Government of the Republic of Trinidad and Tobago
Ministry of Health

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May 7, 2018

Ms. Bridgid Mary Annisette-George
Speaker of the House of Representatives
Public Accounts Committee
Level 2, Tower D,
The Port-of-Spain International Waterfront Centre
1A Wrightson Road
Port-of-Spain

Dear Ms. Annisette-George,

Re: 10th Report of the Public Accounts Committee on the Examination of the Audited Financial Statements of the Eastern Regional Health Authority for the financial years 2008-2013

With reference to letter dated February 1st, 2018, kindly find the enclosed written response to the findings and recommendations of the review of 10th Report of the Public Accounts Committee on the Examination of the Audited Financial Statements of the Eastern Regional Health Authority for the financial years 2008-2013. Accept my apologizes for the late submission.

Respectfully,

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Permanent Secretary (Ag)
Ministry of Health

ERHA responses to the 10th Report of the Public Accounts Committee on the Examination of the Audited Financial Statements of the Eastern Regional Health Authority for the financial years 2008-2013

Issues and Recommendations

1) Absence of performance measurement system

- **The MOH must ensure that each RHA develops its own Key Performance Indicators to continuously measure strategic progress;**
- **Weekly meetings should be held with the department heads that include a brief review of what each department is working on, what is recently achieved and what improvements are needed ; and**
- **ERHA should submit a report to the Parliament on the status of the initiatives being undertaken to measure the organization's strategic progress by February 28, 2018.**

The Eastern Regional Health Authority (ERHA), in its draft 3-year work plan (2018-2020), recognized the importance of having key performance indicators to measure the progress of each unit under its purview over the planning cycle. During the developmental phase of the work plan, the planning team met with each functional unit to guide and enforce the need to outline relevant metrics aligned to their unit's strategic objectives. Further to this, each unit was asked to set targets for their significant strategic objectives annually over the 3 year planning period. These core components formed the main body of the work plan's implementation framework.

Subsequently, the information collected through the 3-year work plan was used to create measurement scorecards for each unit which will form the foundation of monitoring and tracking each performance indicator identified. Critical components of the scorecards are the submission of baseline readings for each indicator identified by each unit that will be used to guide the short term planning for the respective units. Updates and reviews of each unit occur at monthly management team meetings. A report on the status of the initiatives is attached at **Appendix 1.**

2) Non- Compliance of Occupational Safety and Health Act (OSH)

Recommendations:

- **The ERHA should take the requisite steps to develop and implement action plans that are kept consistent with the OSH Act and are available to all workers by December 31, 2017; and**
- **ERHA should submit a report to the Parliament on the status of the initiatives being undertaken to ensure compliance of law by January 18, 2018.**

The OSH Department conducted a review of all ERHA health facilities to assert compliance with the OSH Act. A GAP Analysis was completed and an action plan was developed to resolve issues of non-compliance. The details of the GAP Analysis with the required supporting initiatives are attached at **Appendix 2.** A report on the status of the initiatives undertaken to ensure compliance of the law is attached at **Appendix 1.**

3) Lack of Maintenance of the Fixed Asset Register:

- **ERHA must liaise with the Auditor General's Department to ensure that the key recurring issues identified with respect to the fixed asset register are addressed; and**

- **An internal system to monitor and ensure that the information in the fixed asset register is accurate and up to date should be developed and implemented and provide a status update to the Committee on the progress made in monitoring and controlling the fixed asset register by February 28, 2018.**

The ERHA has been working with the External Auditors appointed by the Auditor General's Department to rectify this issue as it is being addressed on a phased basis, wherein the last Audited Financial Statements (2014/2015), the External Auditors were able to verify the ERHA's Land, Buildings and Vehicles Register.

All items recorded on the Fixed Asset Register are reviewed by the Cost & Management Accounting Unit, ERHA to ensure that it meets the relevant criteria of a Fixed Asset. In

December 2017, ERHA acquired a Fixed Asset Audit Software (PANATRACK) which will be used to conduct regular audits to ensure all movements of Fixed Assets are recorded and updated in the Fixed Asset Register in a timely manner. Further, the Internal Audit Department will provide ongoing audits on the register to ensure compliance.

The Fixed Assets Module in the Financial Management Information System (FMIS) is active and this would enable the Authority to populate the Fixed Asset Register resulting in updated and accurate data. A report on the status of the progress made in monitoring and controlling the fixed asset register is attached at **Appendix 1.**

4) Challenges experienced by the Eastern Regional Health Authority (ERHA):

- **The ERHA should review trends in staff turnover, setting out a plan on how the shortage of personnel will be addressed over the next three months and provide the Committee with a plan by February 28, 2018 and how it will retain staff better;**
- **The ERHA should report back to the Public Accounts Committee by February 28, 2018 summarizing what actions have been identified and implemented to mitigate the challenges experienced by the Authority; and**
- **The ERHA should immediately submit a report to the Parliament on the status of the initiatives being undertaken to implement a succession plan for the Authority and a proper performance appraisal system.**

<u>Turnover Trends at ERHA for the period October 2014 to February 2018.</u>

During the period October 2014 to February 2018, the staff turnover trends for contract staff declined marginally from a rate of 4% (72 officers out of 1,645) to 1% (18 officers out of 1,666).

The ERHA believes that Human Resources constitute the most valuable asset and recognizes that it creates the results desired by our internal and external customers, by expending their physical and mental energies, in addition to their productive relationships with data, equipment, machinery, money, systems and time. The ERHA is therefore committed to attracting and retaining a diverse and talented workforce who can contribute to its Goals, Mission and Vision

through the process of systematically and efficiently managing the creation, execution and analysis of contracts and employment propositions.

As a result, the Employment and Employee Services Unit (E&ES) is focused on attracting, selecting, recruiting and retaining all categories of staff within the ERHA. An application database is maintained in the E&ES Unit that allows for the efficient tracking of applications. The screening and interviewing process is imperative, as its purpose is to identify and hire candidates who will perform effectively and efficiently. Interviews assist in determining cultural fit of potential candidates, along with assessing the skill levels of the candidates that are required for the job.

INFLUENCING FACTORS

Landscape

Due to the rural geographic landscape in the region, there exist several challenges to retain employees at remote Health Centres on the North Coast (Matelot and Toco) and also in the South Eastern part of Trinidad (Rio Claro and Brothers Road).

Contracts

Most of the contract officers are exposed to training opportunities and during their tenure gain considerable experience in the operations of the ERHA. After their term ends, there is an issue of retaining employees who opt to look for more lucrative opportunities. This results in the re-training of new employees thus, hindering the speed of growth and development.

Terms and Conditions

The ERHA is also faced with the challenge of outdated Terms and Conditions for employees and it has no control over this matter as salary negotiations are done by the Chief Personnel Officer. Many of the positions on the Establishment, especially the Clinical and Para-Clinical are below the base salary of what is being paid in other similar institutions. This has proven to be a dilemma in retaining persons; who would normally gain a level of experience and exposure but

would then leave for more lucrative terms and conditions being offered in other related areas of employment.

Limited Personnel

Another area of concern is the limited personnel in certain professions such as District Health Visitors, Midwives, Gynaecologists and other specialist areas. Persons with these qualifications are not always willing to accept employment in rural areas, and secondly, they have the option of better compensation packages both internally and externally.

INTERVENTIONS

In light of the above, the ERHA has developed an action plan that is periodically updated based on changing needs and circumstance arising in the management of Human Resources. In light of the current economic constraints, the ERHA is recommending the following initiatives to assist in the alleviation of shortages of personnel and staff turnover:

a) Greater Emphasis on Orientation

The ERHA has embarked on a programme of orientation of recruits in various areas. This orientation programme contains various elements such as Safety, Code of Conduct, and Quality Care. This strategy has been quite successful in the retention of employees thus, creating sustainability and motivation of employees.

b) Teambuilding and Interdepartmental Activities

The ERHA has also embarked on various initiatives in teambuilding and fostering better inter-personal relationships in the workplace. This is done periodically with various units using teambuilding sessions and events, hence providing a sense of purpose and direction.

c) Training

One of the key areas of development of employees is creating an organization that encourages development and fosters personal growth. This is an area of great emphasis where the focus is on

internal training as part of the entire transfer of knowledge and development of key competence and personal growth.

d) Commitment to a Career Path

The ERHA encourages employees to align their career paths with existing and new opportunities through coaching, cross-training and development of competences. The internal recruitment and selection strategy gives preference to existing employees before going externally, thereby maximizing the experience of employees gained within the ERHA. This fosters greater motivation and retention of employees with extensive knowledge and experience.

e) Improved Communication

Improved communication and feedback in the workplace facilitated through regular inter-departmental meetings, newsletters and open forum sessions are vital to enabling the sharing of knowledge, experiences, challenges and developing/amending action plans to effect improvement among employees. This strategy fosters greater motivation, commitment and the use of problem solving strategies.

f) Re-Implementation of Quality Circle Meetings

The re-introduction of Quality Circle meetings across the ERHA with various units and employees creates an opportunity to resolve issues by fostering greater mobilization of resources and escalation of task and responsibility for effective resolution as deemed necessary.

g) Identifying Critical Areas of Focus

An assessment of the demographic and epidemiological profile of the region with the current human resources and capabilities provides an opportunity to identify the critical areas for development in terms of service, capacity and need. This enables the Authority to re-scope and re-define its purpose and direction in alignment with patient needs.

h) Competency and position profiling

A clear understanding of capabilities needed for successful performance in key areas and critical positions are essential requirements for guiding learning and development plans, setting clear

performance expectations and assessing key indicators of performance. Completing the process of competency-based skills or position profiling within the ERHA should result in employees gaining an understanding of the key responsibilities of the position including the qualifications, behavioural and technical competencies to allow for greater success and performance.

i) Identifying succession management strategies

When critical positions have been identified and profiled for competencies, an assessment will be conducted to determine if it exists in the Establishment or needs to be developed and followed by the development of internal competence and talent management initiatives to create the succession planning strategy.

j) Document and implement succession plan

The Succession Planning Action Plan is to be developed and implemented. It will clearly define timelines, roles and responsibilities including identifying two potential successors for each key position identified.

To ensure that the ERHA's succession planning efforts are successful, a systematic review will be undertaken to determine its effectiveness, namely - monitoring of workforce data, evaluation of workflow activities undertaken and the implementation of training programmes to create individual development plans for identified successors.

k) Several initiatives were implemented to strengthen the effectiveness of the Performance Management Process. These include:-

- Train the Trainer Workshops for a select group of key managerial and supervisory personnel;
- Rollout of performance management training utilizing the trained group of personnel;
- Review of the current process and implementing changes to ensure performance appraisal reports are completed on a timely basis and with improved quality; and
- Ensuring that personnel development plans and corrective action plans are prepared to complement performance appraisals as necessary.

A status report of the initiatives being undertaken to implement a succession plan for the Authority and a proper performance appraisal system is attached at **Appendix 1.**

5) Staff constraints within the Internal Audit Unit

- **ERHA should develop a policy document on whistle-blowing within the shortest possible time frame to ensure that staff appreciates the ethical environment of honesty, integrity, ethics and fair play; and**

- **ERHA should submit a report to the Parliament on the status of the initiatives being undertaken implement the internal fraud policy and a whistle-blowing policy by February 28, 2018.**

The Draft Whistle-blowing Policy is currently being reviewed by the General Manager Legal and Corporate Affairs. It will then be forwarded to the Management Team in May 2018 for review and discussion. Thereafter, it will subsequently be submitted to the Board of Directors for Approval by July 2018.

The Fraud and Bribery Policy was approved by the Board of Directors and submitted to the Ministry of Health for approval on March 20, 2018. The Ministry of Health has indicated that the ERHA should collaborate with the other Regional Health Authorities (RHAs) and formulate one policy that is accepted by the other RHAs. This draft policy will be circulated to the other RHAs for review and discussion in April 2018.

A status report of the initiatives being undertaken to implement the internal fraud policy and a whistle-blowing policy is attached at **Appendix 1.**