Resolution No. 21-01

A RESOLUTION OF THE 21ST MICRONESIAN CHIEF EXECUTIVES’ SUMMIT

Acknowledging past Micronesian Chief Executives’ Summit (MCES) and US-affiliated Pacific Island (USAPI) health leadership commitments to prioritizing Human Resources for Health (HRH)/health workforce development efforts, commitments to the same under the World Health Organization (WHO) for the Western Pacific Region HRH Strategy 2006-15, and recent Pacific health leadership endorsement of the recommendations of the Health Islands Report 2015 to strengthen and increase HRH, and re-affirming MCES commitments to support and invest in HRH/health workforce development as a matter of utmost urgency to effectively address chronic and acute healthcare needs in the USAPIs.

WHEREAS, it is acknowledged that there continues to be a prevailing and serious epidemic of non-communicable diseases (NCDs), a high burden from communicable diseases, and multiple, recent outbreaks of vector-borne infections throughout the USAPIs and wider Pacific region; and

WHEREAS, alarming and disproportionate amounts of national healthcare budgets are primarily directed at acute hospital care, attesting to critical insufficiencies in current responses, and a dire need to strengthen both primary and secondary prevention efforts; and

WHEREAS, the USAPI health leadership comprised of the chief and deputy health officials of the Territory of American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, U.S. Territory of Guam, Republic of the Marshall Islands, and Republic of Palau, at the 2009 42nd PIHOA Meeting on Nahlap Island in Pohnpei, developed and endorsed the Nahlap HRH Action Plan outlining critical priorities for HRH/health workforce development, including strengthening government personnel management systems and local licensure boards, reviewing local policies, procedures, and pay scale classifications to ensure equity and fairness, developing and delivering practical “HRH 101” trainings, encouraging the education sector to develop a “Regional Strategic HRH Educational and Resources Plan”, advocating for scholarship reform, developing opportunities for on-island health careers training, supporting the coordination of multi-agency and cross-sectoral partnerships for HRH development, and to “Develop and strengthen foundation training programs among the regional
colleges and community colleges, in nursing, public health, health services management, and allied health. This must include providing financial resources to assist with recruiting students and providing adjunct faculty, mentors and preceptors.”; and

WHEREAS, at the 12th MCES, it was agreed that the Regional Health Committee would develop “its regional strategic plan for Human Resources for Health (HRH)” and the Chief Executives fully endorsed “the development in each USAPI health agency of appropriately staffed, trained and resourced HRH Management Offices capable of providing the focus, expertise and strategic coordination that is essential for addressing the critical health workforce needs in each MCES member state.”; and

WHEREAS, at the 13th MCES, it was agreed that “In the area of Human Resources for Health Management (HRH) Management Offices in USAPI Health Agencies, PIHOA is now assessing the available curriculum and resources for developing and delivering “HRH 101” courses in the USAPI for health agency focal points charged with staffing the implementation of local HRH plans” and the Chief Executives supported the Regional Health Committee’s effort to “Continue to work towards the development of human resource and educational opportunities, including the creation of Fiji School of Medicine, North”, and “Continue to work on developing Human Resource for Health (HRH) Management Offices in the USAPI Health Agencies.”; and

WHEREAS, the Pacific health leadership endorsed the WHO for the Western Pacific Regional HRH Strategy 2006-15, the recommendations on health workforce development at the 11th Pacific Ministers Meeting, and the recommendations of the recent 20-year retrospective review of the 1995 Yanoa Island Declaration – Healthy Islands Vision, which included, among other things, continued need to expand and improve Pacific HRH; and

WHEREAS, despite the commitments made and critical gains achieved in addressing HRH in the last decade, due to chronic healthcare systems challenges and increasing ill-health amongst the USAPI populations, resulting in increased demands on already challenged health infrastructure and resources, there remain critical and acute health workforce shortages, heavy reliance on expatriate workforce for specialist areas, and heavy reliance on external funding sources to cover core, HRH workforce needs; and

WHEREAS, the above statements support the conclusion that the USAPI health systems continue to be highly vulnerable; and

WHEREAS, increasing and expanding efforts to strengthen and increase locally trained and qualified HRH is a critical aspect of building health systems resiliency, reducing vulnerabilities, and improving community and individual health and well-being; and
NOW THEREFORE, BE IT RESOLVED, the Chief Executives re-affirm and renew their commitments to support regional and local HRH/workforce development efforts, invest jurisdictional resources in these same efforts, including exploring new innovations in HRH/health workforce educational delivery, and affirm their endorsement of the still-germane recommendations of the 2009 Nahlap HRH Action Plan; and

BE IT FURTHER RESOLVED, the Chief Executives strongly encourage planning and delivery of training programs that address acute healthcare needs specific to each USAPI context, including but not limited to hospital and public health management and administrators, health economists, community-based nurse practitioners and physician assistants, laboratory specialists in microbiology, cytology and histology, pathologists, pharmacists, radiologists, biomedical technicians, occupational safety and sanitation health officers, environmental health officers, and behavioral and mental health specialists (clinical psychologists, psychiatrists), and performance and quality improvement officers; and

BE IT FURTHER RESOLVED, the Chief Executives shall support and invest jurisdictional resources to establish the development and implementation of regional approaches to partnership-building and faculty-sharing amongst Pacific and Pacific Rim academic institutions of higher learning and local community colleges, as well as regional and local teaching hospitals, to ensure access to local and in-region, quality-standard health careers training opportunities and continuing health professional development to meet local health workforce training and capacity development needs, including on-going HRH research and needs assessments, and the dissemination of such work, to support local and regional strategic HRH planning and response; and

BE IT FURTHER RESOLVED, the Chief Executives encourage local, regional, and other technical partners and professional associations to support and align their respective HRH efforts to stated USAPI HRH priorities; and

BE IT FURTHER RESOLVED, that copies of this Resolution shall be transmitted to local and regional academic institutions of higher learning and teaching hospitals, including but not limited to the University of Guam, Fiji National University, University of Hawaii (including associated community college systems), College of the Marshall Islands, Northern Marianas College, American Samoa Community College, Guam Community College, Palau Community College, College of Micronesia–FSM; regional health professional associations, including but not limited to Pacific Basin Medical Association, Pacific Basin Dental Association, Association of USAPI Laboratories, Northern Pacific Environmental Health Association, Pacific Basin Public Health Association, Pacific Islands Primary Care Association, Cancer Coalition of the Pacific Islands, and Pacific Behavioral Health Collaborating Council; and regional technical agencies, including but not limited to the WHO, Secretariat of the Pacific Community, Pacific
Island Health Officers Association, and the relevant agencies of the US Department of Health and Human Services.
Signed this 24th Day of February, 2016 at the 21st Micronesian Chief Executives’ Summit in Koror, Republic of Palau.

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