

WHO COLLABORATIVE CENTER

Developing a Hub for Knowledge Transfer: The National Rehabilitation Center **Abu Dhabi Training Institute**

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Scope



- UNGASS 2016 and other policy statements
- Lack of skilled workforce a major barrier to providing services in many countries
- Key component in overall service structure
- Skill mix is a key in workforce
- Training should be multi-professional and multi-level
- Available material
- NRC and it Training Institute
- Conclusions

Capacity Building



- Joint high level Ministerial Statement 2014, Political Declaration and Plan of Action 2014 and UNGASS Outcome Document 2016, all have capacity building embedded in them (implied)
- Perhaps a more stronger clear statement would have given the issue higher priority



In the Eastern Mediterranean Region, it is estimated that in majority of the countries less than 10% of people in need have access to treatment systems to help them (WHO EMRO, 2015).

PREVENTION AND TREATMENT SYSTEMS





Components of a treatment system



- Service delivery
- Workforce
- Information systems
- Access to essential medicines
- Financing
- Leadership and governance

WHO (2007), Gehring and Saeed (2017)

HUMAN RESOURCES



Inter-professional competencies and alignment

Competencies and Entrustable Professional Activities (EPA'S)

Practice
Based
Learning and
Learning
Based
Practice

Leaders / senior managers

Specialists

Professions / scientists

Administrators

Workers

Volunteers

Available Training Resources and Curricula



- WHO MhGap
- ASSIST
- TreatNet
- ICCE Curricula



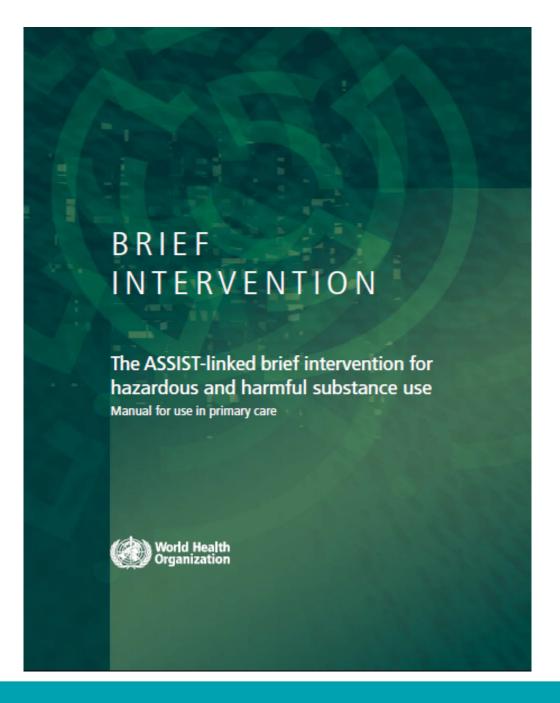
mhGAP-IG



for mental, neurological and substance use disorders in non-specialized health settings



mental health Gap Action Programme













Treatnet Training Package

The Treatnet Training Package was developed by an international consortium of clinical experts, researchers, and trainers from international Capacity Building Consortium, led by the University of California Los Angeles / Integrated Substance Abuse Program (UCLA/ISAP). It is a central component to the effort by the UNODC Treatnet initiative to increase the level of knowledge and skills on substance abuse around the world.

Volume A: Screening, Assessment and Treatment Planning

Volume B: Elements of Psychosocial Treatment

Volume C: Addiction Medications and Special Populations

Volume D: Administrative Toolkit

ASI Manual







Curriculum Development

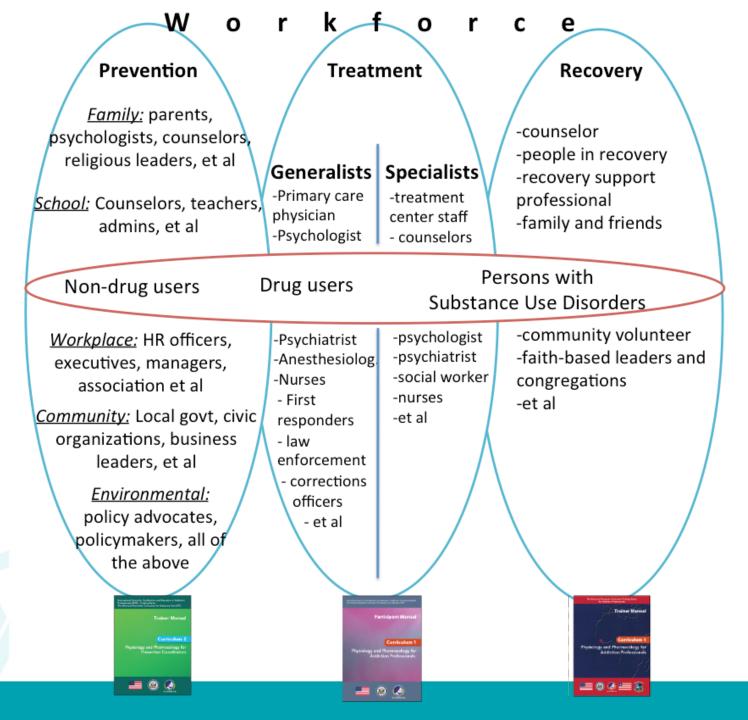
updates in collaboration with field experts

Training

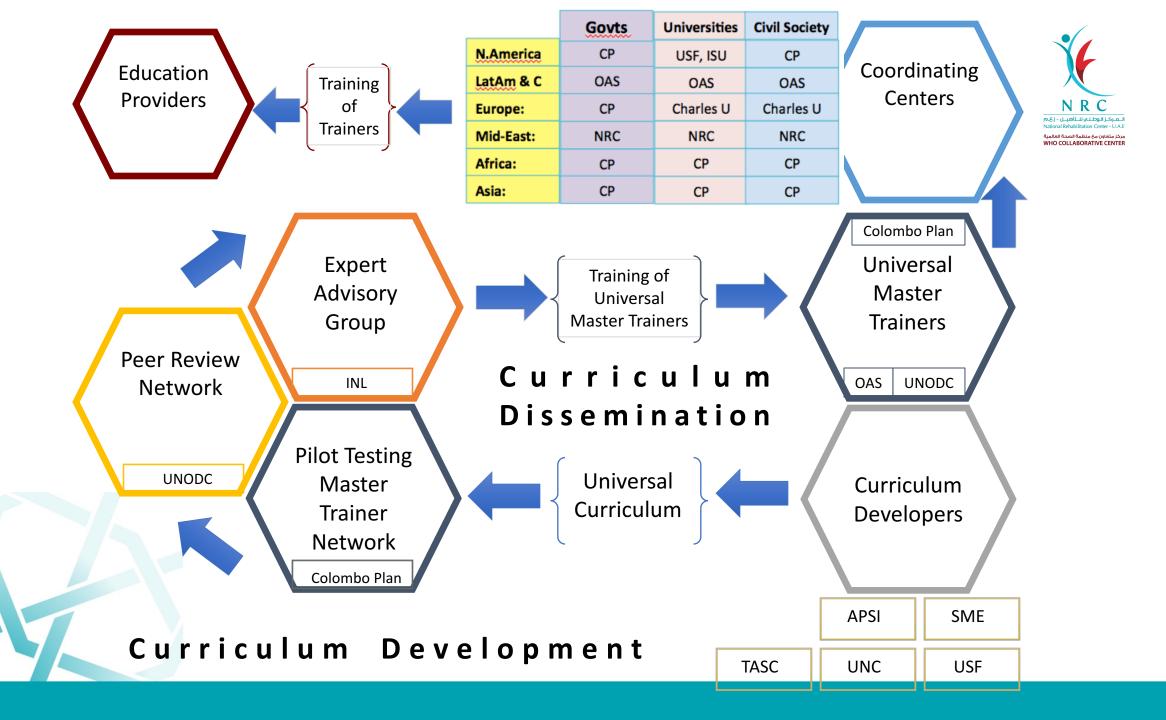
in collaboration with UNODC, OAS/CICAD, Governments, and other Education Providers

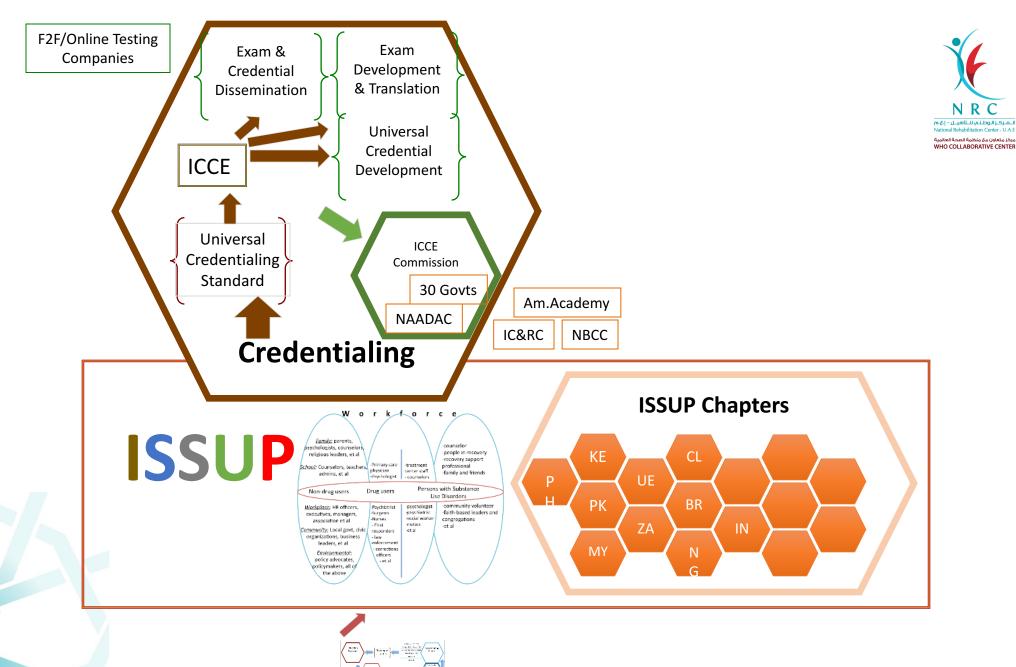
Credentialing

individuals with standardised exams and work experience









ISSUES IN TRAINING



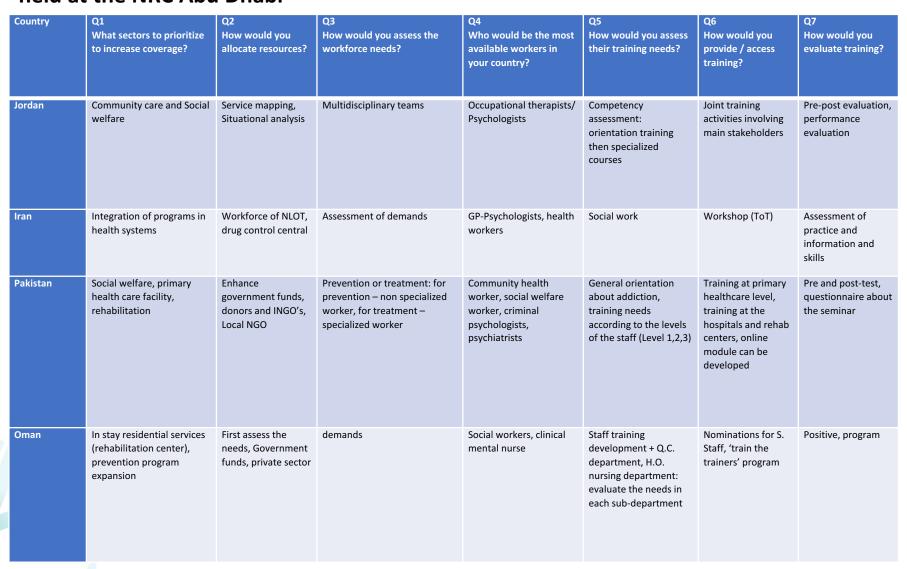
- Skills and competencies
- Qualifications
- Credentialing and accreditation
- Professionalisation

TRAINING NEEDS ASSESSMENT



- Prevention or treatment?
- Priority for the treatment system (focus)
- What is skills mix?
- Available workforce and potential workforce
- Clinical responsibility
- Safety
- Quality

Results of a brief training needs assessment carried out at a WHO regional meeting held at the NRC Abu Dhabi





Results of a brief training needs assessment carried out at a WHO regional meeting held at the NRC Abu Dhabi



Country	Q1 What sectors to prioritize to increase coverage?	Q2 How would you allocate resources?	Q3 How would you assess the workforce needs?	Q4 Who would be the most available workers in your country?	Q5 How would you assess their training needs?	Q6 How would you provide / access training?	Q7 How would you evaluate training?
Somalia	We need treatment counters for drug users, rehabilitation centers, integrated treatment healthcare at primary care	Donors, government, community	Survey, discuss the needs	Doctors, nurse, community health workers, clinical health officers	Assess their training through survey	Universities, hospitals, ToT, community health workers training	M&E
Lebanon	Community Health Centers/PHO, schools	Budgeting (legislation & policies, training, access to medication, referral system, HIS)	Assessment, available skills, missing position, training, recruitment.	Case managers	Need assessment (survey, meeting, educational school)	ToT, Training supervise, involve societies, order, managers	S&S, effectiveness
N/A	Private, primary health care centers	Private, government, international. Spend more for training, follow and analyzing for needs	Counselors, psychologists, social workers, doctors	Psychologists, social workers	Create new training programs, international collaboration (joint) programs	Joint programs, local training.	In minimal to the specialty and it depend on building own experiences
UAE	Psychologist, nurse, social workers	Urgent, important	By using the TNA/LNA	Nurse	Sharing the needs with the head sections of each department	In door/ out door	By the output and after each training we have evaluation questionnaire and surveys done in this part. To see the effectiveness of the training.
Sudan	NGO, ministry of education, ministry of interior, ministry of social and solidarity	Ministry of health, ministry of social and solidarity, international ONG	Mapping to assess the needs, data analysis	Social workers, psychologists, psychiatrist, ex-addicts (peer effect)	Through individual interview to assess the needs	-	KPI

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Egypt	Health care, to adolescent female (special group)	For prevention, training and ttt: NGOs, ministry of social and solidarity, ministry of health	Mapping for all psychiatric divisions including addiction, data analysis	Social worker, psychologists, ex- addicts, nursing staff	Individual interview to assess the needs but we don't have international training schedule.	Training through trainee (psychiatrist, psychologist, social workers, nursing)	KPI, Audit
Morocco	NGO, Ministry of education, ministry of health, ministry of justice	Ministry of health, NGO international	Mapping, analysis (data question)	Social workers, psychologists, psychiatric nurses, peer educators	Questionnaire, analysis	Trainer of training	Test (before/after), monitoring of outcomes
Palestine	The rehabilitation center and the team, primary health care, design maker, social worker for school, specialist	Private sector (from donated country or agency, human resources or staff) buy someone to make training.	Depend on the service. For detox rehabilitation we need (doctor, nurse, psychiatrist, social worker, social worker, administrator)	(nurses) all of the team we have but psychiatrist is very rare	General training about addiction, special training for different staff, doctor + nurse +social worker + psychologists	Search for perfect material or training, prepare proposal and ask consultant (indoor and outdoor)	Questionnaire before and after
Common answers	Social welfare, rehabilitation centers, primary health care, ministry of health	Government, NGO, private sectors	Mapping, analysis	Social workers, psychologists, nurses, psychiatrists, exaddicts	Assessment, interview, training and orientation	ToT, Training activities	Pre/post-test, KPI

What should a training strategy looks like?



- Why? Outline of need
- Summary of local picture and resources
- Needs and priorities
- Objectives and milestones
- Converting a strategy into a plan with KPI's
- Evaluation and review

The National Rehabilitation Centre Abu Dhabi Training Institute



Background

The identified lack of a skilled workforce in the area of addiction and substance misuse to serve requirements, internally at the NRC, in the UAE and the region. Addressing this need is part of the NRC's Education and Training Strategy.





The National Rehabilitation Centre Abu Dhabi Education and Training Institute



Aim: To develop an education and training centre to address these needs.

Objectives:

- Skills development at different levels.
- Development of different professions.
- Skills development as well as training leading to accredited qualifications.
- Contribute to national and regional capacity building.
- To develop resources and training manuals in Arabic.

The Model and Vision



- Bring all our education and training activities under one umbrella.
- To be the National and Regional training and capacity centre in addictions.
- To be a recognized National and Global course provider and qualification granting institute (CAA accredited).
- To be an autonomous body within the NRC.

Our Strategy



- Identify training needs.
- Developing courses that meet our needs and that of UAE.
- Finding suitable partners (institutions) to work with and accredit our courses.
- Find sustainable solutions.
- Expand to serve the region.
- Have a global approach.
- Establish a Training Institute.

PARTNERSHIPS AND MOU'S



Education Institutes:

- United Arab Emirates University is our main partner in our training activities.
- Maudsley International / Institute of Psychiatry-King's College London has a long association with the NRC from the very beginning.
- Aberdeen University: NRC has a MOU with Aberdeen University covering research and training.
- McLean / Harvard: NRC has a MOU with McLean Harvard for technical support and development and training and accreditation could be added.
- Matrix Institute: NRC has a MOU and contract with the Matrix Institute to train and accredit NRC staff to deliver the Matrix Programme. It is expected that in the future the NRC will be able to deliver training on the Matrix Programme.
- Lundbeck Institute: This is an independent institute, which is a part of Lundbek Pharmaceuticals dedicated to training on mental health issues. The NRC has an MOU with Lundbeck Institute to cooperate in training events of mutual interest.
- University of California Los Angeles: The NRC plans to have an MOU with UCLA on training and research collaboration.

PARTNERSHIPS AND MOU'S



International Organisations:

- UNODC: The NRC has had an MOU and worked in partnership with UNODC on a number of projects since 2009. As part of its collaboration with the UNODC Global Programme the NRC is currently negotiating with the UNODC partnership in the NRC's education and training activities.
- WHO: The NRC has an MOU with the WHO and aims to be a collaborating centre. It has also carried out training activities in partnership with the WHO. The NRC aims to play an active role in the regional capacity building activity of the WHO. A detailed work plan for education and training activity with the WHO needs to be developed.
- Colombo Plan: The NRC has an MOU and an active working relationship with the Colombo Plan. The NRC recently joined the Asian Centre for Certification and Education of Addiction Professionals (ACCE) Commission and plans to be an ACCE training provider and credentialing centre for the region.
- National Institute on Drug Abuse (NIDA) USA: The NRC recently signed a MOU with NIDA which would give the NRC access to a range of experts who could contribute to the Training Institute.

THREE LEVEL MODEL OF TRAINING



NRC Strategy for Workforce Capacity Building



Level 1

ADDICTIONOLOGY



- Development of a specialty.
- Need for a workforce to deal with this increasing problem.
- Three Strands:
 - ✓ Developing specialist addictionologists (IOP Masters one of the 1st) - Level 3 – ICUDDR agenda.
 - ✓ Increasing awareness, knowledge and skills of all professions in the MDT- Level 2 ICUDDR agenda .
 - ✓ Professionalising workers who do not belong to professions (e.g.drugs counsellors) ICCE Basic level agenda – Level 1 .

ADDICTIONS

Level 2- Generic Health professions & others



- Counselling
- Medicine
- Nursing
- Pharmacy
- Psychiatry

- Psychology
- Scientists / technicians
- Social Work
- Administration
- Special experts

ADDICTIONS

Level 3 Specialists and Senior Mangers



- Addictionology Post-Graduate Courses, PhD's ICUDDR
- WHO Mid level and Senior Manager Training



UAEU
Abu Dhabi
University
Kings College
Aberdeen
University

UNODC WHO Colombo Plan

> McLean/Harvard Maudsley International Matrix Institute Key individuals

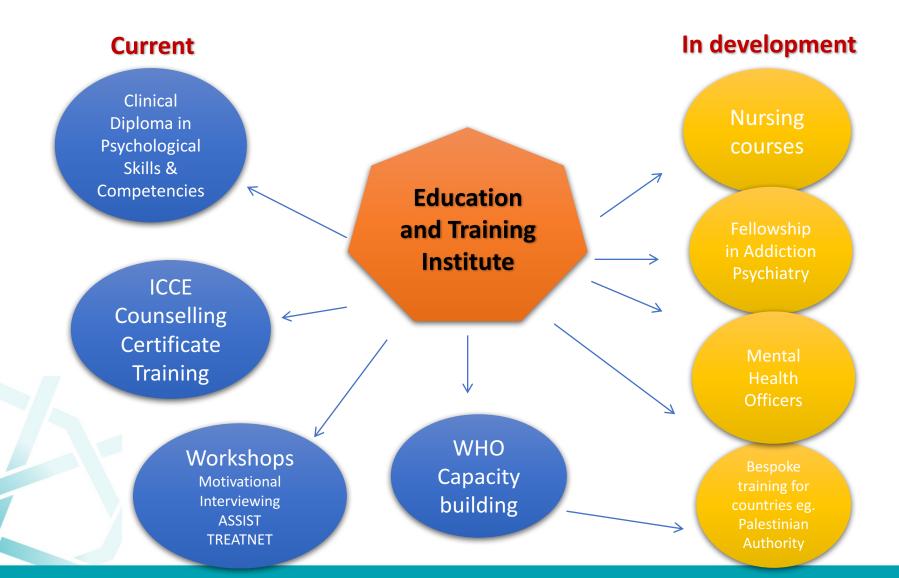
NRC Training Institute

NRC's own staff and resources

Accredited courses
Certificates
Vocational Qualifications
Diplomas
Degrees
Doctorates Placements
Fellowships

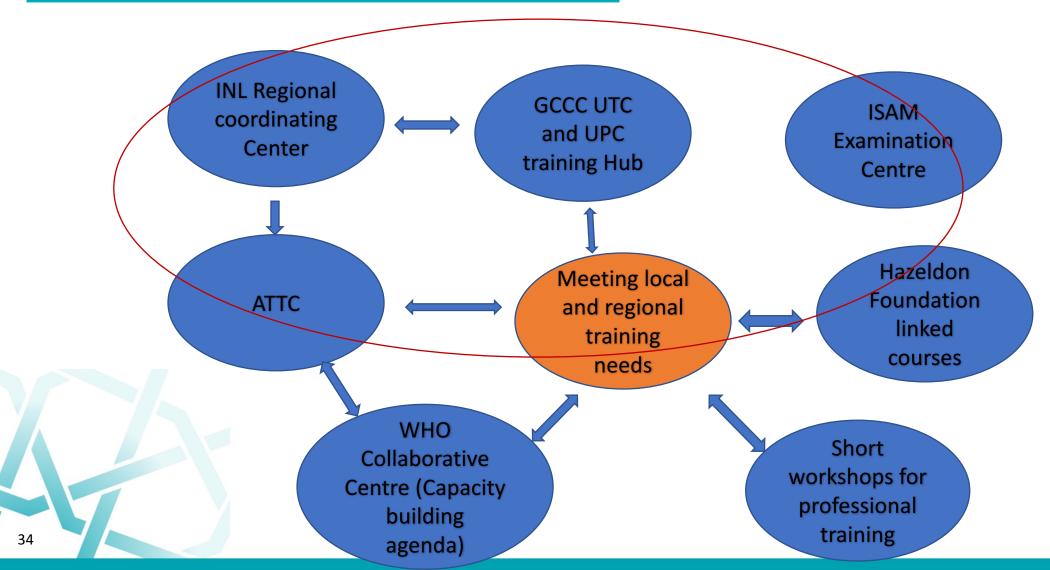
National Rehabilitation Center Abu Dhabi Training Institute





NRC CAPACITY BUILDING STRATEGY





Achievements



- PG Diploma in Applied Psychological Skills (graduated 71)

 Masters
- CME Workshops
- Vocational Training: Working with the National Qualifications Authority and becoming an RNDC (Recognised National Development Committee) – First stage approval for two courses
- Department of Health Abu Dhabi Approved Practice Setting in progress
- Translating UTC level 1 into Arabic
- UTC Arabic Training and Manuals
- Completing UTC 'Walkthrough' training in Arabic and holding ICAP exams
- Enrolling UAE and regional universities in ICUDDR

Work in Progress



- Masters upgrade
- Psychiatry Fellowship
- Mental Health Officer Project
- Nursing Diploma
- Research Diploma with AMECA
- Toxicology Diploma
- CME Certificate Course e.g. McLean Harvard

NRC Local Workforce Development Strategy Overview



Sponsored Career
Development
undergraduate and
graduate

Sponsored Career Development undergraduate and graduate Sponsored Career Development undergraduate and graduate Sponsored Career Development undergraduate and graduate

Assistant Nurse

Psychology Apprentice Assistant Social Worker

Counselling Assistant Apprentice Leve
NQA
Competencies
+
HAAD Category

Generic Level
NQA
Competencies
+
HAAD Category

NRC Generic Staff

ICCE level I Counsellor training (NQA Accredited)

NRC Training Institute Foundation Courses (NQA Accredited)







NRC Regional Agenda

Very limited rehabilitation centers

are currently available on the region.





NRC as a WHO Collaborative Centre and INL Regional Training Hub



- Overlapping objectives work towards a common agenda.
- Translation of material into Arabic.
- Developing a cohort of UTC trainers in Arabic.
- Targeting 2- 3 countries initially for level 1 training (Egypt, Jordan and Bahrain).
- Getting key universities in each country to join ICUDDR and include GCCC curricula in their academic programmes.
- Making other courses developed by the NTC TI available to other countries.

Issues to Address



- Influencing policy
- Identifying resources
- Embedding research and evaluation

Conclusions



- Workforce Capacity is a key component of a Response System
- Building workforce Capacity should be a priority
- There are excellent resources available they are under utilized
- The NRC Training Institute is committed to build capacity in the region and has reached several milestones



مركز متعاون مع منظمة الصحة العالمية WHO COLLABORATIVE CENTER

Thank you

