RECRUITMENT OF A MEDICAL OFFICER ON TRISTAN DA CUNHA

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TRISTAN DA CUNHA GOVERNMENT

JOB DESCRIPTION

Role: Medical Officer, Tristan da Cunha

Accountable to: Island Administrator

Reports to: Island Administrator

Essential Qualifications: Full registration with the General Medical Council (GMC) or similar Medical Board.

MB/MB/BS/BAO/BCH

ACLS, PALS (APLS) and ATLS

Essential Experience:

Primary Health Care
Demonstrated experience in General Surgery
Demonstrated experience in Anaesthetics – including experience of providing dissociation anaesthesia
Demonstrated experience in Obstetrics and the ability to manage deliveries single handed (normal and caesarean)

Desirable Qualifications

A higher medical qualification in either obstetrics or surgery would be beneficial.

Desirable Experience:

Experience in Public Health and / or Health Services Management
Experience in motivating and leading a team to achieve organisational goals

Duration of assignment

1 year post with possibility for extension
Consideration will also be given to appointing a small team of suitably qualified doctors to provide the service on a rotational basis for periods of 4-6 months each over a period of 3-5 years

Salary:

£100,000 per annum

Starting date

May 2011. An earlier starting date can be considered

2. About Tristan da Cunha

The territory of Tristan da Cunha is composed of four islands, Gough, Inaccessible, Nightingale and Tristan itself. The latter three are grouped together while Gough lies some 230 nautical miles (426km) to the south. The main island, Tristan da Cunha, is the remotest inhabited island in the world. Its nearest neighbour is St. Helena 2,334kms to the North while Cape Town is 2,778kms to the East. Tristan is an Overseas Territory of the United Kingdom. It is under the authority of the Governor of St. Helena but powers are delegated to a resident
Administrator. There is only one inhabited area. This is Edinburgh of the Seven Seas on Tristan. It is a small village of just under 300 people, the total population of Tristan da Cunha. It was named in 1867 after Prince Alfred, Duke of Edinburgh (second son of Queen Victoria) who visited in August that year as commander of the frigate "Galatea".

3. **Background to the Post**

The post holder will be the only qualified health professional on the island, whose main objective will be to provide health promotion/preventive and curative clinical care to the Island population. He/she will be assisted by a team of 4/5 untrained nursing auxiliaries / healthcare assistants who have limited capacity or clinical knowledge and therefore require significant supervision, mentoring and training. The MO also has line management responsibility for the dental staff consisting of a Dental Nurse and Dental Assistant. Tristan da Cunha is in the process of recruiting a hospital administrator and a Uk qualified Nurse to complement the team. The qualified nurse will support the medical officer in his/her duties and provide training and on-the-job coaching of the nursing team. She is scheduled to commence work in February 2012.

The post holder is expected to assist the TDC Government in the implementation of a newly developed sustainable development strategy, which amongst other things, aims to promote "a vibrant, healthy and sustainable population." He/she will be expected to assist the Administrator with the management, implementation and monitoring of the health related aspects of the development strategy and to work with other key stakeholders within the Government and Island Community in striving to meet the goals set out within it. A medical operational plan is currently being developed and this will act as the guiding document. He/she will be expected to suggest appropriate improvements/changes as the need arises.

This post will be funded by the UK Department for International Development (DFID). DFID also funds visits from a number of clinical specialists throughout the year, including an annual visit by a dentist and dental technician and a biennial visit by an optometrist. There is scope for providing other specialist visits through this programme of support and the postholder will take a proactive role in identifying areas of need and managing the visits accordingly in order to maximize the benefit for TDC. Northern Ireland Co-operation Overseas (NI-CO), based in the UK is assisting TdC with the recruitment and contracting of these posts.

It has been identified that there is an urgent need to move away from the traditional curative approach to healthcare that is currently in place on TDC, towards a more strategic and preventative approach with a focus on health promotion to encourage healthy lifestyle choices and eventually have a positive impact on the current morbidity and mortality patterns. The post holder will take a lead role in transforming the system and managing the change required to achieve this goal.

He/she will be responsible for providing leadership in the following key areas:

(a) To provide advice to the TDC Administrator and Island Council to further improve health services and health outcomes on island and ensure that health issues are adequately addressed

(b) To provide leadership in public health, health promotion, preventive and curative care on Tristan, ensuring high quality of service delivery at primary and secondary level.

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1. TDC Draft Sustainable Development Plan March 2009
This includes provision of clinical services, quality assurance of medical standards, adherence to UK protocols and standards adapted to Tristan situation as required and acting as head of profession and line manager for health and support staff working in the hospital/health sector and all visiting health professionals.

4. **Summary of Key Responsibilities**

1. To take lead responsibility for all medical and health matters for the inhabitants of Tristan da Cunha, in accordance with the TDC Medical Department Policy attached at Annex A.

2. To perform all the duties of a General Practitioner with surgical, obstetric and public health duties.

3. To explore establishment of distant (telehealth) support link in relevant areas if/as required.

4. To take lead responsibility for public health matters with a view to improving the health status of the Island population, including devising and delivery of effective strategies to counter the community’s lifestyle issues and challenges and proactively implementing recommendations received from visiting specialists in the field of public and environmental health.

5. To take the lead in the management, implementation and monitoring of the health related aspects of the Strategic Development Plan (SDP) and to work with other key stakeholders within the Government and Island Community in striving to meet the wider goals set out within it.

6. To take ownership and guide the implementation of the island’s draft medical policy and operational plan and report against deliverables at outputs and outcomes.

7. To develop and ensure effective implementation of appropriate workplace policies and procedures and treatment guidelines/protocols taking into account international best practice.

8. To contribute to other work-streams supporting the Sustainable Development Plan, where specialist knowledge and/or expertise is required. This will include a role in the effort to maintain EU market access for Tristan lobster.

9. To liaise effectively with visiting yachts and ships so that all appropriate measures are taken to ensure the health of the community is protected, as far as is practically possible, from ship borne diseases and viruses.

10. To ensure best and most efficient use of financial and physical resources, including undertaking audits of and, where necessary, making the case for and support improvements to hospital buildings and equipment; the procurement, management and storage of medicines and managing spending on overseas referrals.

11. To draft and present the annual Medical Estimates to Council by the due date each year, ensuring that the budget contains the appropriate capital investment required to maintain an acceptable medical service to the community.

12. To line manage health and support staff at Camogli Hospital in accordance with Tristan Government management practice and procedures, including design and delivery of training and support for continuing professional development.
13. To be a member of the Council Medical Committee with a view, subject to confirmation by the island Council, to eventually succeeding the Chief Islander as Chairman

14. To be a member and, if required, the chair of a newly created Tristan Competent Authority for testing of Tristan lobster to meet EU standards for export.

15. To perform basic and emergency dentistry when there is no visiting dental team on-Island

16. As required, to assist the Agricultural Officer with veterinary work

5. Detailed description of tasks/responsibilities

1. Clinical Care
   • To provide primary care services within regular clinic hours and provide out of hours emergency services / home visits as required
   • To provide secondary care services at Camogli Hospital, including general surgery, anaesthetics and obstetric care.
     o Surgery: The MO must be able to manage surgical emergencies including appendectomy, trauma, bowel resection, gastric ulceration, draining of call bladder and removal of stones, draining of intra-cranial haematomas and management of open fractures.
     o Obstetrics: provide a full obstetric service including caesarean sections, ectopic pregnancies, spinal and epidural anaesthesia.
     o Anaesthetics: it is important to keep anaesthesia simple and safe. Experience in dissociation anaesthesia is important.
   • To provide appropriate care and support using registers, clinical protocols and clinical audit patients suffering from hypertension, asthma/chronic obstructive airways disease, obesity and diabetes.
   • To support the development of a social care model for the elderly with support from a (to-be-recruited) community health worker and advice on care and home support required of those over the age of 70 and disable/vulnerable community members based on dependency and health and safety assessments
   • To provide a basic mental health service, obtaining expert advice through distant support from a psychiatrist as/when required.
   • To supervise the dental nurse and provide basic emergency dental care when required
   • To safely dispense all medications and ensure adequate drugs and medical supplies stock levels through adequate management of electronic pharmacy systems and timely ordering of drugs/supplies in accordance with the TDC Health Policy

2. Public Health
   • To provide overall leadership and accountability for Public Health on the island and advise TDCG as required
   • To review, develop, update and implement health policies, procedures and protocols for the island, in accordance with Island Ordinances and in conjunction with the Administrator
• To manage, implement and monitor the health related aspects of the SDP and to contribute to other SDP workstreams where public health / medical expertise is required
• To develop and maintain adequate Health Management Information to monitor utilisation of services, achievements of quality standards/targets and surveillance of communicable diseases To lead and manage any epidemiological investigations of communicable diseases and food borne disease outbreaks, and their response
• To act as local focal point for International Health Regulations and be responsible for ensuring standards are met
• To take overall responsibility for the medical sector in Disaster Preparedness including preparation of emergency plans, practicing implementation of plans
• To take responsibility for ensuring that environmental health standards, including waste management, pest control and food hygiene are maintained
• To contribute to efforts to secure and maintain access to EU markets for Tristan lobster, including through the implementation of a product testing regime. To be a member of (and, if required, chair) a newly created Tristan Competent Authority for this work.
• To provide leadership to ensure high quality health promotion programmes and communicable disease control programmes e.g. STIs and TB
• To take the lead in health education for children and adults with special emphasis on obesity and salt intake and alcohol consumption.
• To conduct annual health check-ups of all children, including calculation and follow-up of BMI
• To provide an annual Public Health Report to the Administrator

3. Health Services Management

• To assess, plan, manage and evaluate health service provision for the island to ensure an overall high quality patient care service is provided cost effectively within the allocated budget in consultation with the Administrator
• To be responsible for leading implementation, routine monitoring and annual review of the health related aspects of the Sustainable Development Strategy
• To provide advice to the Administrator on the prioritisation of resources e.g. overseeing the overseas referrals process and reviewing formulary/drug orders (having regard to clinical need, likely treatment efficacy and prognosis, and public health priorities); advise on and assist in the development of health care financing strategies
• To develop and implement policies relating to clinical governance and patient safety issues, including reviews of Serious Untoward Incidents
• To ensure regular clinical audits/reviews of the health service take place and it’s recommendations to improve performance are implemented
• To submit monthly reports to the Administrator on departmental objectives and progress towards objectives set out in the Sustainable Development Strategy

4. Line Management and Professional Leadership

• To be fully accountable for the provision, management and quality assurance of the TDC health service, laboratory services, environmental health services, dental and pharmaceutical services
• To conduct performance appraisals annually with all health and support staff, including dental staff.
• To have regular one-to-one performance discussions with (to-be-recruited)qualified nurse at least quarterly, while the concerned nurse will conduct quarterly performance
discussions with all other health/support staff which will be used to obtain and provide feedback on staff and personal performance and to discuss issues of concern

- To provide regular training to staff including Basic Life Support Training

Special Conditions:

1. Where this post is filled on a rotational basis by a number of Medical Officers providing the service for a period of 4-6 months at a time, co-ordination between the postholders will be critical in order continuity of the service within agreed parameters as set out in the TDC Health Policy and Medical Operational Plan (which is currently being developed). For example, all rota Medical Officers will be required to:
   - Follow an agreed set of procedures and protocols for
     - Prescribing medication
     - Procurement of drugs and medical supplies
     - Off-Island referrals (esp criteria for approval)
     - Management of healthcare support staff rotas
     - Outpatient clinic scheduling
     - Home visits and emergency care
   - Maintain detailed and up to date patient records in the same format
   - Develop a detailed set of handover notes for the incoming Medical Officer
   - Agree arrival and departure dates that will, wherever possible allow a handover period of 1-2 weeks between incoming and outgoing doctors.

2. This job will be challenging and demanding. As the sole provider of medical services on the Island, irregular or longer than usual working hours are to be expected. The applicant must ensure that health and safety requirements are adhered to and take necessary safety precautions to avoid exposure to contaminated body fluids or radiation during his/her work.

Note:
This job description is intended only as a guide to the duties involved and may be modified to meet changing needs. The post holder will be expected to be flexible in his or her role and responsibilities to respond to emerging needs.
TRISTAN DA CUNHA HEALTH POLICY

Objective: To promote, within the means of the Island, free and effective health care, to WHO standards, to the total population of Tristan da Cunha and to improve general health and social well-being.

Acronyms:

Administrator The Administrator of the Island of Tristan da Cunha
NICO Northern Ireland Co-operation Overseas Ltd
WHO World Health Organisation
UK United Kingdom

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1. STATISTICAL INFORMATION

To be able to compare efficacy of treatment and to compare between various centres, statistics on a daily basis of all medical and nursing activities are necessary and will be kept and transferred to the appropriate computer data file. Monthly and yearly reports will be forwarded to NICO and quarterly reports to Council.

Record of all medication ordered will be entered on the appropriate spreadsheet for proper control.

Reports required by the United Nations regarding the ordering, use, manufacturing and confiscation of drugs must be forwarded as required.

2. MEDICAL ISOLATION AND COMMUNICATION

It is of utmost importance that medical doctors on the island have access to new developments in medicine and treatments and are able to communicate freely and confidentially, by telephone, Internet or e-mail with colleagues elsewhere in the world, or to download via Internet appropriate health related articles.

3. PUBLIC HEALTH

3.1 Head of Department
The Director of Medical Services’ duties include that of Head of the Health Department and will report to the Administrator regarding all public health matters.

3.2 Environmental Health
3.2.1 Slaughterhouses
The DMS will have free access to slaughterhouses and will advise the Department responsible for the slaughterhouses on hygiene and disease prevention. The DMS will advise closure of a slaughterhouse to the Administrator, if processing meat in the slaughterhouse poses a health risk.

3.2.2 Food safety in shops and factory
The DMS will carry out regular inspections in the fish factory, shops, Café and public toilets (not less than three times per year) to confirm that management follows health safety regulations.

3.2.3 Pest control
Controlling rodents and other pests is not the duty of the Medical Officer. If rodents or other pests pose a health risk, the DMS will report it to the Administrator.

3.2.4 Sewerage disposal
Sewerage will be disposed of in such a way that it is not harmful to humans or animals and will not pollute the environment.

3.2.5 Waste disposal
Waste will be disposed of in a well-demarcated area where it will not endanger the community and will not infringe on agricultural land.

3.2.6 Water supply and testing
Tristan da Cunha is fortunate to have a clear, continuous supply of spring water and all care should be taken to prevent contamination between the source and before it gets piped to the village. Water samples should be taken on a monthly basis. The Petrifilm® method of testing for E.Coli, Coliforms and aerobic organisms is acceptable. A certificate to the effect may be issued on request.

3.3 **Safety in workplace**
All employees of the Government as well as private enterprise are entitled to work in a safe environment. Working at sea and climbing the mountain poses its unique risks and care must be taken regarding safety measures and protective clothing.

3.4 **Port health**
3.4.1 **Hazardous material**
No hazardous material should be imported to the island without prior approval of the DMS and Administrator. Tristan does not have the available facilities to cater for certain chemical induced disasters and all care should be taken not only to reduce the possibilities of injuries, but also to prevent it completely.

3.4.2 **Medical clearance**
The inhabitants of Tristan da Cunha do not have the immune resistance of people more exposed to viruses and bacteria. It is therefore very important that no one sets foot on the island without clearance from the DMS and that no one is allowed to disembark that can be a threat to the Islanders.

4. **SOCIAL WELFARE**
Social welfare on Tristan is the responsibility of Government as well as the rest of the community.

4.1 **Elderly**
The family cares for the elderly, but it is important for the medical staff to supervise not only the health but also the care and living conditions of the elderly. Government plays a role to provide the medical staff and sustenance for the elderly.

4.2 **Mental health**
The isolation on the island presents its own unique problems. It is part of the medical and nursing staff’s duties to advise and support the family in the care of patients. Continued education opportunities and a well-equipped library are important for external mental stimuli.

4.3 **Healthier living**
The islanders live a fairly active life, but with the importation of motor vehicles and equipment and with the larger exposure to modern luxuries is it important to maintain and promote a healthy lifestyle.

4.3.1 **Alcohol**
As in the rest of the world, alcohol consumption is high and it is important to provide the necessary literature to educate the community to the health and social implications of alcohol abuse. The lack of other activities and sport facilities does not leave the community with much else to do than to socialise.

4.3.2 **Smoking**

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Smoking is the only vice that with normal consumption can kill you. Educational material and literature will be available and active anti-tobacco campaigns by the Education and Health departments are necessary.

4.3.3 Exercise
The main sources of activity on the island are fishing, farming, strenuous working activities and walking. It is however not enough to maintain physical health. Obesity is the result of dietary restrictions as well as the lack of constructive physical exercise. Spinal problems are above the average and can only be reduced by structured physical exercise with the appropriate equipment and exercise programmes.

4.3.4 Diet
Most of the fresh produce has to be imported. The quality of imports will be checked on arrival and will adhere to normal health standards. Cultivation of vegetables will be promoted. Promotional literature will be available and the Educational and Health departments will promote healthy eating.

4.3.5 Relaxation
Relaxation is important for physical and mental health and the community will have the opportunity to partake in active and passive relaxation. It is important that islanders not only take time off during their annual break, but also at regular interval that can be either an extended weekend or a few days to have time for themselves and their families.

5. PRIMARY AND PREVENTATIVE CARE

5.1 Immunisation
All babies and children are to be immunised on WHO recommended schedules.

5.2 Screening
Screening of breast cancer, prostate cancer, cervical cancer, blood pressure, cholesterol and serum glucose will be done on an annual basis or shorter depending on circumstances.

5.3 Blood transfusions
All blood transfusions are done directly after donations. Blood grouping is to be done on all children at the age of 5 years and a complete record of blood groups is to be kept. HIV testing, with the donator’s consent, is advisable for all group O donators. Whenever possible, the patient’s preference to the donor will be sought.

5.4 Hospital
5.4.1 Buildings
The hospital buildings are to be maintained by the Public Works Department. It is the duty of the Director of Medical Services to notify the PWD of any repairs to be done and structural changes required.

5.4.2. Drugs
A complete inventory of all medicine in the dispensary is necessary for proper control. A stock list of minimum requirements has to be kept. It is accepted that there will be a
certain amount of medicine that has to be kept for emergencies, even if it has to be replaced when expired. It is of utmost importance to keep the emergency trolley fully stocked. The cheaper generic equivalent will be bought wherever possible and bulk ordering can be done, on the condition that the turnover will be within the time limit set by the expiry date and that calculations show the capital investment to be worth while. A control book for all schedule 7 medicine (RSA Medicine Control Act) will be kept.

5.4.3 Equipment
The equipment in the hospital will be as good as possible within the financial capabilities of the Island. It is accepted that the equipment will be within the spectrum of experience of the medical officers on the island. It is advisable that all medical officers appointed will be able to use an ultrasound, ECG and endoscope. Although it will be ideal to have a replacement policy for all equipment, it is mandatory for all critical equipment including anaesthetic machine and monitors, ECG and the defibrillator.

5.4.4 Records
All patient records are kept in written files and are locked in a filing cabinet. All records will be up to date and complete.

5.5 Staff
5.5.1 Doctor
The population of 300 merits a fulltime doctor on the Island. The doctor is at this stage on contract with DFID through NI-CO as a Consultant and is therefore required to report to DFID and NI-CO on all activities. Full time doctors will have experience in all the aspects of medical practice including obstetrics, anaesthetics and surgery.

5.5.1.1 Title
The doctor’s title will be that of Director of Medical Services or alternatively Principle Medical Officer.

5.5.1.2 Responsibilities
The doctor will be responsible for all aspects of medicine on the island including the managing of the hospital and will be the Head of the Department of Health for the island government.

5.5.2 Nursing
The number or nurses will be enough to ensure proper nursing and functioning of the hospital. The nurses will report to the DMS and are required to do all the nursing activities as expected of them including house visits and monitoring of home care.

5.5.3 Dental
5.5.3.1 Dentist
An annual visit by a dentist ensures the quality of dental care. The dentist is at this stage also on contract with NICO and will report to NICO. The island government will ensure that the dentist has the necessary facilities and equipment for proper dental care. There will be a separate dental policy for the Island.

5.5.3.2 Technician
A dental technician is necessary during the visit of the dentist to manufacture dentures, crowns and other dental apparatus as necessary. The technician is at this stage also under contract with NICO and will report to the dentist.
5.5.3.3 Assistant
A dental nurse will be available for the dentist. The island will have its own properly trained dental nurse to assist the dentist as well as continuing dental maintenance during the dentist's absence. The dental nurse will perform procedures as approved by the dentist and will report to the dentist when on the island, otherwise to the DMS.

5.5.4 Ophthalmic Services
A visit by an optician every second year will be necessary to supply the necessary ophthalmic care. A combined visit by a dispensing optician will facilitate dispensing of the required glasses. The visiting optician will have the facilities and staff available and supplied by the island to facilitate the service. An ophthalmic surgeon will visit the island if required.

5.5.5 Other specialties
The services of other specialists can be procured if required by the DMS, if it is practical and if it is financially viable.

5.6 Overseas treatment
The cost of overseas treatment should not influence the decision to refer a patient for specialist investigations and treatment. Treatment on the island is preferred if the facilities are available and the doctor in charge has the necessary experience for the procedure or treatment. A patient's choice of doctor and place of treatment will be respected, but if the treatment or procedure is available on the island, the island government will make no payment if the patient prefers to receive treatment elsewhere.

The DMS's decision for referral is final.

5.7 Operations
Only emergency operations, including caesarean sections and operations under local anaesthesia, including spinal anaesthesia, will be done on the island. Full time doctors must have the necessary experience in the managing of trauma and emergency operations. It is generally understood that it is not possible to have a full theatre team and that the nursing staff are not qualified theatre nurses.

5.8 Obstetrics
5.8.1 Infertility
The government respects the right of parents to have a child of their own. Overseas infertility testing is very expensive and will have to be limited to one time only. Medical treatment is acceptable, but will be dependant on the resident medical officer's experience.

5.8.2 Abortions
The Island will abide by UK law regarding abortions.

5.9 Emergency services
The emergency service on the island consists of the DMS, nurses and the rescue team. The rescue team is the responsibility of the Chief of Police and must be trained and available for any rescue task on land or sea.

5.10 Emergency protocol
5.10.1 Quick assessment
Whoever first notified, the Chief of Police or the DMS, will assess the situation and if necessary consult with one another. The rescue team will be assembled if required.
5.10.2 Role of the rescue team
The rescue team will be under command of the Chief of Police, DMS or appointed leader depending on the situation. The DMS, as the only doctor on the island, will not partake in any dangerous activity if it can be avoided. The rescue team will assess the situation on reaching the scene, will supply emergency care and will evacuate patients to the hospital if possible. The rescue team will always take the utmost care not to endanger themselves. Members of the rescue team will be available for ambulance duty if required.

5.11 Health education
5.11.1 Schools
Health education of the population starts at the school. The school will include in their curriculum parenting skills, nutrition education, sex education, environmental care, basic life support to the older children and general hygiene. The importance of mental and physical health and regular doctor and dentist visits will be stressed.

5.11.2 General population
The community will be educated in the need for regular screening for diabetes, hypertension, cholesterol, prostrate, breast and cervical cancer. The need for regular checkups will also be stressed. Basic life support training to as many people as possible will be an advantage.

5.12 Training
5.12.1 Nurses and doctor
Nursing training will consist of a structural program of training by the resident doctor as well as Basic Life Support training. The number of patients admitted and the number of operations done in the hospital is too little to maintain expertise and it is necessary for at least one nurse per year to get additional experience at a bigger centre. If the resident medical officer’s term of duty exceeds one year, it will be necessary for the medical officer to partake in professional development activities during his or her break.

5.12.2 Rescue team and guides
It is essential that the rescue team and the guides be certified in basic life support and first aid and the leaders in each group will be qualified up to paramedic standards.

6. LEGAL ASPECTS

6.1 Confidentiality
Patient data is confidential and may only be revealed with permission of the patient, if ordered by a court of law or to the chief of police if required in the investigation of a criminal offence.

All patient data will be kept in a secure place and only the nursing staff and resident doctor will have access to it. Patients may have access to their medical files, but may not remove the file or its contents from the hospital. Access to files must be in person and not by proxy.

6.2 Certification of mentally ill patients
It is not possible on the island to comply with the Mental Health Act of the UK. It is always better to have the patients consent for treatment but if the patients condition poses a risk to him or herself or the community then the DMS and the Chief of Police together with the nurse manager or the nurse on duty at that moment must agree that treatment is necessary without the patients consent. The three people involved must
agree in writing to the treatment. Emergency treatment by the doctor without consent is authorised on the condition that it is necessary to prevent the patient from harming him or herself or anyone else. The treatment in this case will be of short duration and reversible.
Country Briefing Notes

Background Information

The territory of Tristan da Cunha is composed of four islands, Gough, Inaccessible, Nightingale and Tristan itself. The latter three are grouped together while Gough lies some 230 nautical miles (426km) to the south. The main island, Tristan da Cunha, is the remotest inhabited island in the world. Its nearest neighbour is St. Helena 2,334 kms to the North while Cape Town is 2,778 kms to the East. Tristan is an Overseas Territory of the United Kingdom. It is under the authority of the Governor of St. Helena but powers are delegated to a resident Administrator. There is only one inhabited area. This is Edinburgh of the Seven Seas on Tristan. It is a small village of just under 300 people, the total population of Tristan da Cunha. It was named in 1867 after Prince Alfred, Duke of Edinburgh (second son of Queen Victoria) who visited in August that year as commander of the frigate “Galatea”.

Brief History

Tristan da Cunha was discovered in 1506 by the Portuguese navigator, Tristão da Cunha. It is not clear whether he ever set foot on Tristan, but the first permanent inhabitants arriving in the early 19th century found large numbers of wild goats and pigs roaming on the island, indicating that someone must have landed on the island. He nevertheless named the island after himself. In the 17th and 18th centuries the Dutch and French governments, as well as the British East India Company, considered taking possession of the islands but decided not to do so, mainly because of a lack of a suitable landing place. The islands of Nightingale, Inaccessible and Gough were originally known as Geebroken, Nachtglas and Goncalo Alvarez respectively.

The islands were later used as temporary bases by sealers and whalers usually from the USA, and it was from here that the first settlers of Tristan came. In 1811 Jonathan Lambert, who hailed from Salem, declared himself emperor (a copy of his flag can be seen in the Island museum). He disappeared in somewhat mysterious circumstances during an argument with one of his two companions. The other, Tomasso Corri (Thomas Curry), was still on the island when its next occupants arrived. This was in 1816 when a British garrison was sent from Cape Town. Corri aroused their interest with stories of buried treasure but never revealed its whereabouts. He died of drink, plied to him by the members of the garrison seeking the treasure!

The garrison had been sent by the British Government because they were worried that the island might be used for an attempt by the French to rescue Napoleon from St. Helena. It was withdrawn in 1817 but Corporal William Glass from Kelso in Scotland, with his wife and children, asked to stay, accompanied by two stonemasons, Nankivel and Burnell, from Plymouth, UK. The stonemasons did not stay long but examples of their work can still be seen on the island houses.

Others joined William Glass and his family over the next few years, notably Thomas Swain from Hastings, UK. Five bachelors on Tristan in the early 1820s asked a naval Captain if he could arrange for five wives to come from St. Helena. In 1827 the ladies arrived and the community began to increase. In 1836 a Dutchman, Peter Groen, who anglicised his name to Green, joined them. In 1837 and 1849 Thomas Rogers and Andrew Hagan, both American whalermen, also settled on Tristan.

At this time the island prospered. Although only operating a subsistence economy they were able to barter their fresh vegetables and fresh water (an official currency was not introduced on the island until the early 1950s) to passing ships for provisions required on the island. Sailing ships en route to South Africa, India, the Far East and Australia all came via Tristan to utilise the trade winds. By 1856 there were 97 inhabitants.

However the decline in whaling, the transition to steam ships and the opening of the Suez Canal, all occurring at around the same time, stalled Tristan's growth. Many inhabitants emigrated to the USA and
Cape Town and the Island was forgotten apart from occasions when the remaining islanders rescued shipwrecked sailors. It was partly in recognition of this help and the activities of missionaries that the British Government in 1875 formally declared the islands to be part of the British Empire. An annual visit by a British warship to bring supplies was instigated.

In 1892 an Italian ship the Italia was wrecked off the island. Two of the sailors, Andrea Repetto and Gaetano Laverello from Gamogli in Italy, decided to stay and then married local girls. Two sisters, Agnes and Elizabeth Smith, from Kilkenny in Ireland met and married two islanders fighting with the British army in the Boer War and afterwards returned with them to Tristan. These seven family names, Glass, Green, Hagan, Laverello, Repetto, Rogers and Swain are the only surnames now found on the island.

The islanders survived over the years through good and hard times. In 1938 Tristan was declared a dependency of St. Helena. The start of a crayfish industry in 1950 brought about the transition from subsistence to a cash economy and in the same year the British Government sent its first Administrator to Tristan. In 1961 a volcanic eruption beside the settlement of Edinburgh caused the evacuation of all the inhabitants to the UK. For two years the islanders stayed in the UK but maintained their close-knit community and a desire to return to Tristan. In 1963 it was considered safe to do so and the majority sailed home. But life in England had changed attitudes and a more affluent and informed society emerged from then onwards, far removed from the lifestyles of their ancestors.

Economy

Tristan da Cunha is almost self-supporting economically although for the last few years the Island’s budget has been in deficit. The Island’s reserves are diminishing and there are some challenges ahead if the island is to avoid insolvency and become reliant on budgetary aid from the UK. Large capital projects require overseas funding. Revenue comes from the royalties from the lobster concession, interest from a reserve fund, the sales of stamps and coins and tourism. This helps finance government activities such as the provision of free health care and education. The Government is the chief employer on the island with a work force of 143. The only other employer is the lobster factory, which provides permanent employment for 23 and casual employment for a further 110 people on fishing days, when 20 small island boats catch lobster for processing. The lobster fishery is operated under the terms of an exclusive concession granted by the Island. The current holder is Eurex Ltd from Cape Town, South Africa. One company ship fishes around the islands of Inaccessible, Nightingale and Gough, while the islanders fish around Tristan. In addition to the royalty and employment, the fishing company also provides a limited passenger (just 12 berths 8 times a year) and a cargo service to Cape Town.

The islanders rely to some extent for their food on their own stock, poultry and crops. Each family is limited to 2 cows and 7 sheep - to conserve grazing - and potatoes, the main crop, are grown at Patches, about two miles from Edinburgh. Other vegetables are also grown privately. The one Island Store (which is government owned) imports and sells a limited variety of foodstuffs, household equipment and clothing.

Government

The Administrator, appointed by the Governor of St. Helena, is the head of Government, which comprises 11 separate Departments. The Administrator takes advice from the Island Council, which is composed of 8 elected members and three appointed members. A general election is held every three years. At least one member of the Council must be a woman. At the moment there are six women members. The Councillor who receives the most votes in the election is appointed Chief Islander.
Communications

There are good phone connections routed through a British government provided service, which links in to the UK. All houses are connected. This means calls to the UK are very cheap and calls elsewhere are charged as though they were breaking out of the UK. Internet is available but can sometimes be slow. Access is via an internet café. One month’s subscription with 24 hour access is 15 pounds.

The fishing and cargo vessels bring most of the cargo and mail to the island, visiting the island nine times a year. The South African Antarctic survey ship, the "Agulhas" calls once a year. A few cruise ships also call.

Climate and Topography

The climate is temperate and oceanic with rapid weather changes, a wide temperature range (4 to 26 degrees C) and an average rainfall of 66 inches (1,676mm) per year.

The island is 38 square miles in area, and just over 25 nautical miles round. It is volcanic in origin (about one million years ago) and the central peak of the island rises to 2060m (6,760 ft.) from a plateau, known as the Base, which rises steeply from the shoreline to 600m (2,000ft.). A number of gullies, known locally as "gulches", lead down to sea level from the Base.

The area around Edinburgh and along the coast to Patches is grassland where the animals graze. At other points around the island are similar, but smaller plains which are used in a variety of ways by the islanders. Most are only accessible by sea.

Wildlife

The seas around the islands of Tristan are rich in finfish as well as lobster and octopus. Fivefinger, snoek, bluefish, stumpnose, steambras, soldier and mackerel can be found. The Yellow-nosed and Sooty Albatross nest on the Base at Tristan and on the other islands. Rockhopper penguins have established rookeries in various parts of the islands.

Fur seals, elephant seals, the rare Shepherd's Beaked whale and the Southern Right whale all visit the island. There is a rich and varied birdlife, including the Wandering Albatross, Petrels, Buntings and on Inaccessible the unique Flightless Rail.

The people of Tristan are keenly aware of the need to live in harmony with their environment. The declaration of Gough Island as a World Heritage site and of Inaccessible as a nature reserve means that 40% of Tristan da Cunha's land is under protection. Gough Island has a Wildlife Management Plan to protect its unique environmental status.

Living conditions

Life on Tristan, as in any farming/fishing community, is ruled largely by the weather. Daily life involves tending to livestock and crops in a timeless routine, mixed with seasonal activities such as shearing, digging, planting and harvesting. During the fishing season the dawn “dong” is sounded to signal a fishing day, involving the majority of the Island workforce, and pensioners too, in landing the catch and processing it at the crayfish processing factory (which, with the Government, provides one of the two major sources of employment on the Island).

There are no restaurants and, of the two pubs (one confusingly called The Café), only one is open at any one time. There are no shops other then a single Island Store, which stocks a limited range of food and other goods. All services (fuel, car repairs, plumbing, etc) are provided by the appropriate
government department. Government departments are open to the public during working hours Monday to Friday, and close for lunch daily from 12:30 to 13:30. It is common practice therefore, for employees to absent themselves from work to go to the bank, do their shopping, or even visit the Internet Café.

**Amenities/Recreation**

The Prince Philip Hall is the social centre of the island. It has the only pub (again, government run) and there is a hall used for occasional dances and indoor sport. There is an open-air swimming pool nearby. A ‘golf course’, shared with grazing cows, although rarely used, provides some relaxation. There is limited access to gym equipment. There is a small library with a limited range of books. There are many spectacular walks from the settlement and ample opportunities for photography.

Recreation facilities are very limited. There are no restrictions on alcohol, and no difficulty about associating with Islanders who lead an active social life, particularly when celebrating birthdays and family events such as engagements, marriages, births and christenings.

The other long-term expatriate residents are the Administrator (British), the crayfish factory manager and the head of public works (both from South Africa); the UNCTBTO station manager (French), factory technician (Bulgarian).

There are no restaurants. However, the availability of crayfish and excellent fresh fish make this a first class posting for those who enjoy cooking!

Other options include hill walking and fishing, either from the beach or a boat, the latter being particularly rewarding.

The increasing frequency of cruise ship visits (3/4 a year) in the southern summer months provides a welcome respite from the constraints of a very small community.

**Visiting Tristan**

Permission is required from the Island Council and the Administrator to visit the Island. This is normally granted. The purpose of the visit and length of stay are required when applying. All visitors must have:

a) A confirmed and fully paid return passage;
b) health insurance to include cover for medical evacuation to Cape Town;
c) sufficient funds to cover their visit.

A combined passport and landing fee of £15 per person is charged.

The island has neither hotel nor self-catering facilities, but accommodation can be provided in island homes at a cost of £40 per night for full board (three meals and laundry) or 20 pounds for self catering. There are no reductions for long-term stays. Camping is not permitted. Visits to those parts of the island away from the settlement plain and to Nightingale Island can only be made with an island guide (for safety reasons). There is a charge of £15 per head for guides (per day). Part of this fee goes to the Island's Conservation fund. An indemnity declaration must be completed and signed by all visitors.