## Pacific Heads of Health Réunion des directeurs de la santé du Pacifique

# Package of Essential Health Services – Tonga

04 April 2019





## **Presentation Outline**

• Universal Health Coverage (UHC)

- Tonga MOH organisation outcome (2015)

- Sustainable Development Goals (SDGs)
- Package of Essential Health Services (PEHS) – pathway to achieving UHC by 2025.



## Universal Health Coverage

 Ensuring that all people can use the promotive, preventive, curative, rehabilitative, and palliative health services they need, of sufficient quality to be effective, while also ensuring the use of these services does not expose the user to financial hardship.









## Package of Essential Health Services (PEHS)

- Specifies the range of health care services for all Tongans (UHC);
- Identifies facilities, drugs & equipment required to provide these services;
- Describes how services can be accessed e.g. remote island communities, – patient transfers, use of social funds, visiting specialists;
- Defines health system changes required to achieve UHC in Tonga.
- Provides a snapshot of current state of services, guiding service development.
  - When agreed standard of services are provided at each facility, then next incremental benchmarks will be set, allowing a planned, sustainable, equitable and ongoing improvement in the approach to health service delivery in Tonga.

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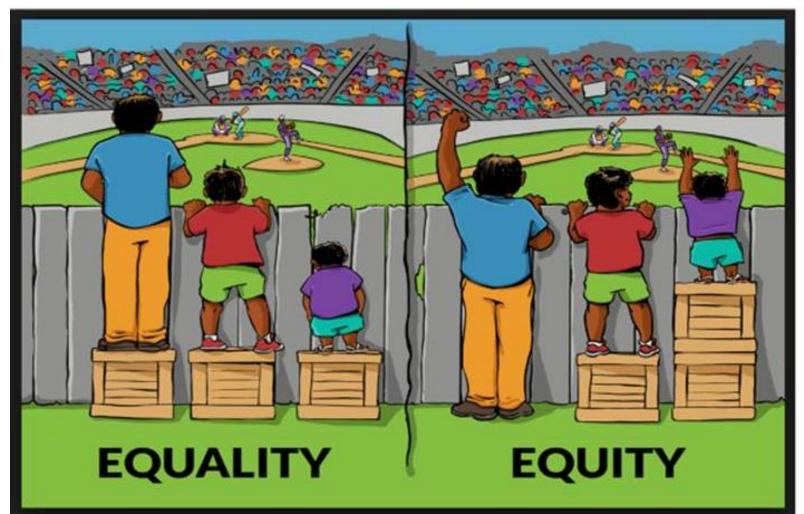
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## UHC and PEHS in Tonga 'What' and 'How'

- Criteria for inclusion, i.e. how we decide which health care services will be in the package?
  - Burden of disease
  - Cost-effectiveness of the services i.e. value for money
  - Supply-side readiness to deliver the services?
  - Ability to ensure quality of care?
  - Country capacity to pay for PEHS?
- Equity: people not missing out on care e.g. because of who they are, where they live, indirect costs associated with seeking treatment and care etc.



## Improving equity is part of Tonga's commitment to UHC in the National Health Strategic Plan, 2015-20. What does it mean?







## 12 + 1 domains of essential health services

- General clinical services
- Maternal, newborn health and family planning
- Child health and immunisation
- Mental health
- Rehabilitation services
- Communicable diseases
- SGBV / Violence against women and children
- NCD prevention and management
- ENT and Eye Care
- Diagnostic (laboratory and imaging) services
- Oral health services
- Environmental health
- Health promotion

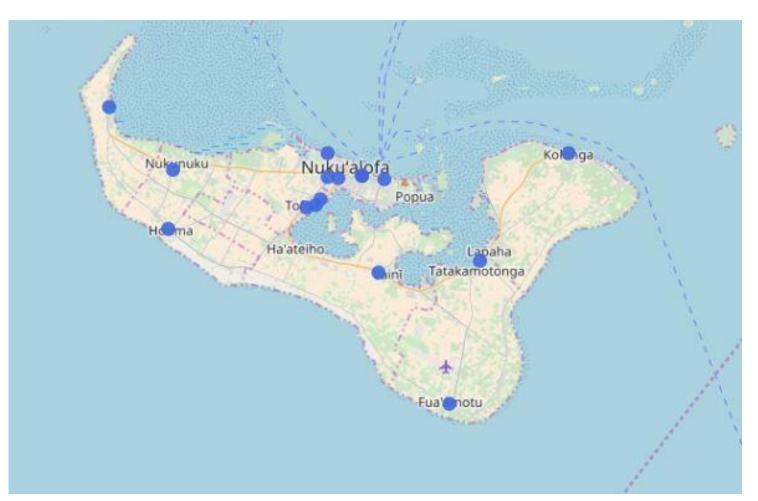


|    | Description of Essential General Clinical Services  | NC | R-NC | СНС | R-CHC- | E CHC/ super C | Niua E&R CHC | Public H | E. C. Hosp | H C. Hosp | V C. Hosp | V.N R Hosp |
|----|---|----|------|-----|--------|----------------|--------------|----------|------------|-----------|-----------|------------|
| 1. | <b>Out-patient clinics:</b> assessment, diagnosis, treatment and rehabilitation of common medical conditions and <b>referral of patients as required<sup>1</sup> is available</b> |    |      |     |        |                |              |          |            |           |           |            |
| 2. | Assessment and basic <b>management of accident and emergency</b> appropriate to level of care and referral as required  |    |      |     |        |                |              |          |            |           |           |            |
| 3. | Short-term admission of patients with acute conditions requiring observation/treatment or awaiting transfer   |    |      |     |        |                |              |          |            |           |           |            |
| 4. | IV (intravenous) antibiotic treatment and fluid replacement is available  |    |      |     |        |                |              |          |            |           |           |            |
| 5. | Suturing and dressing of wounds is available  |    |      |     |        |                |              |          |            |           |           |            |
| 6. | Selection and organisation of patients for visiting medical and dental clinics is undertaken  |    |      |     |        |                |              |          |            |           |           |            |
| 7. | <b>Pharmacy dispensing and counselling</b> in line with <b>Essential</b> Medicine policies/guidelines occurs  |    |      |     |        |                |              |          |            |           |           |            |

- An **empty box** means that the intervention is not available at that level of facility and that it is not a priority under the PEHS to make it available. (For example, there are obviously no plans to perform surgery at a Level 3 facility).
- **Red:** signifies that the intervention is not currently provided at this facility level, however it is a priority to provide this within the next 7 years as part of UHC.
- Yellow/amber: signifies that these interventions are currently provided in part, but more work needs to be done to ensure consistent availability of the service.
- Green: signifies that these interventions are <u>consistently</u> provided at that facility



Expansion of services offered to improve productivity of larger, strategically located CHCs and NCs on Tongatapu (and ease demand on Vaiola Hospital OPD )

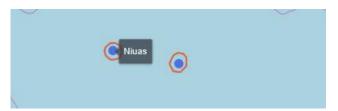


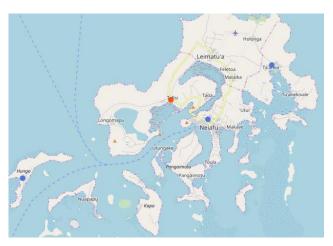
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### Enhancing access to services in remote communities





#### Remote / extended CHCs in the Niuas

- Likamonu
- Tu'akifalelei

#### Vavau

• Remote NC: Hunga



#### **Ha'apai** Remote NC: Kauva, Uiha Remote CHC: Nomuka, Ha'afeva





# Aspects of the health system that needs to be strengthened

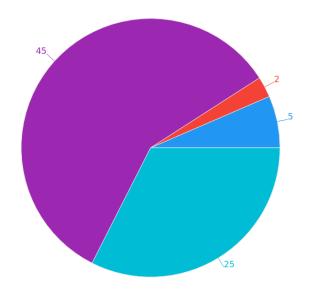
- Leadership and governance
- Legislation, regulation, policies and guidelines
- Health workforce pre-service and in-service training
- Essential medicines and technologies
- Infrastructure
- Telemedicine
- Systems to support the model of care in remote locations



## Monitoring progress of implementation

- Routine data collections
  - Case load
  - Burden of disease
- Tupaia
  - Service readiness and availability



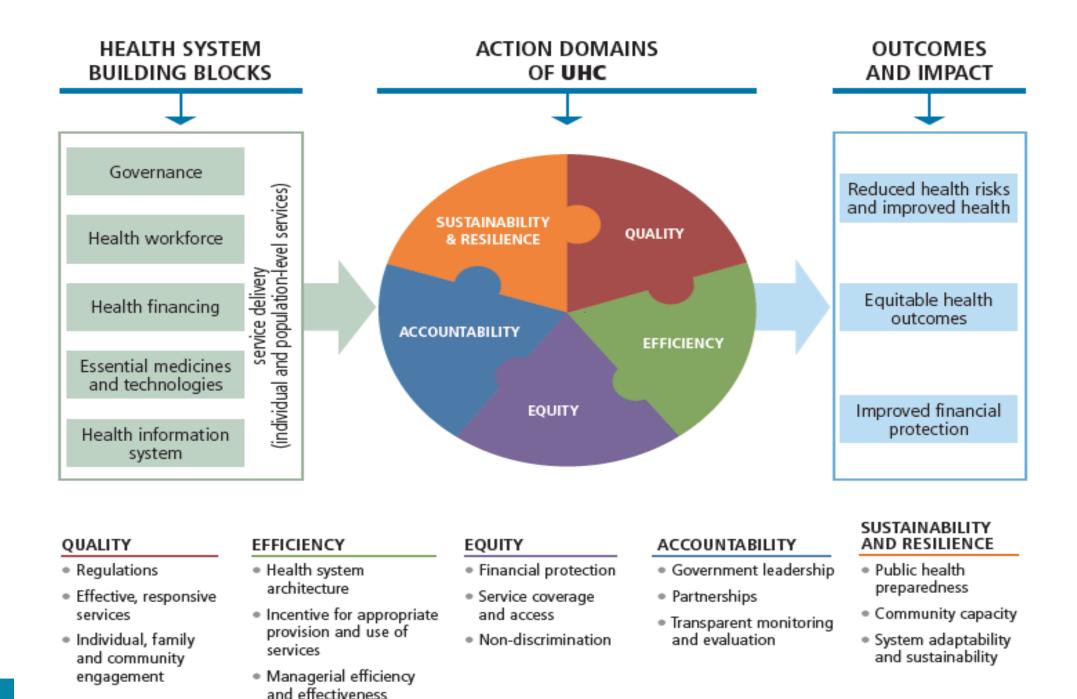


🗖 doctors 📕 midwives 📕 nurses 📒 others

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# PHC / UHC RECOMMENDATIONS

## **RECOMMENDATIONS TO GOVERNMENTS**

Governments may consider:

- Strengthening leadership and political alliances for primary health care:
  - To include other sector leaders into primary care modernization plans and work cross-sectoral, for example to include the educational sector and work closely with health promoting schools to empower the next generation for being more responsible for their own health.
  - To ensure that primary health care is embedded in all other government policies including the respective financial resource allocations (health in all policies).
  - To continue raising awareness and increasing the level of health literacy of institutional and political partners, as well as individuals and communities.
- Strengthening health workforce for primary health care:
  - To implement a retention policy with incentives for the right staff to be at the right place with the right skill mix
  - To reorient health workforce curricula towards a more comprehensive approach, balancing clinical services and skills with preventive approaches and practices, taking into account the cultural and social determinants of the Pacific
  - To develop a continuing medical education program for all primary health care professionals to acquire and maintain comprehensive skills and that includes a systematic peer review system
- Strengthening the capability to plan and monitor for changes in the way primary health care is delivered
  - To invest into a health information system on primary health care level

## **RECOMMENDATIONS FOR DEVELOPMENT PARTNERS**

Development partners may consider:

- to continue supporting support Pacific island countries in their efforts to modernize primary health care by advocating for health in all policies.
- to continue advocating, together with their health sector counterparts, for more investments into primary health care and its workforce development.
- to support developing a program of collaboration in primary health care between Pacific island countries, allowing for example regular exchange of experiences in the implementation of the various ongoing modernization plans and concepts.
- to encourage and fund more research and evaluation work in primary health care in the Pacific that can support effective advocacy and leadership efforts.