

STRATEGIC PLAN 2018 – 2021

Our Mission is to effectively and efficiently deliver within available resources, measurable improvements in the health outcomes of the population and to promote all efforts to achieve a healthy environment for all.

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Our Vision is to achieve longer and healthier life at all ages for the people of the island now and in the future by ensuring everyone's full participation in the planning and delivery of an integrated, effective and good quality preventive and treatment services across all our facilities and communities.

Our Mission is to effectively and efficiently deliver within available resources, measurable improvements in the health outcomes of the population and to promote all efforts to achieve a healthy environment for

all.

Our Values - We are committed to ensuring our health services are *safe, effective, caring, responsive* and *well-led.*

Our Priorities

- 1) Expand the range of and access to preventive services to tackle avoidable lifestyle and behavioural risks to health and wellbeing particularly smoking and risky excess body weight
- 2) Maintain local access to a range of health services in partnership with the community
- 3) Maintain sustainable access to overseas and tertiary healthcare services
- 4) Ensure effective clinical care and self-management of long term conditions particularly diabetes, hypertension, risky excess body weight, osteoarthritis and chronic airway diseases
- 5) Ensure our existing and emerging health workforce needs are adequately met
- *6)* Ensure our healthcare services are safe, effective, people-centred, data-driven and evidencebased

STRATEGIC PLAN 2018-2021

Welcome to the Health Directorate's Strategic plan for 2018-2021.

Our vision and mission as a directorate no matter what words we use to express this centre around achieving verifiable improvements in the health outcomes of individuals and the population as a whole. The overall health status of the population is driven by many factors from our heritage, to genetics, to the lifestyle choices we make, our behaviours, social network, culture, government policies, regulations, prevailing technology, the environment we live in, our finances and personal capabilities. The interplay between these various factors is complex and not linear.

Nevertheless, the strategic and operational arrangements to manage these various determinants, and to work with the community to use all available assets to achieve better health outcomes, and the determination to improve everyone's health status and outcomes is an important endeavour. This is our key task as a health directorate.

This document highlights our key strategic tasks and priorities over the medium term. We revisit and firm up our intentions regarding several elements of the previously published 2017-2020 strategic plan. The approach herein builds on the admirable work that has been done by all the teams in the directorate to date and supported by political leaders to improve workforce capability, expand and renovate available facilities on the island, and shift towards promoting wellness and preventing ill-health.

We work in a context where the:

- Population is ageing and consequently require more healthcare input;
- Service provision on the island is limited by available funding, low technology base, as well as the availability of required expertise;
- Cost of care is ever-increasing due to inflation locally and overseas, high disease burden and the advent of new/ expensive technologies;
- Prevalence of long-term conditions is very high ~25% of the population have been diagnosed with diabetes, ~30% with hypertension, and more than 70% of adults and 40% of children experience excess body weight with attendant risks to long term health;
- Outcomes for people experiencing long term conditions are not optimal. For example, up to 40% of patients with a diagnosis of diabetes are known to have poor blood sugar control;
- Prevalence of lifestyle and behavioural risk factors is high. For example the prevalence of smoking which is the number one avoidable cause of many long term conditions reported at:
 - 33% of all men and 17% of all women;
 - 20% of women in the reproductive age group;
 - 24% of all teenagers (15-19yrs); and
 - 52% of young men and 32% of young women between 20 and 24yrs.

Over the next 3 years, 2018-2021, our strategic intent within the health directorate as we undertake the task of facilitating continuous improvement in the health status and outcomes for the current and future generations on the island is

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Strengthen the ability to deliver effective and efficient services on the island by Identifying needs and prioritising our core response within available resources; Enhancing and maintaining core capabilities to deliver prioritised services on the island; Integrating services where necessary to achieve efficiencies, enhance effectiveness and user experience; Managing available budgets using the most cost-effective approaches to treatment and procurement of services & products including visiting specialists, laboratory & radiology services, utilities, internet access, and use of pharmaceutical supplies; Systematically identifying, designing, funding and delivering service areas where costs can be reduced by providing on-island care rather than relying on overseas referrals; Collecting, collating and analysing relevant data to aid decision-making; Agreeing and implementing clear clinical standards, protocols and guidelines within a robust clinical governance framework; Identifying workforce development needs and actively engaging in continuous professional development, education, training of our staff while working hard to attract the appropriate expatriate staff when local expertise is unavailable in the short to medium term; and Tackling inadequate management of prevalent long term conditions e.g. diabetes, hypertension, osteoarthritis, chronic airway disease and risky excess body weight. Our core services include Community Nursing and Primary Health Care Services (including Outpatients, Community Mental Health, Physiotherapy and Occupational Therapy); Dental Services; Pharmacy Services; Hospital/Acute Services (including Ambulance, Emergency Service, Inpatient Medical/Surgical/Obstetric Services and Radiology); Environmental Health Services; and Pathology Laboratory Services. There is much that can be done to provide the most effective care in an efficient manner when illness strikes, doing

this well ensures that burden and agony of ill-health fades away quickly and that scarce resource can be stretched to meet the health needs of many. We have embarked on an exercise to find ways of reducing avoidable cost across all service areas and to redeploy the efficiencies to meet several unmet needs around long-term condition management, cost of overseas treatment, and expanding preventive and health promotion services.

Design and implement an effective Prevention and Health Promotion service by

Fully engaging the community in the identification of modifiable lifestyle and behavioural risk factors such as smoking, low participation in physical activity, excess body weight, and the options to tackle these;

Identifying community infrastructure, voluntary and private sector partners, and assets within the community that can be deployed to deliver effective interventions to promote health and wellbeing;

Emphasising and prioritising opportunities to prevent ill-health and promote wellbeing among children and young people;

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Integrating preventive intervention into all clinical contacts and supporting patients to make positive and lasting changes to improve their health;

Identifying and procuring expertise both local and international to design and implement a comprehensive preventive service to tackle smoking, excess weight and others; and

Designing, funding and implementing sustainable health promoting and community-based interventions to improve long term health outcomes and avoid ill-health;

Lastly, making healthy choices the easier choices for people requires wide input, effort across sectors and working very closely with the community, opinion-formers, political leaders and the voluntary sector. The policy and regulatory environment that we foster should promote health.

Protect the population from identifiable threats and hazards to health and ensuring a healthy environment by Providing adequate environmental health risk assessment and services at ports of entry and across the community;

Ensuring preparedness for public health emergencies and delivering on the provisions of international health regulations;

Identifying opportunities to strengthen current regulations to aid in the promotion of healthier choices and promoting safer practices e.g. tobacco control, alcohol pricing, taxation instruments, abortion regulations, practitioner registration & regulation, etc.;

Collecting, collating and analysing relevant data to aid decision-making and to monitor population health status and trends; and

Providing access to tertiary and additional specialist care overseas based on clinical prioritisation and available resources when local options are not possible.

Making every contact with the health directorate towards an improvement in health outcomes will become central to our way of working.

Dr Akeem Ali Director of Health Services

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Strategic Priority 1 - Expand the range of and access to preventive services to tackle avoidable lifestyle and behavioural risks to health and wellbeing particularly smoking and risky excess body weight

What is our target?

factors to health.

Year 1	Year 2	Year 3
• Establish a Social Marketing & Health	• Offer specialist intervention to 20% of	• Offer specialist intervention to 50% of
Promotion Programme to tackle	outpatients with high BMI requiring it	outpatients with high BMI requiring it
smoking and risky excess body weight	• Offer brief intervention to 70% of out-	Increase coverage of brief interven-
Recruit 20% of smokers (180) into a	patients who are smokers	tion among outpatient clients for all
smoking cessation programme	• Recruit 50% of smokers (400) into a	indications to 90%
• Achieve 50% quit rate for >13 weeks	smoking cessation programme	Ascertain new smoking prevalence
among smoking cessation clients	• Achieve 50% quit rate for >13 weeks	rate
• Offer brief intervention to 70% of out-	among smoking cessation clients	• Achieve >60% quit rate for >13 weeks
patients with high BMI		amongst smokers

What will we do to achieve that target?

Year 1	Year 2	Year 3
 Conduct public awareness, social marketing and health promotion campaigns on priority lifestyle risks; Ensure access to brief intervention at all clinical consultations; Commence structured smoking cessation and weight management programme; Monitor prevalence of lifestyle risk factors Commence a comprehensive child and school health programme aimed at reducing prevalence of risky excess body weight; and Identify and recommend regulatory and policy interventions to reduce risk 	 tion programmes to reduce the prevalence of lifestyle and behavioural risk factors; and Establish a workforce wellbeing programme across public and private sector. 	 interventions as required; Implement policy and regulatory recommendations; Conduct evaluations and service reviews;

Year	1	Year	2	Year	• 3
•	Identify funding	•	Identify funding	•	Identify funding
•	Recruit expertise	•	Recruit expertise	•	Recruit expertise
•	Engage with the community and partners	•	Engage with the community and partners	•	Engage with the community and partners

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Strategic Priority 2 - Maintain local access to a range of health services in partnership with the community

What is our target?

Year 1	Year 2	Year 3
 Maintain access to outpatient clinics at 3x community clinics & Jamestown Achieve ≤9-days waiting times for access to non-urgent outpatient doctor's appointment Achieve annual specialist review for cardiology, ophthalmology, optometry, audiology, engineer, psy- 	 As year 1 Reduce annual cost of overseas treatment by 5% Reduce the backlog of patients awaiting joint replacement surgery by 50% Reduce the backlog of patients awaiting dentures by 50% 	 As Year 2 Achieve 100% compliance with medical equipment maintenance

What will we do to achieve that target?

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Year 1	Year 2	Year 3		
 Ensure full complement of clinicians are in post; Identify and recruit visiting specialists for prioritised clinical areas Identify and recruit medical engineer and establish a routine maintenance programme; Maintain the range of core services across pharmacy, laboratory, radiology, and community services Undertake service efficiency reviews to identify opportunities to redeploy resources for priorities. 	 As in Year 1 Establish facility to care for acute mental health clients on the island Expand local specialist orthopaedic service to include joint replacement surgeries Identify and recruit short term dental technician cover 	 As in Years 1 & 2 Explore and identify opportunities for partnerships to deliver special- ist care on the island using more visiting specialists 		

Year 1		Year	Year 2		Year 3	
•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets	
•	Identify funding	•	Identify funding	•	Identify funding	
•	Recruit expertise	•	Recruit expertise	•	Recruit expertise	

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Strategic Priority 3 - Maintain sustainable access to overseas and tertiary healthcare services

What is our target?

Year 1	Year 2	Year 3
 Reduce waiting times for urgent overseas referral to ≤3 months 	As in Year 1	As in Year 1
 Reduce average cost of overseas treatment per patient by 2% 		
 Reduce travel turnaround time and overseas stay to minimum for overseas treatment 		
 Maintain comparative good patient 		

What will we do to achieve that target?

Year 1	Year 2	Year 3
 Identify funding needs for overseas and specialist treatment offisiand; Lobby to receive adequate funding Collect and analyse data on costs, outcomes and patient experience Identify and implement opportunities to reduce avoidable cost of overseas treatment; and Negotiate favourable pricing arrangements with overseas clinicians and medical facilities. 	 Review contracting arrangements for overseas treatment to achieve further cost reduction through ne- gotiated agreements; and Explore and identify other locations for overseas referral with potential for reduced cost (in light of ex- pected air access). 	 Implement recommendations from work done in Year 2

Year 1	Year 2	Year 3
 Monitoring data including patient feedback Community dialogue to achieve ethical and acceptable prioritisa- tion policies 	 Monitoring data including patient feedback Community dialogue to achieve ethical and acceptable prioritisation policies 	 Monitoring data including patient feedback Community dialogue to achieve ethical and acceptable prioritisa- tion policies

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Strategic Priority 4 - Ensure effective clinical care and self-management of long term conditions particularly diabetes, hypertension, risky excess body weight, osteoarthritis and chronic airway diseases

What is our target?

Year 1	Year 2	Year 3
 >80% of patients living with diabetes receive annual HbA1c check >80% of patients living with diabetes receive annual retinopathy screening % of patients living with diabetes with poor control reduced from 45% to <10% Plan for integrated long term condition control programme in place 	 Implement fully the integrated long- term condition management pro- gramme >80% of patients living with hyperten- sion receive annual review Systematic lifestyle intervention made available as indicated to >40% of pa- tients living with long term conditions 	 Implement a full weight management programme Systematic lifestyle intervention made available as indicated to >60% of patients living with long term conditions

What will we do to achieve that target?

Year 1	Year 2	Year 3
 Establish a diabetes control and prevention team; Implement weekly diabetic specialist clinic service; Establish clinical standards and protocols for diabetic care; Explore the introduction of patient activation monitoring clinical tool; Identify and recruit short and longterm specialist expertise for chronic disease management as required. 	 Maintain and expand Year 1 interventions as required; Introduce Patient Activation Measures into clinical care to aid the introduction of self-management programme; Establish 'expert-patient or selfmanagement programme for longterm conditions; Train relevant practitioners and establish standards and protocols for care; Identify and recruit expertise as required to strengthen service delivery; and Systematically learn from similar healthcare systems that have successfully tackled high prevalence of noncommunicable diseases. 	 Maintain and expand Years 1 & 2 interventions as required Conduct evaluations and service re- views; Conduct needs assessment; and Renew the design of primary care services to tackle long term condi- tions.

Year	1	Year	2	Yea	· 3
•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets
•	Identify funding	•	Identify funding	•	Identify funding
•	Recruit expertise	•	Recruit expertise	•	Recruit expertise

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Strategic Priority 5 - Ensuring that our existing and emerging health workforce needs are adequately met

What is our target?

Year 1	Year 2	Year 3
 Identify and recommend key skills for long-term capability and workforce development; Establish an annual training and edu- cation support fund for prioritised skill areas for the directorate 	 100% successful completion for those in training Train at least one person for long term skill development Systematic CPD programme for all practitioners established 	 100% successful completion for those in training All staff supported and completing training return to island to take up roles 3-year plan to reduce reliance on ex-

What will we do to achieve that target?

Year 1	Year 2	Year 3
 Establish a continuous profession- al development programme (CPD) for technicians, clinicians and ad- ministrators to strengthen local expertise and reduce reliance on expatriate staff where practicable Identify local staff for long term skills and capability training Identify training facilities and facili- tators and establish funding re- quirements for long-term work- force development Support current staff undergoing degree training to complete suc- cessfully 	 As in Year 1 Develop professional network links for lone professionals working on the island for supervision and professional development; Strengthen CPD programme for all practitioners working in the directorate Identify potential partnerships with tertiary health professional training institutions across the world and 	 As in Years 1 and 2 Establish operational links with tertiary health pro- fessional training institu- tions across the world to supply specialists and trained personnel to the island
 Undertake regular competency review and update skills 		

Year	1	Year	2	Year	3
•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets	•	Create and implement opera- tional plans to meet targets
•	Identify funding	•	Identify funding	•	Identify funding
•	Recruit expertise	•	Recruit expertise	•	Recruit expertise
•	Engagement with students and school teachers	•	Engagement with students and school teachers	•	Engagement with students and school teachers

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Strategic Priority 6 - Ensure adequate protection from public health threats and that healthcare services are safe, effective, people-centred, data-driven and evidence-based

What is our target?

Year 1	Year	2	Year 3
 Annual environmental health inspections conducted Port health inspections conducted as per regulations Effective pest control service made available Healthcare associated infections maintained at zero Annual clinical audit programme established for lesson learning and reducing clinical errors & risks 	 As Year 1 Clinical Governance Framework designed and implemented New Health Infor- mation system in place 		 Complete epidemiological pro- file, operational data and popu- lation health vital statistics avail- able routinely; Continuous (clinical) improve- ment programme in place
What will we do to achieve that target?			
Year 1		Year 2	Year 3
 Maintain core environmental health team and services; Maintain food and water laboratory service; Identify and appoint a clinical governance lead; Prioritise the implementation of teaching, learning and clinical audits for all practitioners including doctors, nurses and other allied professionals; Systematic implementation of lesson-learning events include SUI, SAE, Case, and Mortality and Morbidity Reviews; Conduct incident preparedness planning and exercise such plans; Train relevant staff regarding major incident management 		 As in Year 1 Procure a new Health Informatio System 	 As in years 1 & 2 Complete population needs assessment Establish routine surveillance and data analytics

Year 1	Year 2	Year 3
 Dedicated management time Training resources Cooperation and collaboration across professional cadres External professional and expert support 	 As in Year 1 Funding for Health Information and Patient Administra- tion System 	• As in Years 1 & 2

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Health Directorate Values

We are committed to ensuring our health services are *safe*, *effective*, *caring*, *responsive* and *well-led*.

Safe

By safe, we mean that people are protected from abuse and avoidable harm.

Effective

By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

Caring

By caring, we mean that staff involve and treat people with compassion, kindness, dignity and respect.

Responsive

By responsive, we mean that services are organised so that they meet people's needs.

Well-led

By well-led, we mean that the leadership, management and governance of the organisation assures the delivery of high-quality person-centred care, supports learning and innovation, and promotes an open and fair culture.