UNC PLANS FOR HEALTHCARE REFORM 2025 TO 2030

A UNC-led government will work to ensure that all citizens receive proper health care. A UNC-led government will improve the healthcare sector in the following ways:

- 1. Review the Children's Life Fund legislation to enable more applicants with diseases not currently included in the Fund to access the facility.
- 2. Ensure the Couva Children's Hospital is fully equipped, staffed, and operational.
- 3. Install a centrally specialized Burns Unit close to the Point Lisas Industrial Complex. (This Unit can be part of the Couva Children's Hospital and Multi-Training Facility)
- 4. Purchase and maintain modern equipment at all medical facilities. This will also include having qualified and trained staff to operate the equipment.
- 5. Fix the supply chain issues to prevent the "shortage of drugs, equipment and supplies "that now hinder the work of doctors and nurses at many of our healthcare facilities.
- 6. Establish guaranteed maximum waiting times for clinic appointments, diagnostic tests, and surgical procedures.
- 7. Immediately treat the backlog of patients awaiting critical diagnostic tests and surgeries, including cataract and joint replacement surgery.
- 8. Create a national Stroke Rehabilitation Centre.
- 9. Treat the chronic non-communicable disease burden promptly and innovatively, including reintroducing extended opening hours at health centres and school and home visits within communities.

- 10. Settle negotiations in the health sector and offer proper/better terms and conditions for all doctors, nurses, and other staff.
- 11. Introduce legislation to create a unique medical malpractice court and special investigative unit, aided by foreign experts, to handle suspected medical malpractice cases.
- 12. Most medical malpractice cases are civil matters; we will also establish a NO FAULT COMPENSATION FUND so that affected citizens can receive some relief even outside the courts.
- 13. Conduct a skills audit within the public healthcare system to train qualified staff in highly demanded areas of specialization.
- 14. Provide opportunities and funding for doctors and nurses to specialize in particular fields.
- 15. Do a full review of the management of the COVID-19 pandemic in Trinidad and Tobago for clinical management and economic impact.
- 16. Revise the Patients' Charter to give patients a greater voice in public health services.
- 17. Implement a National Health Card for all resident citizens so that a patient's medical records can be accessed at any public or private health facility. This will save time and allow the healthcare provider to access information readily at their fingertips. This means faster delivery of health services and will make the issue of "lost files" a thing of the past.
- 18. We will also implement data protection systems to back up these electronic medical records safely and securely.
- 19. Review the entire IT system at all RHAs and procure the latest IT technology and systems [for all RHAs] to mitigate against cyber-attacks and hacking.

- 20. Conduct an audit of the number and qualifications of the many foreigners working in our health sector while our citizens are jobless at home.
- 21. Employ local Doctors—Increase the number of doctors in the public health system to achieve the required complement at all public hospitals and health centers and thus increase the number of doctors to the number of patients.
- 22. Employ local Nurses Increasing the number of nurses in the public health system by focusing on training and certification of Nursing Programs and the availability of jobs within our public health sector, thus increasing the number of nurses to the number of patients.
- 23. Employ local Technicians Increase the number of cardiovascular, radiographic, and other specialist medical technicians.
- 24. Focus on decreasing wait times for clinic appointments and surgeries by increasing nursing staff and medical doctors to these facilities or departments to reduce the workload on existing staff.
- 25. Train Primary Care Doctors—Increasing the number of primary care doctors will decrease non-communicable diseases such as heart disease, hypertension, diabetes, chronic kidney disease, and obesity.
- 26. Equipment Audit—All diagnostic and radiographic equipment will be audited to determine any deficiencies, with a mandate to equip medical professionals with the necessary equipment.
- 27. Build Cath Labs—Complete the construction, equipping, and operationalization of Catheterization Laboratories at all major Hospitals. This would include the San Fernando General Hospital, the Arima Hospital, and the Sangre Grande Hospital. The Scarborough Hospital has a Catheterization Lab, but there is no attending Interventional Cardiologist. This would enable cardiac stenting on a 24-hour basis within minutes of arrival at the Hospital. ENABLING A NATIONWIDE 90-MINUTE POLICY OF HEART ATTACK TO STENT.
- 28. Dialysis Clinics—Complete the construction, equipping, and operationalization of Dialysis Clinics at all major Hospitals, with the

relevant staff, to enable 24-hour dialysis. Thus, the state's bill to the External Patient Program would be reduced by at least 100 million per year. Only emergency dialysis cases to private providers would be paid for.

- 29. Ambulance Service—The ambulance Service will be expanded to rural areas in Central and South Trinidad, creating a central and southern hub for cleaning and re-outfitting.
- 30. National Laboratory Centre—This state-of-the-art laboratory adjacent to the Couva Hospital and outfitted with the equipment and staff to enable the quickest turnover in testing.
- 31. National Cardiac Centre A state-of-the-art cardiology centre adjacent to the Couva Hospital, equipped with 2 Operating Theatres, 1 ICU, 1 CCU, and a Cath Lab to allow bypass surgeries to be done. This would significantly reduce the By-Pass backlog. Patients currently have to wait at least 12 to 18 months to wait for urgent bypass surgery.
- 32. Strategic partnerships with International Health Educators for Internal Medicine, Cardiology, and Nephrology.
- 33. CDAP—Review and update CDAP, streamlining medication and increasing service to rural communities. Newer drugs that are very effective in hypertension and diabetic treatment will be included on the list.
- 34. Childhood Obesity—Legislation for Front-of-Package Warning Labeling to be implemented on retail food products will warn consumers of high sugar, high sodium, and high-fat items. This will intensify the existing awareness programs for combating Childhood Obesity and expand their reach.
- 35. Implement a modern prenatal, maternal, baby, and early childhood care strategy.
- 36. Expanding access to immunization.

- 37. We will implement a multipronged strategy to deal with reproductive issues and empower women to seek good health during pregnancy.
- 38. Maternal and Child Health Policy and Standard Operating Procedures for Obstetrics and Midwifery will be updated and implemented.
- 39. Antenatal and postnatal care services will be improved by purchasing additional equipment needed to track the health of mothers-to-be and their babies.
- 40. Reintroduction of the Baby Grant.
- 41. An emergency response plan will be developed to cover all possible medical crises ranging from natural hazards and oil spills to infectious diseases.
- 42. The Ministry of Health will make an inter-ministerial arrangement with the Ministry of Housing and Urban Development and the Ministry of the Environment and Water Resources to address the effects of climate change on human health.
- 43. We will initiate a national awareness campaign on mental health.
- 44. Public-private partnerships will be formed to widen the Ministry of Health's reach in mental health promotion. Some persons desperately need mental health help but don't know it.
- 45. We will formalize the draft National Comprehensive Mental Health Implementation Plan.
- 46. Mental health services will be integrated into all routine health service delivery systems.
- 47. We will increase the number of trained staff at the Ministry of Health Research Unit so that timely health research can be accomplished and data can be provided for prompt decisionmaking.

- 48. Formulate a Healthcare Financing Policy, including introducing and implementing a comprehensive National Health Insurance System, and create mechanisms for sustainable financing.
- 49. The Ministry of Health will collaborate with the Ministry of Education, Tertiary Education and Skills Training, and research institutions focused on the health sector to develop a comprehensive plan for Trinidad and Tobago's health wellness and preventative medicine.
- 50. Commit to fully refurbishing and adequately resourcing the Ministry of Health's INSECT VECTOR CONTROL DIVISION.