response

	Not confident	Slightly confident	Moderately Confident	Very confidence
Risk Communication				
Community Engagement				
Specimen Collection				
Specimen handling and shipping				
Case investigation				
Contract Tracing				
Surveillance				
Data management				
Data analysis				
Infection Prevention and Control				

9. How confident did you [would you] feel in <u>leading</u> these activities for the COVID-19 response

	Not confident	Slightly confident	Moderately Confident	Very confidence
Risk Communication				
Community Engagement				
Specimen Collection				
Specimen handling and shipping				
Case investigation				
Contract Tracing				
Surveillance				
Data management				
Data analysis				
Infection Prevention and Control				

10.	Overall, how helpful has the intermediate and advanced FETP program been in preparing you for the COVID-19 response? [] Not helpful [] Slightly helpful [] Moderately helpful [] Very helpful
11.	Can you give specific examples of how the intermediate and/or advanced FETPNG programs have helped prepare you or support you in your COVID-19 response?
12.	What could the intermediate and/or advanced FETPNG programs do to better prepare you for another emergency response?
13.	How aware is your manager of your skills as a field epidemiologist? [] Not aware [] Somewhat aware [] Very aware
14.	Were your skills as a FETPNG graduate well used by your manager during the COVID-19 response? [] Yes [] No [] Don't know
15.	What could be done to improve the use of FETPNG graduates by management?

Thank you so much for taking the time to complete this survey.