

Emergency Nurse Advisor Honiara, Solomon Islands

This assignment has been negotiated in good faith with the Partner Organisation, and the information contained was correct at the time of acceptance of the request.

However, while we take responsibility for matters under our direct control, all assignments and arrangements are subject to change due to the inherent low levels of predictability in developing country environments. This assignment may be amended or withdrawn to reflect changes in circumstances.

GENERAL DETAILS

Assignment Title	Emergency Nurse Advisor
Partner Organisation	Ministry of Health and Medical Services
Website of Partner Organisation	N/A
Duration of Assignment	4-6 months
Start Date	January- February 2019
Assignment Code	N/A
Australian Organisation	Australasian College of Emergency Medicine (ACEM)

1. PARTNER ORGANISATION OVERVIEW

The Solomon Islands Ministry of Health and Medical Services (MHMS) is responsible for the management and delivery of the health and medical services for the population of Solomon Islands.

MHMS consists of the following units: Health Improvement, Health Care, Health Policy and Planning, and Administration and Management; hospital services fall under Health Care.

Of the nine provinces in Solomon Islands, eight have a public hospital. There are also four private hospitals in the provinces, owned and operated through various church organisations. Provincial health services include a network of health centres, aid posts and village health workers, with location broadly determined by the size and distribution of the population and the need to provide access to care. The quality of service provision may be impaired by poor availability of pharmaceuticals and other resources in outlying facilities, including a doctorand health worker-to-population ratio that is among the lowest in the Pacific.

Communicable diseases like malaria, other parasitic diseases and tuberculosis (TB) remain prevalent, although malaria incidence is gradually declining. Non-communicable diseases (NCD) like diabetes and hypertension and the prevalence of NCD risk factors are rising rapidly. Most women now give birth with the assistance of a skilled attendant, but one in 10 children are malnourished and the mortality rate for infants and children under five (5) are declining only slowly. There have been large outbreaks of measles and dengue fever over the last two years.





The National Referral Hospital (NRH) is the main hospital in the Solomon Islands. Its principal activities are:

- Provision of secondary and tertiary clinical care for people living in the Solomon Islands
- Provision of clinical training attachment for residents, paramedics and nurses
- Provision of specialist clinical services and support to the provinces
- Ensuring patient care is of high quality
- Evaluating and facilitating overseas referral to St Vincent Hospital, Sydney, for patients needing more highly specialised treatment (according to MHMS off-shore referral guidelines and eligibility criteria).

The NRH Emergency Department (ED) has been criticised in Solomon Islands media for its lack of resources and functionality; visiting medical professionals have described it as the 'poor cousin' of the hospital. The ED is commonly used as a primary health care service instead of for managing patients with urgent, life-threatening conditions or referred from other services with complex problems. The MHMS and NRH management have prioritised providing the ED with adequate resources and maintenance, and with external specialist technical assistance to improve the functionality of the Department and to provide training and supervision for staff.

Solomon Islands is in a unique situation of having sent a significant number of students to train in medicine at universities around the world. The majority of these foreign trained medical graduates (FTMG) have attended universities in Cuba, with others studying in Fiji and Taiwan. As a result of the increased numbers of FTMGs, much larger annual cohorts of new medical officers (up to 25 per year) will be returning to Solomon Islands over the next five years; due to overlaps between cohorts, there may be 50 or more junior doctors undertaking preregistration training in the Solomon Islands health system at any one time.

The large numbers of returning graduates are expected to place substantial pressure on an already stretched Solomon Islands health system. There is currently very limited capacity for senior medical staff within Solomon Islands hospitals to provide adequate supervision while also attending to the clinical case load. Without adequate supervision, medical graduates may not develop the necessary skills and knowledge to perform effectively as doctors, which would represent a major missed opportunity for the sector to address medical shortages throughout the health system. There are also concerns about how well the clinical knowledge and skills of the FTMGs trained in Cuba align with the practicalities of working in Solomon Islands health system.

To help address the increased complexity and demand for pre-registration training, the Solomon Islands has developed a two-stage internship comprising: 1) a special pre-internship Bridging Program for FTMGs trained outside the Pacific and/or in a language other than English; and 2) a revised and updated two-year Solomon Islands Internship Training Program (SIITP), which all new medical graduates must complete in order to gain registration as a medical practitioner. The two programs operate under the oversight of a MHMS Medical Training Committee.

An Emergency Department rotation is included in both the Bridging and Medical Internship programs.



2. ASSIGNMENT OVERVIEW

The Emergency Nurse Adviser role is part of the Solomon Islands Graduate Internship Supervision and Support Project (SIGISSP) — a project funded by the Department of Foreign Affairs and Trade (DFAT) through the Australian aid program in the Solomon Islands.

The MHMS has acknowledged concerns about its capacity to provide adequate supervision for FTMGs as they return to Solomon Islands and has requested DFAT assistance to provide supplementary supervisory capacity until there are enough local supervisors to manage the programs. The SIGISSP supports the MHMS to deliver the Bridging Program (for FTMGs) and the Medical Internship Program (for all new medical graduates).

Short term (4-6 month) Australian registrar intern supervisors will be recruited through strategic Australian Organisations for the SIGISSP for areas facing shortages of local supervising clinicians, including O&G, Paediatrics and Adult Medicine. SIGISSP will also engage a Clinical Educator to strengthen the quality of training, supervision and skills assessment for Bridging and Internship Program participants.

At present, the Emergency Department is not in a position to host the intern rotations as it has few consultants or registrars with sufficient clinical or supervisory experience. To ensure that the ED can provide an effective training environment, there is a need to improve the triage system and other management processes and to upskill staff with specific emergency care training and supervision skills. To help achieve this, SIGISSP has partnered with the Australasian College for Emergency Medicine (ACEM) to recruit a long term (12 month) ACEM Fellow and an ED Nurse Adviser to be based in the Department; this support will continue for the duration of the project (4 years).

ACEM have an existing relationship with NRH and were contracted by DFAT to provide a detailed assessment and recommendations for the ED in 2014. The College will make the results of this assessment available directly to the consultants.

Please note that the standard of care possible in the NRH ED is not usually comparable with the Australian setting. Significant adjustment is required for medical professionals from well-resourced settings to operate effectively in the Solomon Islands environment. This role will suit an enthusiastic and experienced ED nurse who is interested and has the energy required to work with local nurse leaders to develop and transform a whole department in line with the vision of the Solomon Islands MHMS, as well as building clinical knowledge and skills through on-the-job supervision and mentoring and contribution to the formal training programs.





3. ASSIGNMENT OBJECTIVES

- Work closely with the Head Nurse ED to improve patient care through improved systems and processes within ED, promoting teamwork and collaboration within the ED
- To provide clinical training, advice and support to ED nurses through formal and informal methods
- To ensure the inclusion of all people directly affected by the volunteer assignment in the course of your work with the host organisation and host community, including implementing strategies that relate to:
 - o promoting gender equality and empowering women,
 - o disability inclusion, and
 - o child safeguarding.

4. DUTIES AND RESPONSIBILITIES OF THE VOLUNTEER

In consultation with their line manager and relevant stakeholders, Australian volunteers complete a work plan in the first three (3) months of their assignment. The duties below are an indication of the type of work that may be involved in meeting the Assignment Objectives:

- Assist the Head Nurse to manage the ED at NRH
- Role model best practice patient care and teamwork within the ED
- Assist to further develop and implement an appropriate triage, patient tracking and flow systems and other relevant ED systems and protocols to improve patient care
- Provide regular in house education to the nursing staff.
- Monitor and assess changes to practice
- Work with the NRH Head of Nursing and National Training Committee to support specialist ED training for nurses
- Work closely with the long-term ACEM Fellow to ensure consistency with the overall objectives of the program
- Develop and/or maintain partnerships with local, regional and international organisations, local and national government, professional and peer networks. Including identification of local staff who can involve in the process of implementation and continue with the role for its sustainability.
- Work closely with local professional staff across all disciplines and ensure an attitude of respect and understanding for local culture and practices.

5. SELECTION CRITERIA

Qualifications, Essential Skills & Experience

- Tertiary qualifications in Nursing and post-graduate qualifications in critical care / emergency nursing
- Significant experience operating as a Senior ED Nurse in a hospital setting, including advanced triage and triage education skills
- Experience in nurse education (not necessarily within a formal Nurse Educator role)





- Experience working with ED staff teams to establish and improve systems and processes to improve patient care.
- Demonstrated ability to bring about positive change.

Desirable Skills & Experience

- Experience working in a resource limited setting
- Familiarity with the Pacific region

6. ASSIGNMENT INFORMATION

Line Manager

Head of Nursing Emergency Department

Staff Supervision

Nurses, interns and trainees

Working Relationships

Good team working relationship

Hours & Days of Employment

From 8am to 4.30pm, Monday to Friday

The expectation is that the Australian volunteer will work the equivalent of a 5-day week to a maximum of 40 hours per week.

Leave Entitlements

All volunteers are entitled to 20 days leave per 12 months, unless otherwise advised.

Same conditions and terms as local colleagues apply, including national holidays.

Professional Indemnity Insurance

Professional indemnity insurance is not provided for Australian volunteers. You should consult your partner organisation about the need for professional indemnity insurance for your role prior to your departure, and where required, you are advised to obtain adequate professional indemnity insurance from a reputable insurance provider.

Note: A volunteer must not act as a medical practitioner without adequate professional/medical indemnity insurance. This must be provided by the partner organisation, Australian organisation (if applicable) or self-arranged by the volunteer.

This applies to all clinical medical activities undertaken by midwives, nurses, doctors, paramedics, physiotherapists etc.).

Other Conditions

If required to work after hours, volunteer is entitled to time off in lieu because there is no overtime pay provisions.





Language Skills and Level Required

Medium level Melanesian/Solomon Islands Pijin required for the work place.

Language Support

Language support is provided during the in-country orientation period. Most often, additional resources for further development later in the assignment will be available if required.

7. LIVING AS A VOLUNTEER

The people of Solomon Islands are warm and friendly, many living a lifestyle almost unchanged for hundreds of years. It is a fascinating country with more than 70 living languages spoken and incredible marine and terrestrial biodiversity. The third largest archipelago in South Pacific, Solomon Islands comprises 992 islands.

In the late 1990s and early 2000s Solomon Islands was divided by ethnic tension and violence. In 2003 the Regional Assistance Mission to Solomon Islands (RAMSI) was deployed to help the Solomon Islands Government restore law and order. The mission, called 'Helpem Fren' was successful in restoring security across the country enabling people to go about their lives free from the fear of violence and intimidation.

The influence of Christianity has had a greater impact on society and people than other institutions. Missionaries managed to curb ancestor worship to some extent but non-Christian beliefs still persist and coexist with Christian concepts. The churches play a very strong role in communal life, especially in rural areas. Virtually every village has a church building or leader and prayer or church services are held once or twice a day, and 95% of the population are professed Christians.

The Australian volunteer will be living in Honiara, located on the island of Guadalcanal. It has a vibrant and fast growing population and has been the capital of Solomon Islands since World War II. Honiara is known as a melting pot of the over 70 language groups that comprise the archipelago; the country features a predominately Melanesian population with minority groups of Polynesians, Micronesians, Asian and Europeans

Honiara has a population of around 100 000. Overall, the country's population is young, with 50% being under the age of fifteen. Honiara is also home to the country's government buildings, commercial centre and a sea port. There is a National Museum, Art Gallery, markets, botanic gardens and beaches. Public transportation runs along the main road and up into many residential areas. Honiara's climate is warm and tropical, with a wetter season from November to April.

Shopping options:

The local market is great for fresh fruits and vegetables. Supermarkets in Honiara also stock other limited goods; canned, frozen, etc. However goods are expensive and not available all the time.





Social and recreational:

- Multi-purpose gym (Honiara); Circuit classes, Yoga classes
- Pacific Casino Gym (Honiara)
- Heritage Park Hotel gym (Honiara)
- Swimming at various Hotel pools and beaches, pay for access to them all
- Tri Club meet at Kakabona 6am on Tuesdays and Thursdays
- Diving and snorkelling (lots of places)http://mundadive.com/home.htm
- Hiking and bush walking (lots of places)
- HHH (Hash House Harriers) meet Monday nights between 5-6pm at various locations in Honiara
- Join a sports club soccer, basketball, AFL, netball

8. ALLOWANCES & SUPPORT

These allowance levels are based on the Cost of Living in the host country location. Allowances will be reviewed periodically and may increase or decrease. Volunteers will be given notice of any change to the allowance level.

Living Allowance

\$6,666 AUD/ Month

Housing

Assistance with the identification of suitable, secure and affordable accommodation will be provided by the In-Country Management Team.

Other Allowances & Support

All Australian Volunteers program volunteers receive the following:

- Pre-departure Briefing in Melbourne
- In-country Orientation on arrival
- Pre-departure vaccination expenses
- Visa expenses
- Pastoral care, assignment monitoring and security guidance
- Return airfare to country of assignment
- Psychological and medical advice and support services
- Re-entry support services
- Settling in allowance (assignments longer than 6 months)
- Re-settlement allowance (assignments longer than 6 months)





9. PREPARING YOUR APPLICATION

As a part of your online application you will be required to answer the following questions through a video recording (if you are unable to submit through the online video due to accessibility please contact the Recruitment Coordinator).

Response to Selection Criteria

- a) Why do I feel that volunteering internationally is the right thing for me to be doing at this time in my life?
- b) What are the biggest personal adjustments I'm likely to have to make to be accepted as a useful colleague and engaged community member in this assignment?
- c) The Australian Volunteers Program is committed to ensuring the inclusion of all people directly affected by the volunteer assignment, such as the partner organisation and host community. What is your personal experience and/or understanding of social inclusion.
- d) How do I match the Qualifications, Essential Skills & Experience? Include your most relevant experiences, results and achievements responding to each of the selection criteria in Section 5.

Personal Circumstances Constraints

The Australian Volunteers Program recognizes and values the enhanced skills and expertise of returned volunteers as a result of their volunteering experience. The program is also designed to maximize international volunteering opportunities for all Australians. With this in mind, if a returned volunteer and a candidate who has not volunteered previously apply for the same role, preference will be given to the latter, providing they meet the personal and professional selection criteria for the role.

We are NOT able to accept applications from people with the following personal circumstances due to security, cultural, legal or visa restrictions in this location:

- Applicants with accompanying children
- Same sex partners who wish to accompany applicants as part of the program may face issues in applying for and being issued with a visa
- Applicants with partners to whom they are not legally married and who wish to accompany applicants as part of the program may face issues in applying for and being issues with a visa
- Applicants with a criminal record where a criminal conviction may be relevant to the inherent requirements of the assignment.

10. HOW TO APPLY

All applications must be submitted online through the Australian Volunteers Program website. If you haven't already done so, you will need to register on our website prior to applying.

Aboriginal and Torres Strait Islander people are encouraged to apply for this assignment.

