

POSITION DESCRIPTION:

SECTION A: Position Context

Position Title	Tuberculosis Specialist RID-TB project, Papua New Guinea
Working Group	TB Elimination and Implementation Science
Classification	Salary discussed with short listed candidates Accommodation allowance, mobilisation and demobilisation allowances, Mobility & special location allowances, medical, travel and emergency evacuation insurance and access to project vehicle
Location	Daru, Western Province, Papua New Guinea (Travel to Melbourne as required)
Effective Date	June 2018

Purpose:

The TB Specialist will work with the RID-TB team to design and implement an effective model of care for the management of DS-TB and DR-TB at the facility and community level in Western Province, with a focus on South Fly District.

The position will be responsible for capacity building of provincial TB team staff to deliver high quality patient-centred care for DS-TB and DR-TB, with a focus on clinical care, care and treatment systems, capacity building and . The position will work with facility and community-based staff and partners including medical officers, health extension officers (HEOs), case managers, nurses, community health workers (CHWs), treatment supporters and laboratory staff. The position will support the implementation of protocols, procedures and conduct training and on-the-job mentoring.

This position is offered for an initial 6-9 month contract, with the possibility of an extension.

Supervision Reporting Relationships:

<u>This positions'</u> supervisor/manager	RID-TB Team Leader (Daru), TB Technical Director (PoM)
Other positions reporting to <u>this</u> position	None

SECTION B: Key Responsibility Areas

The key responsibility areas (KRAs) are the major outputs for which the position is responsible and are not a comprehensive statement of the position activities.

Key Responsibility Areas	
1. Capacity building and clinical mentoring	<ul style="list-style-type: none"> Day-to-day clinical mentoring of TB medical staff responsible for inpatient, ambulatory and outreach care. Facilitate practical training sessions for medical staff on topics, agreed upon with the Provincial TB physician tools.

Key Responsibility Areas		
		<ul style="list-style-type: none"> Provide direct clinical care for TB patients when needed
2.	Implementation support	<ul style="list-style-type: none"> Support development and implementation of TB care and treatment systems, tools and standard operating procedures (SOPs) for the model of care Train health workers in the model of care Provide support to strengthening health system areas such as governance, health information systems, supply chain and laboratory systems as needed Support planning, outreach and decentralisation of TB services as needed
3.	Reporting, analysis and dissemination	<ul style="list-style-type: none"> Contribute to internal project reporting, quality improvement, analysis and evaluation Support TB program data management (including the electronic medical record system) and contribute to operational research Contribute to dissemination of project outputs through presentations and briefs
4.	Communication and team work	<ul style="list-style-type: none"> Provide leadership and workflow direction to Burnet team members in activity areas outlined by the team leader Establish and maintain effective working relationships with counterparts, partners and other stakeholders. Maintain effective communication, collaboration and working relationships with relevant Burnet staff in both PNG and Melbourne.
5.	Occupational Health & Safety	Refer to the "Burnet OHS responsibilities and roles" document for full details on specific OHS obligations and responsibilities of Employees.

Occupational Health and Safety

The Burnet has a commitment to providing a safe and healthy workplace in accordance with the Occupational Health and Safety Act 2004. All staff are obliged to take all reasonable care to ensure that their actions do not place themselves or others at risk.

SECTION C: Key Selection Criteria

Qualifications		Essential/ Preferable
	A medical doctor with over 10 years of clinical experience, preferably with specialisation in infectious diseases, internal medicine or similar	Essential
	An additional qualification in public health, tropical medicine, international development or similar	Desirable

Experience / Knowledge / Attributes		
1.	Experience in the clinical and programmatic management of TB including DR-TB	Essential
2.	Experience in protocol or guideline development, report writing or publications	Essential
3.	Experience working in a similar position in a remote, unstable or resource-constrained setting	Essential
4.	Proven interest and experience in team management, capacity development / training of local staff in a resource-constrained setting	Essential
5.	Demonstrated capacity to work independently exercising strong judgement, decision-making and problem solving skills	Essential

6.	Experience working on databases in a TB or health project program	Essential
7.	Fluency in English and demonstrated high level written and verbal communication skills	Essential
8.	Previous work/living experience in PNG or the Pacific	Desirable

Other Requirements

The Burnet Institute is a child safe organisation. The incumbent of this position may be required to undergo a Police Check or Working with Children Check as a condition of their employment.

SECTION D:

Burnet Overview

Burnet Institute is a leading Australian medical research and public health organisation focused on achieving better health for vulnerable communities in Australia and internationally by accelerating the translation of research, discovery and evidence into sustainable health solutions. The Institute is headquartered in Melbourne with programs that operate across Asia, the Pacific and in Africa.

Burnet's culture links innovative discovery-oriented research and implementation research with development and humanitarian action. World-class laboratory and field-based research is integrated into multidisciplinary programs aimed at the prevention, detection and treatment of diseases of global significance. This unique approach allows the Institute to make a tangible and sustainable impact on health in both developed and developing countries.

The Institute has three major thematic programs – Disease Elimination, Behaviours and Health Risk, and Maternal and Child Health, and two expansion programs – Healthy Ageing and Health Security. Staff within these Programs are supported by cross-cutting communities of practice; the disciplines of Life Sciences, Public Health and International Development.

RID-TB Project Overview

Tuberculosis (TB) is a major public health problem in PNG and a high prevalence of multi-drug resistant (MDR) TB has been identified in several hotspots in PNG including the National Capital District and Western Province. In response, the National Department of Health (NDOH) has convened an emergency response to MDR-TB. In Western Province, tuberculosis is the leading cause of hospital admissions and deaths and the provincial rate of new notifications of TB is almost twice as high as the PNG national rate. Within this TB endemic province, an outbreak of drug resistant TB (DR-TB) in South Fly District (SFD) has been characterized by unprecedented person-to-person spread of DR-TB and emerging pockets of extensively drug resistant TB (XDR-TB) transmission. This constitutes a pressing public health crisis and health security threat that necessitates an immediate effective response to minimize the human, social and economic costs, and to prevent local (and wider) escalation of the DR-TB epidemic.

Since August 2014, Burnet has been a partner in the multi-stakeholder response to the major TB epidemic in Western Province through RID-TB project (Reducing the Impact of Drug-Resistant TB, Western Province). This project of technical assistance provides a sustained field-based implementation support model to provide capacity development, systems design and monitoring of the TB response. The project is funded by the Australian Aid program via the Department of Foreign Affairs and Trade (DFAT) and is implemented as part of a package of support to the National Department of Health (NDOH), Western Provincial Health Office (PHO), Daru General Hospital (DGH) and delivered in collaboration with partners such as World Vision and the World Health Organisation (WHO).

The RID-TB project aligns with the goal and objectives of the Western Province Strategic Plan and South Fly District Implementation Plan for the emergency TB response. RID-TB has 5 strategic interventions.

1. Design and support the implementation of a model of patient-centred TB care for Daru (DS-TB and DR-TB) at facility and community level in Daru
2. Identify health systems bottlenecks for TB and design and support the implementation of systems solutions
3. Identify needs, strategies and modalities for community engagement to strengthen the delivery of effective TB care
4. Understand the TB epidemic and the programmatic responses through monitoring, evaluation and operational research
5. Provide technical assessment and guidance for Provincial response planning and implementation

Across all of these areas, Burnet is responsible for building capacity of health workers, program staff, community members, volunteers and other stakeholders in the skills and knowledge they need to deliver the response. Strong collaborative relationships with provincial and national stakeholders from the level of communities to policy makers will remain fundamental to the delivery of technical assistance within the response. The RID-TB project phase has contributed to establishing the template for an outbreak response by establishing care and treatment systems, piloting contact screening and preventive therapy, strengthening health systems and building capacity and promoting data utilisation and operational research. The project emphasises capacity building of PNG institutions and the application of novel tools, interventions and strategies such as new effective diagnostics and drugs; decentralization of services and treating TB infection (preventive therapy) on Daru Island. Implementation and scale up of these tools provides an opportunity to expedite the outbreak response, sustain reductions in DR-TB and DS- TB transmission in the long term and address ongoing health security risks.

Further Information:

For further information, please contact
