

Director of Clinical Services Meeting

Réunion des directeurs des services cliniques

SPC/HEALTH/DCS/Virtual Meeting

Information Paper N° 10

BUILDING A SUSTAINABLE WORKFORCE THROUGH EDUCATION AND LEADERSHIP IN PACIFIC ISLANDS COUNTRIES AND TERRITORIES

16 – 17 August 2023, Time: 12.00-3.00pm FJ Time; virtual meeting

REGIONAL CLINICAL SERVICES UPDATES

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Agenda Item N° 2.1

The Public Health Division (PHD) of the Pacific Community (SPC) plays a key role in clinical, nursing, biomedical and allied health support to Pacific Island Countries and Territories (PICTs). As secretariat to the regional governance Directors of Clinical Services (DCS) and the Pacific Heads of Nursing & Midwifery (PHONM) meetings, this provides a pathway for countries, Pacific clinical and nursing networks and organisations to suggest and make recommendations for governments and development partners to consider and act upon.

Its clinical services helpdesk function allows countries to request, and together with coordination and collaboration with relevant organisations and partners, enables effective utilisation of scarce resources. Additionally is the advocacy support for health technology that governments can utilise as a tool to complement and strengthen their health services delivery. An area of importance is utilising country data to inform decision making.

Key discussions at the 13th Pacific DCS meeting convened on 29-30th August 2022 and the 3rd PHONM meeting from 1-2 September 2022, focused on workforce issues, education and research, clinical governance, health emergencies and Pacific clinical and nursing networks. Recommendations presented at the recent Pacific Heads of Health meeting in April 2023, included workforce, education, and leadership in both clinical and nursing areas.

This briefing paper provides an update of support and activities implemented during 2023, and facilitated by the Clinical Services Program (CSP).

1. BACKGROUND

SPC is the principal scientific and technical organisation in the Pacific region, and is an international development organisation owned and governed by 27 Pacific Island Countries and Territories (PICTs). The CSP, is one of three programmes in the PHD (one of the nine divisions of SPC), recognises that stronger regional oversight is the key to better management of regional aspects of country health systems. The PHD plays a key role, through its regional governance of hosting the Directors of Clinical Services (DCS) and the Pacific Heads of Nursing & Midwifery (PHoNM) as Secretariat. Moreover there is collaboration with PICT's and partners, to explore regional opportunities and solutions for clinical services. It assists and facilitates the delivery and strengthening of clinical services in the region to ensure healthcare is affordable, appropriate to local needs and is of good quality, inclusive and accessible.

In 2016, the Pacific Regional Clinical Services & Workforce Improvement Program (PRCSWIP) formerly known as Strengthening Specialised Clinical Services in the Pacific (SSCSiP), was designed to bring together all three implementing partners, Fiji National University (FNU), Royal Australasian College of Surgeons (RACS) and SPC, for better coordination, and achievements in clinical outcomes. This phase 1 program ended in 2022. The Pacific-Clinical Services Health Workforce Improvement Programme (P-CSHWIP) is in its second phase, with a funding period of five years. This programme is funded by Australian (Department of Foreign Affairs and Trade) DFAT.

The CSP has also worked with other funding partners and agencies such as the European Union (EU), New Zealand Ministry of Foreign Affairs and Trade (NZMAT), Republic of China (ROC) Taiwan through Pacific Islands Forum Secretariat (PIFS) and the United States Agency for International Development (USAID) with its technical arm – Family Health International (FHI)360.

2. PROGRESS AND ACHIEVEMENTS

2.1 PICTs own and lead the change agenda for health services improvement in the region: SPC hosts the DCS and PHONM regional governance meetings for PICTs member countries. In August 2022, the DCS, PHONM and partners identified workforce issues, education and research, clinical governance, health emergencies and Pacific clinical and nursing networks as priority areas that needed to be addressed. SPC has supported 6 recommendations in the areas of education, capacity building of workforce, leadership, health emergencies, Infection Prevention and Control (IPC) and Pacific Clinical and Nursing Networks.

2023: Through recommendations for workforce and education, there has been support for capacity strengthening of medical, nursing and allied healthcare workers in PICTs. Training, conferences, workshops and course activities that has been supported by SPC include areas in Anaesthesia, Biomedical, Emergency

Medicine, IPC, Obstetrics, Surgery and Orthopaedics, Radiology (International Certificate in Radiology Fundamentals), Respiratory Medicine, Ultrasonography.

Deployment: In 2023, SPC responded to a request from the Ministries of Health of Tuvalu and Vanuatu and deployed nurses including SPC staff to provide clinical and nursing support.

2.2 Improved capabilities & knowledge/skill gains leading to practise change & improved effectiveness and efficiency within Pacific MoHs: CSP hosts a Regional Help Desk function to assist PICTs with their Clinical, Nursing & Biomedical requests. Requests are mainly from PICTs, Development Partners, Specialist Colleges/Associations and Institutions. The areas of training supported included Anaesthesia, Biomedical, ENT, Emergency Care, IPC, Perioperative Nursing, and Radiology.

July 2023: Total of 326 HCWs trained. 309 (95%) completed; 17 ongoing (5%). SPC and RACS continues to collaborate in Perioperative Nursing training support to Fiji, Kiribati, Marshall Islands, Micronesia (FSM), Nauru, Palau, Samoa, Solomon Islands, Tonga, Tuvalu & Vanuatu. Through the Australian College of Nursing (ACN), SPC has supported training in perioperative and critical care nursing.

Biomedical: In-country biomedical technical assistance was provided to Fiji, Nauru, Kiribati. Training for 12 PICTs is ongoing for maintenance and repair of the Hamilton ventilators that were procured in 2021. Completion of this training will allow the biomedical staff to be accredited for at least 3 years.

The USAID funded the America Rescue Plan Act (ARPA) project is focussed on COVID-19 Vaccine Response, targeted for Fiji, Kiribati, Tonga and Solomon Islands and will end in September 2023. Its four focus areas, with support to health facilities include: improve vaccine cold storage, Strengthen IPC training and practice, develop communications campaigns, and Strengthen data collection and reporting.

Nursing: SPC is supporting 8 nurses to undertake the Graduate Certificate of Perioperative Care Nursing (GCPN) at the ACN.

The ROC Taiwan funded project on 'Capacity building in specialized clinical and nursing services for healthcare workers (HCWs) in PICTs', facilitated through the Pacific Islands Forum Secretariat (PIFS) reported training of more than 125 PICTs HCWs in 10 PICTs in the areas of anaesthesia, emergency medicine, family medicine, obstetrics and gynaecology, orthopaedics, nursing, and radiology. Support was extended to provision of educational resources e.g., laptops, internet support that would assist PICTs to continue capacity building activities.

2.3: Legislations, policies, guidelines and standards enforced/implemented in PICTs. SPC continues to work in collaboration with RACS and the Harvard Global Safe Surgery Program to provide support to countries (Cook Islands, Fiji, Samoa) in their development of the NSOAP¹. Tonga is in the final stages of having their NSOAP signed off by cabinet.

NSOAP: SPC provides ongoing support to develop National Surgical Obstetric Anaesthesia Plans for Cook Islands, Palau, Tonga, Vanuatu and co-funded the NSOAP stakeholder workshop in Tonga with the Ministry of Health (MOH) and WHO.

SPC has provided support in updating nursing strategic framework, nursing act and its organisation structure for Vanuatu.

IPC: support has been provided to Cook Islands, Marshall Islands, Nauru and Tuvalu to develop their workplans. Marshall Islands and Cook Islands have also completed their guidelines and recently launched this. There is continued support with IPC training and education in AMR prevention and support with training materials and development of audit tools and standard operating procedures to support IPC focal points with IPC program implementation.

2.4: Innovation, digitalisation & technology introduced by PHD resulting in improved effectiveness and efficiency within Pacific MoHs: SPC has provided support to 3 PICTs - Kiribati, Tuvalu, Vanuatu to use the UpToDate health app. Discussions are still ongoing for Palau. There have been discussions with Cook Islands to use Therapeutic Guidelines, and Tuvalu.

2.5 Data, stats & knowledge products used to inform evidence-based planning and policy decisions: CSP in collaboration with other partners supports research and analytical work to support informed decision making by DCS and PHoNM.

The situational analyses for biomedical services delivery was undertaken in 2023, with responses from 16 PICTs. Additionally the IPC networks have updated their IPC Core functions for at least 16 PICTS

¹ National Surgical Obstetrics and Anaesthesia Plan

3. CHALLENGES

- Delayed Procurement Processes: due to the impact of the COVID-19 pandemic, there has been a shortage of specific consumables from strained global supply chains with a significant delay in shipment.
- Competing priorities for PICTs causing a delay in responses from PICTs to implement activities.
- Country requests and clinical staff not aware of processes of seeking SPC support for clinical needs

4. FUTURE DIRECTIONS

4.1 Recommendations for governments:

- PICTs to continue to strengthen support and collaboration with SPC e.g. co funding of activities strengthens ownership of commitment to PICTs.
- HCW to be made aware of processes in requesting SPC support through Directors of Health, Directors of Clinical Health Services or Medical Superintendents and Heads of Nursing.
- Political will and leadership to advocate and support clinical services and nursing priorities.
- Strengthen biomedical capacity and support – repair and maintenance.
- Nursing priorities
 - To continue support for nursing education and specialisation e.g. study time, study space
 - Establish and/or strengthen career pathways for nursing specialisation e.g. critical care, emergency nursing, perioperative nursing.
- Continue to invest in IPC through strengthening and supporting IPC leadership and programs at the regional, national and healthcare facility level.

4.2 Recommendations for development partners:

- To provide more flexibility in funding. CSP programs are demand driven by PICTs and requests can be variable and out of the context of allocated projects and activities.
- To continue to allocate budgets for Health Emergencies and Deployment Funding
- To continue to support PICTs in priority clinical nursing and IPC needs, both regionally and at the national level
- To provide ongoing support for workforce strengthening, service delivery and improving quality of clinical, nursing and IPC services.
- To strengthen biomedical capacity in country.