

## Pacific Regional Clinical Services & Workforce Improvement Program (PRCSWIP)



*Director of Clinical Services Annual Meeting, April 2017 held in Suva, Fiji*

Greetings from the PRCSWIP Team. This is a brief update on the new regional clinical services program called Pacific Regional Clinical Services and Workforce Improvement Program (PRCSWIP)

Previously there were 3 distinct DFAT funded programs to assist Pacific Island Countries (PICs) in the delivery of clinical services including workforce development. These program were: - Royal Australasian College of Surgeons Pacific Islands Program (RACS-PIP); Strengthening Specialised Clinical Services in the Pacific (SSCSiP); and College of Medicine, Nursing and Health Science, Fiji National University (CMNHS, FNU).

The new program, PRCSWIP) brings together all 3 implementing partners (RACS, SPC, and FNU) for better coordination and achievements clinical outcomes.

Each of these partners contribute to the vision of PRCSWIP that **Healthcare that is affordable, appropriate to local needs and is of good quality and accessible.**

1. CMNHS, FNU – looks into PG training, that it is responsive and relevant to the Pacific needs.
2. SPC PRCSWIP – works closely with PIC's to explore regional opportunities/solutions for clinical services.

3. RACS-PIP ensures that PICs receive quality visiting medical teams with an increased focus on capacity building.

**For PRCSWIP – SPC there are 5 main focus areas:-**

1. Hosting of the Directors of Clinical Services (DCS) Secretariat – this is an annual DCS meeting to look into regional clinical issues and solutions. Key regional recommendations are presented at the Heads of Health (HOH) Meeting (which follows immediately). This mechanism has allowed clinical agendas to be heard at the HOH forum.
2. Hosting of a regional help desk function – we distribute clinical information, we connect clinical services and personnel, and answer queries and requests from clinicians in the region and from abroad.
3. Develop regional approaches and standards – this includes looking at minimum standards for an internship program; feasibility of ENT training and service approach; a tailored leadership program for clinicians; and regional CPD framework that countries may adapt/adopt
4. Support commissioning and dissemination of research and analytical work – work includes maintaining a regional clinician database, now to include specialist nurses; analysis of PGD scholarships for clinical studies to advocate for more scholarships; routinely updating POMR and SAO data for the region; feasibility of regional procurement of medical equipment and supplies
5. Strengthen networks of clinical professionals and institutions – providing technical assistance, support and linkages between clinical professionals and institutions.