



SAINT LUCIA COUNTRY CONSULTATION ON THE UNIVERSAL HEALTH COVERAGE STRATEGY

Country Overview

Increased demands are being placed on the Saint Lucian Health System as the epidemiological profile is now dominated by the chronic non-communicable diseases. The leading causes of death for 2012, included diabetes, heart disease and cancers, however, accidents and injuries featured prominently due to the fact that it affected mostly the productive population. Coupled with the change in the epidemiological profile is also the shift in the demographic profile, with fertility down, increased life expectancy with implications for a shrinking productive base and larger dependent population group. The health system is also faced with the challenge of limited resources in an environment where donor funding has declined significantly.

The Government of Saint Lucia continues to spend significant amount of resources in the health sector and as it currently stands, health is the second largest line item within the government budget but it has now become necessary to examine whether the investment in health is being used effectively and efficiently to get the required outcomes. The Ministry of Health is now engaged in Health Sector Strengthening Programme of which, the Universal Health Coverage is a component of.

Saint Lucia's Universal Health Coverage journey started in 2002 when the Government of Saint Lucia appointed a task force to consider the feasibility of introducing an Unemployment Insurance, a Pension Plan for Farmers and Fishermen and a National Health Insurance. Some of the key achievements under this initiative included the acquisition of a Health Information System which was to support the UHC initiative, the island wide screening of the population for Diabetes where over 30,000 people were screened, and the initiation of the UHC Phase I Pilot Project which provided free medication for persons suffering with Diabetes and with the co-morbidity of Hypertension. To date, the Saint Lucian population is still being provided with free medication for Diabetes and Hypertension.

The UHC initiative which began in 2002 was focused mainly on addressing the resource needs for secondary and tertiary services including pharmaceuticals, however, this focus changed when the initiative was placed under the auspices of the Ministry of Health. The financial, economic, demographic, social and epidemiological changes both internationally and locally has led the policymakers to rethink the UHC in terms of health care that is comprehensive, population based, sustainable and one that is focused on high impact interventions.

The Ministry of Health is now in the process of defining its Essential Package of Health Services (EPHS) which is determined by the country's Burden of Disease, morbidity and mortality profile of St Lucia, the social determinants of health and the country's financing capacity. The development of the Essential Package of Health Services will also be done within the framework of the broader health system framework where reforms in service delivery, leadership and public policy will be implemented to support the UHC Initiative. Some of the key achievements to date include:



- The draft burden of disease analysis report
- The Health Situation and Response Analysis
- Detailing of the Essential Package of Health Services commenced with Diabetes and with research under way for Hypertension, Communicable Diseases and Cancer
- Clinical Protocols are also being defined
- Human Resource Planning and Development Policy
- First Draft of Governance Model under review.

Introduction

The Pan American Health Organization was mandated to prepare a **Strategy for Universal Health Coverage (CE154/12)** which will be presented for consideration during the 2014 Directing Council. Within this draft document contained four key strategic line items:

1. Expanding equitable access to comprehensive, quality, people- and community centered health services:
2. Strengthening stewardship and governance
3. Increasing and improving financing, promoting equity and efficiency, and eliminating out of pocket expenditure
4. Strengthening intersectoral action to address the social determinants of health.

These were regarded as some of the key areas which would help countries in the transformation of their health systems to one that provides universal coverage to its population.

The stakeholder consultation which was undertaken by PAHO on 27 June 2014 at the Coco Palm Hotel was necessary as input from the member countries in the crafting of this strategy was deemed of utmost importance as they will ultimately be responsible for implementing their universal health coverage initiative. The objectives of the consultation were as follows:

1. Present and discuss the draft document;
2. Identify St Lucia's position with regards to the four strategic lines of action outlined in the strategy;
3. Document the experience/status of Saint Lucia concerning UHC; and
4. Prepare a report on the national perspective on UHC for inclusion in the PAHO Strategy.

Methodology

The Consultation was convened by the Chief Health Planner within the Ministry of Health, Saint Lucia who gave the opening remarks and brief overview of the Universal Health Coverage and the history of the initiative in Saint Lucia.



Dr. Margaret Hazelwood presented the Strategy for Universal Health Coverage under the four main strategic line items and also explained the objectives of the consultation. Participants were apprised as to how the structure of the consultation, where there would be four groups, with each one focusing on one of the Strategic line items.

There was a presentation from Miss Lauren James of the Ministry of Health on the progress of the Universal Health Coverage Initiative in Saint Lucia.

Participants were then placed in their respective groups and provided with motivation questions to guide the discussion. A moderator and rapporteur were chosen in each group and then the discussions ensued in the group. The groups were expected to make a presentation on the discussions held.

A plenary session was held after the group discussions to present the results to everyone for general discussion.

Results

1. Overall, is the proposed strategy comprehensive? Does it include the critical line items to be considered to advance toward UHC in the region?
 - It does not spell out the role of “hospitals” in the primary health care strategy.
 - Incorporated persons responsibility for their health
 - Absence of the establishment of clinical standards/guidelines
 - Need for the development of a monitoring and evaluation strategy
 - Does not address the Governance structures need to provide the regulatory framework (monitoring, accountability)
 - Very philosophical and does not seem to address the enabling environment of the Caribbean
 - Not sufficient linkage on the economic significance and impact

Two groups felt that the proposed strategy was comprehensive.

2. What aspects are not addressed or should be included:
 - The specific roles of hospitals
 - Establishment of clinical care standards/guidelines
 - Establishment of a Monitoring and Evaluation Strategy
 - The role of traditional and cultural medicine/medical practices should be clarified and strengthened.



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3. What are the main elements for a road map for moving towards universal health coverage in the country?
- A financing mechanism
 - Efficient Governance/Oversight of providers for accountability/Regulation
 - Capacity Building
 - Efficient National Health Management Information System to facilitate monitoring and evaluation of key indicators
 - Designated Champion – leader to lead the process
 - Health system capacity to provide the services that the country is promising the population
 - Inclusion of Stakeholders in the process.
 - Legislative, policy frameworks to be in place
 - Change Management Workshop and Training
 - Public Education and Sensitization – Improved communications strategy
 - Project management methodology – timelines, targets and milestones, deliverables

Strategic Line Item 1 - Expanding equitable access to comprehensive, quality, people- and community centered health services.

a) *In order to advance toward universal health coverage, what importance do you give to the following aspects?*

Components	Importance	Notes
The definition of a comprehensive, universal package of legally guaranteed services	High	
The development of health care models that focus on the needs of the people and communities	High	<ul style="list-style-type: none"> • Disability access at facilities. • Acknowledging also the increased prevalence that accompanies older age. • HR Sharing with levels of care



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Increasing resolution capacity of the primary level of care through integrated health service networks	High	Hospitals and Community, Emergency medical Services
Increase investment in the 1st level of care to quickly address unmet health needs	Very Important	Investment should be strategic and should not lead to a decrease in other levels of care.
Increase employment options at the first level of care, with attractive labour conditions and incentives	High	Incentives should not go counter to outcome that you seek to achieve in the strategy
Improve availability and rational use of medicines and other health technologies (ancillary medical supplies/devices)	Extremely Important	The use of the formulary to protect clients
Implement programs for the empowerment of people, including promotion, prevention, etc that enable people to know more about their health situation their rights and obligations	Highest Importance	

b) *What need to be done in your country to improve equitable access to quality services particularly for groups in situations of vulnerability?*

Very Young	Excellent policies and programs already in place
Elderly	Need to review, revise and adopt national policies for older persons and persons with disabilities. In the package of services, home visits to clients.
LGBT	Develop a LGBT Policy



c) *What has been the national experience and lessons learned on improving access to care?*

- Affordability
- Sustainability
- Education and Promotion to address issues of discrimination

d) *How can PAHO support your country in this process?*

- Assessment for Strategic Investment
- Improving Integration of levels of care
- Review and adoption national policies for persons with disabilities and older persons

Strategic Line Item 2 - Strengthening stewardship and governance

a) *In the transformation of the health system towards UHC, what importance do you give to the following topics?*

Component	Importance	Notes
Establish formal mechanisms for participation, dialogue and accountability	Very Important	must be carefully managed, with clear criteria for participation and indication of how the feedback will be used
Policies and plans with defined national targets and goals that can be monitored and evaluated	Extremely important	<ul style="list-style-type: none"> • However clinical care standards/guidelines need to be included as it is critical to monitor and evaluate the impact of following these standards/guidelines on the delivery of care and measurement of targets. Clinical care guidelines/standards are the foundation of quality health care. • QualityManagement system/mechanism to monitor the compliance of these standards



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Define and implement a set of interventions to strengthen governance and stewardship capacity of the health sector, guaranteeing the Essential public health functions, with emphasis on management and leadership of the health authority	Highly Important	
Legal and regulatory capacity	Highly Important	
Strengthen national information systems to monitor and evaluate progress toward universal health coverage. Develop a research agenda and improve knowledge management	Highly Important	

b) *In your opinion, what are the key aspects in your country that should be strengthened in order to improve governance and leadership in the health sector?*

- Governance Structures
- Established clinical care standards/guidelines
- Monitoring and Evaluation Strategy

➤ *How would you address them?*

- ▶ Via statutorization of the hospitals as well as a formal governance structure for PHC. PHC should be strengthened (clinical care standards, M & E, QMS) as any deficiency in the quality of health outcomes in PHC impacts the burden placed on secondary care.
- ▶ Formal linkage/mechanism (via Standard operating procedures) between PHC and Secondary Care via efficient referrals/ seamless integration between the two.
- ▶ Institutionalize / formalize arrangements between staff from PHC and Secondary care (cross training of staff across PHC and Secondary care)

c) *What have been the experiences and lessons learnt regarding strengthening governance and leadership in the health sector?*

- ▶ Lack of efficient governance structures, lack of policies and procedures, lack of clinical standards/ guidelines – correct systems/mechanisms are not in place and therefore it is difficult to hold persons accountable
- ▶ Lack of key targets and baselines, lack of M & E strategy, lack of strategic direction of the Ministry



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d) *How can PAHO technical cooperation provide support in this area?*

- ▶ Clinical Care Standards/Guidelines Development
- ▶ SOPs/ Policy and Procedure Development
- ▶ Quality Management Training- Capacity Building in all these areas
- ▶ Support towards International Accreditation
- ▶ Work plan guided by country's needs
- ▶ Provision of Toolkits in various health care areas
- ▶ Improved responsiveness to country's needs

Strategic Line Item 3 - Increasing and improving financing, promoting equity and efficiency, and eliminating out of pocket expenditure

a) *Based on the information in the draft Strategy Document (page 5), indicate what elements should be taken into consideration to address the following issues?*

Increase public financing for health	<i>Increasing the National Insurance Contribution which will be used for the UHC Taxation on Tourism (issue of sustainability of this measure) Sin Taxes Private/Public Partnership in financing</i>
Eliminate direct payment at the point of service and replace it with a pre-paid integrated pool based on the principle of solidarity, that allows cross-subsidies from healthy to sick, from rich to poor, and from young to the elderly	<i>National Insurance Corporation coordination the finances in terms of collection and remitting to Government or entity responsible. Establishment of a Separate Entity to administer the UHC</i>
Improve the efficiency in financing and the organization of the health system	<i>Implementation of the Health Management Information System to track expenditure and health indicators Legislation to mandate the use of National Health Information System by private sector</i>



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b) What are the challenges in your country for the application of the proposed interventions in this strategic line (increase public financing and eliminate direct payment at the point of service)? How would you address it?

- Political Will
- The nature of the St Lucian Politics where government change every five years, sometimes there is no continuity.
- The current fiscal environment makes it difficult to add an additional tax on the public
- The process of changing legislation
- The Fragmentation in the health system
- The hoarding of data
- The collection and storage of data is a challenge

c) What are the experiences and lessons learnt in the implementation of interventions to improve efficiency in the health system in your country?

- There are no standards in place in the health system – clinical guidelines and protocols should be instituted
- Duplication of services because of a lack of information system across the health system
- Very poor documentation of information and lack of appreciation for information – the health information system should help alleviate this situation
- Community based Programmes should assist in improving efficiency

d) Can PAHO technical cooperation provide support in this area?

- Assistance in developing clinical guidelines and protocols which could be adopted throughout the health system
- Assistance in developing health indicators for the HMIS
- Assistance in the costing of health services



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Strategic Line Item 4 - Strengthening intersectoral action to address the social determinants of health.

a) What importance do you give to the following topics?

<p>Leadership role of the health system to involve other sectors in addressing the social determinants of health. Establish intersectoral coordination mechanisms</p>	<ul style="list-style-type: none"> - The leadership role is extremely important since sustainable solutions to can only be found with the cooperation of both government and civil society. - The processes established needs to have buy-in of both the government and civil society, it should be inclusive and the teams accountable. This proposed mechanism should have Cabinet sanction.
<p>Generate evidence to support inter-institutional actions, in particular assessing the health related implications of policies, programs, and development projects</p>	<ul style="list-style-type: none"> - The formulation of policy based on data and research is important however, there needs to be advocacy by the Ministry of Health and Civil Society to influence the national agenda particularly the harmonization of policy and law. - This would be enhanced by strengthening the mechanisms for management and sharing of data.
<p>Promote universal health coverage in social protection programs. Strengthen the participation of the health sector in defining the health-related components of social programs, including programs for conditional cash transfers, as appropriate</p>	<ul style="list-style-type: none"> - It is important to strengthen the social marketing to ensure that persons know where the services exist. There is a need for synergies and sustained integrated planning of social programs with the MOH and civil society organizations playing a key part in defining health related components. - While conditional cash transfers are important, addressing exit strategies of households from these programs should be a clearly articulated.
<p>Strengthen the links between health and community, empower people and communities by training leaders, young people and other community member on the social determinants of health so that they can play an active role in health promotion and protection.</p>	<p>This is very important because it builds leadership and fosters responsibility</p>



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b) *What are the barriers to strengthen the capacity of the national health authority to influence legislation, regulations and interventions beyond the health sector that address the social determinants of health? How would you address it?*

- Ineffective representation by the various sectors on the national health authority.
- Understanding the process and capacity constraints on the drafting and passage of legislation.

Solution

- Strengthen the capacity of the national authority to understand the legislative process and participate (presenting authority with draft legislation).

- ▶ Cultural norms and practices and the lack of political will to change.

Solution

- ▶ More education programs including early childhood.
- ▶ Work with persons who hold these cultural beliefs to understand their beliefs to validate and influence their attitudes.

c) *What have been the experiences and lessons learnt in working with other sectors to address the social determinants of health?*

- ▶ There is a silo mentality and lack of buy-in by other agencies as to their importance in determining health outcomes.
- ▶ The omission of civil society or the lack of significance attached to the perspective of civil society in policy formulation and project execution.
- ▶ Lack of decentralized services particularly hard on rural communities.
- ▶ The lack of opportunities for redress by the users of the health system hinders the ability to address the social determinants.

d) *How can PAHO technical cooperation provide support in this area?*

Training:

- Data collection, gathering
- Further support for MIS
- Developing indicators for Monitoring & Evaluation.



Conclusion

The consultation brought into focus many of the issues which may hamper the country's ability to achieve universal health coverage. Chief among those concerns was the financing mechanism in light of the current fiscal situation, which brings to the fore the issue of sustainability. The consultation highlighted that people are committed to the Universal Health Coverage Initiative because of the obvious benefits; however, the major concern is the financing mechanism in light of the current fiscal situation and the implications for the country.