

Report from The Postgraduate Forum of Medical Training Bodies on Global Health Activities in Developing Countries

The Forum convened a well attended meeting of representatives from the Postgraduate Training Bodies in the Health Disciplines at RCPI on 21.3.18.

The ICGP was represented by Dr Peter Harrington, Dr Brendan O' Shea (ICGP SIG Developing World Medicine) and Mr James Larkin (ICGP Research).

The Meeting was also attended by Mr Ruairi De Burca, Director General at Irish Aid (www.irishaid.ie), who addressed the Meeting, chaired by Prof Ellen O' Sullivan, and facilitated by Dr David Weakliam, who delivered opening comments.

The form of the meeting included descriptions from 5 of the 14 PG Training Bodies who have had some organised activity in this area of development, including the ICGP, The RCSI, The College of Anaesthetists, The Faculty of Public Health Medicine, and the RCPI, which was then followed by an open discussion regarding follow up actions.

The ICGP

It was noted that the ICGP comprised a large number of Members and Trainees with relevant expertise in Primary Care Service development, delivery, education and research. Further, it was noted that to date, substantial but undefined numbers of individual GPs and Practice Team Members have actively engaged in relevant activities in this area of care. Most recently, it was also noted that in 2017, an ICGP Special Interest Group has been established, under the leadership of Dr Joe Gallagher & Dr Peter Harrington, with initial actions including collation of activities of individuals Members, Practices and Training Schemes, as well as running well attended Workshops at ICGP Conferences during 2017. Further, a survey requesting expressions of interest and detail of previous experience from College Membership had been undertaken and resulted in c 247 responses, indicating substantial interest from a good proportion of College Members. Data from this survey completed end 2017 is presently being collated.

Dr Peter Harrington presented in detail on work carried out through his own Practice in Wexford, where a sustained program of involvement dating back several years is underway, with evident involvement of the local Community where his practice (The Palms Surgery) is based. Further, the basis for this project included to some significant extent the influence and support of the South East GP Training Scheme, where a formal link has been established and maintained, with remote rural Malawi, including full placements for Senior GP Trainees on the Scheme, underway c 12 years, under the direction and leadership of Dr Martin Rouse.

Related activities underway at ICGP Research included work with the health status of Syrian people seeking refuge in Ireland, which was briefly reported on by Mr James Larkin

RCSI

A report from the RCSI was delivered by Mr Eric O'Flynn, which chiefly focused on COSECSA (College of Surgeons of East, Central and Southern Africa, www.cosecsa.org), established as a long term Program for Postgraduate Surgical Training run in 12 eastern, southern and central African Countries, delivered in 105

Hospitals, collectively serving a population of c 350 million, and delivered through a 5 year program, including 2 years of General and 3 years of Specialised Surgical Training. At the outset, Eric observed that it is estimated that 19% of preventable premature mortality in developing world health systems relates to lack of available surgical services. COSECSA was established in c 1999, and is presently providing training for c 360 Trainees, at locations mainly based in their own countries, but also in South Africa and Ireland. Strategic alignment with Irish Aid in terms of a focus on Sub Saharan Africa was evident from the outset of this project.

The program is substantially funded by Irish Aid, and other funders, and is now effective at producing a stream of Surgeons locally (with some experience provided in teaching and in Irish placements), who, recent research demonstrates, are likely (c 85%) to remain working in the hospitals and countries where they have trained.

Eric explained that funding has been largely supplied by external agencies, particularly Irish Aid, the relevant technical and surgical expertise, time and sustained institutional commitment has been provided by RCSI Staff and membership, with the program now running for c 14 years. Educational delivery is effected through placements, e Learning, Train the Trainer modules, and collaboration in setting curricula and running examinations.

The College of Anaesthetists (COA) of Ireland

This report was delivered by Prof Kevin Carson, who commented on the importance of the availability of effective and safe Anaesthesia in developing world evolving health systems. In particular, he advised that somewhere in the order of 5-7 billion of the global population do not have access to safe or effective anaesthesia (Lancet 2015) at present.

The approach of the COA differed from that of RCSI / COSECSA in that it was not restricted to a geographical area, but by establishing a program of supported and tailored International Fellowships, it reached into many evolving health systems internationally.

The International Fellowship Program in Anaesthesia was based on an evolved process of Training, with placements in Ireland, Curriculum Development (which implicitly recognises limitations of the evolving health systems), and supported by bespoke projects, often responding to unique or particular circumstances. Unlike COSECSA, which is focused in parts of sub Saharan Africa, the International Fellowship Program has delivered educational supports on several continents and is truly Global in its design and implementation. Detail on activities is available on www.anaesthesia.ie/index.php/international-relations.

An further example of the global perspective of the COA is its involvement with the Lifebox Project , which is based on training and making available Pulse Oximetry to African Medical Orderlies, and in Operating Rooms, providing effective and appropriate training and equipment for staff on these surgical services improve both monitoring of oxygenation as well as training towards improving responses during peri operative desaturations.

The Faculty of Public Health Medicine

Activities of The Faculty of Public Health Medicine were reported on by Dr David Weakliam, who advises that the Faculty had established a Global Health Committee as far back as 2004, which had generated a series of relevant position papers, together with specific Training Initiatives, and further, has worked in collaboration with the HSE Global Health Program and Irish Aid, through the development and commitment to a formal Memorandum of Understanding (MOU) with The HSE.

The MOU focused on the identified UN Sustainable Development Goals. The Faculty had also availed of funding under the ESTHER Scheme . David is directly involved in ESTHER, a European Alliance, which is a network of countries working in partnership to tackle major diseases and improve healthcare in less developed countries. It involves the twinning of European health institutions with counterparts in less-developed countries to strengthen healthcare services by building expertise and sharing experience. Ireland is linked to the initiative via Irish Aid. Emphasis is on reciprocal and enduring relationships between institutions North and South, each contributing to the development of the other.

(Two Irish practices, the Palms GP surgery Gorey and Eden Park surgery Raheny, have received funding from ESTHER under their start-up grants scheme, aimed at institutions initiating or exploring new partnerships with institutions in the developing world).

A final resource utilised by The Faculty of Public Health Medicine relates to www.worldmapper.org which provides 'at a glance' perspectives on global demographics, and is helpful in planning activities.

Royal College of Physicians of Ireland

Background in relation to RCPI activities was presented by Prof Frank Murray (former RCPI President) and by Mr Eoghan Hayden (Medical Engineering at Holles St Hospital).

At the outset, Frank and Eoghan explained how the operational aspects of activities related to the identification, evaluation, placement, necessary training and support of particular equipment and accessories, which while expired in the context of the Irish Health System, remained intrinsically valuable in the context of evolving health systems, particularly in Africa.

Based on this start point, the RCPI program was established in 2013, and has now includes a series of collaborations and partnerships to identify, source, re condition, transport and support equipment identified. The preparatory / incubation period for this took several years, and included a formal working arrangement with the HSE, but the project switched on in a major way in 2017, with a particular emphasis on Zambia.

The project in Zambia (**EQUALS**)(<https://www.rcpi.ie/policy-and-advocacy/equals>) was consolidated by the signing of an MOU with the Ministry for Health of The Government of Zambia on the initiation of programs for Specialty Training, including transfer of relevant expertise and equipment, and is focused on establishing National Colleges of Surgery and Medicine. Primary Care is presently identified as a major deficiency, which requires further detail, given that in many African countries, deaths from NCDs (Non Communicable Diseases – which we know as Chronic Diseases such as Diabetes, Asthma and COPD) are exceeding deaths from Communicable diseases.

Discussion

A short, intense and focused discussion was subsequently directed by Prof Ellen O'Sullivan, who chaired the meeting. Mr Ruairi De Burca noted that the development of North South Partnerships now has several years of good precedent to support it, and while an exclusive focus on Africa could be considered limited, there were several reasons for favouring the continued development of such North South collaborations, not least of which was successful precedent and outstanding need.

It was noted that during the last decade, the budget of Irish Aid had been substantially maintained despite the economic downturn, and that in 2018, as the Irish Economy is clearly expanding, that it is particularly likely that there will be scope for further projects, in addition to maintaining those which have clearly been effective. Prof Frank Murray observed that there it was singularly appropriate that the tradition of C19 and C20th activities undertaken by Irish Missionaries was now evidently being developed further by Irish Agencies, including Postgraduate Training Bodies.

Follow up activities discussed included the possibility of holding a one day Conference for any or all Irish Healthcare Professionals with either interest or experience in working in this area of care. Further, the ability to develop greater co ordination between the main Specialties was highlighted, given the need to progress health system evolution on several fronts, and utilising a range of appropriate technologies. The Forum was felt to be particularly relevant and well positioned in this regard.

Implications for General Practice and the ICGP

There are 14 constituent bodies in the Forum, and while it was pleasing to note that the ICGP was among the 5 presentations, it is clear that despite our activity during 2017, our expertise in a highly sought after discipline, and the fact that ours is the largest of the Healthcare Postgraduate Training Bodies based on membership numbers, that relative to the RCSI, RCPI and COA, that we are at an earlier stage in terms of undertaking a substantial program.

Results from a survey of GPs and Practice Nurses undertaken by Dr Joe Gallagher with input from ICGP Research clearly indicate that a substantial proportion of GP Team members either have or wish to develop experience in this area of care. The benefits of an effective program are in many respects obvious for the health systems of developing health systems. They are also substantial for the postgraduate training bodies.

The insight and perspective to be gained by Colleagues who become involved, be they Practice Nurses, Administrators, GPs or College Staff are very substantial, in terms of personal experience, insight, as well as corporate credibility and development. The 'lost decade' from 2007 has included several costs for all of us in general practice, including a loss of self belief to some extent, as well as an arguably dangerous obsession for what we feel we have 'lost' or are otherwise entitled to, in a personal sense. Three months in remote rural Malawi might give you a much better perspective, and be summarily curative of those particular perceived slights.

The ICGP SIG on Developing World Medicine will be facilitating sessions for interested GPs and Practice Staff at ICGP Annual Conference on May 25/26th, and it is likely that this topic will feature at College AGM.

The key question for the ICGP SIG, and indeed College itself, is if the ICGP should undertake a formal program of activity in Developing World Medicine, involving a broad cross section of College people, including College Members, GP Trainees, College Staff and Practice and Departmental Staff. This will be debated at ICGP Annual Conference 2018.

In considering the value evident in the programs underway at RCSI and RCPI, making available the expertise in setting curricula, in appropriate teaching methodologies, in educational evaluation, and in expertise in the development of relevant primary care services all represent highly desirable resources which lie within the College Membership. Further, it is apparent that these knowledge resources are uniquely available to College, as opposed to actual funding work, in a financial sense.

In particular, the development, provision and delivery of an effective primary care module for African Medical Officers, including curriculum, delivery and evaluation would be a particularly useful initial objective for consideration, together with formal engagement with those other Postgraduate Training Bodies which already have substantial expertise in this area of care.

Mr James Larkin
Dr Peter Harrington
Dr Brendan O' Shea