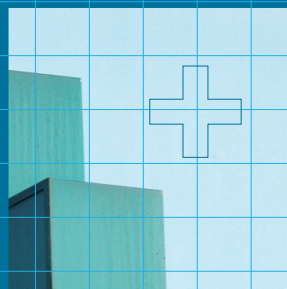
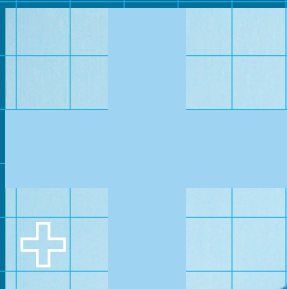
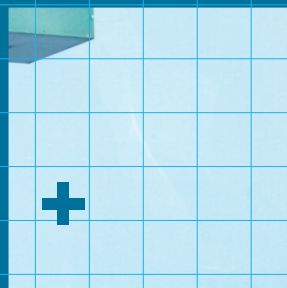
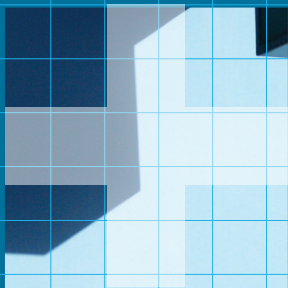
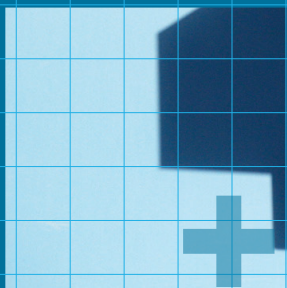




Republic of Namibia
MINISTRY OF HEALTH & SOCIAL SERVICES



ROADMAP





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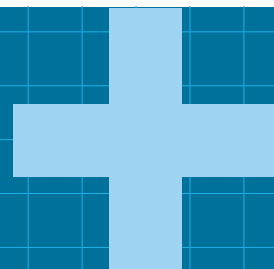
31 March 2014

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Preface



The mission of the Ministry of Health and Social Services (MoHSS) is to provide integrated, affordable, and accessible quality health care and social services responsive to the needs of the population.

Therefore, the development of appropriate short and long-term plans that spell out the priorities of the MoHSS is of paramount importance.

In view of the afore-stated, the Ministry has developed a Roadmap, which provides a strategic long-term framework for governance, human resource development, health facility upgrading and the establishment of specialised services and institutions. The Roadmap will be operationalised through annual action and national development plans, the medium-term expenditure framework, development assistance and public private partnerships.

In addition, the Roadmap will serve as a guiding framework for the directorates within the MoHSS, and partners in the health sector including Government offices, ministries and agencies, civil society, non-governmental organisations, faith-based organisations, foundations, private sector, bilateral and multilateral partners.

Dr. Richard N. Kamwi
Minister

Introduction



Namibia has made significant strides in transforming its health sector since independence, in 1990, following a clear policy statement that spelt out egalitarian objectives.

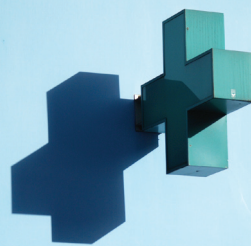
New health facilities were built and old ones in previously underserved areas, upgraded. Furthermore, health priorities were defined for the population based on disease epidemiology and preventative approaches.

Maintaining these achievements has required continued alertness. Thus, the health system has been responsive to the strategic ideologies on improvement of health and human development as advocated in Vision 2030, the national development plans, international obligations and health policy frameworks.

The development of a Ministry of Health and Social Services (MoHSS) Roadmap is therefore in accordance with NDP4 and Vision 2030. Its implementation is within the Medium Term Expenditure Framework (MTEF) and takes into consideration the prevailing conditions and possible future developmental issues in health.

The MoHSS Roadmap provides a strategic long term framework for governance, human resource development, health facilities upgrading and the establishment of specialised services or institutions.

I. Health Sector Governance



The governance structure provides an arrangement in which quality health and social services are to be delivered. It involves the interaction of multiple stakeholders from the central level to the lowest level of health sub-district offices.

The levels play an important role as intermediaries between the implementation level from sub-district offices to the central level where policy formulation and strategic planning takes place. There is a need therefore, to facilitate the linkages between the various levels of the health system, for Government to be well informed of the problems and constraints on the ground at sub-district level in all the 14 regions. (See Figure 1).

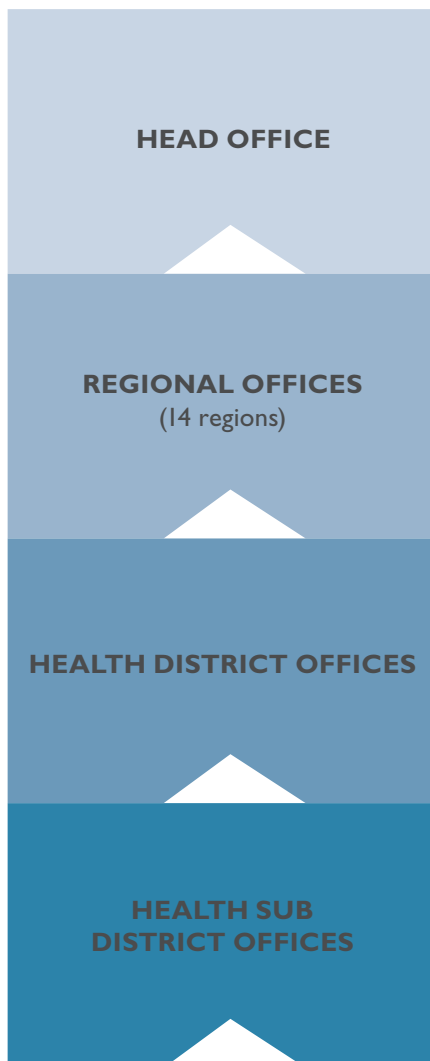


Figure 1

2. Training of health workers



Table I reflects the Roadmap for training of health workers. Human resource remains the backbone of health and social service delivery. Namibia has a critical shortage of human resource at various levels of its health sector. This has led to insufficient patient care resulting in poor health outcomes.

The expansion of the primary care level brought new requirements for the health workforce as more focus was placed on developing a professional cadre such as a general practitioner of nurses, to operate and manage health centres and posts. To this end, the Ministry has set up a training programme till 2017.

Type of training	Status 2013	Status 2015	Status 2017	Total
Medical Undergraduates	250	250	250	750
Medical Interns	(Depending on the number of Medical Graduates)			
Postgraduate Training	20	30	50	100
(Medical Specialists)	2	11	12	22
Nursing Training				
Enrolled Nurses (EN)				
Registered Nurses (RN)	270	270	270	810
Specialized Nurses (SN)	50	50	50	150
Medical Engineers	50	50	50	150
Medical Technicians	75	75	75	225

Table I

Deployment of Human Resources for Health in the Public Sector

3. Management

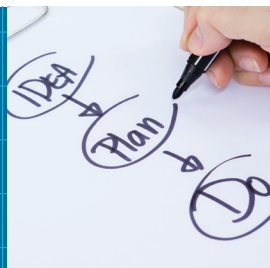


Figure 2 shows different layers of general, functional and programme management. To effectively manage a Human Resource for Health (HRH) system, managers at different levels must work in a coordinated and systematic manner. This would help them to better understand that their actions can produce specific improvements at various departmental levels and at the same time contribute to the strengthening of the organisation.

Furthermore, managers have to embrace technological and managerial trends in health care which are some of the aspects related to a broader health system. These are the new opportunities for a professional cadre and require re-training. Emphasis should be placed on the development of corporate culture, characterised by quality and standards.

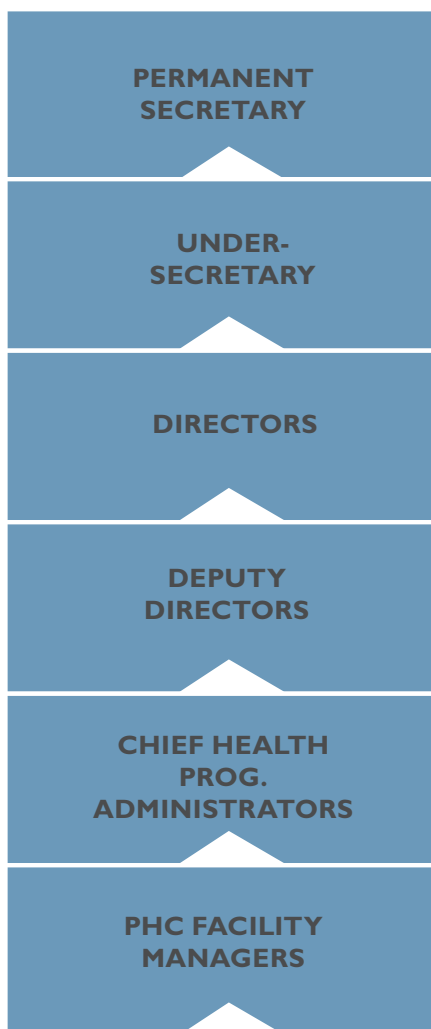


Figure 2

4. Health Care Service Provision



Deployment of health professionals ensures that a person performs the tasks that they are qualified in and avoids a mismatch of competencies. The focus for the MoHSS will be in deploying human resources where they are needed. With the help of external organisations, the Ministry will step up training while at the same recruiting health professionals through bilateral agreements as it recognises that this is only part of the solution. Emphasis should be placed on the development of career path and professionalism within the health service in line with sectoral objectives of attracting and retraining health professionals.



Figure 3

5. Development of Hospitals and Health Facilities and Services



5.1 STRUCTURE

The traditional vision of a hospital is no longer tenable. The existing models of health care provision, often subject to fragmentation and insufficient coherence, appear to be one of the main causes limiting the efficiency of interventions and quality of health outcomes. Hospitals are seen to represent a collection of things that no longer fit together, with elements of high specialisation not suited for general work or integration with primary care and social services.

Thus, there is a need to adopt the role and function of a 'modern' hospital, which involves re-orienting services to a system centred on procedures and/or particular types of patient problems. (See Figure 4.)

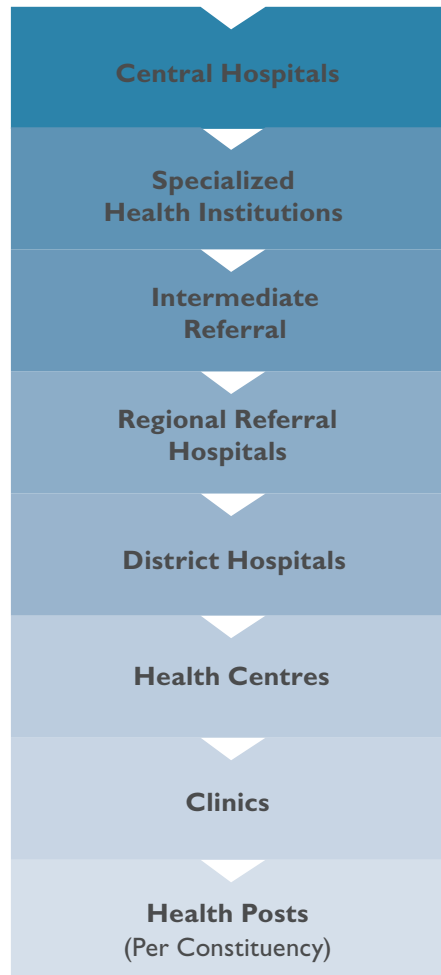


Figure 4

5.2 TARGETS

Table 2 shows the Roadmap for the development of Hospitals and Health facilities. It is envisaged that by 2030 Namibia will have three Class A hospitals instead of one, four Class B Level 1 and six Class B Level 2 hospitals. The four Class B Level 1 hospitals have been identified as Katutura, Onandjokwe, Rundu and Swakopmund while the six Class B Level 2 are Otjiwarongo, Katima Mulilo, Engela, Keetmanshoop, Outapi and Opuwo.

Facility Type and Service	Status 2013	Status 2018	Status 2023	Status 2030
Class A State Hospital	WCH	WCH	WCH Oshakati	WCH Oshakati Rundu
Class B Level 1	Katutura Oshakati Rundu	Katutura Oshakati Rundu	Katutura Oshakati Onandjokwe	Swakopmund Oshakati Onandjokwe
Class B Level 2	Onandjokwe	Onandjokwe Otjiwarongo Katima Mulilo Keetmanshoop	Otjiwarongo Katima Mulilo Engela Outapi Swakopmund Keetmanshoop Opuwo	Otjiwarongo Katima Mulilo Engela Keetmanshoop Outapi Opuwo

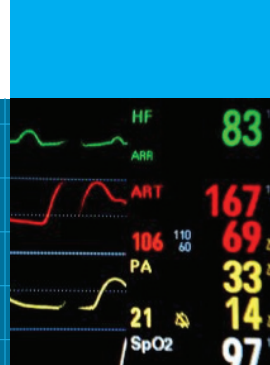
Table 2

In respect of district hospitals, the target is to build five new ones by 2023. (See Table 3). Also on the cards is the construction of 60 new health centres and 350 clinics by 2030.

Facility Type and Service	Status 2013	Status 2018	Status 2023	Status 2030
District Hospital	30	36		
Class C	Omuthiya	Nkurenkuru Windhoek Ondangwa Rosh Pinah	Tsumkwe Windhoek Ondangwa Rosh Pinah	
Health Centre	46	52	55	60
(Class D) Clinic	261	300	320	350
(Class E) Community Health Post	0	2500	5000	

Table 3

6. Medical Specialised Services and Departments



6.1 STRUCTURE

Figure 4 lists specialised services that are provided for less common disorders and need to be concentrated in centres of excellence where the highest quality care can be offered. The type of care envisaged is that which is clinically effective, safe and offers a positive experience for patients. Currently these services in Namibia, as per diagram, are only provided in the Government’s only Class A hospital, the Windhoek Central Hospital and to a lesser extent in the Class B Level I hospital, the Oshakati Intermediate Hospital.

No	Type of Medical Specialization	Class C District	Class B2 Regional Referral	Class B1 Int. Referral	Class A Central
1	Family Medicine	•	•	•	
2	Obstetrics and Gynaecology		•	•	
3	Paediatrics		•	•	
4	Internal Medicine		•	•	
5	General Surgery		•	•	•
6	Anesthesiology		•	•	•
7	Intensive Care		•	•	
8	Emergency Medicine		•	•	
9	Orthopedics			•	
10	Ophthalmology			•	
11	Otorhynolaryngology (ENT)			•	
12	Urology			•	

Table 4

In order to increase access, equity and less referral to the Class A hospital, there is a need to diversify specialised services to Class B Level 1 and Class B Level 2 hospitals. This is to be provided for in line with the development targets of health facilities as well as training of the human resource to become professionals in various fields.

No	Type of Medical Specialization	Class C District	Class B2 Regional Referral	Class B1 Int. Referral	Class A Central
13	Radiology		•	•	•
14	Cardiology			•	•
15	Cardio Thoracic Surgery				•
16	Nephrology			•	•
17	Neurology			•	•
18	Neuro Surgery			•	•
19	Pulmonology			•	•
20	Nuclear Medicine			•	•
21	Medical Oncology				•
22	Radiation Oncology				•
23	Maxillo-Facial Surgery			•	
24	Spinal Orthopaedics			•	•

Table 4

6.2 TARGETS

As reflected in Table 5, the provision of specialisation is the main focus area for the implementation of the MoHSS Roadmap. The focus areas are specialised mental hospitals, mother and child hospitals, infectious disease and oncology departments.

Institution Type	Status 2013	Status 2018	Status 2023	Status 2030
Specialized Mental Hospital		Windhoek Oshakati Rundu	Windhoek Oshakati Rundu Keetmanshoop	
Specialized Mother and Child Hospitals		Windhoek	Windhoek Oshakati	Windhoek Oshakati Rundu
Infectious Disease Hospitals		Windhoek Oshakati Walvis Bay	Windhoek Oshakati Walvis Bay	
Oncology Hospitals/Departs (Nuclear Medicine, Radiation, Oncology)	Windhoek	Windhoek Oshakati		

Table 5

