CONSULTATION ON HOSPITAL PLANNING AND MANAGEMENT IN THE PACIFIC

20–22 June 2018
Nadi, Fiji
MEETING REPORT

CONSULTATION ON HOSPITAL PLANNING AND MANAGEMENT IN THE PACIFIC

Convened by:

WORLD HEALTH ORGANIZATION REGIONAL OFFICE FOR THE WESTERN PACIFIC

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NOTE

The views expressed in this report are those of the participants of the Consultation on Hospital Planning and Management in the Pacific and do not necessarily reflect the policies of the conveners.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for Member States in the Region and for those who participated in the Consultation on Hospital Planning and Management in the Pacific in Nadi, Fiji from 20 to 22 June 2018.
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### KEYWORDS:

Hospital administration / Health systems plans / Economics, Hospital / Pacific Island
SUMMARY

Hospitals are a key – and often the most visible – component of health services. They provide complex and acute medical care, help train health professionals and account for a large share of health-care costs. Being highly visible, they play an important role in shaping public perceptions about the quality of health care. Despite their centrality, hospitals continue to face challenges related to their planning and management at the system and facility level.

The Consultation on Hospital Planning and Management in the Pacific was held in Nadi, Fiji from 20 to 22 June 2018. It was attended by 25 representatives from 13 Pacific island countries and areas (Cook Islands, Fiji, French Polynesia, Kiribati, Marshall Islands, Federated States of Micronesia, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu), including senior representatives from the ministries of health and national-level hospitals. The Consultation focused on the current situation and role of hospitals within the health system to advance universal health coverage. Participants identified key issues and challenges related to hospital planning and management, including inadequate weak governance and regulation, high operating costs, insufficient monitoring, and low quality and safety of care.

Participants discussed national and subregional actions related to the health system and facility levels that need to be taken to improve hospital planning and management. They also identified key areas where health sector capacity needs to be strengthened to implement the identified policy actions. Further, they reviewed and provided valuable feedback on the draft regional action framework developed for consideration by the Regional Committee for the Western Pacific at its session in October 2018.
1. INTRODUCTION

1.1 Meeting organization

Service delivery is the most visible face of the health system for individuals, families and communities. Within service delivery systems, hospitals play an important role, often serving as the first point of access for acute specialist care and shaping public perception of the performance of countries’ health systems. In the Western Pacific Region, hospitals account for a significant share of health spending, consuming 30–50% of health expenditure. Although hospitals are a vital part of the service delivery system and a core dimension of universal health coverage (UHC), countries face various challenges related to hospital planning and management, both at the system level and at the facility level. These include inadequate governance and regulation, high operating costs, insufficient monitoring, and low quality and safety of care.

In Member States across the Western Pacific Region, improvement of hospital performance has been high on the reform agenda. Initiatives have been undertaken at both the system and facility level. WHO has undertaken policy analysis, convened policy dialogue, provided technical advice on hospital planning and management, and built the capacities of hospital managers through training.

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The consultation focused on the current situation and role of hospitals within the health system context. It identified key issues and challenges facing the hospital sector and facilitated a dialogue between government representatives, development partners and experts on priority actions that need to be undertaken both at the system and facility level to improve the performance of hospitals. It also discussed the health sector capacities needed to drive changes in hospital performance. The consultation also reviewed the draft regional action framework on hospital planning and management prepared for consideration by the Regional Committee for the Western Pacific at its session in October 2018. The detailed programme of activities is available in Annex 2.

1.2 Meeting objectives

The objectives of the consultation were:

1) to review approaches and initiatives in countries to strengthen hospital planning and management within UHC;
2) to reach a common understanding on next steps in hospital planning and management at regional, national and local levels; and
3) to review a draft technical document on hospital planning and management for consideration by the WHO Regional Committee for the Western Pacific at its session in October 2018.
2. PROCEEDINGS

2.1 Opening session

The meeting commenced with Dr Vivian Lin, Director, Division of Health Systems, delivering opening remarks on behalf of Dr Shin Young-soo, WHO Regional Director for the Western Pacific (see Annex 3). Dr Lin emphasized the role and importance of hospitals in advancing UHC. She also noted that countries in the Region are increasingly concerned and committed to improving the way hospitals function. She highlighted the need to integrate hospitals with the rest of the health services with an aim to improve their accountability, quality, efficiency, equity, and sustainability and resilience within the overall health service delivery system.

Dr Lin then proposed office bearers for the meeting: Dr Josephine Aumea Herman as Chair, Mr Karlos Moresi as Vice Chair and Dr Gregory Jilini as Rapporteur. Ms Anjana Bhushan, Coordinator, Integrated Service Delivery, presented the agenda and objectives of the consultation and encouraged participants to actively engage in the discussions. She also outlined the expected outputs of the consultation, which included: country-specific discussions on the role of hospitals within the UHC and Sustainable Development Goals (SDG) agendas; review of the draft technical document on improving hospital planning and management; and consensus on the way forward for Member States and WHO.

2.2 Plenary session 1: Setting the scene

Dr Vivian Lin gave a presentation on the importance of improving hospital planning and management to advance UHC. She highlighted the vital role of hospitals within service delivery systems and emphasized the need for a whole-of-system approach that takes into consideration the financing and governance mechanisms to achieve equitable access to quality health services. Within health systems, hospitals are often “the elephant in the room” – the challenges they face are so complex that they are often overlooked. The magnitude and nature of these challenges may differ depending on the country and health system context. However, there is commonality in issues at the system and facility level.

At the system level, these include inequities in access, fragmented funding, increasing cost of care, lack of people-centredness, and weak governance, planning and accountability. At the facility level, they include weak management capacity and competencies, poor organization and internal coordination, poor quality and patient safety, and significant information gaps.

She acknowledged the diversity in country health systems and recommended that tailored actions need to be taken at the system and facility level to improve hospital planning and management. As hospitals can be considered a microcosm of the health system, policy actions at the facility level need to be guided by the five attributes of a high-performing health system: quality, efficiency, accountability, equity, and sustainability and resilience. At the system level, policy levers and choices to improve hospital performance can be guided by the GIRFF framework – goal, institutional arrangements, regulation, financing and feedback. She also emphasized that the health sector needs to strengthen its capacity to lead the needed changes at both the system and facility level. Dr Lin expressed her hope that the consultation would broaden understanding and policy dialogue on hospital issues and make recommendations and suggestions to improve the relevance and usefulness of the draft regional action framework.
2.3 Plenary session 2: Hospitals in the Pacific – a situational analysis

Three countries (Federated States of Micronesia, Solomon Islands and Tonga) made presentations on the current situation of hospitals within their health system contexts. These were followed by facilitated discussions.

In his overview of the health system and issues of hospital management in the Federated States of Micronesia, Dr Livingston Taulung identified three major challenges: 1) lack of direct supervision by the federal department of health systems at the state level; 2) a health care coalition being charged with developing national health policies; and 3) states’ weak financial capability to run health services. To address these issues, at the system level, the country has developed national standards of practice and a quality improvement tool, and strengthened the capacity of the health workforce. At the facility level, it has conducted a safe hospital index assessment and target population service assessment.

Dr Stephen Aumanu outlined the hospital legal and policy framework, hospital financing, hospital reporting and staffing arrangements in the Solomon Islands system. The issues and challenges faced at the system level include varying provincial human resource management systems, and the ineffectiveness of current legislation to ensure good administrative arrangements for hospitals. At the facility level, the issues include absence of clinical guidance and governance systems in the hospital, performance management and human resource management. In response, system-level actions include implementation of the role delineation policy and governance structure. Facility-level reforms related to hospital workforce planning. Planned initiatives include legal reform and capacity-building for the health workforce.

In his presentation, Dr Lisiate Ulufonua outlined three major issues related to hospitals in Tonga: 1) limited access to specialized care; 2) weak capacity to absorb foreign-trained medical graduates from China and Cuba; and 3) inability to maintain health facilities’ infrastructure. Key facility-level actions in the pipeline include: establishing clinical practice standards and guidelines, developing essential health service packages, conducting staff training, and developing monitoring and evaluation systems of patient and staff experience. Implementing these priorities requires strengthening the hospital governance framework, collecting robust data, and developing regulations for the health workforce.

The ensuing discussions focused on common challenges across the Pacific countries, such as: the need for laws to clearly delineate the roles of health services, including hospitals; improving quality and safety; and subregional action to tackle the challenge of overseas medical referrals. The discussion highlighted the need to regulate hospital operations, strengthen clinical governance and reduce hospital-acquired infections, and improving referral and responding to the increasing demand for specialized tertiary care.

2.4 Group work 1: Issues and challenges in hospitals

Following the plenary discussions, participants worked in groups to identify and analyse key issues at system and facility levels, using the GIRFF framework and the five core UHC attributes. The group work also provided an opportunity for countries to share their experiences and good practices relevant to hospital planning and management.

The system-level challenges identified for health system planning included inefficient budget planning, lack of concrete laws and regulations on hospitals, and weak capacity of the health
workforce. Participants stressed the need for a sustainable long-term strategy for health system regulation. Health workforce shortages and the lack of specialists result in lower access to needed health services for patients and the burden of overseas referrals for governments.

At the facility level, countries raised concerns regarding poor clinical governance, poor quality and safety of patient care, weak resilience of facilities in the face of climate change and extreme weather events (a particular concern for Pacific island countries), and limited data to guide service improvement. Polynesian countries also face the challenges of a weak work ethic and culture and inappropriate skills of the health workforce.

2.5 Panel 1: Improving hospital planning and management at the facility level

Panellists discussed actions to improve hospital planning and management at the facility level, based on the five core attributes of a high-performing health system. The discussion on accountability focused on evaluation of service performance, transparency of hospital governance and public reporting. For efficiency, better information management and operational management, including adequate resource allocation, were identified as important. Regarding quality and safety of care, panellists stressed improving quality assurance, patient reporting, and engaging with patients, their families and communities. Discussions on equity focused on reducing service access barriers, for example through outreach programmes provided by referral hospitals to subdivisional hospitals. The panel also agreed that sustainability and resilience of hospitals can be improved by infrastructure management based on shared decision-making, institutional learning and renewal, and risk management based on a robust information system.

2.6 Group work 2: Improving hospital planning and management at the facility level

During the group work discussions, participants reviewed the section of the draft regional action framework that outlines suggested facility-level policies and actions, based on the five core UHC attributes. The groups provided useful feedback on the suggested actions. In terms of accountability, participants agreed on the importance of clinical governance and management. They stressed the need for clear delineation of responsibilities within the facility and the role of a governance body such as a hospital board. To improve efficiency, fiscal efficiency and resource allocation were discussed. As resources are not always stable in small hospitals, resource-sharing across departments and bulk purchasing were suggested as options.

The shortage of skilled health providers and remoteness of locations are key barriers, resulting in inequities in access. In addition, sustainability and resilience are key challenges in the context of the geographic conditions of the small island states in the Pacific. Participants highlighted the need to adequately prepare for and respond to climate change and disease outbreaks. Other issues raised included the need to continuously improve quality, balance competing priorities, and bring key stakeholders together to enable hospitals to contribute to health system strengthening and advance UHC. As the role of hospitals is not limited to delivering clinical services but extends to educating and training health professionals. Undertaking clinical research, planning and training of human resources were also strongly stressed.
2.7 Panel 2: Improving hospital planning and management at the system level

Panellists discussed actions to improve hospital planning and management at the system level, based on the GIRFF framework. The topics covered included strategic planning for hospital service delivery, the relationship between hospitals and the state, regulatory approaches to develop a culture for quality, sustainable financing and budget planning for hospitals, and information and feedback mechanisms for improving hospital performance.

The panel agreed that UHC is an important goal for the health system, and hospital administration and management need to be strengthened to serve communities better. Key to this are better human resource planning in collaboration with the social service sector, better links hospitals to primary health care, stronger capacity in finance and budget planning. A stable and predictable health-care budget plan is an essential component of a strong health service delivery system. The health sector leaders need to view feedback not only from patients and families, but also on performance indicators and administrative information from health records. It is important to put in place the full cycle from collection to analysis, to use feedback in driving improvements in hospital performance in the accountability, quality, equity, efficiency and resilience in hospital.

2.8 Group work 3: Improving hospital planning and management at the system level

During the group work discussions, participants reviewed the section of the draft regional action framework that suggests system-level policies and actions, based on the GIRFF framework. The groups agreed that strengthening institutional arrangements, regulation, financing and feedback were critical to improving hospital planning and management. There was consensus that the national health strategic plan should periodically clarify the roles and responsibilities of hospitals in contributing to UHC.

The groups emphasized collaboration with other countries in the Pacific and beyond, as well as between institutions and countries, particularly to optimize the use of scarce resources. The groups also identified the need to involve clinicians in health budget planning to duly reflect their clinical practice needs. Good monitoring and evaluation are a key component of ensuring the quality of services. Establishing a clear reporting system based on a minimum set of mandatory requirements is a useful regulatory tool. However, as part of feedback, monitoring including that related to the quality and safety of services is weak in most countries. Participants identified the need to improve reporting on hospital performance and requested technical support to develop an appropriate set of indicators.

2.9 Panel 3: Improving capacity to drive hospital reform

Panellists discussed actions to strengthen the capacity of the health sector to drive hospital reform, including capacity for health sector planning, information management and human resource management. In terms of health sector planning, setting priorities in a collective and transparent manner helps create ownership to achieve the objectives. Panellists emphasized that communities are among the key relevant stakeholders to be involved in deciding the priorities for health. They also stressed the importance of strengthening information capacity, particularly on data literacy and the collection, analysis and use of information in developing policies, to ensure continuity of funding for health, and for comparison and benchmarking across systems and programmes.
2.10 Group work 4: Improving capacity to drive hospital reform

Following the panel discussion, countries worked in groups to review the section of the draft regional action framework that suggests system- and facility-level actions that can be taken to strengthen the capacity of the health sector in countries to drive improvements in hospital performance. Overall, participants agreed with the suggested actions and related competencies. They emphasized the need to build capacity at the system level on policy and situational analysis, including related to the economic and financial sectors; sharing of information and learning from other countries and systems; long-term planning with budget forecasting; and implementing and monitoring evidence-informed actions. Participants agreed that, at the facility level, capacities need to increase: in leadership and management skills, including in financial management and accounting; in quality and patient safety, human resource management and information; and in building relationships with partners as well as patients, families and communities.

2.11 Group work 5: The way forward

Participants reviewed the section of the draft regional action framework that provides guiding principles to Member States based on a typology of countries: advanced economies, transitional economies, highly decentralized countries and small island developing states. It also outlines ways forward for Member States and WHO. In general, participants agreed with the recommendations. They suggested that some items related to equity, efficiency, quality of care and information management listed under other country groups also applied to small island developing states. Participants recognized that health service planning should cover tertiary care and improving equity in access. The need for a fair and transparent priority-setting process was stressed. Participants recognized the potential for improved efficiency through resource-sharing in skills and supplies, across facilities and health systems. Participants requested WHO support to develop hospital performance indicators.

3. CONCLUSIONS AND RECOMMENDATIONS

3.1 Conclusions

The consultation provided a forum for participants to discuss issues and share experiences as well as provide useful suggestions and feedback on the draft regional action framework on improving hospital planning and management, in preparation for discussions at the WHO Regional Committee session.

Participants affirmed the utility of the draft regional action framework in guiding Member States on how to improve hospital planning and management, as part of overall efforts to advance UHC, through more equitable access to people-centred health services of adequate quality without undue financial hardship.

Participants recognized the following:

1) Hospitals are a vital part of the service delivery system and a core dimension of UHC. Participants identified key issues and challenges faced by Member States and priority actions that can be taken at the system and facility levels.
2) Member States are making efforts to improve hospital performance through better planning and management.

3) However, they face various challenges, both at the system level and at the facility level.

4) Various promising approaches and initiatives are being implemented in various Member States, which provide useful lessons for others.

Participants discussed the actions suggested in the sections of the draft regional action framework, including:

1) Improving hospital planning and management though actions at the health system level
2) Improving hospital planning and management though actions at the facility level
3) Strengthening the capacity to drive hospital reforms.

Participants provided valuable perspectives on the applicability, relevance and appropriateness of suggested actions. The draft action framework can be improved by incorporating the comments and suggestions that participants made during the consultation, including:

1) Emphasize the role of hospitals within the service delivery system, including links with primary care.
2) Emphasize the importance of population health needs-based service planning, explicitly including palliative care, rehabilitation and mental health, given the noncommunicable disease epidemic and dominance of public sector provision in the Pacific.
3) Emphasize the importance of strategic national planning that balances specialists and generalists, along with regional collaboration on specific needs with regard to the health workforce.
4) Include actions to develop national quality systems through stronger clinical governance and external quality assurance, including medico-legal risk and litigation.
5) Include ways to use government budgets to actively monitor and improve hospital performance in terms of efficiency, quality and equity.
6) Emphasize the role of technology in overcoming geographical access barriers and e-health solutions in managing patients.
7) Strengthen the actions related to resilience, including having a good plan for preparedness, response and recovery in the face of environmental and financial shocks.
8) Emphasize the teaching and research roles of hospitals more.

3.2 Recommendations

3.2.1 Recommendation for Member States

The regional action framework is intended as a comprehensive but flexible framework to guide Member States in improving hospital planning and management. Member States will use the draft framework to prioritize and implement actions. Countries are not starting from scratch, but will build on the significant progress already achieved.

Member States are encouraged to do the following:

1) Collect and share examples of good practice at system and facility level to improve hospital planning and management, for inclusion in the draft regional action framework.
2) Take actions to improve hospital planning and management within national UHC road maps as the pathway to Healthy Islands, based on principles of primary health care and equitable, integrated, people-centred services.
3) Take opportunities to engage in peer learning, regional cooperation and sharing of expertise on this agenda, using existing mechanisms (Heads of Health, clinical directors) where possible.

3.2.2 Recommendations for WHO

The WHO Regional Office for the Western Pacific is committed to supporting Member States in improving hospital planning and management. WHO is requested to do the following:

1) Revise the draft regional action framework in line with the comments and suggestions received during the consultation.

2) Facilitate the collection and dissemination of regional experiences and implementation of good practices on improving hospital planning and management, particularly leadership and management.

3) Undertake policy analysis, convene policy dialogue, help build capacity (e.g. in data and equity analysis), provide technical advice, and help identify resources for improving hospital planning and management (including clinical governance and strategic hospital plan development).

4) Support the development of a set of hospital performance indicators and pilot in selected countries.
ANNEXES

Annex 1. List of participants, temporary advisers, observers and secretariat

CONSULTATION ON HOSPITAL PLANNING AND MANAGEMENT IN THE PACIFIC

WPR/DHS/ISD/(03)/2018/IB/2

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Annex 2. Timetable

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<thead>
<tr>
<th>Time</th>
<th>Day 1, Wednesday, 20 June</th>
<th>Day 2, Thursday, 21 June</th>
<th>Day 3, Friday, 22 June</th>
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<tbody>
<tr>
<td>08:30 – 09:00</td>
<td>Registration</td>
<td>08:00 – 08:20 Secretariat meeting</td>
<td>08:00 – 08:20 Secretariat meeting</td>
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<tr>
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<td></td>
<td>08:20 – 08:35 • Morning prayer • Summary of Day 1</td>
<td>08:20 – 08:35 • Morning prayer • Summary of Day 1</td>
</tr>
<tr>
<td>09:00 – 09:55</td>
<td>Opening session • Morning prayer • Welcome • Opening remarks: Host country • Opening remarks: Dr Vivian Lin, DHS, on behalf of Regional Director, WPRO • Introductions • Nomination of Chair, Vice-Chair, Rapporteur • Objectives, agenda, meeting process</td>
<td>08:35 – 09:20 Panel 1. How to improve hospital planning and management • At the facility level</td>
<td>08:35 – 09:20 Panel 3. How to improve capacity to drive hospital reform • At the system level • At the facility level</td>
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<tr>
<td>09:55 – 10:20</td>
<td>Plenary 1. Setting the scene Improving hospital planning and management to advance UHC: Dr Vivian Lin</td>
<td>09:20 – 11:20 Group work 2. Improving hospital planning and management at the facility level • Facilitated review of the technical document • Comments on the policy actions</td>
<td>09:20 – 11:20 Group work 4. Improving capacity to drive hospital reform • Facilitated review of action framework • Comments on suggested policies and actions</td>
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<tr>
<td>10:20 – 10:45</td>
<td>Group photo and mobility break</td>
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<td>10:45 – 12:00</td>
<td>Plenary 2. Hospitals in the Pacific: a situational analysis • Country presentations • Micronesia, Federated States of • Solomon Islands • Tonga</td>
<td>11:20 – 12:00 Panel 2. How to improve hospital planning and management • At the system level</td>
<td>11:20 – 12:00 Plenary session 5. Group work report back</td>
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<tr>
<td>12:00 – 13:00</td>
<td>Lunch</td>
<td>12:00 – 13:00 Lunch</td>
<td>12:00 – 13:00 Lunch</td>
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<tr>
<td>13:00 – 15:30</td>
<td>Group work 1. Hospitals: issues and challenges</td>
<td>13:00 – 15:10 Group work 3. Improving hospital planning and management at the system level • Facilitated review of action framework • Comments on suggested policies and actions</td>
<td>13:00 – 14:00 Group work 5. The way forward • Comments on suggested policies actions • Recommendations for Member States • Recommendations for from WHO</td>
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<tr>
<td>15:30 – 15:45</td>
<td>Mobility break</td>
<td>15:10 – 15:30 Mobility break</td>
<td>14:00 – 14:30 Plenary session 6. Group work report back</td>
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<tr>
<td>16:30 – 17:00</td>
<td>Secretariat meeting</td>
<td>16:10 – 16:30 Secretariat meeting</td>
<td>15:30 – 15:45 Secretariat meeting</td>
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<tr>
<td>17:30 – 18:30</td>
<td>Reception</td>
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Annex 3. Opening remarks of Dr Shin Young-soo, WHO Regional Director for the Western Pacific

1. Good morning. I am pleased to welcome you to the Consultation on Hospital Planning and Management in the Pacific. Thank you for finding the time in your busy schedules to participate in this important consultation.

2. Dr Shin Young-soo, WHO Regional Director for the Western Pacific, regrets not being able to join us due to previous commitments. He has asked me to send his regards and deliver these words.

3. This consultation comes at a time when the global community is mobilizing around the need to bring an additional one billion people under health coverage. This year marks forty years of the Alma Ata declaration on primary health care. This year’s theme for World Health Day in April was “Universal health coverage: health for all—everyone, everywhere”.

4. Hospitals are a vital part of the service delivery system and, therefore core to advancing universal health coverage. They are often the first point of care contact and shape public perception of the performance of the country’s health system. Many countries of the Pacific are witnessing an increase in the use of hospital services. In Tonga, for instance, the average outpatient consultation per year is 1-2 but the annual hospitalisation rate is relatively high at about 10 percent.

5. Such increases in the use of hospital services have often resulted in regular bed shortages, long waiting lists, overburdened hospital staff, reduced quality and patient safety and growing patient dissatisfaction.

6. Hospitals account for a large share of health spending. Across the Western Pacific Region, up to half of the health expenditure is on hospitals. Depending on the health system context, this expenditure is incurred mainly at the provincial- or national-level hospitals. Across Pacific island countries the percentage of expenditure on hospitals remains high, ranging from 42 percent of current health expenditure in the Federated States of Micronesia to 54 percent in Kiribati.

7. Noteworthy in Pacific island countries is the spending on overseas medical referrals. In Samoa, for example, overseas referrals represented 11 percent of total public health expenditure in 2008-09, increasing to 15 percent in 2011-12. Unless managed well, escalating costs of tertiary care services will continue to overwhelm the government health budgets and increase public dissatisfaction. At the same time, the growing burden of noncommunicable diseases underscores the need for hospitals to play a stronger role in delivering promotive and preventive services as well as rehabilitative and palliative services.

8. When they function well, hospitals are a trusted source of quality services for all. Member States, however, are struggling with how to bring the hospital sector in line, so that it can play its due role in advancing universal health coverage.
9. Getting there is not easy. Member States in the Region face a range of challenges. At the system level, these include a lack of comprehensive service plans, inadequate links with primary health care, a lack of financial incentives and weak regulation. Facility-level challenges include weak managerial capacity, inefficiencies, high costs and poor clinical governance, quality and safety. These challenges occur against the backdrop of increasing burden of chronic diseases, climate-related health risks, financial and service pressures, the advent of new medical technologies and pharmaceuticals, and increasing public and political expectations.

10. Member States in the Region are concerned and committed to improving the way hospitals function. We receive increasing requests for support in this area. A whole-of-system approach can improve accountability. At the system level, action is needed in a range of areas: goals, institutions, regulation, financing and feedback. At the facility level, reforms to improve hospital planning and management can enable hospitals to play their part in strengthening health system performance along five key attributes: quality, efficiency, equity, accountability, and sustainability and resilience, which are also the foundation of accelerated progress towards UHC.

11. This consultation provides the opportunity for countries to share experiences in this area. You will also review a technical document that offers practical guidance on hospital planning and management for countries to adapt to their contexts, in preparation for consideration by the Regional Committee for the Western Pacific in October. I hope you will agree on next steps and key priorities for action, to help secure equitable access to high-quality, efficient and effective health care – for everyone, everywhere.

12. I wish you a successful meeting.

13. Thank you.