

# **POSITION DESCRIPTION:**

## **SECTION A:** Position Context

Position Title	Tuberculosis Specialist (Public Health)
Position Number	
Location	Daru, Western Province, Papua New Guinea
Effective Date	July 2019

## Purpose:

The TB Specialist (Public Health) will work with the RID-TB team to design and implement an effective model of care for case-finding and preventative therapy of DS-TB and DR-TB at the facility and community level in Daru and support South Fly District and the Western Province in Decentralization of TB services.

This includes supporting community-based contacting screening and scale up of TB prevention programs, DGH TB diagnostic centre and support to decentralization activities. The position will be responsible for capacity building of provincial TB team staff to deliver high quality patient-centered diagnosis and care for DS-TB and DR-TB, with a focus on case-finding, high quality diagnosis, preventative therapy and linkage to care. 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.

## **Supervision Reporting Relationships:**

This positions' supervisor/manager	Field Team Leader – RID TB
Program reporting line	TB Medical Director, Project Manager
	Project Director, RID-TB Project (Melbourne based)
Other positions reporting to this position	TB Nursing officer & Contact tracing team

## **SECTION B: Key Responsibility Areas**

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

	Key Responsibility Areas		
1.	Clinical Mentoring	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.	
2.	Implementation Support	Support development and implementation of clinical, diagnostic & case management systems, tools and protocols for patient monitoring, follow-up and retention.	
		Train health workers on case management systems.	
		Support development and implementation of patient information systems and protocols to support the use of patient records/tools.	

	Key Responsibility Areas		
		Provide technical support to medical officers and HEOS on implementation issues associated with establishing the model of care.	
3.	Other tasks	Establish and maintain effective working relationships with donors, implementing agencies and other stakeholders.	
		Liaise directly with relevant program staff, in both PNG and Melbourne.	
		As needed, provide support to staff responsible for strengthening governance, data management, supply chain and laboratory systems.	
		Support operational research as needed.	
4.	People Responsibility	Ensure participation of all staff in the People Development Framework (PDF) to enhance performance and identify training, professional development and career coaching needs.	
		Ensure compliance within the group in relation to all required compliance training including online and face to face training.	
Manage HR issues with the support and guidance of HR as needed.		Manage HR issues with the support and guidance of HR as needed.	
		Manage leave within the group to ensure leave balances are kept within institute policy guidelines.	
		Coach and support staff and students.	
5.	Occupational Health & Safety	Refer to the "Burnet OHS responsibilities and roles" document for full details on specific OHS obligations and responsibilities of Managers with People Responsibilities.	
6.	Training	Responsible for completing all required training in line with the position / role.	

# **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

Qu	Qualifications	
	A qualified and registered Medical doctor	Essential
	An additional qualification in global / public health, international development or infectious diseases	Preferable

Experience / Knowledge / Attributes		
1.	A medical doctor with over 5 years of clinical experience, preferably in infectious diseases or similar	Essential
2.	Highly adaptable, ability to work in unstable hardship setting	Essential
3.	Experience in protocol or guideline design, report writing or publications	Essential
4.	Proven interest and experience in team management, capacity development / training of local staff in a resource- constrained setting	Essential
5.	Demonstrated analytical, critical appraisal and problem solving skills	Essential
6.	Fluency in English and demonstrated high level written and verbal communication skills	Essential
7.	Demonstrated ability to meet competing deadlines	Essential

	Field experience in the clinical and programmatic management of TB/DR-TB in a resource- constrained setting	Preferable
10.	Previous work experience in PNG or the Pacific	Preferable

# 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**

Burnet has a long history of collaborating with donors, Government and other partners in particular areas of need in Papua New Guinea. Since August 2014, Burnet has been a partner in the multistakeholder response to the major TB epidemic in Western Province. This epidemic is characterised by the emergence and spread of drug-resistant TB (DR-TB) with Daru as the known hotspot of intense transmission of DR-TB. This is a public health emergency with rates of DR-TB that are arguably the highest documented globally at the district level. At the same time, there is limited capacity nationally, and at the provincial level to deliver and sustain an effective response.

Burnet is contributing to the response as the technical lead in the design of an effective response and in monitoring its implementation. Burnet is utilising a partnership approach with Western Provincial Health Office (PHO), Daru General Hospital and other implementing partners such as World Vision. Burnet implemented Phase I of RID-TB from August 2014 to November 2015, funded

by the Australian Aid program via the Department of Foreign Affairs and Trade (DFAT). RID-TB phase IIA (December 2015 – March 2018) aligns Burnet's contribution to the goal and objectives of the Western Province Strategic Plan and South Fly District Implementation Plan. The successful achievement of the goal and objectives will require adequately resourced contributions from a range of partners. Phase IIA 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.

#### Further Information:

For further information, please contact Charlotte Graham, RID-TB Project Manager; <a href="mailto:charlotte.graham@burnet.edu.au">charlotte.graham@burnet.edu.au</a>