

South Pacific Nurses Forum

Rarotonga , Cook Island .



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Transforming Leadership.....

While we appreciate and acknowledge the efforts of our nurse leaders old and current to move our nursing profession to this heights.

As nurse leaders through the future we indeed need to transform our leadership to have the ability to accommodate the pressures that demand our profession as frontlines in the health care service delivery points of our country.

SI fully support the Nursing Now Campaign .



Introduction .

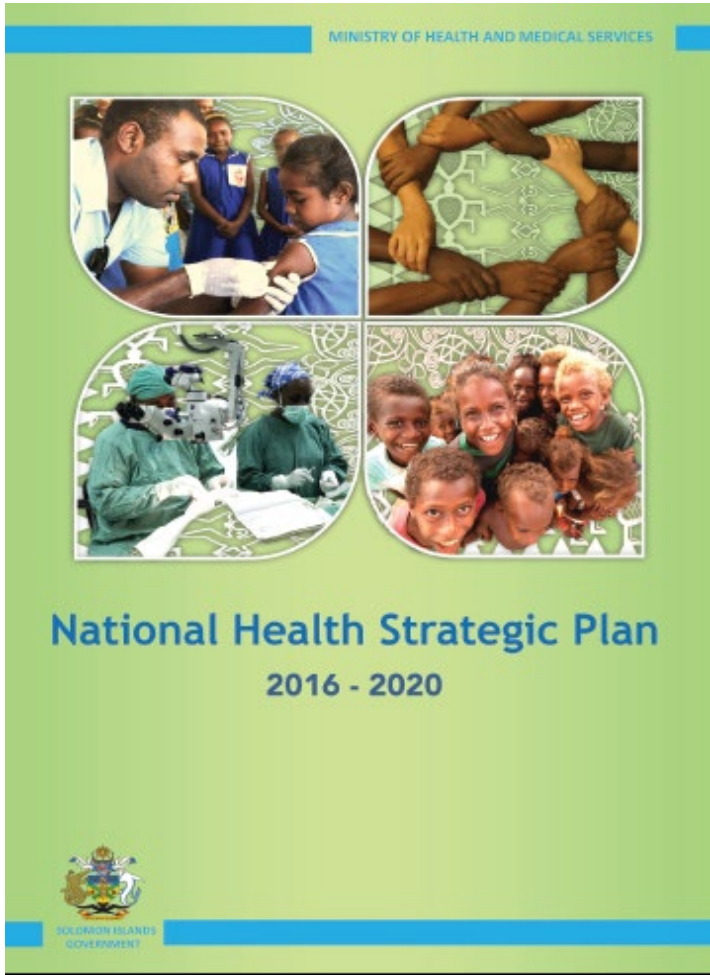
- SI Ministry of Health is progressively undergo a major reforms.
- A shift that demanded by the Country's National Development Strategies and a push to embrace Universal Health Coverage and a call for “*better care service closer to the people*”

Advocate for.....

- Socio-economical status – Both at the country and individual level.
- Quality & safety- Sustainability
- Inclusiveness – marginalized groupings & targeted health issues - NCD
- Need for cultural safety and gender sensitivity services
- Impact of climate changes -



Policy Directions. NHSP



Key Result areas

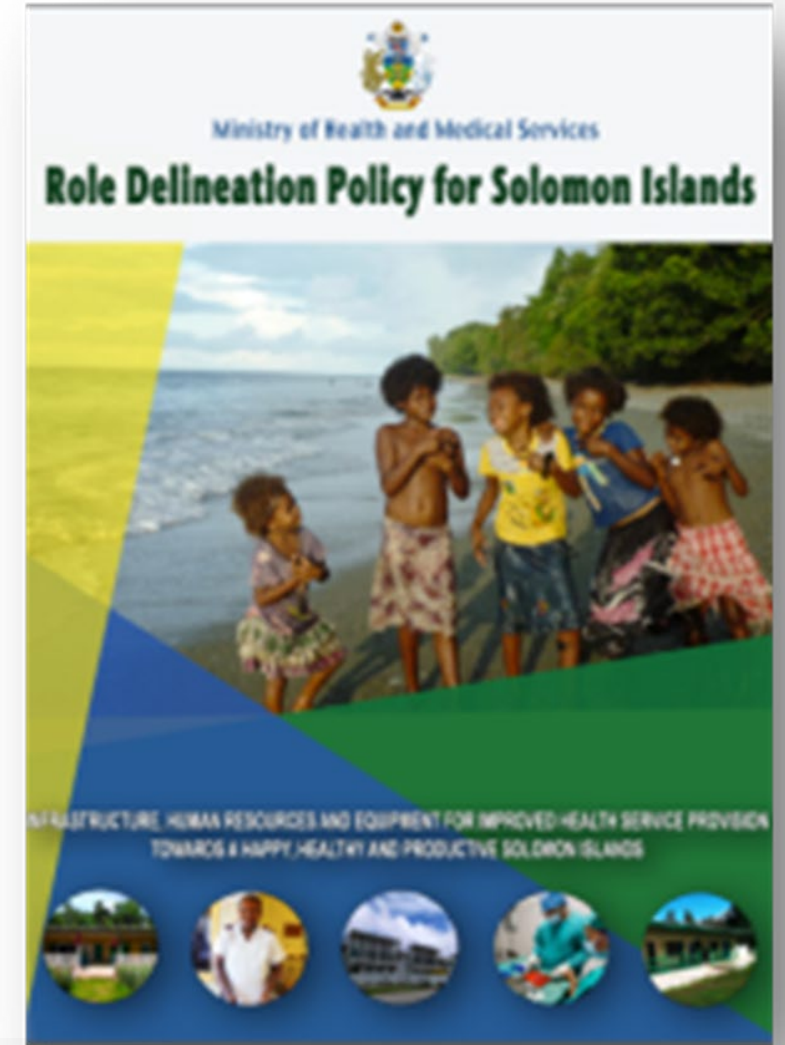
- ❖ Improve Service Coverage
- ❖ Improve Service Quality
- ❖ Lay Foundation for Future
- ❖ Building Strong Partnership



Introduction- Role Delineation Policy

The Role Delineation Policy defines the levels of services, the “packages of care”, that are to be provided at each level of health service provision in the country.

It is aimed at ensuring that appropriate services are provided closer to where people live so that people can access services without financial hardship. Aligned to this, is the need to have our staff work where services are needed.

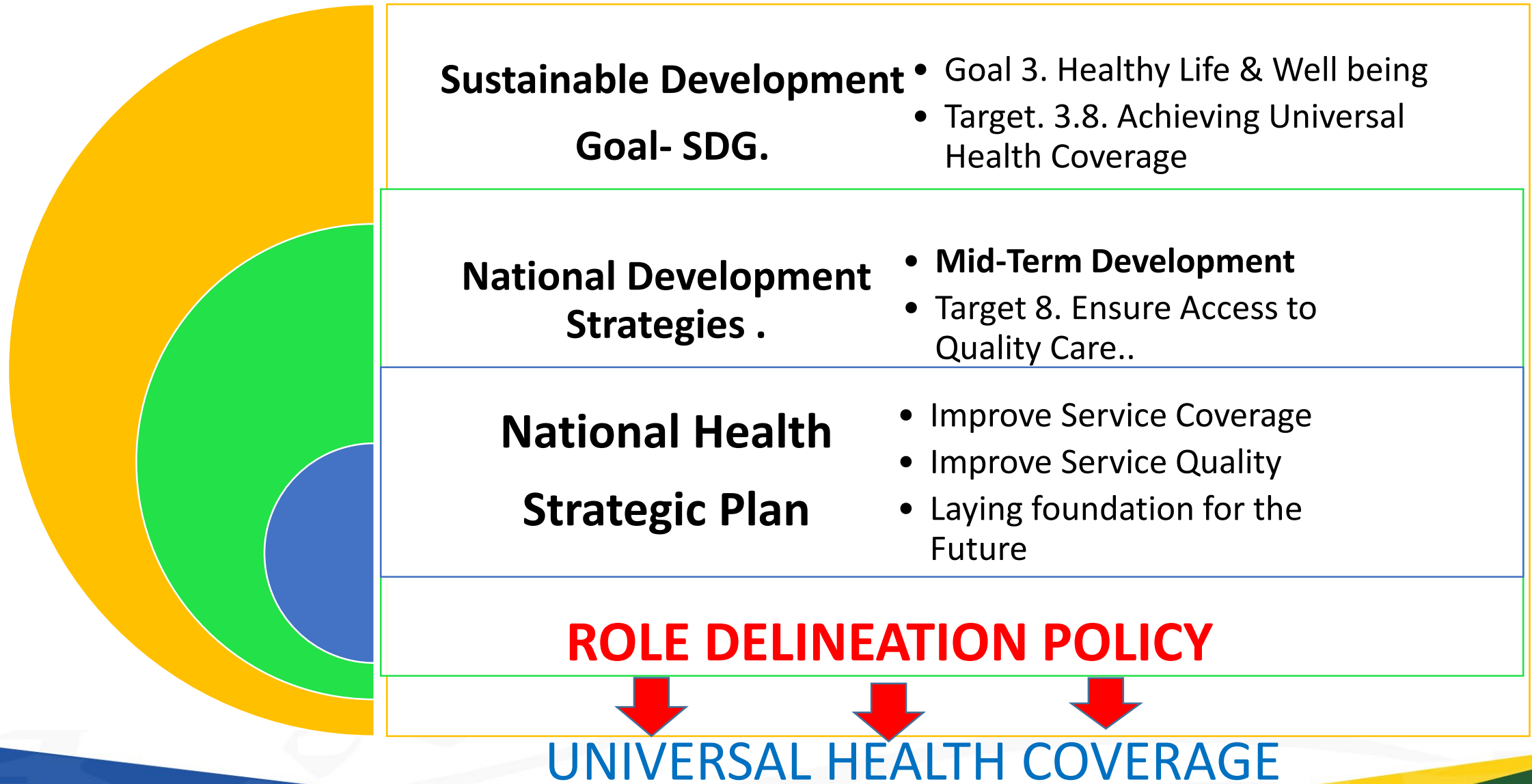


Role Delineation Policy Fundamentals:

- Defines the different levels of service in the Solomon Islands Health System
- Developed based on the principles of Primary Health Care
- Acts as a catalyst for health sector reform to strengthen quality service delivery
- Lays the service delivery foundations for future development of the Solomon Islands Health System.
- Provides guidance on types of services (service delivery packages) to be provided at each of the six (6) levels of service to inform service planning and improve service quality
- Defines the patient referral pathway



Strategic Linkages



RDP - Defines

1. Standard package of service by Health Facility level
2. Standard Human Resource needs – number & skill mix
3. Standard Infrastructure – Plan
4. Standard equipment and medical supplies



CATEGORY	RHC		
RN/NA	2+		
	UHC	AHC L1	AHC L2
RN/NA	4+	3+	4+
Medical Officer - General	1	1 *	1
Public Health Officer		1+	1+
Pharmacy Officer/Pharmacist	1		1
Laboratory technician		0+	1
Dental Therapist/ Dentist	1	0+	1
Medical imaging technician			0+
Administration Officer			1
Cook			1
Support Services staff	1	1	1+
Logistics and Transport Officer		1	1



Workforce Planning to meet Service demand in the context of Solomon Islands. Primary Health Care..

Contextual factors. (underplaying our efforts)

- Population behaviour & size varies by provinces
- Geographical and access challenges varies
- Access to next level of Health facilities- can be costly
- Skill & Specialist WF shortage –push & pulling facts
- Infrastructure size, type and state
- Health seeking behaviour – Utilization level varies



HR mapping purpose

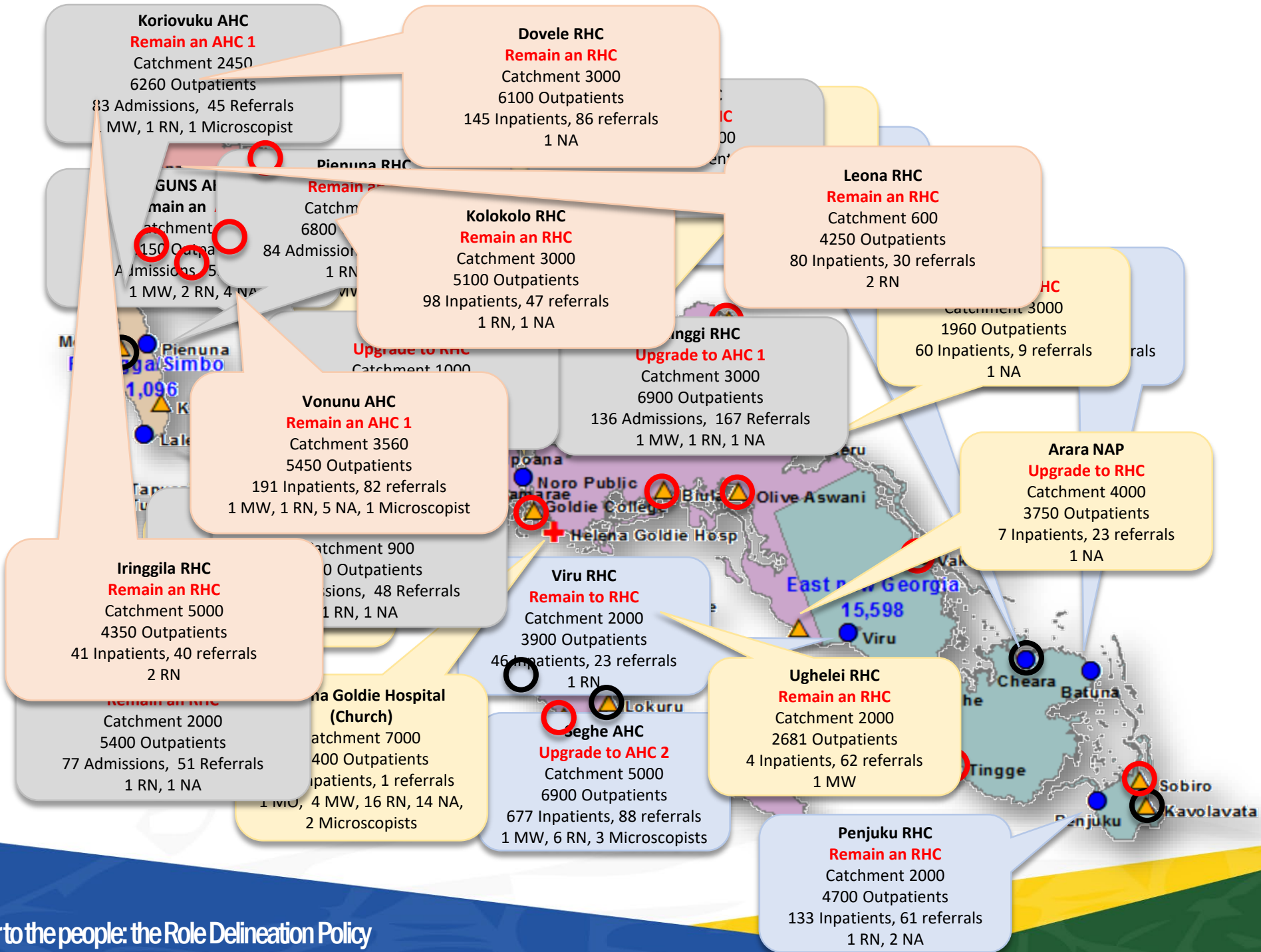
- To better understand the scale of human resource demanded by this major reform at the PHC Level.
- To map out the current health workforce headcount, distribution and other important characteristic regarding the entire PHC Workforce. Source of HR data base.
- To determine factors that can influence deployment of HR to PHC .
- inform the Ministry's decision on the HR gaps in the effective adaptation and implementation of the policy and the desired reforms within resource limitation environment.



Methodology.

- Current levels of services were identified using DHIS2 service records and Service Availability and Readiness Assessment (SARA) survey data
- Geographical reach was assessed using Geographical Information Systems (GIS Mapping)
- Staffing requirements were computed using SARA data on current numbers and RDP indicative numbers
- Provinces are being consulted for evidence on other ground realities





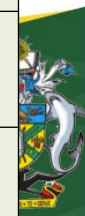
East New Georgia Health Zone

Health Facility	Type	Proposed Type	Comments
Arara	NAP	RHC	3750 Outpatient, 7 inpatient contacts in 2016. Catchment 4000. 1 NA in position.
Batuna	RHC	RHC	3915 Outpatient, 119 inpatient contacts in 2016. Catchment 3000. 1 RN in position.
Cheara	RHC	RHC	Closed due to poor condition of staff house. Catchment 2500.
Keru	RHC	RHC	1960 Outpatient, 60 inpatient contacts in 2016. Catchment 3000. 1 NA in position.
Penjuku	RHC	RHC	4700 Outpatient, 133 inpatient contacts in 2016. Catchment 2000. 1 RN, 2 NA in position.
Seghe	AHC	AHC 2	6900 Outpatient, 677 inpatient contacts in 2016. Catchment 5000. 1 MW, 6 RN, 2 NA, 3 Microscopists in position.
Sobiro	NAP	NAP	2100 Outpatient, 45 inpatient contacts in 2016. Catchment 2000. 1 NA in position.
Tingge	NAP	NAP	2345 Outpatient, 25 inpatient contacts in 2016. Catchment 2000. 1 RN in position.
Vakambo	NAP	NAP	2500 Outpatient, 16 inpatient contacts in 2016. Catchment 500. 1 NA in position.
Viru	RHC	RHC	3900 Outpatient, 46 inpatient contacts in 2016. Catchment 2000. 1 RN in position.
Kavolavata	NAP	NAP	Closed due to poor condition of staff house. Catchment 2500.



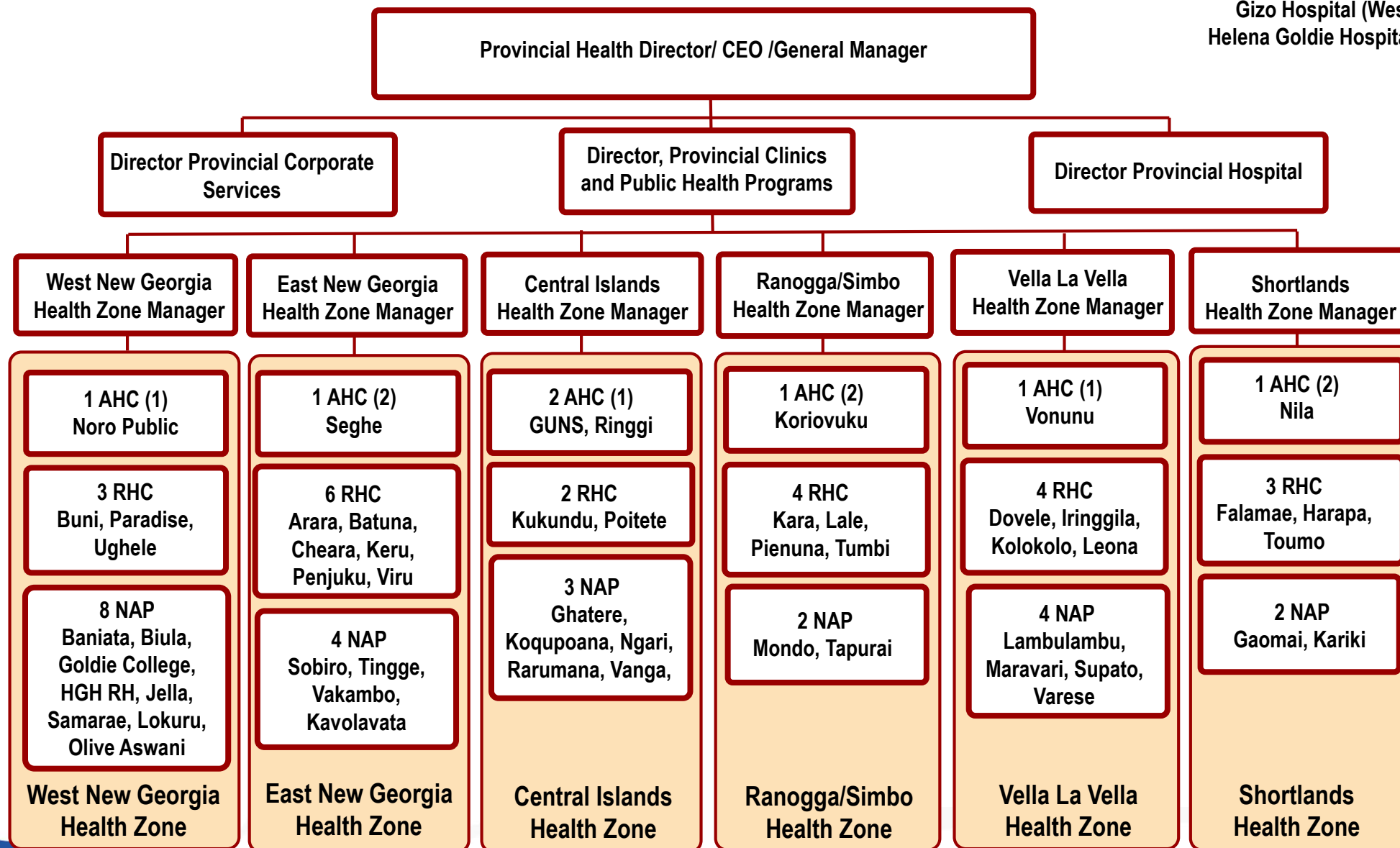
East New Georgia Health Zone

Health Facility	Type	Proposed Type	Current Staff	Indicative	Staff Need
Arara	NAP	RHC	1 NA	1RN/1NA or 2RNs	1 RN
Batuna	RHC	RHC	1 RN	1RN/1NA or 2RNs	1 RN
Cheara	RHC	RHC		1RN/1NA or 2RNs	1RN
Keru	RHC	RHC	1NA i.	1RN/1NA or 2RNs	1RN & 1MW
Penjuku	RHC	RHC	1 RN, 2 NA .	1RN/1NA or 2RNs	Meet RDP Requirement
Seghe	AHC	AHC 2	1 MW, 6 RN, 2 NA, 3 Micro/ PO	1MO 1MW 4+RN PO,LO,DO, PHO, SS	1MO DO MLO SS
Sobiro	NAP	NAP	1 NA i	Yet to be decide	
Tingge	NAP	NAP	1 RN	Yet to be Decide	
Vakambo	NAP	NAP	1 NA .	Yet to be decide	
Viru	RHC	RHC	1 RN in position.	1RN/1NA or 2RNs	1 RN & 1MW
Kavolavata	NAP	NAP	Closed	Yet to be decide.	



Western Province

Gizo Hospital (West New Georgia)
Helena Goldie Hospital (Central Islands)



Primary Health Care – HR Demand 4-5yrs

Provinces	MO	Nurses	Midwives	PhO	Tech.	Dental Officer	PH officer	Cooperate Staff
Central Provinces	1	10	5	1	1	1	2	2
Choiseul Province	2	16	9	2	2	2	2	2
Isabel Province	2	20	9	3	1	1	2	1
Guadalcanal	4	35	8	4	1	1	2	2
Makira	2	37	9	2	1	2	2	2
Malaita	2	52	8	3	3	2	3	3
Renbel	1	2	2	1	1	0	1	1
Total Demand	16	172	50	16	10	9	14	13

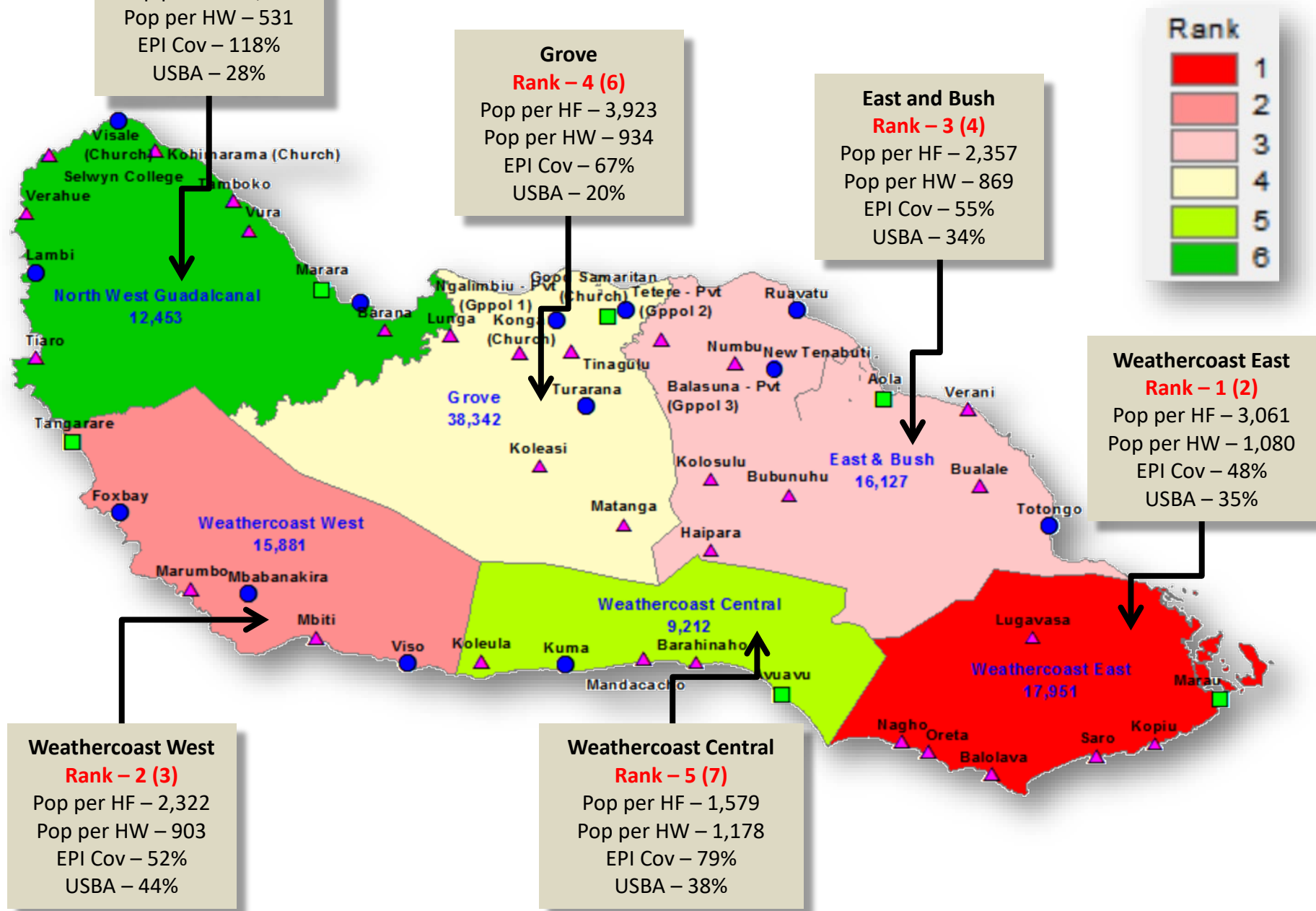


Where to Start - Priority Health Zones

- Four Proxy Indicators were factored for ranking
 - Population per health facility (only functional health facilities)
 - Population per health worker (Doctor, Nurse, Midwife, Nurse Aide)
 - Measles Immunization Coverage
 - Unsupervised Deliveries (%)
- Each health zones were ranked using the four indicators
- Each health zone was also ranked within each province



Guadalcanal



Outcomes.

- Re-organized the provincial functional structure
- Progressively doing review of Job scopes and roles
- Reviewing nursing career path
- Strengthening leadership at all levels
- Advocate for Budget shift -
- Strengthen support to the education intuitions



Opportunity for Nursing & Midwife Workforce

- The career path for Nurses has been reviewed to align with the nurses professional development & Reforms.
- Recognition of Nursing specialist both at the PHC and Hospital Services-
- Open career options -Opportunity to take on leadership roles at different levels .



Next step

- Further refine and maintain a up-to-date Human Resources for Health Database
- Use workload estimation tools to refine workforce requirements by health facility.
- Develop a plan to fill in human resource gaps
- Develop a rural retention policy to attract and retain health workers to remote locations
- Project health workforce requirements for the future and map against production of health workforce

