BELIZE

HRH Coaching Session

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Background on Health System of Belize

<u>The National Health System for</u> <u>HRH Planning in BELIZE</u>

- To ensure Universal Access and population based services as a result of health sector reform.
- The Administrative authority of health services were decentralized giving Four (4) health regions that cover the entire country:
 - the Northern Region which encompasses the northern districts of Corozal and Orange Walk,
 - the Southern Region which covers Toledo and Stann Creek,
 - the Western Region which covers the Cayo District and
 - the Central Region, which covers the Belize District.

- Hospital based care in these four regions includes:
 - inpatient and outpatient care, including
 - accident and emergency, paediatrics, obstetrics and gynaecology, internal medicine and surgical care.
- A network of clinics, permanently staffed health centres and unmanned health posts is available to address the primary health care needs of the population.
 - These are supplemented by mobile health services, community nursing aides, community health workers and traditional birth attendants working throughout the rural communities of the country.

National System



- Chief Executive Officer
- Director of Health Services
- Directors: Planning and Policy; Health; Epidemiology
 - Of which HRH is housed in the Planning and Policy unit



Challenges in HRH Planning

BELIZE

Educational Environment

- To ensure health personnel are available for every district and for the various programs of primary care, ther needs to be trainings institutions within the Country, however,
 - There are no medical facility where physicians are trained.
 - However various categories of nurses are trained at Belize's national university, the University of Belize.
 - Graduation rates appear to be abysmally low.

Improvements towards increasing health professionals to provide health services

- Belize approved the CSME freedom of movement, the movement of health professionals to CSME can be traced since they must apply for a CARICOM Skills Certificate.
- Belize relies on international healthcare volunteers to shore up health workforce shortages most especially in the rural areas. Notable among the healthcare volunteers in Belize are the Cuban Medical Brigades and the Nigerian Technical Aids Corps.
- Belize has a Bilateral Agreement with Cuba to provide scholarships of Belizeans to be trained in needed health careers.
 - However, there is no standard to accredit these health professionals whether from Cuba or Nigeria or Belizean students trained in other countries...this does affect the quality of care provided.

<u>Role of planning to move towards</u> <u>Universal health coverage</u>

- Every one has the right to healthcare. The plans need to level the disparities between culture, sexes and economic status to allow all to the same quality health care. Launching of NHI to cover more regions of the country.
 - However, the challenge is ensuring that the program becomes sustainable to be able to be maintained for the entire country over years to come.
- Community Health Workers can be regarded as the base of Belize's primary health care system
 - They are community volunteers at different educational backgrounds; also the small stipend may not be sufficient to allow for a fulltime practice.
- No healthcare without health workforce Plans for retention and recruitment – increase in salaries and benefits of nurses and doctors
- There is need of Database of HR personnel functioning to improve planning

<u>Critical areas that require planning in their</u> <u>Country</u>

- Belize's health system is challenged by the increasing burden of chronic noncommunicable diseases and lifestyle ailments.
- Diabetes, Homicides & Injury purposely inflicted, Ischaemic Heart disease, HIV/AIDS and Cerebrovascular disease are leading causes of deaths.
- International Diabetes Foundation reveal that in the age cohort 20 to 79 years, there are some 45,000 Belizeans living with diabetes.
- cost of treating violence and related injuries. On a per capita basis, Belize has one of the highest homicide rates on the world and most of the victims are as a result of gunshots.

Prevention programs is now the emphasis of the newly launched NCD Strategic plans 2014-2024.

These efforts increases the need for more health professionals eg. Dietitians, psychiatrists, lifestyle family counsellors etc...

• There is a need for improvement in country-level coordination of health training among the many stakeholders in the health field.

Poor coordination in training manifests itself in the following; Mismatching skills and assigned jobs an available post required by the country's health care need.

- Furthermore; there is a need to strengthen the management of recruitment and deployment of staff. This process should be objective, transparent and appropriate.
- The above causes serious disruptions in service delivery at facilities serving the most vulnerable populations. The PAHO/WHO Toronto Call to Action (2006-2015) that addresses five (5) identified HRH Challenges in order to achieve the Millennium Development Goals (MDG) and to provide access to quality health care for the Belizean Population.
- The areas identified include: Policies and Plans; The Right People in the Right Places; Migration; healthy workplace; Inter-institutional cooperation.

- There is also a serious shortage of certain specialties such as (physiotherapist, biomedical technicians, X-Ray technician, and ultrasound -no-graphers etc.) that severely restrict the quality and quantity of services being provided, especially in the Rural areas of Belize.
- In other areas, county to country cooperation has served to fill in the gaps, such as the Cuban Brigades and Nigerian Brigades that serve to provide coverage in remote areas.
- However, this dependency without proper long term planning of needs is a weakness in the system which requires closer attention. This situation also highlights the improper use of resources as some physicians are located in areas where their skills cannot be maximized or utilized given the limited infrastructural/equipment support and also barriers in language and different cultures.

- . The Ministry of Health is now trying to implement the electronic data base system with the BHIS to facilitate the monitoring of HR at the local level.
- The establishment of a National Steering Committee with active subcommittees seeks to garner national support for the development of a feasible HRH Strategic Plan that addresses the five areas identified in the Toronto Call for Action, but as well meets the needs and demands of the Ministry of Health.

Summary of other Challenges

- Strategic Plan Implementation in ALL areas of Belize (Urban and Rural)
- Dormancy of steering committee
 - Challenges to involve all personnel
- Revision of BHIS HRH Module
 - Improve to be comprehensive tool
- Revision of HRH Operational plan
- Recruitment of Doctors and creating posts for young trained returning doctors
- Retain Nurses and Needed Health Professionals
- No Budget assigned to HRH alone
- HRH Unit is only one person –Focal Point
- Focal point turn over
- HRH planning key stakeholders includes MOF and MPS, decisions are not solely MOH
- Regulations of Public Service and Unions can be a deterrent to HRH: standardizing salaries and benefits, movement of right people into the right places...

Thank You