



MINISTRY OF HEALTH WORKFORCE DEVELOPMENT PLAN 2019-2025

“Building capability and leadership”

Workforce planning is a continual process used to ensure the organisation has current and future access to the human resources it needs to perform effectively. It aligns the needs and priorities of the organization with those of its workforce to ensure it can meet its regulatory, and service requirements and organizational objectives. Continual analysis of workforce effectiveness and implementing the necessary measures, such as learning and development initiatives and succession planning will ensure the workforce remains efficient.

Acronyms and definitions

APTC	Australian Pacific Technical College
DFAT	Department of Foreign Affairs and Trade
DG	Director General
DoCSPP	Directorate of Corporate Services Policy, Planning.
DPU	Directorate of Public health
EPI	Expanded Program of Immunisation
EH	Environmental Health
GoV	Government of Vanuatu
GRT	Government Remuneration Tribunal
HIS	Health Information System
H&CS	Hospitals & Curative Services
HRM&DU	Human Resource Management and Development Unit
HRD	Human Resource Development
HRM	Human Resource Management
HRMIS	Human Resource Management Information System
HSS	Health Sector Strategy
ILDp	Individual Learning and Development Plan
L & D	Learning and Development
MOH	Ministry of Health
MDGs	Millennium Development Goals
NCD	Non-communicable disease
NGO	Non-Government Organisation
NSDP	National Sustainable Development Plan
OPSC	Office of the Public Service Commission
PHC	Primary Health Care
PMDS	Performance Management Development System
RDP	Role Delineation Policy
UHC	Universal Health Coverage
VNSO	Vanuatu National Statistics Office
WHO	World Health Organisation
WPWG	Workforce Planning Working Group

Executive Summary

1. Introduction	1
2. Overview of Vanuatu: its Communities and its Workforce.	3
2.1 Demographic Profile of Vanuatu	3
3. Planning Process and Considerations	5
3.1 Principles of the Plan	5
3.2 Considerations for MoH	5
3.3 Assumptions	6
3.4 Workforce planning challenges	7
4. Health Demographics	9
4.1 Health Services and Utilisation	11
5. Current workforce	14
5.1 Workforce size	14
5.2 Workforce deployment	14
5.3 Descriptive information by cadre	16
5.4 Distribution of Health Workers	17
6. Current Vacancies	18
7. Human Resource management and development	19
7.1 Human resource management issues	19
7.2 Staff performance issues	21
7.3 Human resource development	22
8. Gap analysis	26
9. Workforce projections	26
10. Priority Areas for Action	30
11. Implementation and Monitoring	34
11.1 Monitoring of Plan	35
Implementation Plan	36

Appendices	Appendix A	Terms of Reference Workforce Planning Working group
	Appendix B	Workforce Planning Consultations
	Appendix C	GRT Permanent positions list
	Appendix D	MoH Organisational Structure vacant positions
	Appendix E	Organisational Structure Recruitment Priorities 2018

Executive Summary

A capable, committed and motivated workforce is central to the success of any business. Getting the right people into the right jobs requires a commitment to attract, develop, retain and recognise talented and motivated employees who are aligned to the vision and values of the organisation.



MoH Emergency Mental Health and Psychosocial Support Response to Ambae

In MoH we are privileged to have a committed workforce that has proved to be resilient in times of significant internal and external challenges, including responding to and managing the health needs of those affected by natural disaster such as Cyclone Pam and the more recent Manaro volcano disaster in Ambae.

In order to meet the complex challenges and health needs of our growing population, and to embrace new technologies and innovation in delivering quality health care to all citizens of Vanuatu, MoH needs to ensure their workforce is adequate in supply and appropriately skilled and supported.

The MoH vision for the future is *to have an integrated and decentralized health system that promotes an effective, efficient and equitable health services for the good health and general wellbeing of all people in Vanuatu* “

A key priority to realising this vision is to address workforce issues.

The MoH Workforce Plan outlines the challenges and issues and the strategies required to produce a sustainable workforce; one that is capable of delivering continuously high-quality health care to the people of Vanuatu. It has been designed to meet overall MoH strategic and operational framework and aims to integrate with and support the goals and objectives of the NSDP 2016-2030, HSS (2017-2020) and achieve workforce growth in line with MoH organisational structure 2017-2030.

To effectively meet the increasing and shifting demands for health care across all provinces, MoH needs to have the capability within its workforce to achieve this. This includes the capabilities required to implement effective workforce planning that ensures an adequate supply of appropriately qualified health workers are working in the right places, that is, where they are needed most.

MoH faces many challenges including workforce skills shortages and an ageing workforce. Added to this, is the ability to meet the community's needs and expectations and deliver quality health care within the financial constraints and limitations.

To address these and other workforce challenges, the Plan considers four (4) Priority Areas for Action to achieve having the right people with the right skills, undertaking the right tasks.

1. Strengthen workforce capability and ensure skills are targeted to priority areas of need.

2. Strengthen Workforce planning, policy and hr management to achieve workforce growth targets and ensure a sufficient supply of skilled health and support workers to meet current and future health needs.

3 Build a positive supportive sustainable workplace culture that promotes honesty and integrity and enhances health care delivery, staff satisfaction, motivation and work performance.

4. Build organisation-wide leadership capability to ensure MoH is well placed to achieve its vision of an integrated and decentralized health system that promotes universal health coverage

1. Introduction

The Workforce Development Plan 2019-2025, referred to as the Plan in this document, follows on from 2 previous MoH workforce planning documents:

- Health Workforce Development Plan 1992 – 2006 (published in 1993) and
- Second Health Workforce Plan 2004 to 2013 (published in 2004)

Both plans were not implemented contributing to the current staff shortage, particularly in the nursing cadre, and to the growth of the workforce in a responsive/ reactive way rather than an integrated and well-planned manner.

This Plan amalgamates the issues and recommendations identified in the previous plan with current information obtained through more recent consultation and research. It has been designed to meet overall MoH strategic and operational framework and aims to integrate with and support the HSS (2017-2020) and NSDP 2016-2030.

Implementation of the Plan will require strong and committed leadership, good governance, access to accurate workforce data and a capable, skilled and committed workforce, particularly in the areas of HR, Planning and Finance.

The Plan will form the basis for ongoing evaluation of the health workforce, allowing changes to be measured over time and inform future decision-making.

Regular review of the Plan will enable the MoH to identify emerging issues that have an impact on health human resources and respond appropriately.

Since completion of the last workforce plan a number of significant developments have occurred that have guided the development of the new workforce plan.



MoH has embarked on a major organizational restructure to be implemented over a period of 14 years (2017-2030).

The restructure is an integral part of a MoH broader health services reform designed to support the MoH to realize its vision of an *“integrated and decentralized health system that promotes effective, efficient and equitable health services for the good health and general wellbeing of all people in Vanuatu.”* (Implementation Plan 2017-2030).

Launch of the new MoH organisational Structure May 2017

Although the new structure was designed to take MoH through to 2030 and identifies an additional **1,780 positions¹**, taking the total staffing from 977 on payroll (741 permanent 236 contract/project) to 2,521, the methodology used to calculate these future workforce requirements remains unclear.

Therefore, it is a reasonable assumption that the organisational structure will need to be modified as the workforce plan evolves, national and provincial health service plans are completed and priorities are determined based on key critical issues, emerging needs and available funding.

¹ The additional positions 1,780 includes the 236 contract/project positions currently on payroll and included in vacancy lists. The 1,780 plus the 741 permanent staff on payroll adds up to the organisational structure total of 2,521.

A new MoH Health Sector Strategy (HSS) 2017-2020 has been developed to meet the policy objectives of the **National Sustainable Development Plan (2016-2030), Society Goal 3**, “A healthy population that enjoys a high quality of physical, mental, spiritual and social well-being”, as follows:

Ensure the population of Vanuatu has equitable access to affordable quality health care through the fair distribution of facilities that are suitable resourced and equipped.

Reduce the incidence of communicable and non-communicable diseases health and well-being.

Build health sector management capacity and systems to ensure the effective and efficient delivery of quality services that are aligned with national directives.

In seeking to meet these policy objectives the HSS is built upon 3 key strategic directions of:

- Strengthening health service management and information systems.
- Improving population access to health services through integrated planning, and fair allocation of resources.
- Strengthening collaborative action across sectors and within the health sector to create a healthier environment and address major health issues.



MoH mission

To protect and promote the health of all people in Vanuatu.

MoH values

Consumer Focus - the first priority and concern in the provision of health care,

Equity - Irrespective of culture, ethnicity, location, disability, age, gender, religious and political affiliation, all clients must be treated as equal, and according to their health needs.

Quality all health care activities will pursue high quality outcomes using safe and affordable interventions and the application of science and technology to maximize benefits to health while minimizing risks.

Integrity - committed to the highest ethical standards in the provision of care and will strive constantly for improvement

Efficiency - cost – conscious, and aim to avoid wasting resources by achieving value for money

In addition, the new salary scale (GRT) introduced in 2018 has meant a significant and long overdue increase in public service salaries. This places increasing pressure on government to meet the additional costs and on MoH to ensure funding is appropriately allocated and well managed.

Building upon the HSS (2017-2020) the Workforce Plan will focus on the four (4) Priority Areas for Action outlined in the Plan.

A separate Medical Workforce plan is currently being developed and will be integrated into the broader plan once completed

Ensuring effective implementation of the plan is everyone’s responsibility and requires strong leadership. Ongoing monitoring of all aspects of the workforce Plan is critical to ensuring MoH becomes a workplace where people want to work and where staff are equipped with the qualifications and capabilities required to deliver quality health care services when and where they are needed.

2. Overview of Vanuatu: its Communities and its Workforce

The Republic of Vanuatu is an archipelago consisting of some 83 relatively small islands, 65 of which are inhabited, in the South Pacific Ocean. Vanuatu has a population of approximately 272,459 residents, the majority living in rural areas (204,710) spread across the islands that make up the 6 provinces of Vanuatu - Shefa, Sanma, Tafea, Penama, Malampa and Torba. Vanuatu boasts 106 distinct languages and innumerable dialects making it one of the most culturally diverse countries on earth. Out of the three official languages, Bislama is the most spoken in Vanuatu, followed by English, and then French. There are over 115 distinct cultures spread across the inhabited islands which makes meeting the health needs of a largely rural population a significant challenge for Government and MoH.



As a nation, Vanuatu is still relatively young and unique, and is still locating its “postcolonial” identity. Kastom way of life still exists in Vanuatu today and culture and traditional ways of doing things combined with a highly politicised public service often influence decisions and impact on workforce planning, governance and service delivery. Finding a balance between respecting and maintaining traditions and culture (Kastom governance indigenous/local) and government is an ongoing challenge.

The region is subject to a range of natural threats including tropical cyclones, earthquakes and volcanic eruptions. This is reflected by the country’s No.1 ranking on the World Risk Index. In March 2015 Tropical Cyclone Pam struck Vanuatu causing significant damage and several deaths.

2.1 Demographic profile

As of 31st December 2017, Vanuatu has a population of 272,459 with the annual population growth at 2.3% (Source: 2016 Mini Census Data - VNSO). The most rapid growth is occurring in urban areas (2.6%), in Port Vila, Shefa province (3.4%) and Luganville, Sanma province (2.6%), suggesting a pattern of urban migration that is supported by other census data.

Rural areas experienced an average annual growth of 2.3% however there was considerable variation in growth between provinces, with Penama province demonstrating the slowest growth of 0.8% per annum.

According to the census data (Table 1) there are more males than females in most age groups in Vanuatu. With males accounting for 51.3% of the population, and females 48.7%. Children under-five make up approximately 14% of the total population.

Table 1. Population Vanuatu - Mini census data 2016

Indicator	Vanuatu	Urban	Rural	Torba	Sanma ^a	Penama	Malampa	Shefa ^a	Tafea
Population Count									
Total population	272,459	6 7,749	204,710	10,161	54,184	32,534	40,928	97,602	37,050
Males	138,265	34,506	1 03,759	5,153	27,901	16,549	20,689	49,541	18,432
Females	134,194	3 3,243	100,951	5,008	26,283	15,985	20,239	4 8,061	18,618
Population Characteristics (%)^c									
Number of children (<15 years)	104,561	2 1,547	83,014	4,179	20,765	1 3,497	16,443	3 2,607	17,070
Youth population (15-29 years)	70,042	2 1,271	48,771	2,460	14,105	6,789	8,786	2 9,077	8,825
Population aged 30-59 years	75,418	2 1,159	54,259	2,604	14,268	8,668	11,438	2 9,777	8,663
Older population (60 years and older)	16,534	2 ,832	13,702	632	3,007	2 ,380	3,330	4 ,944	2,241
Median age	20	2 3	19	19	19	19	20	23	19
Av. annual popn growth rate (%)	2.3	2 .6	2.3	1 .2	2.6	0 .8	1.6	3 .4	2.0

Source: 2016 Mini Census Data - Vanuatu National Statistics Office (VNSO)

(a) includes urban areas (Luganville and Port Vila respectively)

Rapid population growth is a long-term trend in Vanuatu, with population increasing by over 25% over the last decade. A high population growth rate places additional pressure on the Vanuatu economy as it seeks to accumulate more human and infrastructure capital to keep up with the needs of an increasing population. The statistics indicate the need for increasing service provision at both ends of the age spectrum.

It also creates a significant challenge for the country's health system. This is especially the case with the sustained high birth rate. In 2015, 3.3 babies were born per woman of child bearing age; little changed from the rate of 3.5 in 2009.

3. Workforce planning process, principles and considerations

Prior to the completion date of the last workforce plan (2013) a number of reviews and consultations were held. The intention was to have a new workforce plan in place to guide MoH workforce development through to 2033, however despite good intentions this did not happen.

Several reports were produced and a recent analysis of these concluded that the information, including the issues and priorities previously identified, still holds significant relevance to the current MoH workforce environment.³

A Workforce Planning Working Group (WPWG) (Appendix A) was established in February 2018 and several consultations held with MoH staff. (Appendix B)

The information obtained during the 2013 and 2017/18 consultation and review process confirmed vast gaps in the implementation with little to no progress made on implementing the majority of recommendations and minimal change on the issues and actions in the previous workforce plan.

The Workforce Plan has been developed using the information from the previous plan, the reviews and the more recent consultations, and focuses on building the capability and productivity of the current workforce, planning for future workforce growth and developing a workplace culture led by strong leadership.

3.1 Principles of the Plan

The Workforce plan is built upon the principles as set down in the Health Sector Strategy 2017-2020 as follows:

- **Universal Health Coverage (UHC)** – ensuring that all citizens have equitable access to affordable health care, including emergency, curative and rehabilitative services, regardless of their age, gender, race, socio-economic status or where they live.
- **Primary care (PHC)** is the foundation of the health system and remains the core strategy for addressing most health issues.
- **Responsibility for health requires multi-sectoral action** – including partnerships with other government agencies, development partners, NGOs, the private sector and civil society.
- Health services should be ‘people-centred’ and the needs of disadvantaged and vulnerable populations, those with disabilities and victims of violence, must be addressed.
- **The health system should provide a continuum of care**, through integration of public health and curative services.
- **Health services should be high quality and delivered** in a cost-efficient way by staff with recognised skills and qualifications. Advocacy and active community engagement is important in encouraging communities and individuals to be responsible for their own health

3.2 Considerations

Public health services (MoH) operate within an environment where there are significant pressures on time, cost and resources, as well as political pressures and an increasing level of public scrutiny.

In determining the investment in the future MoH workforce a number of factors and influences need to be considered:

The specific drivers for the development of this Plan include:

- MoH is the only health provider providing country wide health care in Vanuatu. To develop a reputation for quality, responsive health care, core skills need to be developed, retained, refreshed, and refined to meet changing demands.
- There must be a continuing focus on enhancing clinical and administrative leadership and management capability at all levels of the organisation, from strategic decision making, to effective problem solving at the

³ Creating a Health Workforce Plan for Vanuatu for the period 2014-2033 (Norbert Dreesch WHO/STC ;Health Workforce Planning in Vanuatu: Current situation and options for future support (Bronwyn Fields May 2009);Review of Human Resources in the Health Sector Concept Note ;Vanuatu HR Sector Planning support (James Buchanan 2011)

front line. Leaders and managers need to understand what is required of them to enable them to work together and share ideas across the organisation to support MoH strategic and operational objectives

- The Plan is to be viewed as a dynamic, fluid process and as such requires key leaders to ensure that it is implemented in a timely and consistent manner. To ensure this a Workforce Planning Working Group will oversee the Plan's implementation across the various Directorates, and will ensure appropriate support provided.
- MoH has a responsibility to the citizens of Vanuatu to lead by example and operate within the values that it strives to uphold including integrity, transparency and accountability. Management must be committed to the organisation's values, and visibly demonstrate ethical behaviours, as well as appropriately manage the work practices and behaviours of their staff.
- The community is increasingly aware of their rights and MoH need to plan ways to consult and involve community more in public health related matters. Accordingly, MoH needs to ensure openness in its communications, and be skilled in consultation and negotiation
- Increasing competition for funding within a limited government budget, combined with growing demands and expectations on an already stretched health service requires innovation and a willingness to challenge traditional ways of undertaking work practices
- Unlike many countries alternative health related employment options are limited in Vanuatu therefore staff retention is high. MoH needs to ensure that staff are not taken for granted and must endeavour to create conditions under which MoH is seen as a desirable place to work where people are motivated and committed.
- Successful and full implementation of the Plan will only be achieved if it is viewed as being everyone's responsibility, with each staff member being provided opportunity to engage in the process including evaluation of the outcomes.

3.3 Assumptions

A number of assumptions guide the development of the Workforce Plan.

Key assumptions include:

- The population will continue to grow at 2.3% per annum for the planning period;
- Funding will be prioritised by the MOH Executive at a minimum allocation of 110 Million Vatu per financial year to meet training commitments and requirements and align with NSDP targets for 2020, 2025 and 2030 for employment of staff.
- Optimal personnel to budget ratio is recognised to be 60:40.
- The Workforce plan will align with the Corporate Services Plan and National/Provincial health Services Plans (to be developed)
- The new organisational structure may require changes as evidence-based workforce planning occurs
- The shortage of qualified local nurses will continue for the planning period requiring MoH to explore alternative options including extending retirement age for eligible and qualified nurses and external sourcing options such as overseas recruitment.
- Natural disasters and climate change related events will continue to threaten Vanuatu with the potential to impact on health service planning and delivery.
- The burden of disease through NCD's will continue to place increasing pressure on health systems
- The government and MoH will ensure Primary health care, including community health services remains a priority and allocate budget accordingly
- Donor support for the health sector will be maintained at least at the current level of approximately 21%
- MoH Executive will embrace all aspects of the workforce plan and drive its implementation
- All service levels and associated health professional staffing requirements to provide packages of health care will be clearly defined in the Role Delineation Policy
- Distribution of health professionals is to be considered at national and provincial level and equitable access to health services remains a driver for priority of workforce placement
- Training timeframes for clinical staff (inclusive internships) remains a critical factor for planning to increase the clinical workforce
- MOH will support in service training of staff utilising traditional and innovative training methods where accessible.

These assumptions have significant implications for the strategic directions of the Workforce Plan.

Given the projected increase in the future workforce numbers as defined in the new organisational structure and the financial constraints, it is unrealistic to expect that the MoH will be able to grow its workforce to this level.

This has necessitated an approach to workforce planning that seeks to:

- Increase the efficient utilization of the current MoH workforce, including to better match the workforce to the health service needs of the people (through, for example, targeting skills to where they are needed most and multiskilling of staff working in rural areas);
- Improve the technical and leadership capabilities and productivity of the current workforce;
- Improve workforce policy, planning and hr management functions to better plan for workforce growth

The foundation to achieving the above is a supportive and positive workplace culture where people are valued and rewarded and feel motivated and committed to delivering quality people centred health services.

3.4 Challenges

The workforce profile of MoH is likely to change significantly over the next decade.

MoH is potentially facing a substantial loss of experienced, and skilled senior staff. Additionally, the population is ageing, and the organisation will be left with workforce gaps **if succession planning is not addressed**.

The rapid increase in non-communicable diseases creates a greater need for primary and preventive care and a generalist workforce with skills and knowledge to manage patients with a broad range of conditions and in a community health setting.

Alternative health services are almost non-existent as MoH is the only large health service employer. Regardless of its hold on the delivery of health services MoH needs to ensure it becomes a place where people seek to work and where the culture of quality people centred services is re-enforced.

Work patterns are also likely to be very different, with people looking for more flexible workplace arrangements. The rigid and inflexible work patterns currently dictated by the OPSC will need to be challenged in order to meet future need of both the health services and lifestyle patterns and enable staff to have a more balanced work/ life situation, however before this can occur MoH needs to address the organisational culture and specifically the areas of leadership, management, governance and the central place of patients and community health needs.

Organisational culture – workplace culture is critical to the success or failure of any organisation even more so in a health service delivery organisation. A strong supportive organisational culture that values its people, encourages and supports continuous learning and creates a strong sense of services to the population can affect the overall performance of the organisation and inspire and motivate staff to improve performance resulting in better health service delivery for the community.

Workforce shortages are seen as one of the major factors limiting the fair distribution of health services. Many public health facilities are understaffed, particularly in rural areas, and some are not staffed at all, resulting in a misleading impression on the delivery and effective availability of health services. While the medical workforce is increasing in size and offers the chance to place more doctors in provincial settings, most new doctors are either quite inexperienced or refuse to go to provinces. This reluctance for rural posting is re-enforced since the support for medical staff allocated in the rural and remote area is non-existent. This will be addressed in the MoH Medical Workforce plan. MoH may need to radically change how some services are provided in rural outpost and find new ways of staffing these health centres such as scheduled time tables for certain staff like dental, mental health, nutrition etc).

The lack of workforce planning and management has contributed to the current staff shortages and resulted in a reactive rather than planned and systematic approach to recruitment, creating the gap between staffing requirements and available workforce, particularly in nursing. Access to accurate workforce data to inform planning continues to be a major contributing factor and needs to be addressed.

Knowledge, skills and capability - To enable innovation and transformation in the delivery of health care, investment in workforce capability is needed. This will ensure staff have the knowledge, skills and capabilities to effectively undertake their role and will build MoH ability to attract the right people. The current skills deficit across a range of areas, particularly in areas of leadership and management impact on work performance which in turns effects the capacity to deliver quality health services.

The lack of strong leadership and good management is seen as one of the primary causes of many of the workforce challenges facing MoH. For example, most people appointed to management positions within do not have management qualifications or experience, even though they may be highly skilled health professionals in their chosen field. There is also a need to adopt a more systematic approach to developing specialist skills in clinical services and primary healthcare. In particular, the growing need for more specialist nursing roles [e.g. midwives, nurse practitioners, public health nurse, diabetes educators, mental health nurses, surgical nurses, critical care nurses].

Governance is weak with a lack of oversight of the performance of the health sector and little coordinated reporting of health service outputs, financial information and business planning activities. This has resulted in limited understanding of how resources are being utilised. Governance needs to be strengthened to ensure accountability for how MoH plan, manage and deliver services in to the future.

There is a mismatch between Government policy (NSDP 2016-2030) and health expenditure. Resource allocation is currently skewed towards curative services particularly those at Vila Central Hospital (VCH) which acts against the policy commitment to Primary health care. Public health expenditure has remained static or declined slightly over the past five (5) years, and as more funding has flowed to hospitals, the PHC share has fallen. If UHC is to be achieved this imbalance needs to be addressed.

Information systems have improved and a large amount of data is being collected however variations exist between provinces in their consistency to report and also on the accuracy of the data collected. There is a lack of or limited analysis leading to minimal flow of information back to staff managing and delivering services, and for use in planning and decision making. The lack of feed-back and use of the data to the lower level that initiated the work and data collection does not motivate the staff to improve the quality of both data collection and reporting.

There is limited integration of curative and public health services with separate 'silos' leading to poor coordination and inefficiencies in resources, including human resource use. There are some models (like Integrated Management of Childhood Illness (IMCI), Malaria Program) that work well to link up separate parts of the system to provide a 'continuum of care', but this area needs more attention, particularly for people with complex and chronic health needs. With a small and geographically dispersed population, the need for a clear health services coverage plan that integrates services is essential in Vanuatu. The model of more specialised and "vertical" services is detrimental to the effective and cost-effective delivery of services.

Performance Management and Development (PMDS). Staff need to be clear about the expectations and responsibilities of their jobs and supported and managed to ensure optimal work performance. PMDS needs to be integrated with learning and development and other key planning and health services delivery activities and performance management strategies undertaken to address performance issues.

Operational management of workforce staff accruals have been an increasing problem challenging the capacity of MoH to manage the rising costs. It is vital that leave policies are implemented to reduce leave balances and align entitlements with the prescribed levels.

Scope of practice for health workforce professionals. New health care approaches need to be explored based on the current and future health needs for example outreach models to meet the needs of remote communities, will require review and redesign of roles, models of care and new innovative ways of working.

MoH must prepare to meet these challenges by having the workforce capability to respond. The workforce will need to include more and different skills in meeting the challenges facing the health needs particularly those of rural communities.

It is imperative that MoH prepares for how it will attract, recruit, and retain the skilled work force it will need for the future.

4. Health Demographics

Vanuatu has made good progress with life expectancy increasing to 69.6 and 72.7 years for males and females, respectively (*VNSO, National Population and Housing Census*)

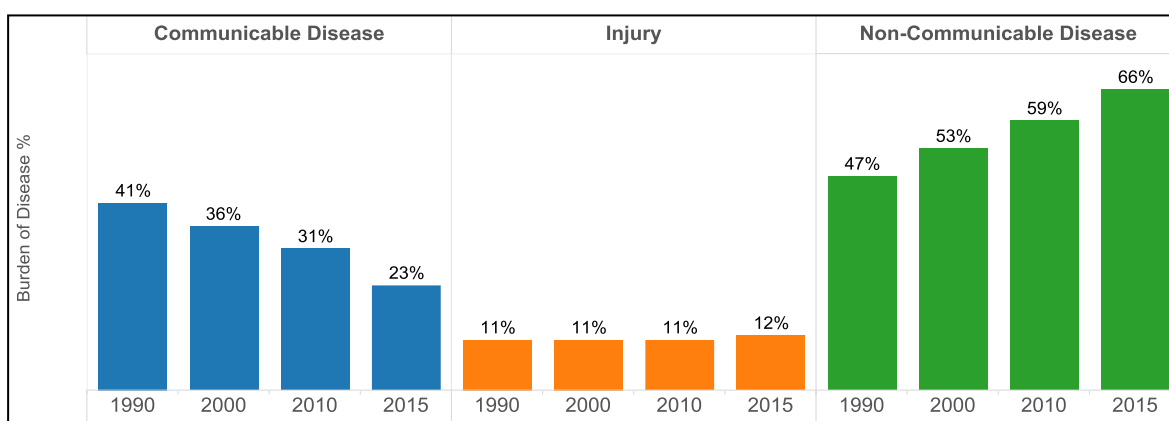
People are living longer, but the country now faces the dual challenges of dealing with both communicable diseases and the rapidly growing incidence of Non-Communicable Disease (NCD), notably diabetes and hypertension.

Emerging needs

Vanuatu, like other countries in the region faces a "triple burden" of disease: communicable diseases such as dengue, combined with increasing rates of non-communicable diseases and the effects of climate change, add to the region's already complex health challenges. At all levels of the health system and in the community, people are concerned about the rising impacts of NCDs, largely influenced by dietary changes, increased alcohol consumption, rural to urban migration and foreign influences.

Premature death and increasing levels of disability – e.g. stroke, amputation, blindness and mental illness present new challenges for the health system as the costs of managing the NCD crisis are huge and growing daily. (*HSS 2017*).

Figure 1. Burden of Disease by Cause 1990 – 2015 (Source: Institute for Health Metrics and Evaluation database, 2016)



The 2011 NCD STEPS survey for Vanuatu (World Health Organisation, 2013) showed that 19% of the adult Ni-Vanuatu population were obese and 29% had high blood pressure. These rates are reported to have increased over the past decade.

High blood sugar levels are also increasingly common. Treatment for diabetes is often delayed until traditional remedies have failed and diabetic related amputations are rising.

Data collected by HIS (2016) indicates 26,531 new cases of NCD's reported with the majority (60%) being female.

The Millennium Development Goal (MDG) 6 was met, with a reduction in deaths from malaria, from 1.6 per 100,000 in 1990 to 0 in 2014, and tuberculosis (TB), from 17.0 per 100,000 in 2000 to 6.4 per 100,000 in 2015 ⁴.

Water supply has improved with 90% of people now have improved water supply, but almost half the population does not have proper sanitation. The lack of proper sanitation facilities along with poor personal hygiene, aids the spread of infectious diseases such as TB, Acute Respiratory Infection (ARI), diarrhoea and skin diseases.

In other key areas, reported health outcomes have not been as positive. Infant mortality and under five mortality have plateaued since the turn of the century, mainly from **preventable causes**, with some links to limitations on the number of skilled health workers providing maternal child health services across the country. The infant mortality rate (IMR) measured 23 per 1,000 live births in 2015 – down by only one from 24 per 1,000 live births in 2000. (*Source: World bank data*)

⁴ World Malaria Report 2015, WHO. TB statistics (Global Tuberculosis Report 2016, WHO)

Childhood immunization coverage is improving, with coverage of the third Diphtheria, Pertussis (Whooping Cough), and Tetanus (DPT) dose at 81% in 2016, up from 55% in 2013. This is a marked improvement but it is short of the target of 90%+.

The following table, shows NCD related issues featuring in the top 2 causes for death and again through serials five (5) to seven (7) out of the top 10 causes of death over the last 25 years. The concern for the health sector relates to the upwards trend in cardiovascular disease and diabetes, both preventable through reinforcement of PHC initiatives and addressed through a competent frontline workforce being established and maintained.

Table 2. MOH Trend of Risk Factors for Vanuatu (1990 – 2015)

Rank	Risk Factor	1990	2000	2010	2015	Trend
		DALY Lost Share				
1	Cardiovascular Diseases	18%	19%	20%	21%	Increase
2	Diabetes, urogenital, blood and endocrine diseases	6%	7%	10%	10%	Increase – Plateau
3	Diarrhoea. Lower respiratory, and other common infectious diseases	18%	14%	11%	9%	Decrease
4	Neonatal disorders	10%	10%	8%	7%	Plateau – Decrease
5	Other Non-Communicable Diseases	6%	7%	7%	7%	Plateau
6	Cancer	5%	5%	6%	6%	Increase – Plateau
7	Chronic respiratory diseases	7%	6%	6%	6%	Plateau
8	Musculoskeletal disorders	3%	4%	4%	5%	Increase
9	Mental and substance used disorders	4%	4%	4%	4%	Plateau
10	Neurological disorders	2%	2%	2%	2%	Plateau

The disability-adjusted life year (DALY) is a measure of overall disease burden, expressed as the number of years lost due to ill-health, disability or early death. One DALY can be thought of as one lost year of "healthy" life. The sum of these DALYs across the population, or the burden of disease, can be thought of as a measurement of the gap.

Also, at a regional level, pneumonia and diarrhoea are among the top three killers for children under 5 years of age. For women in Vanuatu, cervical cancer is a growing concern where the crude incidence rate is 15.4 per 100 000 women. However, as Vanuatu is in the early stages of registering cancers and surveillance is still weak, the real incidence might be higher. Cervical cancer has been identified by the Pacific Leaders as a regional priority in both 2015 and 2016 Pacific Leaders Forum. This is due to the high incidence rate of cervical cancer amongst Pacific women, with approximately 1,257 cases each year and up to 684 deaths across the region.

Cervical cancer, pneumonia and diarrhoea are all largely preventable through 'new' vaccines (i) human papilloma vaccine (HPV) (ii) pneumococcal conjugate vaccine (PCV) and (iii) rotavirus vaccine (RV).

MoH continues to make concerted efforts to tackle the health issues and while some progress has been made the rapid rise of NCD's will continue to present additional health challenges.

Dealing with these new challenges needs to be seen as a priority for MoH. Current staff (hospital and community based) need to be equipped with knowledge, understanding and skills, and additional qualified staff need to be employed to fill the workforce gaps, particularly in the remote rural areas.

Health promotion activities require a multilayered, proactive approach reaching out across all provinces including remote areas, with a focus on all age groups.

4.1 Health services and utilisation

Health services in Vanuatu can be described in the context of central (National), Provincial and Community settings with different levels of health care being provided under a Community Care to Tertiary Health Care System.

Community Care - Provided through Community Health Services (CHS) with a functional Village Health Worker framework in place throughout all provinces. Facilities are not under management of the GoV, nor are Village Health Workers (VHWs) considered employees of the GoV.

Primary Health Care – Also provided through Community Health Services with services delivered at Dispensary and Health Centre level (MoH asset descriptors). Health Clinics are generally NGO, or Church run facilities which operate under MoU with the MoH. Municipal Dispensaries are shown as Government facilities but operate within urban areas.

Secondary Health Care – Provided at provincial hospital level in four provinces (Tafea, Penama, Malampa and Torba) with focus on general clinical services and essential trauma care, child health and nutrition, communicable disease, sexual and reproductive health, maternal and new born health, non-communicable disease including mental health and environmental health.

Tertiary Health Care – Provided at Regional and national referral hospital level in two provinces (Sanma and Shefa) through Northern Provincial Hospital (NPH) and Vila Central Hospital (VCH). NPH is listed as a regional referral hospital for Northern provinces and VCH as the national referral hospital for the country.

4.1.1 Health facilities

According to the Master Health Facility List below, Vanuatu has a network of 6 hospitals, 35 health centres, 91 dispensaries and 202 functioning aid posts. The majority of facilities (85%) are in rural locations serving the country's many highly dispersed villages and local communities. Some villages are extremely remote, being many hours' journey by boat or on foot from the nearest health facility.

The current distribution of health facilities which are listed as open are shown in the following table.

Table 3. Master Health Facility List (2017)		Facilities Master List						
	Tafea	Shefa	Malampa	Penama	Sanma	Torba	Total	MOH
National Administration	0	1	0	0	0	0	1	137
Provincial Administration	0	1	0	0	1	1	3	
Hospital	1	1	1	1	1	1	6	
Health Centre	4	5	9	6	8	3	35	
Dispensary	13	13	19	23	18	5	91	
Municipal Clinic	0	6	0	0	7	0	13	
Other	2	6	1	0	7	0	16	

In addition to the formal health facilities, 202 functioning Aid Posts are established around the country with Village Health Workers (VHWs) providing community care as part of a Primary Health Care (PHC) package. Aid Posts are not owned by the GoV nor maintained through health sector budgets and VHWs are volunteers, supported through training and administration offered by the MOH.

The facilities are owned by the community with functioning Aid post committees in place and are a critical component of the overall PHC approach. The intention, for some time, has been to bring the VHW's into the MoH workforce, however no serious planning has taken place to progress this.

The RDP 2017-2030 sets staffing standards for primary care facilities based on:

- The types of services to be provided, including the expectations for mobile outreach and supervision and previous staffing standards developed for the RDP (2004) and the MoH Organizational Structure for 2017 – 2030.

The staff cadres and levels required at each facility level are summarized in Table 4 below.

Table 4: Staffing requirements by primary care facility

Facility	Village Health Worker	Registered Nurse	Midwife	Nurse practitioner	Nurse Aide	Handyman	Driver
Aid Post	✓						
Dispensary		✓			✓		
Remote Dispensary			✓		✓		
Health Centre		✓	✓	✓	✓	✓	✓

The shortage of nurses combined with budgetary constraints and inadequate workforce planning means that many health centers fall short of the recommended staffing levels and some remain closed.

The MoH Organisational Structure 2017-2030 assigns Medical Officers to some Health Centers however given the existing budgetary constraints and the shortage of trained medical officers it is unlikely that Medical Officers will be employed in the near future.

This highlights the importance of developing a robust outreach model to ensure delivery of complete health services in the rural communities.

4.1.2 Health service utilisation

The exact utilisation of health services is difficult to quantify due to incomplete data.

Outpatient

According to MoH HIS data (2016) a total of 495,322 outpatient consultations were conducted via hospitals, health centres and dispensaries) including specialist clinics in 2016.

Table 5 shows the number of consultations reported by facility type and province.

Shefa and Sanma figures reflect the fact that the two major referral hospitals attract larger proportions of the population seeking specialist healthcare.

Table 5. Number of outpatient consultations reported per province, by facility type, 2016

Facility type	Malampa	Penama	Sanma	Shefa	Tafea	Torba	National
Aid Posts:	7,177	13,052	7,253	19,922	15,890	1,765	65,059
Health Centres/ Dispensaries:	33,138	40,613	83,719	78,889	20,006	10,914	267,279
OPD & Emergency:	4,779	3,879	18,755	37,434	15,540	3,427	83,814
Specialist Clinics:	<u>4,537</u>	<u>1,347</u>	<u>14,216</u>	<u>54,695</u>	<u>4,375</u>	<u>0</u>	<u>79,170</u>
Hospitals (Total):	<u>9,316</u>	<u>5,226</u>	<u>32,971</u>	<u>92,129</u>	<u>19,915</u>	<u>3,427</u>	<u>162,984</u>
All Facilities:	49,631	58,891	123,943	190,940	55,811	16,106	495,322

HIS Data - Number of outpatient consultations reported per province, by facility type, 2016

Inpatient Admissions

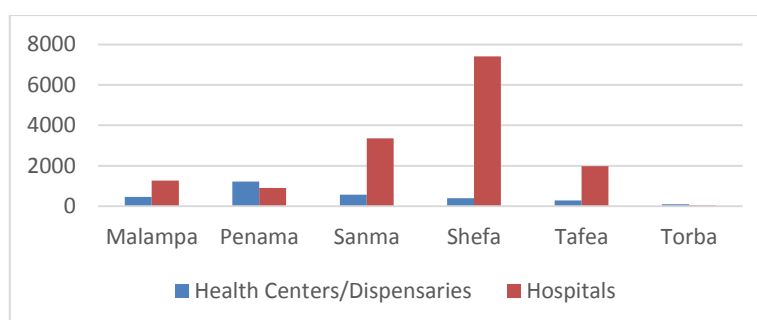
The number of reported inpatient admissions for 2017 is less when compared to the previous two years. A decrease at Norsup Hospital may be due to absence of a Doctor for several years now and also not having a HIS officer during 2017.

With the exception of Penama provinces, hospitals accepted a far greater number of patients in 2017 than all of the health centres and dispensaries combined. This is not surprising given they are better equipped and designed to manage inpatients compared to health centres and dispensaries.

In Penama, the geographical location of Lolowai Hospital and the population density of Pentecost Island makes access to the hospital more difficult plus there are several health centres with significant capacity to care for inpatients. Lolowai Hospitals reported 42% of all inpatient admissions to facilities in Penama.

Similarly, the Qatvaes (Sola) facility in Torba admits a smaller proportion of the overall inpatients for the province because of its geography and size. Although Qatvaes has relatively fewer beds and a smaller capacity for accommodating inpatients, it still accepts a large proportion of admissions for the province, approximately 30%.

Figure 2. Number of Inpatient Admissions per Province (Disag by Facility) 2017



Understandably the inpatient load is greatest at the large referral hospitals in Sanma (NPH) and Shefa (VCH) hospitals where patients are regularly accepted from other provinces for treatment and care, and where there are more resources to accommodate patients.

Table 6. Inpatient Admissions by Province (Disag by Type of Facility)

Facility Type	Malampa	Penama	Sanma	Shefa	Tafea	Torba	National
Health Centres/Dispensaries	462	1230	572	404	295	105	3068
Hospitals	1263	903	3353	7407	1978	44	14948
Total Inpatient Admission	1725	2133	3925	7811	2273	149	18016

5. Current Workforce

One of the main roadblocks to effective workforce planning has been the ability to obtain accurate and consistent workforce data. It is critical that this is addressed as a priority within the implementation of the workforce plan.

The following workforce data was obtained from the June 2018 Employee payroll⁵, HRMDU⁵, and HRMIS⁶ however it is important to note that a number of additional staffs may be engaged under contract but have not yet been added to the payroll system further reinforcing the need to improve workforce data management.



5.1 Workforce size

As at June 30th 2018 MoH listed 977 staff on payroll. This includes approximately 741 permanent staff and 236 contract or project staff. Although currently on payroll the 236 contract staff are included in the current vacancy list with plans for some to be absorbed into MoH staffing, some to come across on direct appointment and the remaining will be advertised.

Table 7. Workforce Summary. Source: MoH Employee payroll. HRMDU database

Cadre	Total	Female	Male
Doctors	39	33%	68%
Allied health	63	38%	62%
Nurses	408	60%	40%
Nurse Aides	130		
Support Staff *	248	45%	55%
Directors & DG	4	0%	100%
Interns *	85		
Total	977		

* Support staff include positions that support the planning, administration, delivery and maintenance of health services such as secretarial, management, IT, health information, hr, finance, assets, cleaning, catering etc.

* Interns include all interns including medical (34), nursing (30), allied (14) and public health (7).

5.2 Workforce deployment

MoH staff are deployed over 3 directorates; Directorate Corporate Services Policy and Planning, Directorate Public Health and Directorate Hospitals and Curative Services.

MoH employs staff across a range of cadres including staff with health qualifications, those with technical qualifications, such as in finance, IT or management, and those with work skills in support areas such as laundry, maintenance and cleaning.

A number of staffs with health qualifications are employed in administrative or management roles, where their health qualifications may or may not be fully utilized.

⁵ MoH Employee payroll June 2018 and reviewed by HRMDU

⁶ HRMIS April 2018

CADRES	61RB – VCH	61 RH - SHEFA PROVINCE	61RG - LENAHEL HOSPITAL	61RI TAFEFA PROVINCE	61SG - LOLOWAI HOSPITAL	61SJ PENAMA PROVINCE	61SF - NORSUP HOSPITAL	61SK MALAMPA PROVINCE	61SB - NPH	61SI SANMA PROVINCE	61SH TORBA PROVINCE	Torba Hospital 61SD	61UA PUBLIC HEALTH	61QA CURATIVE & HOSPITALS	61VA/VY	TOTAL per Cadre
Doctors	21		3		3		2		6						4 Cuban	39 (13 expat inc Cuban)
Dentists	4						1		3							8
Radiology	8		1						3							12
Laboratory	14		2						4							20
Other Allied	11		1			2	1		4				4			23
Nurse Practitioner	5	2	2	3	1	3	3	3	6	6	1	2	1		1	39
Senior Midwife	9	2	2	1	3	0	3	1	5	6	1				5	38
Midwife	4	2	4	1	0	3	2	5	3	1	1	1				26
Senior Nurse	43	0	7		3	2	6	5	22		2	3			9	103
Registered Nurse	41	19	9	11	4	26	10	27	20	21	5	2	7			202
Nurse Aides	22	7	11	11	2	11	9	24	15	11	6	1				130
Intern doctors	34															34
Intern Allied	2															2
Intern Lab	8															8
Intern Nurses	10		4		3		4		9							30
Intern PH officers													7			7
Intern Dentists	2															2
Intern radiology	2															2
Support Staff	58	10	11	4	7	7	13	13	42	10	4	4	30		35	248
Director													1	1	1	3
Director General															1	1
Total staff	298	42	57	31	26	54	54	78	142	55	20	13	50	1	56	977

Breakdown of staff distribution is shown by cost centre.

Source: MoH Employee payroll June 2018.

5.3 Descriptive information by category

5.3.1 Nurses

Nurses, including midwives nurse practitioners and nurse aides and intern nurses, make up the largest proportion (58%) of the health workforce. They are the primary service providers for the majority of the population, through their work in Dispensaries and Health Centres. They also provide much of the day-to-day care to patients in Hospitals.



Registered Nurses - There are approximately 305 registered nurses, working in MoH in hospitals and community health settings.

Midwives - The MoH employs 64 midwives, who work in both community and hospital settings. In Health Centres, midwives provide a wide range of maternal and child health Services. In addition, midwives participate in the provision of general health services to the community, including after-hours emergency services to men, women and children. In hospitals, midwives work in the maternity ward under the direction of doctors, providing care during labor and delivery and in the immediate postnatal period.

Nurse Practitioners - Nurse practitioners work as senior health service providers in Health Centres and in certain areas within Hospitals. They provide assessment and clinical management of patients, as well as community health services. They participate in on-call rosters to ensure 24-hour health service coverage. The MoH employs 39 nurse practitioners. Nurse practitioners are often in-charge of Outpatient areas in hospitals, and in smaller hospitals may be the most senior health worker present in the absence of the doctor.

Nursing qualifications

Table 9 shows the nursing qualifications and breakdown of nursing staff working in hospitals, community health, public health, planning and administration and training and development. Four hundred and thirty-eight (438) staff have a Diploma of Nursing and one hundred and twenty-four (124) of these have obtained additional qualifications.

Table 9. MoH Nurse Qualifications as at June 2018. Source: HRMDU database

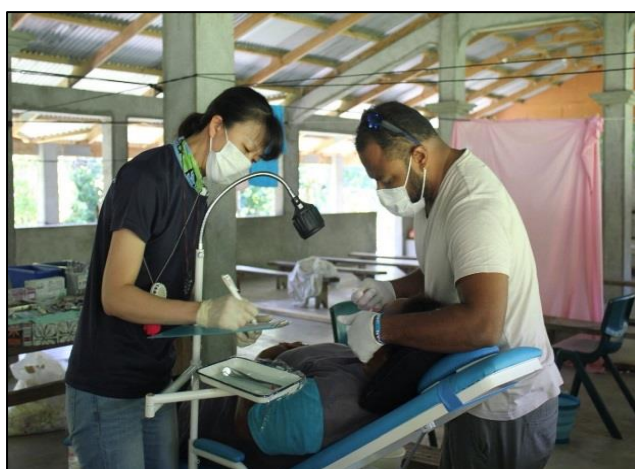
Qualifications held by Nurses	Hospital	Community health	Public health	Planning & Admin.	Training and Development	Total
Diploma of Nursing	225	164	8	3	38	438
Additional qualifications held by Nurses						
Advanced Certificate in NP and Midwifery	12	8				20
Postgraduate certificate Midwifery	22	19			1	42
Post Graduate Diploma in Midwifery	10	4		1		15
Postgraduate Certificate Nurse practitioner	12	10				22
Bachelor in Emergency Nursing	1					1
Post Graduate Certificate in Anaesthesia	3					3
Post graduate certificate in ICU Nursing –	1					1
Post Graduate certificate in Paediatric Nursing -	1					1
Post Graduate diploma in Mental Health Nursing	2					2
Post Graduate Diploma in Primary Eye care	4	1	1			6
Bachelor of Clinical Nursing (Child Health)	2					2
Bachelor in Public Health		2		1		3
Masters in Midwifery				1		1
Post graduate Certificate in Health Management				1		1
Masters in Nursing Education					1	1
Diploma of Teaching					3	3

5.3.2 Doctors

As stated earlier a separate medical workforce plan is being developed by Aspen Medical and will be integrated within the broader workforce plan once completed.

Based on MoH payroll data June 2018 there are 26 local doctors employed by the MoH. An expatriate medical workforce of 13 doctors currently supplements the local supply of ni-Vanuatu doctors. In addition, visiting specialist health teams visit Vanuatu regularly, providing services in fields such as diabetes, orthopaedics, plastic surgery, ophthalmology, heart care, and ear, nose and throat. It is important to note that the majority, 21 of the total of 39 doctors (local and expat), are located at Vila Central Hospital **which is an issue that needs to be addressed in the immediate future.**

The (Draft) Medical Workforce Plan identifies that a sustainable medical workforce requires an average of 2 students to enter into a medical training program each year and a maximum of 3 intern positions be offered by Ministry of Health each year.



5.3.3 Dentists and other oral health workers

There are 8 dentists working in Vanuatu for the MoH. Four (4) at VCH, three (3) at NPH and one (1) at Norsup Hospital. There are ten (10) oral health workers including dental technicians, dental therapists, hygienist and consultant working across VCH, NPH and in the health promotion unit.

5.3.4 Allied health workers

The allied health workforce includes staff working in diagnostic services such as laboratory and radiology, those working in rehabilitation or in dietetics. A total of sixty-three (63) staff are employed in the allied health area.

5.3.5 Pharmacists

There are five (5) pharmacists' positions and seven (7) dispensers employed by MoH. One of the pharmacists is currently occupies the Principal Pharmacist position located at Port Vila national.

5.4 Distribution of health workers

Obtaining accurate numbers on the current number of health workers is challenging due to inadequate workforce data systems and management. Based on the MoH employee payroll June 2018 there are approximately 440 health workers (Doctors, nurses, midwives) including approximately one hundred and one (101) health workers on contract.

This equates to approximately 16.17 per 10,000 population including contract positions.

In 2016, WHO recommended that 45 health worker (doctors, nurses and midwives) per 10,000 population will be needed in order to meet the Sustainable Development Goal (SDG) population needs by 2030. This figure has been provided by WHO with the caveat that the contextual situation in Vanuatu needs to be reviewed to see whether this is possible or required. It is important to note that Doctors, Midwives, Nurse practitioners and Registered Nurses are used in this definition, however Nurse Aides are not (as they are not registered as nurses).

The MoH HSS (2017-2020) sets a target of 24 health worker per 10,000 population by the year 2020 which would total approximately 698 health workers for a projected population of approximately 291,000 (2.3% growth). This equates to approximately 260 additional health workers by 2020.

6. Current vacancies

The new organisational structure identifies an additional 1,780 permanent positions. Approximately 236 of those vacant positions have been occupied by workers on a contract basis, many people being kept on contract for many years.

To fill every position in the organisation structure by 2030 would require MoH to recruit an average of approximately 127 new staff each year which in the current fiscal environment is highly unlikely. In addition, the structure reflects more “aspirational” targets than evidence and needs based targets so it is a reasonable assumption that the structure will need to be reviewed and modified as the workforce plan evolves, national and provincial health service plans and RDP are completed and priorities are determined based on key critical issues, emerging needs and available funding.

The organisational structure has 2,521 approved positions with 977 (741 permanent and 236 contract/project) currently on payroll as at June 2018. Vacancies are listed as 1,780 which includes the current 236 contract and project positions on payroll.

Vacancy breakdown (Organisational Structure 2017-2030)

Table 10 shows the current vacancies under the new structure per cadres also per Cost centre. A complete listing is included in Appendix F Org Structure Vacant positions.

Table 10. Vacant positions as per Organisational Structure 2017-2030

Cadres	Vacant positions	COST CENTRE	Vacancies	Nurse
Doctors	198	61VA Corporate services	36	
Dental	28	61BA DG office	8	
Corporate & Curative	66	61QA Director Curative	5	
Allied	160	61VW CMS	9	
Public health staff	232	61VY VCNE	15	
NURSES	535 (455 RN, 80 MW)	61UA Public Health	46	
NA	134	61RG Lenakel Hospital	87	30
Support	427	61RI Tafea PH	71	12
Total	1,780	61RH Shefa CH	87	14
<p>The organisational structure shows five hundred and thirty-five (535) vacant nurse positions.</p> <p>Based on the list provided this consists of four hundred and fifty five (455) registered nurses and eighty (80) midwives.</p>		61RB VCH	463	125
		61SB NPH	330	163
		61SI Sanma CH	135	39
		61SD Torba Hospital	62	19
		61SH Torba CH	60	9
		61SK Malampa CH	90	22
		61SF Norsup	82	40
		61SG Lolowai	100	42
		61SJ Penama CH	94	20
		Total	1,780	535

The capacity of the MoH to fill these nursing vacancies is limited to the available pool of applicants which locally is almost nil until further training occurs. There are approximately 32 general nurses graduating in July 2019, but after this graduation there will be no more until at July 2020 when an additional 40 will graduate.

Once VCNE implement the Bachelor of Nursing it is anticipated that there will be an intake of up to forty (40) students each course. Based on these estimates approximately three hundred and twenty (320) Bachelor of Nursing students could graduate by 2030, not considering withdrawal or failure which on average is estimated at 10%. This still falls short of the organisational structure vacancies of (455) for registered nurses.

MoH needs to consider alternative options to address the critical and worsening nursing shortage.

Plans are underway to bring in seventy-three (73) Solomon island nurses to work in hospital and community health setting for up to 2 years however there have been delays in moving forward with this. Discussions are also underway with Training Scholarship Coordination Unit (TSCU) to try and secure additional nursing and other medical scholarships to address the critical shortage in priority areas however at the very least, completion of training to graduation takes 3 years.

Filling vacancies for medical doctors, particularly specialists, and for allied health workers such as laboratory technicians, is very difficult and will be addressed in detail in the medical workforce plan.

Workforce planning must also address the current planning, recruitment and placement of newly trained qualified health workers to ensure a smooth transition into the workforce. Intern placements need to be planned in advance to avoid delays and ensure they commence work soon after they graduate. This requires forward planning in advance of their return from training, identifying the appropriate post and allocating budget for salary and allowances.

7. Issues human resource management and development

7.1 Human resource management issues

Human resource management is everyone's responsibility and needs strengthening at all levels of the system.

Under the new structure, the MoH has a Human Resource Management and Development Unit (HRMDU) which consists of human resource management functions (HRM) and human resource development (HRD) functions.

The HRM&D Unit has a total of 10 positions however four (4) of these remain vacant. Given the significant increase in workload, particularly for HRM in recruitment, there is an urgency to fill these positions to ensure the timely and efficient implementation of the organisational structure.

There is a need to standardize conditions of employment within the framework of the public service structure. Recruitment and promotion based on qualifications and merit; appropriate utilization of permanent, daily rated, contract and temporary staff classifications; grading of posts and career pathways are all areas that could be improved within the MoH. There is no flexibility of employment of permanent staff within the MoH. For example there are no part time permanent.

At present there is no relief staff to cover sick leave, maternity leave, annual leave, study leave or other planned or emergency absences of staff. This creates significant hardship for the remaining staff, particularly in smaller facilities. There is the potential for better utilization of staff to help cover staff absences and variations that occur in workload.

The current HRMIS system has the capacity to provide good human resource data and be expanded to include other relevant hr information however it is not maintained and information is inaccurate resulting in poor hr planning and misinformation. The current recording and filing of hr information also requires improving to ensure information is maintained and accessible. New systems are required and staff training and supervision strengthened.

Managers at all levels require skills in human resource management appropriate to the size and complexity of the facility or department they are responsible for. Supervisory and disciplinary activities need to be strengthened as a part of an overall strategy to increase staff motivation and improve staff performance and productivity. Allocation and distribution of staff based on both health service needs and not individual preference needs to be reinforced by ensuring appropriate disciplinary measures are taken if staff fail to present regularly for work at their allocated workplace.

Accurate information on staff attrition is not available, however it is accurate to say that staff attrition based on retirement has historically been low, largely due to the inability of the government to fund termination payments for retiring staff when they reach 55.

Table 11. MoH staff attrition. Source: Smartstream

	2017	F	M	2016	F	M	2015	F	M
Age Retirement	149	96	53	4	3	1			
Death	3	2	1	1		1	2	2	
Resignation	-	-	-		-		2	2	
Terminated	15	9	6	28	13	15	12	2	10
Total	161	107	60	33	16	17	16	6	10

There is no accurate data on medical retirements however a small number (3) are known to have retired on medical grounds in the last 12 months and with the increasing rates of non-communicable diseases, such as diabetes and hypertension in the older adult population, there is a concern that medical retirements may increase.

There has also been a slight rise in the number of staff terminations on disciplinary grounds however Smartstream, does not identify this category separately so accurate number are not available. Due to a lack of adherence to the performance management system and the requirements of the Public Service Act, and a lack of adherence to staff disciplinary policy and procedures several dismissals have resulted in an increase in legal cases for MoH.

The Smartstream system shows that between the period 2011 - 2014 there was a large number of terminations (221), however this was due to the ending of contracts for Solomon island nurses and various project staff.

Retaining quality staff so that they remain committed and motivated is also part of workforce planning that needs to be addressed. Establishing appropriate career paths for all health cadres is an important aspect of retaining staff, as well as providing them with realistic, equitable expectations regarding promotion and access to further training as they progress in their career.

7.1.1 Ageing workforce

Limitations of the government personnel databases, particularly related to date of birth, make it difficult to accurately project the staff retirements.

Until 2017 the inability of Vanuatu government to pay staff their retirement entitlements meant that staff have continued to work well beyond the compulsory public service retirement age of 55 years and into their 60/s. This resulted in a large number of staff having to retire at the same time on 31st December 2017. Within this group eighty (80) MoH staff (57.97%) were clinical or nursing staff, six (6) (4.35%) were Public Health Staff and forty-four (44) (31.88%) were support staff including corporate staff members. A total of eighty-nine (89) females (64.49%) and forty- nine (49) males (35.51%) retired.

The lack of workforce planning meant that fifty-one (51) of the staff that retired in 2017 had to be rehired to fill the workforce shortages. Due to the shortage of skilled nurses available thirty seven (37) retired nurses were rehired on contract at the beginning of 2017 along with an additional fourteen (14) corporate and other support staff.

According to HRMIS data approximately 150 staff will retire between 2018 -2025 with eighty (80) of those being nursing staff including nurse aides.

Table 12 Projected retirements 2018-2025

Projected retirements 2018 -2025									
HRMIS Current age	Retirement year	Total Permanent	Nursing (inc. Nurse aides	Support staff	Allied	Medical	Public health	Corporate	Contract staff
54/ 55	2018	25	17	5	1		1	1	4
53	2019	19	12	4	1			2	1
52	2020	12	5	4	1			2	2
51	2021	22	11	5	2	1	2	1 DG	3
50	2022	17	11	4			1	1	4
49	2023	20	9	4	2		4	1	5
48	2024	19	4	9	3		2	1	9
47	2025	16	11	3				2	3
		150 (exc. contract staff)	80	38	10	1	10	11	31

Data source: HRMIS April 2018 health report

Many staff are healthy, capable and willing to work beyond 55 and maintain a wealth of knowledge and experience to contribute, however any extension of the retirement age beyond 55 has implications in terms of a potential increase in financial liabilities for MoH.

Currently, in accordance with the provisions of the Employment Act [CAP 160], the rate of the annual leave entitlement for public servants is 24 days annual leave. This increases significantly after 20 years of unbroken service to 42 days, after 25 years to 48 days and after 30 years to 72 days.

A holistic approach is necessary to deal with the ageing workforce and knowledge retention problems. Such an approach should combine effective knowledge transfer practices and more effective HR processes and practices to ensure a more systemic approach to succession planning.

7.2 Staff performance issues

Staff performance is a combination of “can do” and “will do”. Staff need both the ability and skills required for their job, and the motivation to do it well. Skills assessments have identified that some staff lack the skills needed to perform well in their job. While the MoH program has attempted to address this with some in house trainings, funding constraints limit the accessibility of other training options. In addition, some staff with specific skills are working in posts where their skills are not appropriately utilized.

Staff motivation varies between individuals, but there is an overall concern that the concepts of professional ethics, quality of service and time management need further development within the workforce. Low motivation is due to many factors, including weak leadership and supervisory systems, a perception that salaries and/or benefits are inadequate, that some benefits are not paid per entitlement, and that there is lack of or inconsistency in rewards for good performance and discipline for poor performance.

Staff working at the community level need regular management and clinical supervision, including on the-job and other in-service training, regular communication with clinical supervisors regarding complex cases, and transport to enable referral of patients when necessary.

It is possible within PSC rules to discipline staff for unprofessional behaviour, but this must be done according to proper procedures, so action is not often taken. Managers need to develop the skills required to improve staff productivity, and to intervene when staff are performing below the required minimum standard.

7.3 Human resource development

7.3.1 Current Training

Historically, the MoH has planned pre-service training of nurses, midwives and nurse practitioners based on training capacity within the Vanuatu College of Nurse Education (VCNE) and available funding, rather than on identified health service needs.

Pre-service training of other cadres of health workers has been dependent on donor funding for students to attend overseas training programs. In the absence of clear MoH targets for different categories of health worker, this training has reflected individual preferences and scholarship opportunities, rather than health service needs.

Potential students have applied for scholarships in their preferred field of study with little understanding of the career options available to them on graduation.



A number of the public health programs, including reproductive health, immunization and child health, provide some in-service training, often supported by donor partners and NGOs, to community health staff to maintain or upgrade their skills.

This training is planned with little, if any, consultation between organizers and the MoH HRD unit. Linkages and planning needs to be strengthened between all those contributing to in-service training of MoH staff.

A Health Training Committee has been operating to oversee selection of training scholarships and more recently steps have been taken to review the Terms of References, scope and membership of this committee to broaden its role in overseeing MoH workforce training. This is seen as a positive step in planning and aligning the training needs with organisational and department goals and objectives.

7.3.2 MoH Vanuatu College of Nursing Education (VCNE)

The Vanuatu College of Nursing Education (VCNE) is under the Directorate of Corporate Services Policy and Planning. VCNE is a Registered Training Provider (RTP) as accredited by the Vanuatu Qualifications Authority (VQA) and is the main institution that provides training within Vanuatu for the nursing cadre.

It currently offers a three-year Diploma in Nursing and an eighteen-month Graduate Diploma of Midwifery.

The current practice of the MoH is to enrol 35 to 40 student nurses (Graduate Diploma) each year in order to train and graduate qualified registered nurses into the workforce, with the intention of employment within the Public Service.

Bachelor of Nursing

Plans are underway to expand VCNE scope of training to migrate the current Diploma of Nursing to a Bachelors level qualification commencing July 2019.

Discussions between MOH, VCNE and VQA in 2017 have outlined the pathway for transition of the Diploma of Nursing to a Bachelor of Nursing course to be run over the same three-year time period.

A review of the national training curriculum and accreditation process through VQA is expected to be completed by December 2018 and additional donor partner support will be required to enable VCNE to achieve successful transition to the Bachelor course by July 2019.

One of the main roadblocks to achieving accreditation is the lack of qualified tutors available to teach the Bachelor of Nursing at the VQA required level 7. The level of qualification required to teach a program is generally one level above the course that is being taught however with the exception of one (1) staff member who holds a Bachelor of Nursing, all other VCNE staff have diploma (level 5) qualifications.

It is critical that MoH continue to support the upgrading of qualifications to enable the introduction of the degree course.

There are currently three (3) staff member's out-of-country engaged in ongoing education, one (1) undertaking a Master of Health Service Management, one (1) undertaking a Master of Public Health and one (1) undertaking a Bachelor of Nursing.

VQA require all staff who teach in a Bachelor program to have obtained a Masters in Nursing prior to July 2021 and all current staff to upgrade their qualifications to at least a Bachelor level.



It is anticipated that prior to June 2021, VCNE will have upgraded all its educators' qualifications to Masters level qualifications.

Graduate Diploma in Midwifery

The midwifery course is the first accredited course run in Vanuatu, obtaining certification as a Graduate Diploma of Midwifery, Certificate Level 7, in February 2017. VCNE commenced a Graduate Diploma in Midwifery (level 7), graduating 14 midwives in June 2017 as part of the Department of Foreign Affairs Australian Aid Program (DFAT-AAP) supported program. The next cohort of students (15) is expected to graduate this course in June 2019.

Nurse Aide training - Korvan Training College are working with the MoH to develop a Nurse Aide certificate level course and preliminary work has commenced in consultation with VQA and the steering committee.

7.3.3 Vanuatu Health Training Institution (VHTI)

Vanuatu Health Training Institute (VHTI) is located at Sanma province within NPH grounds. The VHTI was used as a postgraduate training institution for nurses, however the last training conducted there was in 2012 for Advanced Nurse Practitioners.

Currently VHTI is not functional and given the requirements under VQA would require additional staffing, course accreditation and establishment of quality management systems at minimum.

Given the limitations of VCNE as the only training institution and the critical shortage of nursing staff the MoH need to explore opportunities and ways to restructure and reopen VHTI to deliver nurse training as well as other health-related training courses.

7.3.4 Scholarships and overseas training

The small size of the Vanuatu population makes the provision of a medical education program in Vanuatu cost-inefficient. Doctors are currently trained through programs in the Pacific or occasionally elsewhere, with scholarships provided by donors. The Bachelor of Medicine/Bachelor of Surgery (MBBS) course is generally of six years duration.

A large proportion of Vanuatu students participating in health worker training overseas attend the Fiji National University (FNU) with sponsorship from the Australian or New Zealand governments through development scholarship programmes. FNU offers a wide range of health related undergraduate and postgraduate courses including: medicine and specialties, dental surgery and dental therapy, public health, environmental health, dietetics, health promotion and health services management. The university has a strong Pacific focus, with well-developed students support services for participants from other countries and procedures in place for dealing with donors and scholarship offices in the countries served.

The University of Papua New Guinea (UPNG) has also trained a number of ni-Vanuatu health workers, particularly medical doctors. The University has a high quality medical education program, but only allocates places for international students if these are not required by local students.

Scholarships are also offered to training institutions in Australia and New Zealand for particular study programs not available in the Pacific. There are occasional scholarships offered to universities in the United Kingdom, Europe or Asia by donors from these areas.

The Ministry of Health has a Memorandum of Understanding (MoU) in place with the Ministry of Public Health in Cuba and 25 graduates completed their studies in Cuba. The majority of graduates are completing their internship at VCH and a small number at NPH. Discussions are currently underway to determine if Vanuatu will continue to send students to Cuba for training.

Post-graduate training for doctors is also dependent on donor scholarships. Without a clear Workforce Plan, this training to date has mainly reflected the individual preferences of the applicant, rather than specific needs of the MoH. Post-graduate training takes doctors out of country for a period of around 3 years. It is critical, therefore, that careful consideration of long and short-term health service needs is made before sending doctors for post-graduate training. This will be addressed in the medical Workforce Plan.

There are twenty-two (22) MoH employees currently studying under scholarships in a variety of undergraduate and post graduate courses as shown in the table below. In addition, there are approximately thirty-one (31) students, not employed by MoH, currently studying medicine, allied, public and other health related fields many of whom will hopefully be employed by MoH in the future.

Table13. Current students studying

Course	
1	Post Graduate Certificate (Mental Health Nursing)
1	Masters – Paediatrics
	Masters -Obstetrics and Gynaecology
1	Post Graduate Diploma in Health Science
1	Post Graduate Diploma in Mental Health Nursing
1	Bachelor of Clinical Nursing
1	Bachelor in Dentistry
1	Post Graduate Diploma in Internal Medicine
1	Bachelor of Epidemiology
2	Bachelor of Public Health
1	Bachelor of Nursing Administration
1	Bachelor in Information System
1	Master of Medicine (Surgery)
2	Master of Medicine (Paediatrics)
1	Master of Medicine (Obstetrics & Gynaecology)
1	Master in Laboratory Science
1	Master in Nursing
1	Master in Public Health
2	2 Master in Dentistry
22	

Improving the impact of scholarships needs addressing in regard to selection of candidates, programs of study supported, and utilization of graduates. Appropriate selection of scholarship candidates is an important aspect of ensuring value from educational investments. Candidates not only need the academic capacity to successfully complete the course, but also a commitment to an ongoing career with the MoH in the field of study.

In order to maximize the impact of scholarships awarded to school leavers, the MoH needs strengthen relationships with MoE and schools and provide career advice to senior high school students and those undertaking foundation studies at University of the South Pacific. This would have benefits both for students and the MoH. If students

choose to study in fields that are MoH priorities, the students are more likely to be employed when they graduate, and the MoH workforce needs will be met. Appropriate utilization of graduates requires interventions

to support good candidate and study program selection, monitoring of student progress and advance planning for recruiting, deploying and retaining the graduate in a job where they can apply the knowledge and skills they have acquired.

Another important issue related to scholarships is the failure of some graduates to return to Vanuatu on completion of their studies. The small number of highly qualified health workers means that the loss of even one graduate is a serious problem for the MoH. Graduates remain overseas for personal, professional or financial reasons. Some meet and marry nationals from other countries while they are studying, others go directly on to post-graduate study, some report that the employment conditions and/or standard of living offered in another country is more attractive than that available in Vanuatu.

7.3.5 Pacific Open Learning Health Net (PoLHN)

Developed by the World Health Organization (WHO) and Pacific Ministries of Health, Pacific Open Learning Health Net (POLHN) provides online learning opportunities for health workers in the Pacific. WHO have established PoLHN centres at VCH, Norsup, NPH, Santo, Lenakel and Lolowai hospitals however only VCH centre is currently operational with a coordinator in place. Due to network problems and the lack of staffing to coordinate the provincial centres they are not currently utilised. The courses are free with certificates of completion available on a range of topics.

PoLHN offers an accessible, cost effective way for MoH staff to study in a health-related course. The MoH needs to explore ways to rectify the issue of network access and invest time in promoting the benefits of learning through PoLHN and increase the utilisation of these facilities.

There are currently three (3) MoH staff studying Post Graduate Diploma in Health Management through PoLHN.

7.3.6 Vanuatu Institute of Public Administration and Management (VIPAM)

VIPAM is under the OPSC and offers public servants a number of short courses related to public administration however these are not always available in a suitable location. Given that MoH have the largest workforce of any Ministry directly under the PSC MoH could negotiate with VIPAM to conduct specific training for the MoH workforce.

7.3.7 Village Health Workers Training.

Village Health Workers are volunteers who operate from community-owned Aid Posts, providing first-line health services including health promotion, disease prevention and treatment, and referral. The MoH outsources the delivery of an extensive Pre-Service Training program inclusive of 8 weeks theory and 2 weeks practical field training to all Village Health Workers, and follow-up refresher In-Service Training every two years.

7.3.8 Other in-service training

Depending on funding available MoH staff have occasional opportunities to participate in training overseas, through conferences or technical meetings in their field of practice however it is unclear what criteria is used for selection and approval to attend these. MoH needs to clearly define their policies and procedures for eligibility, selection and attendance at overseas training to ensure fairness and transparency and also relevance of the training to improving health service delivery in Vanuatu. Sharing knowledge and information acquired through in service training also needs to be shared with work colleagues to ensure all team members are kept up to date on current information and practise.

7.3.9 Partnerships

With the support of DFAT funding MoH have negotiated with Australian Pacific Technical College (APTC) to conduct a Leadership and Management Certificate1V Course for 23 MoH staff due to commence in August 2018. The course will form part of a broader leadership development program which will be designed to incorporate a variety of activities such as mentoring, on the job learning, coaching etc. to ensure the MoH has an adequate supply of future leaders.

8. Workforce Gap Analysis

The lack of consistent and accurate workforce data has made it difficult to accurately identify specific gaps.

Based on the information provided the following gaps have been identified.

- In the short term (5 years), there are critical shortages of doctors, which will cause deficiencies in service provision and oversight and supervisory support for the junior and rural based doctors.
- In the short to medium term, 5 to 10 years, MoH there will continue to be a critical shortage nursing staff as new nurses are trained and current nursing staff retire.
- Clinical specialties deficits identified include: Internal Medicine; General Surgery; Paediatrics; Anaesthetics; Emergency; Accident and emergency; Mental Health (Psychiatry); Community Mental Health Nursing; Community Nursing and Child and Family Nursing; Theatre Nursing and Biomedical
- There is currently a significant reliance on donor partner support to top up workforce supply. As demand increases, this supply is viewed as unsustainable over a longer term.
- The ageing workforce means that there will be loss of skills and corporate knowledge years as older workers exit, and there is a larger number of comparatively less experienced staff.
- There will be a growth in demand for services, but it is unknown to what extent that this will impact on the size of the current workforce
- Areas that are of greatest strategic vulnerability include rural and community health facilities; front line staff in hospitals, where vacancies or sudden disruptions have significant impacts
- Working patterns are rigid (f/t) and may need to change to accommodate more flexible work options.
- The skill shortage combined with the competition to recruit available skilled workers in other more general areas may also present a challenge for MoH. These include the corporate support areas of Finance, Human Resources, IT, Environmental Services, Data Management, Biomedical Engineering and Trades positions

9. Projected workforce

Accurately projecting workforce needs requires a clear vision for the future of health services. The last Corporate Plan was in 2011 and there is currently no health services plan in place on which to base the workforce plan.

In the absence of a long-term health services plan, the working group responsible for developing the Plan will be guided by the MoH Organisational structure (2017-2020) to estimate workforce requirements. Further work will be required to review the organisational structure and more accurately determine and prioritise the workforce required.

According to the information⁸ provided a total of two hundred and twenty-eight (228) vacant positions have been prioritised for recruitment in 2018/19.

Recruitment has commenced on approximately twenty-seven (27) of the vacant positions and twenty-five (25) staff will be directly appointed to their positions based on their performance appraisals.

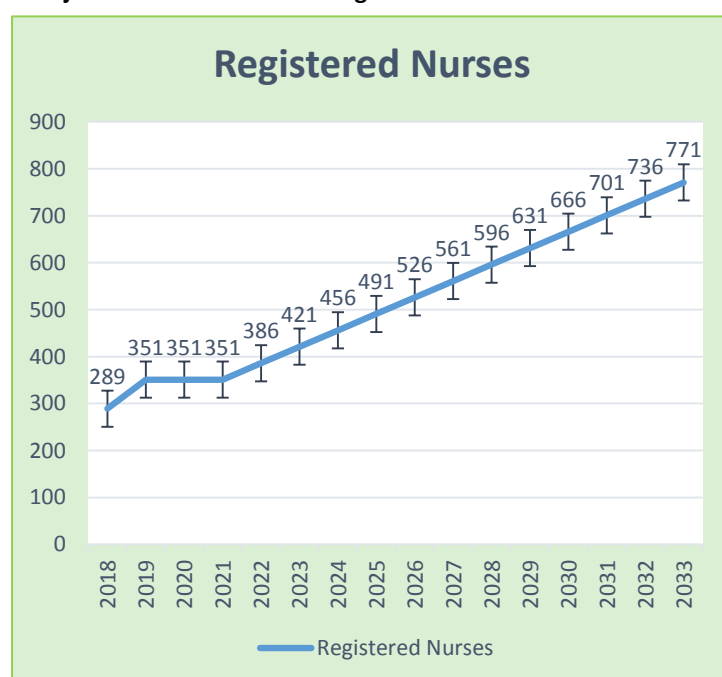
⁸ MoH Structure 2018 Vacancies (HRM)

A recruitment plan will be developed for the remaining one hundred and seventy-six (176) positions. One hundred and fourteen (114) of these already have approved financial visas which in theory this means that recruitment can commence immediately, however with only three (3) HRM staff and a lack of recruitment planning in place progress is extremely slow.

Table 14. Breakdown of 2018/19 recruitment based on the Organisational Structure priority list (Appendix E)

2018 to 2019					
Cadres	Vacancies	Recruitment commenced	Financial Visa (FV) available	FV and Priority	Direct appt.
Doctors	198	3	1		
Dental	28	0	0		
Corporate	66	6	3	1	
Allied	160		4		
Public health	232	3	12	1	11
Nurses	535	0	59	2	13
NA	134	0	8		
Support	427	17	30	1	1
TOTAL		29	109	5	25

Figure 3
- Projected Nurses based on Organisational Structure

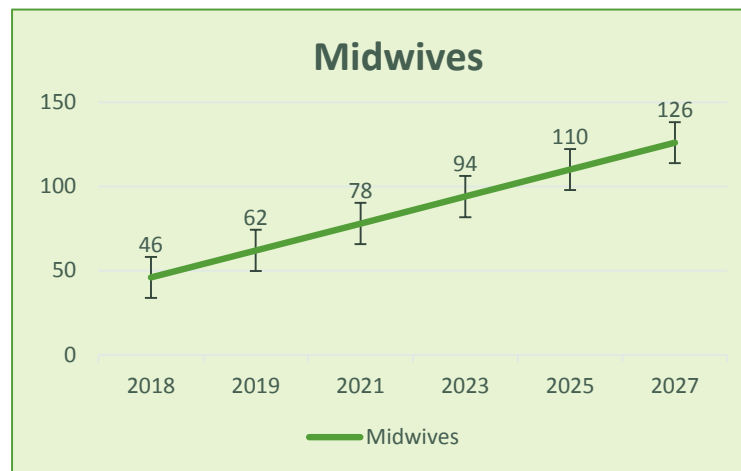


Projected Nurses 2018-2025 - The workforce target for Registered Nurses, based on the organisations structure, is 744. The current number of permanent registered nurses is approximately 289. The current contract staff positions are included in the 455 vacancies.

The projections are based on VCNE having an intake of 40 students in the Bachelor of nursing course, due to commence in 2019, and allows for a 10% withdrawal rate.

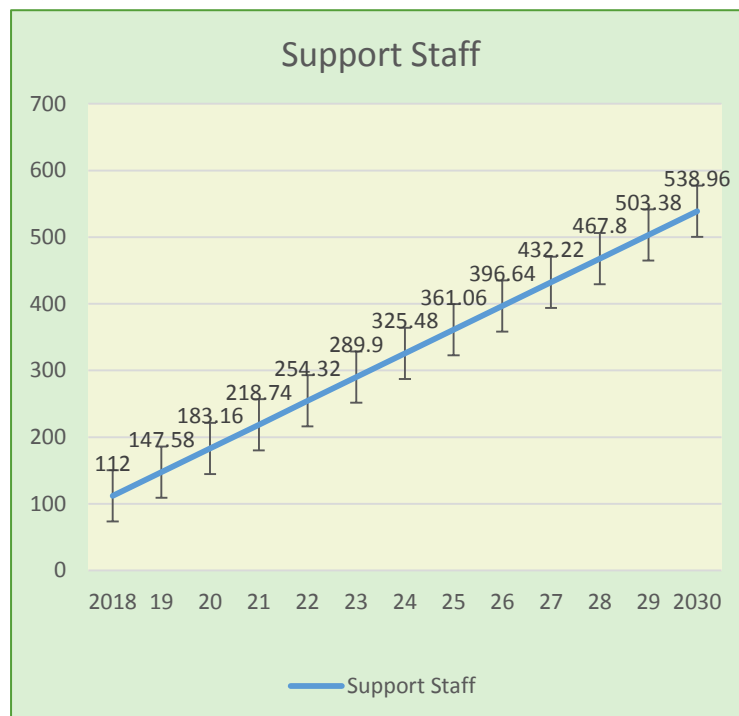
If VCNE nurse training proceeds as planned MoH will achieve its target in the organisational structure in 2033. This could be attained earlier if negotiations to send additional students overseas to study nursing is successful. This does not include an additional thirty seven (37) Nurse Practitioners required as identified in the new structure.

Figure 4. Midwives based on Organisational Structure



Midwives- The workforce target for midwives, based on the organisational structure is 126. The current number of permanent midwives is 46. Current vacancies are listed as 80 positions. The projections are based on an intake of 16 students in the Graduate Diploma in Midwifery course. No allowance has been made for withdrawal due to the high completion rate. MoH could attain its target of 126 midwives by 2027.

Figure 5. Support Staff based on Organisational Structure



Support Staff – Based on the organisational structure the workforce target for support staff is 539. The current number of permanent staff listed is 112. Current vacancies are listed at 427. This consist of laundry, catering, cleaners, maintenance, trades etc plus some administration positions.

Filling all positions within the organisational structure implementation timeframe of 2030 would require recruitment of an average of 35.58 support staff per annum.

Public Health– Based on the organisational structure the workforce target for Public Health staff is 268. The current number of permanent staff listed is 36. There are 7 public health cadets due to complete their cadetship at public health at the end of 2018. Current vacancies are listed at 232. The qualifications required to work in public health varies depending on the position, and registered nurses are employed in many of the public health positions. There are 2 MoH staff studying for a Bachelor in Public Health and 1 studying a Master in Public Health. There are 3 (external) students studying for Bachelor in Public health.

Projection of future public health workforce recruitments will require review and prioritisation of the vacancies.

Allied Health - Based on the organisational structure the workforce target for Allied health is 215. The current number of permanent allied health staff listed is 55. Current vacancies are listed at 160. This includes positions in the fields of, Dietetics (7) Rehabilitation (20), Pharmacy (69), Laboratory (37), Radiology (18) Administration and Management (9).

Projection of future allied health workforce recruitments will require review and prioritisation of the vacancies.

Dental - Based on the organisational structure the workforce target for dental staff is 43. The current number of permanent staff listed is 15. Current vacancies listed is 28 and includes, Consultants (3), Dental registrar (4) Dental Therapists (11) Dental Technician (2) Dental Hygienist (3) Dental Assistants (2) Registrar Prosthodontics (2) Chief Dental officer (1). There are 2 MoH staff studying for their Masters in Dentistry and 1 studying Bachelor in Dentistry.

Projections for future dental workforce recruitments will require review and prioritisation of the vacancies.

Doctors – projections for the medical workforce will be provided in the Medical Workforce plan currently under development

10. Priorities and Strategies to meet current and future workforce demands

MoH already faces a critical shortage of health professionals, particularly in rural areas, across all discipline. Immediate action needs to be taken to not only address the current workforce capabilities, future supply of workers and to also assess how and where the work is performed. Population growth, and a corresponding increase in primary and acute care needs, will continue to escalate service demands faster than the availability of workforce supply unless action is taken.

Based on the information provided four (4) priority areas for action have been identified.

These priorities reflect the analysis of the MoH current workforce, future projections and set the direction for workforce development and growth over the life of the Plan. The priority areas were developed through consultation with key MoH staff, taking into account previous plans and reviews, the MoH organisational structure and the existing MoH strategic directions set down in the HSS 207-2020).

Priority Areas for Action:

- 1. Strengthen workforce capability and ensure skills are targeted to priority areas of need.**
- 2. Strengthen Workforce planning, policy and hr management to achieve workforce growth targets and ensure a sufficient supply of skilled health and support workers to meet current and future health needs.**
- 3. Build a positive supportive sustainable workplace culture that promotes honesty and integrity and enhances health care delivery, staff satisfaction, motivation and work performance.**
- 4. Build organisation-wide leadership capability to ensure MoH is well placed to achieve its vision of an integrated and decentralized health system that promotes universal health coverage**

Priority Area 1 - Strengthen workforce capability and ensure skills are targeted to priority areas of need.

Developing and growing the health workforce, to meet demand is one of the critical roles of MoH. A capable, committed and professional workforce, large enough to meet the fluctuating levels of demand experienced by health services, is essential to the delivery of health care services now and in the future. Workforce requirements cover not only clinical staff, but also a range of support service staff without whom clinical staff are unable to effectively and efficiently provide direct care. These include technical, administration, management, food service and maintenance staff.

The rapidly growing incidence of NCD's combined with population growth and an ageing population will present increasing challenges and demands on health services. Planning in response to the changing health needs to meet the future health needs is essential if universal coverage is to be achieved. A health system with a strong PHC as its core delivers better health outcomes, efficiency and improved quality of care compared to other models. *We need health systems with strong PHC if we are to achieve universal health coverage.*⁹

MoH needs a skilled primary care workforce which works collaboratively with community and other key stakeholders to focus on health prevention programs including early intervention education programs.

⁹ WHO (web/Framework on integrated people-centred health services)

Objective 1.1: Strengthen workforce learning and development (training) based on clear policy, strategy and plans

A strong learning culture can influence the overall performance of the organisation and can inspire and motivate staff to improve performance and health service delivery and achieve organisational growth. Professional learning and development should be an ongoing process to ensure staff are staying current—if not one step ahead—in their fields and competencies. Having the right people, in the right place, at the right time, requires MoH to have a strong focus on learning and development. The ability to ‘*grow their own*’ staff is an essential component of the workforce plan.

By adopting a more strategic and consistent approach to the planning and delivery of L&D programs MoH will ensure;

- a) a more productive and skilled workforce capable of meeting the current and future goals and objectives of the organisation, and
- b) staff will be supported in achieving career and individual learning and development goals.

MoH will also need to strengthen and develop new partnerships with training and education institutions, donor partners and explore the broad range of available activities available to develop workplace competencies including technical skills, knowledge, attributes and behaviours. This could include formal tertiary education, in house training and informal learning from work experience, coaching and mentoring, e-learning and other methods.

To achieve this the MoH will:

- ✓ Develop and implement 5-year Master Learning & Development Plan
- ✓ Develop annual national and provincial training plans
- ✓ Develop and implement competency framework
- ✓ Develop and implement a learning and Development Framework
- ✓ Increase staff utilisation of POHLN and explore alternative mechanisms for e-learning and distance learning models.
- ✓ Explore viability and options for reopening of VHTI
- ✓ Review and develop learning and development policies, procedures and data management systems
- ✓ Review MoH Training Committee, roles and responsibilities and conduct regular Training Committee meetings.
- ✓ Develop career pathways/planning for clinical and corporate positions.
- ✓ Create a career path for rural staff
- ✓ Gain accreditation and introduce Bachelor of Nursing degree at VCNE.
- ✓ Participate in the development of Nurse aide training
- ✓ Train additional nurse aides
- ✓ Work collaboratively with donor partners to ensure sufficient scholarships are available in the prioritized areas of study for ni Vanuatu school leavers and current health professionals
- ✓ Establish, manage and monitor a system for recording and tracking of all MoH internal and external training including recording of applications, participant attendance and progress.
- ✓ Allocate adequate learning and development (training) budget and make accessible to Managers
- ✓ Work with APTC to implement Leadership and Management Certificate 1V.

Objective 1.2 Target workforce skills to deliver proactive and preventative health programs in partnership with communities and other key stakeholders close to where people live.

A qualified and appropriately skilled primary care workforce is essential the delivery of health education and preventative health programs. By engaging with local communities and other relevant health partners, and improving preventative health knowledge and access to community health facilities the community will support a strategy to Increase appropriate utilisation of PHS facilities and reduce inappropriate utilisation of hospital services.

To achieve this, MoH will review current workforce capabilities and program delivery and explore new approaches and partnerships to ensure skills are targeted towards accessible primary and preventative health care programs.

To achieve this the MoH will:

- ✓ Review existing staffing patterns at all facilities and propose staffing based on RDP and service needs
- ✓ Develop partnerships and joint projects with external providers to deliver preventative health care programs
- ✓ Evaluate current service models and assess workforce efficiencies
- ✓ Explore and develop new health care approaches based on the current and future health needs, for example outreach models, multiskilling.
- ✓ Identify ways to reduce staff concentration at hospitals and ensure adequate distribution of human resources based on need within the provincial areas
- ✓ Deliver a multilayered community awareness and education campaign designed to inform the community about common health issues and risk factors; promote self-care and increase community knowledge on the different levels of health services/facilities available.

Priority Area 2 - Strengthen Workforce planning, policy and hr management to achieve workforce growth targets and ensure a sufficient supply of skilled health and support workers to meet current and future health needs.

Objective 2.1 Build and support integrated evidence-based workforce planning aligned with MoH strategic and operational framework

To achieve this MoH will:

- ✓ Clearly define and articulate, the MoH vision for health services, including the balance between community based and hospital-based health services
- ✓ Update and review workforce policies and procedures in line with changes to MoH policy and changes to legislation.
- ✓ Explore development of a one stop shop on line Employee Help Centre for employee information
- ✓ Develop communication plan to ensure workforce plan maintains a high profile at national and provincial level and is integrated into strategic and operational framework.
- ✓ Develop and implement a media/publicity strategy to maintain high public profile of health needs/issues

Objective 2.2. Plan and take action to ensure MoH has sufficient skilled health workers delivering quality people centred health services aimed at achieving universal coverage for all.

To achieve this MoH will:

- ✓ Develop and implement a new integrated workforce data management and information system
- ✓ Review management position descriptions, to ensure that management competencies, accountabilities and values are clearly stated and assessed at the time of recruitment
- ✓ Review and improve recruitment practices to successfully appoint suitable applicants in a timely manner
- ✓ Develop and implement workforce recruitment plan based on the HSS targets and organisational structure priority positions.
- ✓ Investigate alternative options to fill the critical nursing workforce shortage until such time that VCNE can train sufficient numbers, including overseas recruitment, extending retirement age.
- ✓ Explore viability of transitioning the VHW's into the MoH workforce.
- ✓ Develop career and succession planning strategy for key cadres and positions.
- ✓ Develop and Implement a knowledge transfer strategy to retain corporate knowledge
- ✓ Explore feasibility of retirement options (e.g. what if staff don't want to retire at 55 and continue to add value) including additional financial liabilities

- ✓ Explore options and develop an incentive plan for retention of staff in rural areas
- ✓ Plan and implement a pathway for smooth transition from graduation to employment (internship and cadetships)
- ✓ Implement (enforce) policy for staff to be placed in locations, including rural and remote, based on workforce planning and population needs
- ✓ Promote health related scholarships and jobs more broadly through relevant avenues such as schools and expos and other avenues to attract suitable applicants
- ✓ Investigate introduction of work experience program for senior high school students interested in health-related careers.

Priority Area 3- Build a positive supportive sustainable workplace culture that promotes inclusion, honesty and integrity and enhances health care delivery, staff satisfaction, motivation and work performance.

Workplace culture is critical to the success or failure of any organisation. A strong supportive organisational culture that recognises and rewards its people and invests in and supports continuous learning can affect the overall performance of the organisation and inspire and motivate staff to improve performance resulting in better health service delivery for the community. It also requires strong leadership and management that demonstrates ethical and fair behaviour at all times and is enthusiastic and engaging to work alongside.

Unlike many countries alternative health related employment options are limited in Vanuatu therefore staff retention is high. MoH needs to ensure that staff are not taken for granted and must endeavour to create conditions under which MoH is seen as a desirable place to work where people are valued and feel motivated and committed to high work performance standards.

Objective 3.1: Create a workplace culture where people are valued and rewarded and motivated to achieve a high standard of work performance at all times

To achieve this MoH will:

- ✓ Deliver hr functions in a timely manner, including recruitment, selection and deployment of staff, payment of salaries benefits and compensation
- ✓ Strengthen workforce performance management, including the induction process; supervisory system; performance appraisals based on jd's; induction and supervision of new graduates; provision of learning and development.
- ✓ Promote staff based on merit using fair and transparent practises
- ✓ Investigate recognition and reward program/s for staff
- ✓ Provide staff with adequate resources to perform their work, including supervision and learning and development opportunities
- ✓ Develop and implement multi layered communication processes to ensure staff across all cadres, directorates and units are kept informed
- ✓ Encourage positive media of health workforce and health service delivery, including use of social media.

Objective 3.2 Create a safe and healthy workplace that upholds the values of integrity and honesty and advocates diversity, inclusion, transparency and accountability

To achieve this MoH will:

- ✓ All work practises and behaviours conform to the Code of Conduct and PSC policies and procedures
- ✓ Take appropriate staff discipline action is taken with an increased emphasis on maintaining professional ethics

- ✓ Advocate for the establishment of health commission to ensure MoH is held accountable by a qualified and relevant body understanding of MoH unique staffing issues and needs.
- ✓ Commit to increasing workforce diversity and inclusion of people with disabilities
- ✓ Advocate for programs that promote women in management and executive positions
- ✓ Foster a zero-tolerance culture against gender based and family violence and child abuse.
- ✓ Support employees affected by domestic and family violence (DFV)
- ✓ Take action against inappropriate workplace behaviour that does not value diversity including discrimination, harassment, bullying, victimisation and vilification of other staff
- ✓ Support the HSS actions to identify and address health impacts of climate change
- ✓ Improve workplace health and safety for staff and visitors

Priority Area 4- Build organisation-wide leadership capability to ensure MoH is well placed to achieve its vision of an integrated and decentralized health system that promotes universal health coverage

Leadership is variously defined but is essentially about “outcomes” and thus is exercised at all levels of any organisation, though often not recognised. There is an essential difference between management and leadership whereby management is about the mechanisms of organisations and leadership is about the dynamics, the relationships that determine outcomes.

The key to successful leadership today is influence and leading by example, not authority. Ensuring the sustainability of the health system requires leadership to be expressed at all levels of organisations. This includes clinicians, those who hold formal leadership and management positions, those who are in service roles, and those who have leadership influence through their personal or professional standing.

The pressures on formal and informal leaders in provincial communities differ from those on their National level counterparts. Health leaders in small communities often have a higher community profile, less personal privacy and are subject to higher expectations of their availability and capacity to respond to local issues.

The strong cultural and family ties that exist in Vanuatu means that health workers also face additional sensitive family or kinship issues with even higher expectations of availability to their communities. They also may lack access to mentors who can support them.

Objective 4.1: Develop future leaders targeting clinical, nursing and corporate services to ensure MoH has strong leadership at all levels of the organisation.

To achieve this MoH will:

- ✓ Develop and implement a comprehensive Leadership Development program

11. Implementation and monitoring

The complexity of the health issues facing Vanuatu and the challenges of attracting and retaining a strong capable workforce means that the reality is that there is no one answer or single solution that will address the range of issues facing each province.

Effecting change requires a multi layered approach and it is important that strategies are not examined in isolation from each other. Some strategies will cut across a number of guiding principles and challenges and many of the issues will be addressed by more than one strategy or solution.

Each program area within the MoH has responsibility for implementation of the Workforce Plan under the oversight of the respective Directors and the Workforce Plan Working group.

Executive and Managers will identify how their service/program will contribute to achieving the objectives of within each of the four (4) priority areas.

Oversight responsibility of the Plan currently lies with the Director of Corporate Services, Policy and Planning and the Human Resources Management and Development Unit.

The development of a Master Training Plan will assist HRM&D U in implementation of pre-service training in-country, and the development of annual training plans for in-service training. HRMDU will also take responsibility for exploration, development and implementation of the other workforce training strategies outlined. The HRMDU will work closely with Directors and Managers to prioritise vacancies and plan for recruitment of staff in line with the organizational structure and based on emerging needs, with a particular focus on primary care. Exploring, developing and implementing workforce management strategies to rationalize deployment and improve the performance MoH staff will also be a priority.

All Directorates have a direct responsibility for supporting implementation and regular review of the Workforce Plan. This Plan is intended to provide overall strategic direction for the growth and development of MoH workforce, and can only be effective if there is active cooperation and collaboration between all stakeholders within and outside the MoH.

11.1 Monitoring of plan

Responsibility for monitoring and evaluation of the implementation of the Workforce Plan (2018- 2025) will lie with the WPWG and the Directorate Corporate Services Policy and Planning.

The Working Group established to develop the Plan will be maintained for the duration of the plan, meeting quarterly to review progress on the implementation. Every two years a major review of the Plan will be undertaken by the Working Group. The review will use the key indicators as set out below to measure the progress achieved and highlight areas that need improvement.

Strategies will be developed to address problems and adjustments made to the Plan to accommodate changes in service workforce needs or the financial environment.

IMPLEMENTATION PLAN

Priority Area 1 Strengthen workforce capability and ensure skills are targeted to priority areas of need					
Objective 1.1	Actions	Outputs	Indicators	Lead Responsible	Timeframe
Strengthen workforce learning and development (training) based on clear policy, strategy and plans	Develop and implement 5-year Master Learning & Development Plan	Training committee meetings held MoH Master Training Plan developed Needs assessment completed	Plan endorsed and distributed. Implementation plan actioned	HRMDU, NTC	Y1 ongoing
	Develop annual national and provincial training plans	Annual national and provincial training plans	Annual national and provincial training plans developed and implemented	HRMDU, Provincial Admin , Directors, NTC	Y2 ongoing
	Develop and implement competency framework	Meetings with key stakeholders held Competency Framework completed Staff assessment conducted Gaps identified	Staff competencies assessed. Competencies reflected in JD's and ILDP, and Training plans	HRMDU	Y1-2
	Develop and implement a learning and Development Framework	Consultations with key stakeholders Learning and Development Framework endorsed by Executive ILDP's in place	Staff have ILDP's in place. Managers and Executive support and report on have L&D outcomes.	HRMDU	Y2 ongoing
	Increase staff utilisation of POHLN and explore alternative mechanisms for e-learning and distance learning models.	Consultation with key stakeholders Inclusion in Master Plan Report with recommendations	Increase in number of POHLN participants POHLN available in other provinces	Managers, NTC, Directors	Y 2
	Explore viability and options for reopening of VHTI	Meetings held. Information gathered. Assessment conducted Report produced	Review of VHTI conducted and recommendations provided	Executive, NTC	Y2
	Review and develop learning and development policies, procedures and data management systems	Gaps identified. Policies and developed. Data management systems developed	Policies and procedures in place.	HRMDU	Y1 -2

		Meetings held	L and D data accurately maintained on system		
	Review MoH Training Committee, roles and responsibilities and conduct regular Training Committee meetings.	Meetings held, roles and responsibilities defined.	# of Training Committee meetings held	Executive	Y1 and ongoing
	Develop career pathways/planning for clinical and corporate positions. Create a career path for rural staff	Working group formed. Meetings held Career Pathways mapped Document produced and endorsed. Education and training conducted	Relevant cadres understand career pathways Career pathways goals are defined and aligned to PMDS and ILDP's.	NTC HRMDU (working group formed)	Y1-2
	Gain accreditation and introduce Bachelor of Nursing degree at VCNE.	Accreditation in place Tutors trained Bachelor degree commenced	Adequate number of trained tutors in place. Accreditation successful and Bachelor of Nursing commenced	VCNE, PNO,VQA (DP external support)	Y 2
	Participate in the development of Nurse aide training Train additional nurse aides	Meetings attended. Nurse aide course developed Additional nurse aides trained	Nurse aide training course developed # number of nurse aides trained and placed	VCNE, PNO,VQA (DP external support)	Y2-3
	Work collaboratively with donor partners to ensure sufficient scholarships are available in the prioritized areas of study for ni Vanuatu school leavers and current health professionals	Meetings held with TSCU and key stakeholders Priorities reviewed Scholarships offered	Donor support secured Required scholarships approved Adequate number of post graduate training places secured in regional institutions	HRMDU NTC	Y1 ongoing
	Establish, manage and monitor a system for recording and tracking of all MoH internal and external training including recording of applications, participant attendance and progress.	Meetings with key MoH staff Current system reviewed New System mapped Education and training to staff on new system Policy developed	Accurate information maintained and accessible on all training planned and attended in MoH Compliance by MoH units to inform HRD of proposed training	HRMDU	Y2
	Allocate adequate learning and development (training) budget and make accessible to Managers	Budget allocated Managers informed Managers access budget	Budget allocated based on L and D needs. Managers understand L &D budget and use appropriately. L&D activities completed.	Executive, DoPPCS,Finance	Y2 ongoing
	Work with APTC to implement Leadership and Management Certificate 1V.	Meetings held with APTC and key stakeholders Course conducted	Leadership and Management Certificate 1V implemented.	HRMDU	Y1 -2

		Participants attend and complete	% of students graduate with Cert 1V.		
Objective 1.2	Actions	Outputs	Indicators	Responsible	Timeframe
Target workforce skills to deliver proactive and preventative health programs in partnership with communities and other key stakeholders close to where people live.	Review the existing staffing patterns at all facilities and propose staffing based on RDP and service needs	Review of staffing patterns conducted Proposals to align staffing with RDP and priority service needs developed	Staffing aligns with RDP and priority needs Service needs met	HRMDU, Working group	Y2-3
	Develop partnerships and joint projects with external providers to deliver preventative health care programs	Consultations with donor partners, NGO's and other relevant stakeholders. Issues and gaps identified. Proposals developed for joint projects. Proposal endorsed	% Increase in number of community based and preventative care programs	Directors, Aid Coordination and DP's	Y2-3
	Evaluate current service models and assess workforce efficiencies	Meetings held Assessment conducted Issues and gaps identified Recommendations for improving workforce efficiency documented		Executive, DP external support	Y2 ongoing
	Explore and develop new health care approaches based on the current and future health needs, for example outreach models, multiskilling.	Consultations and meetings held with key stakeholders. Research on current health care approached Issues and gaps identified. Plan for new approaches in place.	Increased appropriate utilisation PHS facilities Reduction in inappropriate utilisation of hospital services.	Directors PH, Hospital and Curative, DP external support, working group	Y2-3
	Identify ways to reduce staff concentration at hospitals and ensure adequate distribution of human resources based on need within the provincial areas	Analysis of current workforce distribution Consultation with key staff	Staff are located based on need in provincial areas. Workforce distribution reflects health service needs	Working group Director H&Cs PNO, DP external support	Y2 -3
	Deliver a multilayered community awareness and education campaign designed to inform the community about common health issues and risk factors; promote self-care and increase community knowledge on the different levels of health services/facilities available.	Meetings held Brochures/ flyers Information packages and resources. Community awareness education campaign	Communities informed on common health issues Better self-care practised Reduced number of inappropriate hospital visits	Health Promotion, external partners	Y2 ongoing

			Increase utilisation of community health facilities		
--	--	--	--	--	--

Priority Area 2 - Strengthen workforce policy, planning and hr management to achieve workforce growth targets and ensure a sufficient supply of skilled health and support workers to meet current and future health needs.

Objective 2.1	Actions	Outputs	Indicators	Responsible	Timeframe
Ensure workforce planning is aligned with MoH vision, strategic directions and operational framework	Clearly define and articulate, the MoH vision for health services, including the balance between community based and hospital-based health services	Executive meetings held Develop and agree on vision for health services lance between community based and hospitals based	MoH vision for health services documented and clearly reflects the desired balance between community and hospital based	Executive	Y1
	Update and review workforce policies and procedures in line with changes to MoH policy and changes to legislation.	Policy and procedure documents Manual updated	Policies and procedures reviewed and updated and accessible to all staff	DoPPCS	Y1-2
	Explore development of a one stop shop Employee Help Centre for employee information	Committee formed Meetings held Information gathered Proposal produced	Employee Help Centre developed with tools for employees to access policies, procedures, forms and programs	HRMDU	Y3
	Develop communication plan to ensure workforce plan maintains a high profile at national and provincial level and is integrated into strategic and operational framework.	Meetings held Communication Plan developed and endorsed Education/promotion delivered on WP	Management understand and integrate Workforce Plan into strategic and operational plans. E.g. business plans L & D Planning	Working group	Y1
	Develop and implement a media/publicity strategy to maintain high public profile of health needs/issues	Publicity and media strategy developed. Activities implemented	Health needs and issues maintain a high public profile. Positive image of MoH.	Working group	Y2 ongoing
Objective 2.1	Actions	Outputs	Indicators	Responsible	Timeframe
Plan and take action to ensure MoH has sufficient skilled health workers delivering quality people centred health	Develop and implement a new integrated workforce data management and information system	Issues and gaps identified Research on workforce data management systems. Proposals developed Proposals endorsed. System purchased and installed. HRMDU staff trained	Workforce information is accurate, accessible and available in one system. HRMDU staff utilise same system 100% of the time.	HRMDU	Y1-2

services aimed at achieving universal coverage for all.	Review management position descriptions, to ensure that management competencies, accountabilities and values are clearly stated and assessed at the time of recruitment	JD's reviewed Core competencies identified HR staff trained	JD's are revised and include core competencies. Person/s recruited meet all criteria	HRMDU, Managers	Y2
	Review and improve recruitment practices to successfully appoint suitable applicants in a timely manner	Recruitment plan developed Guidelines/FAQ sheets/to facilitate timely recruitment practices. Training conducted Meeting with PSC	Recruitment timeframes met 95% of the time Recruitment practises follow recruitment plan	HRMDU	Y1
	Develop and implement workforce recruitment plan based on the HSS targets and organisational structure priority positions.	Recruitment Plan Organisational structure review Priority list	MoH meet HSS targets Clear plan for recruitment based on priority	HRMDU	Y1 ongoing
	Investigate alternative options to fill the critical nursing workforce shortage, including overseas recruitment, extending retirement age.	Working group formed Options investigated Proposals developed and approved Meetings held	# Nurses sourced to temporarily fill workforce shortage	PNO, Director H & C, Director Corporate HRMDU	Y1-2
	Explore viability of transitioning the VHW's into the MoH workforce.	Meeting with key stakeholders. Feasibility options paper produced. Costings	Report developed	Executive, Director PH	Y2
	Develop career and succession planning strategy for key cadres and positions.	Working group formed Plan and resources developed Training conducted Key people identified	Strategy developed. # Key people identified and developed for succession into key positions. # staff with career plans in place.	HRMDU, DP external support	Y2 ongoing
	Develop and Implement a knowledge transfer strategy to retain corporate knowledge	Working group formed Options explored Policy and proposals developed	Corporate knowledge retained	HRMDU	Y2
	Explore feasibility of retirement options (e.g. what if staff don't want to retire at 55 and continue to add value) including additional financial liabilities	Working group formed Meeting held. Options explored Policy and proposals developed. Meeting with PSC Legislation understood	Proposals for options provided	Executive working group	Y2
	Explore options and develop an incentive plan for retention of staff in rural areas	Working group formed. Issues and gaps identified Options explored	Rural Incentive plan developed and rural staff retention improved	HRMDU	Y2-3

		Analysis of costing associated with options.			
	Plan and implement a pathway for smooth transition from graduation to employment (internship and cadetships)	Meetings between Training Committee and Finance, VCNE, PNO and other key staff held at least 4 months before graduation. Issues and past roadblocks identified. Plan developed	Graduates commence work within one month of graduation. Vacant posts funded to enable new staff including graduates to be employed on return.	HRMDU, VCNE, PNO, Director H & C, Director DoPPCS	Y1 ongoing
	Implement (enforce) policy for staff to be placed in locations, including rural and remote, based on workforce planning and population needs	Review policy and procedures Gaps identified Blockages identified Policy promoted widely	Disciplinary action taken for inappropriate staff behaviour	Executive	Y2 ongoing
	Promote health related scholarships and jobs more broadly through relevant avenues such as schools and expos and other avenues to attract suitable applicants	Consult with MoE Plan for activities Develop health career resource package Attend relevant events Health related careers promoted	Staff attend relevant events and promote health related careers and Scholarships	HRMDU NTC	Y2 ongoing
	Investigate introduction of work experience program for senior high school students interested in health related careers.	Meet with MoE Working group formed Policy and procedures for work experience program Develop partnership/mou agreement with MoE and MoH	Students gain a better understanding of health related careers. Appropriate students pursue health related careers	Executive, HRMDU	Y2 ongoing

Priority Area 3 - Build a sustainable workplace culture that promotes inclusion, honesty and integrity and enhances health care delivery, staff satisfaction, motivation and work performance.

Objectives 3.1	Actions	Outputs	Indicators	Responsible	Timeframe
Create a workplace culture where people are valued and rewarded and motivated to achieve a high standard of work performance at all times.	Deliver hr functions in a timely manner, including recruitment, selection and deployment of staff, payment of salaries benefits and compensation	Recruitment plan in place. Staff trained Accurate workforce data Interviews held Reports New staff Induction held	% Recruitment and deployment meets timeframes. Recruitment in accordance with priorities and approved recruitment plan %Salaries and benefits paid on time and correctly.	HRMDU	Y1 ongoing
	Strengthen workforce performance management: ✓ All staff have up to date jd's ✓ All staff receive comprehensive induction. ✓ All staff receive regular supervision. ✓ All staff have workplans and performance appraisal. ✓ All staff have ILDP's	Policies and procedures updated and promoted. JD's workplans and appraisals Induction program. Resources and tools Education and training to national and provincial staff. ILDP's in place	Work performance is based and assessed on clear job roles and responsibilities. Improved work performance Staff receive regular supervision. Learning and Development is based on assessment of individual land d needs	HRMDU, Directors , Managers	Y1 ongoing
	Promote staff based on merit using fair and transparent practises	Policies and procedures Education and training Staff in right place Career pathways	Fair and transparent practises are used 100% to promote or select new staff	HRMDU, Managers, Directors	Ongoing
	Investigate recognition and reward program/s for staff	Working group formed. Options explored Staff satisfaction survey Analysis of costing associated with options. Proposal developed and approved	Staff are recognised and rewarded for their efforts. Staff motivation is increased. Improved work performance	HRMDU, Executive	Y2-3
	Provide staff with adequate resources to perform their work, including supervision and learning and development opportunities	Staff satisfaction survey Communication protocols and mechanisms established	Staff have the resources to do their job. Staff motivation is increased. Improved work performance	Executive, Managers Finance	Y2 ongoing
	Develop and implement multi layered communication processes to ensure staff	Staff survey Newsletters	Staff more informed and motivated.	HRMDU, Managers	Y2 ongoing

	across all cadres, directorates and units are kept informed	Regular meetings Social activities			
	Encourage positive media of health workforce and health service delivery, including use of social media.	Working group formed Policy and procedures Education and training, Explore social media development for MoH	Positive health related media Improved image for MoH	Executive	Y2 ongoing
Objective 3.2	Actions	Outputs	Indicators	Responsible	Timeframe
Create a safe and healthy workplace that upholds the values of integrity and honesty and advocates diversity, inclusion, transparency and accountability	All work practises and behaviours conform to the Code of Conduct and PSC policies and procedures	Policies and procedures Code of Conduct signed Education and training package	MoH leaders and staff adhere to Code of Conduct displaying ethical and honest behaviour at all times	Executive	Y1 ongoing
	Appropriate staff discipline action is taken with an increased emphasis on maintaining professional ethics	Documentation of disciplinary action taken. Education and training package	Staff discipline is documented and implemented in accordance with policy and procedures	Executive	Y1 ongoing
	Advocate for the establishment of health commission to ensure MoH is held accountable by a qualified and relevant body understanding of MoH unique staffing issues and needs.	Clear vision and direction. High level meetings and negotiations held	# of meetings and negotiations held	Executive	Y2
	Commit to increasing workforce diversity and inclusion of people with disabilities	Consult with PWDA and relevant stakeholder groups	Consultations held	Executive	Y2
	Advocate for programs that promote women in management and executive positions	Policies and procedures Leadership training Talent management strategy	# Increase in number of women in management and executive.	Executive	Y2
	Foster a zero-tolerance culture against gender based and family violence and child abuse.	Policy and procedures Education and training package. Participation in external events and programs supporting zero tolerance	MoH promotes a zero tolerance of gender based and family violence and child abuse and takes necessary action to deal with unacceptable or criminal behaviour.	Executive	Y2 ongoing
	Support employees affected by domestic and family violence (DFV)	Information and resource package Referral system to NGOs Education and awareness sessions	Women are supported with information and referral	Executive	Y 2 ongoing

	Take action against inappropriate workplace behaviour that does not value diversity including discrimination, harassment, bullying, victimisation and vilification of other staff	Policies and procedures Education and training package	Workplace culture openly values diversity	Executive	Y2 ongoing
	Support the HSS actions to identify and address health impacts of climate change	Participation in task force	Potential health impacts of climate change and the actions required to deal with these are known and incorporated in program development	Executive	Y2 ongoing
	Improve workplace health and safety for staff and visitors	Working group formed Workplace safety assessment Action plan	Reduction in workplace accidents and injury Workplace safety is improved	Executive	Y 2

Priority Area 4 Build organisation wide leadership capability to ensure MoH is well place to achieve its vision of an integrated and decentralized health system that promotes universal health coverage					
Objectives 4.1	Actions	Outputs	Indicator	Responsible	Timeframe
Develop future leaders targeting clinical, nursing and corporate services to ensure MoH has strong leadership at all levels of the organisation.	Develop and implement a comprehensive Leadership Development program	Assessment conducted Leadership capabilities documented Leadership program developed and approved	Leadership Development Program developed # number of staff identified for leadership development # number of staff participate in program	HRMDU, DP external support	Y1 ongoing

Service Level Workforce Planning Outline

Executives and Managers: Use this template to review each priority area, identify the strategies/actions relevant to your service/program and develop an implementation outline for these strategies. This outline can then be used to guide your workforce planning.

Priority Area 1 - Strengthen workforce capability and ensure skills are targeted to priority areas of need	Describe how your service/program will contribute to this outcome?
Objective 1.1 : Strengthen workforce learning and development (training) based on clear policy, strategy and plans	
Objective 1.2 Target workforce skills to deliver proactive and preventative health programs in partnership with communities and other key stakeholders close to where people live.	
Priority Area 2 - Strengthen Workforce planning, policy and hr management to achieve workforce growth targets and ensure a sufficient supply of skilled health and support workers to meet current and future health needs.	
Objective 2.1 Ensure workforce planning is aligned with MoH vision, strategic directions and operational framework	
Objective 2.2. Plan and take action to ensure MoH has sufficient skilled health workers delivering quality people centred health services aimed at achieving universal coverage for all.	
Priority Area 3- Build a sustainable workplace culture that promotes inclusion, honesty and integrity and enhances health care delivery, staff satisfaction, motivation and work performance.	
Objective 3.1 Create a workplace culture where people are valued and rewarded and motivated to achieve a high standard of work performance at all times.	

Objective 3.2 Create a safe and healthy workplace that upholds the values of integrity and honesty and advocates diversity, inclusion, transparency and accountability	
Priority Area 4- Build organisation-wide leadership capability to ensure MoH is well placed to achieve its vision of an integrated and decentralized health system that promotes universal health coverage	
Objective 4.1: Develop future leaders targeting clinical, nursing and corporate services to ensure MoH has strong leadership at all levels of the organisation.	

APPENDICES



MINISTRY OF HEALTH

Terms of Reference

Workforce Planning Working Group (December 2017)

Introduction

The last MoH Health Workforce Plan (2004-2013) came to an end in 2013.

Since this time MoH has embarked on a major organizational restructure to be implemented over a period of 14 years (2017-2030). Prior to the completion date of the last workforce plan (2013) a number of meetings, discussions and consultations were held with the intention being to have a new workforce plan in place to guide MoH human resource development through to 2033, however despite good intentions this did not happen.

The previous Plan was meant to undergo regular evaluation, but this was not achieved. A number of assessments were undertaken just prior to the completion date of the plan, and those, combined with more recent hr consultations provide enough information to guide the approach to creating a new workforce plan.

Current Situation

In September 2017 and initial consultation was held with Directors, Senior Managers, Medical Superintendents, Supervisors and relevant MoH staff to review the previous recommendations of the last plan and determine what had been achieved and what is still relevant for integration into the new plan.

Previous consultations (Creating a Health Workforce Plan for Vanuatu for the period 2014-2033, Norbert Dreesch) identified the following areas of need most of which are still relevant today and can be updated and integrated into the new workforce plan:

The 3 main categories include:

1. Expanding access towards universal coverage in the provinces
 - 1.1 Staff concentration at hospitals
 - 1.2 Imbalance between supplies, equipment and human resources

1.3 Lack of integration of human resources across different programmes

1.4 Insufficient PHC coverage and no adherence to entry and referral needs

2. Staff productivity, workload and clinic management

2.1 Lack of attention to mechanisms to check staff productivity, staff welfare and empowerment

2.2 Imbalance between clinical and public health skills

2.3 Lack of evidence on workload and productivity

2.4 Insufficient budgetary provision to take viable decisions on human resources

2.5 Heavy workload as a result of 'free' services

2.6 Uneven spread of patient arrivals during clinic hours

3. Management capacity, needs in Health Workforce Management and budget issues

3.1 Insufficient management knowledge and capacity

3.2 Absence of a career structure and mechanism to review staff issues

3.3 Unclear staff roles, functions, tasks; lack of access to incentives to boost retention

3.4 No planning for staff replacement

3.5 Staff deployment not in conformity with established positions

3.6 Lack of budget and budgetary authority to address human resources problems

Purpose

The objectives of the working group will be to:

1. Review the last workforce plan and achieve consensus on the current relevance of information/ findings contained for integration into new plan.
2. Determine work and tasks to be undertaken for new plan and allocate tasks accordingly.
3. Consult with all stakeholders, provincial and national level, on workforce planning needs.
4. Analysis of specific roadblocks preventing implementation of last plan and recommendations to the executive committee on what is required e.g. resources, commitment, leadership etc. to ensure the new workforce plan is fully implemented.
5. Prepare and submit the final document to the Executive

Table 1: Membership of the WPWG

Name	Position	Agency / Position
Len Tarivonda	Chairperson	MoH - Director Public Health
Dr Willie Tokon	Member	MoH - Director Hospitals and Curative Services
Markleen Tagaro	Member	Acting Provincial Health Administrator (Penama)
Morris Amos	Member	Acting Provincial Health Administrator (Shefa)
Santus Wari	Member	Acting medical Superintendent (VCH)
Andy Ilo	Member	Acting Medical Superintendent (NPH)
Jacques Honore Morris	Member	Acting Nursing Services Manager (VCH)
Carol Rovo	Member	Principal Planning Officer
Paul Makikon	Secretary	Acting General Services Manager (VCH)
Henry Lakeleo	Member	Acting Finance Manager
Viran Tovu	Member	DSSPAC – Health Sector Policy Analyst
Charlie Harrison	Member	HRM&D Manager
Leipakoa Matariki	Member	Acting Principal HRD officer
Deb Coleman	Member	VHRM HR TA

Positions and Quorum

Chairperson

The Chairperson of the WPWG will be the Director Public Health MoH.

In the absence of the Director Public Health the meeting will be chaired by the Director Hospital and Curative Services.

The chairperson will be responsible for establishing the agenda and remaining a focal point for and / or MOH Executive requests.

Secretariat Duties

The Secretary of the WPWG will be the Acting General Services Manager Paul Makikon (VCH). In the absence of the Acting General Services Manager Paul Makikon, an alternative Secretary may be appointed by the Chairperson.

The Secretary will be responsible for arranging a suitable location for the meeting, advising all members of the time and location of the meeting and the drafting and issuing of minutes.

The Secretary will also be responsible for circulating the agenda and key documents to the membership group no later than 48 hours prior to any scheduled meeting where documents would be discussed.

Quorum

For the WPWG to have a quorum, a minimum of one of the abovementioned Chairpersons will be present. The total number of members of the group, including the Chairperson, will be no less than seven (7). This number may be made-up of members or additional members partaking in the meeting via telephone or videoconferencing and by other invited personnel or technical officers.

Members

Will be responsible for consulting more widely as required with MoH staff within their province, work units and within specific cadres under their responsibility.

The MoH Executive, remains the approving and releasing body for the Workforce Plan and all associated reports.

Timeframe

As the completion of the plan is dependent on the completion of a number of other bodies of work the timeframe will be established and agreed to at the first meeting scheduled to take place late January 2018.

APPENDIX B – WORKFORCE PLANNING CONSULTATIONS

The workforce planning consultation held on the Monday 11th June identified and discussed many workforce planning challenges and issues, the majority of which have been the topic of previous consultations and reviews held over several years.

Participants were provided with a list of the workforce related challenges and issues impacting on MoH, its staff and ultimately the delivery of health services to the people of Vanuatu.

Breaking into 3 groups (Curative and Hospital (1), Public Health (2) and Corporate Services (3)) the participants were asked to focus on the following:

- Consider and agree on the challenges and critical issues
- Identify possible solutions
- Identify and discuss the roadblocks that are preventing the solutions from being implemented right now?

Given the complexity of the issues and challenges facing the MoH it is important that they are not examined in isolation from each other. The reality is that there is no one solution that will address all of the issues and challenges presented. The solutions will be multi-layered and interlinked and cut across a number of areas.

The consultation feedback table (Table from Groups #1 and #3) also incorporates feedback received from MoH staff either individually or in previous discussions.

The information obtained will be used to identify key priority areas for the focus of the workforce plan and inform the development of strategies that fit within each of these areas and align to the strategic directions of the HSS.

APPENDIX B1 – CONSULTATION FEEDBACK TABLE (GROUP 1 AND 3 COMBINED)

Hospital and Curative Organisational culture-	Possible options to address challenges and critical issues NOTE: many solutions may cut across several areas	In relation to the solutions what is preventing this from being implemented now? NOTE: The reasons may cut across all areas
<ol style="list-style-type: none"> 1 Staff contracts take too long 2 Time management, 3 Lack of staff 4 Career management 5 Leadership needed 6 Lack of discipline of staff for breaches (friendship/ family relationships) 7 Lack of succession planning 8 Wrong people in wrong positions 9 Islandism/nepotism 10 Political interference 11 No incentive system prolongs problems 12 Lack of career planning 13 Lack of training plan 14 Lack of support resources 	<ol style="list-style-type: none"> 1 Improve management leadership and management 2 Implement policy and strengthen staff skills 3 Improve planning and follow through 4 Conduct regular meetings 5 Staff rotation 6 Better reporting systems 7 Need strict timeframes 8 Staff absences need to be addressed 9 Change the culture 10 Need clear policy 11 Need better understanding of plans 12 Comply with code of conduct and implement disciplinary or performance management 13 Reduce PSC interference 14 Need stronger leadership across the board Improve staff morale by addressing acting positions 15 Need better communication across all MoH 	<p>Leadership Policies not implemented Reluctance to discipline staff No clear policy Lack of understanding of plans Reluctance to discipline staff Lack of skills in performance management and supervision Lack of understanding of policy PSSM not followed PSC interference Lack of skills Lack of leadership and direction from the top Poor communication across</p>
<p>Health financing</p> <p>Specific issue identified include:</p> <ol style="list-style-type: none"> 1 Training budget 2 Lack of data and planning 3 Growth in staff 4 Health community act 5 Integrated staffing 6 Limited budget 7 Difficulty accessing and understanding funding allocations 8 Lack of good BP 9 Lack of skills in budgeting and writing budget proposal 10 Lack of M and E in provincial and community level 11 Job codes for OPD needed 12 Lack of reliable internet in some provinces 13 Slow process of financial visas delays 14 Recruitment and information not forthcoming too slow 	<ol style="list-style-type: none"> 1 Develop Master training plan 2 Finalise RDP 3 National and Provincial service plans 4 Workforce plan 5 Improve Forecast expenditure 6 HC act revised 7 Look at Other sources <p>Other previous suggestions</p> <ol style="list-style-type: none"> 8 High level advocacy to government to ensure adequate budget –based on accurate data 9 Promote MoH in positive light to improve credibility and support and increase profile 10 Competencies for staff roles 11 Need additional funding 	<p>Lack of competency framework No clear job descriptions Lack of strategic plans Timing Lack of prioritising Not enough training The budget ceiling Lack of proper consultancy with provinces Lack of established BP within province e.g. cost centres Too much political interference</p>

15 Patient care fund	12 More transparency and monthly reporting 13 Strengthen BP 14 Develop training on budgeting and writing proposals 15 strengthen m and e 16 revise job code 17 Identify critical areas and explore solutions with OGCI to improve 18 HR and Finance to improve the fv process and accountability 19 FO in place in all provinces 20 Train fo's to do fv 21 Produce weekly financial management reports 22 Strengthen financial systems 23 improve communication 24 other funding sources	
Workforce shortages		
1 Workforce supply not enough available 2 Plan better 3 Lack of facilities to accommodate 4 Staff attitude 5 Low productivity for health workers 6 Lack of recruitment planning 7 Lack of funding 8 Lack of planning for training and master plan inc nurses NP 9 Lack of communication between MoH and scholarship board 10 Lack of career talks to school leavers to attract suitable workforce 11 Lack of incentives and good working conditions 12 Lack of compliance with transfer policy 13 Unequal staff distribution of health workforce 14 Lack of clear rdp 15 Too much political interference 16 Lack of planning communication regular monitoring	1 Increase capacity at VCNE 2 Send nursing students overseas 3 Increase funding 4 Purchase more equipment 5 Review NP Board 6 Review and redistribute staffing based on priority need 7 Recruitment plan 8 Support staff value 9 Assets Plan build houses 10 Training plans 11 Planning for new staff 12 Communicate 13 More information to provinces 14 Use retired staff 15 explore not having to retire at 55 16 Overseas options temporary gaps	More funding Staff house locked?? HR role
The lack of workforce planning-	All of above apply to workforce planning	
1 Lack of data	1 Training and IT skill	Need standard system for planning

2 Lack of leadership 3 Lack of communication 4 Reactive recruitment 5 HR too slow to recruit 6 PSC hold up things 7 Planning 8 Need right people in right job 9 No proper induction program	2 More HR staff to have fully functioning hr unit 3 Monthly and Quarterly reports 4 Regular meetings Previous consultations 5 Workforce planning activities integrated with financial and planning processes. 6 Workforce planning an objective in service and business planning 7 Workforce data accurate and communicated 8 master Training Plan 9 team workforce plans 10 Know the capacity of the current workforce and supply for those needs 11 Competency 12 Leadership and management 13 Policies and procedures followed 14 Better tools and data systems to support the workforce planning 15 More communication between corporate 16 Educate politicians	Time Internet access for some province Not always know
Access to accurate workforce data to inform planning		
1 Not updated workforce data 2 Hard to access 3 interprets data for planning 4 develop service based on data 5 Lack of accurate and consistent data related to retirements, vacancies 6 Acting off books interns contracts	1 Solution to workforce planning is good quality data 2 HRMIS maintained -skills to do this? 3 Regular structure meetings 4 Create HRMIS for the MoH 5 Robust data collection systems should be put in place to inform workforce planning processes. 6 Link scholarships information with the HR information system to provide for smooth integration of new health graduates and retiring staff 7 utilise HRMIS better 8 Finance and HR to meet and share information 9 better reporting 10 Update workforce data and strengthen hr workforce data	Finance and HR not meeting or communicating regularly Separate system for MoH

Knowledge, skills and capability		
1	Lack of limitation and provision of scholarships	1 Needs a culture of learning
2	Lack of Master plan training	2 Leadership program and training
3	Lack of strong leadership and good management	3 Staff appraisals
4	Lack of governance, policies, procedures	4 Succession planning
5	Lack of professional leadership	5 Leadership progression plan
6	Political interference	6 Governance addressed
		7 Being a good role models
		8 Strong work ethics
		9 Pollical awareness
		10 Staffing competent
		11 Previous consultations
		12 L & D assessments conducted based on new PSc competency framework
		13 Master L&D Plan developed
		14 Linked to PMDS
		15 PM strengthened
		16 Strengthen training committee include Med sups in training committee
		17 Strengthen relationship with scholarship board and training institutions
		18 Training needs
		19 Appointment should be on merit
		20 Need comprehensive induction program
		21 Implement program for CPD standardise training tools
		22 VIPAM Infection control refresher training other training
		23 Master Training Plan
		24 strengthen PMDS
		25 strengthen and utilise POHLN
		26 Include in Dr JD for training
		27 Improve channels of communication for training planning through Training committee
		28 Master training plan develop skills training epidemiology
		29 Fairer distribution of staff
		30 Teach management skills for staff primarily trained in clinical skills but who are assigned management tasks
		Financing preventing
		Time preventing
		Lack of discipline implemented
		Lack of leadership skills and competencies
		Need training tools
		Need more staff so staff can attend training
		No staff to do training
		Communication
		No training plan
		Not sure process

	31 Develop a career plan for all levels of staff from provincial to national level 32 Work out an incentive plan for retention of staff in rural areas 33 Create rules for strict enforcement of staffing of facilities with personnel who has the corresponding qualification 34 Regular meetings for HR staff 35 Strengthen training committee include Med sups in training committee 36 Strengthen relationship with scholarship board and training institutions	
The lack of strong leadership and good management		
1 Lack of governance policies and procedures and no follow what there is 2 Lack of professional leadership 3 Political interference 4 No management of staff discipline or work performance 5 Noncompliance with PSSM 6 Acting in position for toll long creates too many problems 7 No leadership or good management 8 No m and e for hospitals services or managers 9 Too many staff not following lines of communication 10 No clear lines of communication between staff managers med sups directors align with structure 11 No regular meetings	1 Succession planning 2 Leadership development 3 Stronger governance 4 More good role models 5 Code of conduct follow 6 Educate politicians 7 Leadership Development Program 8 Address workplace culture 9 Succession planning 10 Develop a training plan for managers to acquire higher level management skills including those for budgeting 11 Implement Leadership program 12 strengthen skills in staff management 13 Educate PSSM 14 Consider direct appointment 15 Leadership program 16 Develop ma and e 17 Clarify clear lines of communication and promote 18	Lack of discipline no leadership skills Political interference Lack of accountability Polices not followed
Weak governance -		
1 Lack of leadership and management 2 Lack of clear reporting systems 3 Coordination and accountability 4 Policies and procedures 5 No discipline for right people	1 Improve reporting systems 2 Improve coordination 3 Ensure accountability at management level 4 Put right people in right position and make accountable for work performance	Time Leadership skills Planning skills Capacity of staff Heavy workload to be addressed

6 No vision 7 No accountability 8 Lack of leadership and good management 9 Lack of strong policy 10 Lack of information? 11 Lack of hospital representation in meetings	5 Develop sops 6 Linked to workplace culture 7 need to change Workplace culture 8 Strong leadership 9 Adherence to policy and code of conduct 10 Shared vision 11 Leadership program 12 Policies enforced 13 Change of culture	
Mismatch between Government policy (NSDP 2016-2030) and health expenditure-		
1 Leadership and management 2 RDP 3 Integration of primary care/curative 4 Update of HIS 5 Not enough funding 6 Need to assess needs 7 Inadequate funds 8 Public health budget needs to be addressed 9 RDP 10 Training	1 RDP in place 2 Update HIS information 3 Referral policy 4 Promotion and awareness packages for communities 5 More prevention program 6 Primary care NCD's big issues 7 Align budget to vision and goals 8 Reporting 9 Community awareness 10 Strengthen public health 11 Policy in place 12 Need accurate budget information	Time More information on public health needed and preventative care
Information systems and data analysis		
1 Lack of accurate recording 2 Lack of data analysis 3 Lack of capability, analysis and feedback	1 Standardised reporting templates 2 Better leadership and management 3 SoPs 4 Clear coordination System for reporting 5 Capacity and skill development in data analysis	Strong leadership resources
Mechanisms to ensure staff productivity, welfare and empowerment.		
1 Leadership and Management 2 Workplace culture 3 Limited resources 4 Lack of incentives 5 Staff not motivated 6 New concept for current managers	1 Incentives and rewards scheme 2 solutions 3 Reward and incentive 4 PM 5 Supervision systems 6 Reporting	Performance management not understood No culture to support staff No policy and systems in place If policy in place not followed PSSM incentives not contextualised

7 No proper system or tools or lack of understanding what this means	7 PMDS system strengthened	
8 Prolonged contract on acting affects staff morale	8 Career pathways	
9 No recognition or reward	9 Master training plan	
10 Unclear jd's and roles and responsibilities	10 Incentives and recognition and reward system	
11 Career planning		
Unclear staff roles, functions, tasks; lack of access to incentives	As above	
1 Job descriptions old	1 Revise jd's	
2 Managers need training on jd's	2 Competencies clear	
3 HR need to support	3 Incentive and value	
4 Job should match role and competencies	4 Reward staff	
5 Staff not clear what is in jd	5 Support staff	
6 Need incentive for staff		
7 Not value		
Operational management of workforce staff leave accruals		
1 Staff leaves too much	1 Enforce leave plan	Lack of management
2 Lack of competent management on leaves	2 Performance management to assist	Inadequate staffing to cover leave
3 Staff refuse to take leave	3 More training	Lack of succession planning
4 Policies not followed	4 Adherence to policies and procedures and robust reporting	
	5 PM	
	6 Pay off all accruals of leave	
	7 Maintain accurate HR data base of information on leaves	
	8 Proper induction for staff so they are aware	
Scope of practice for health workforce professionals.		
1 Lack of joint planning	1 National and provincial plans	
2 Lack of equipment and resources	2 Coordinate joint planning- who does this	
3 No planning against service needs	3 Include all in joint planning	
4 Budget against service needs	4 Review services	
5 Not enough resources	5 staffing mix and location in the right place	
6 Need skills and training	6 Design outreach and allocate adequate resources	
	7 All HF should be inclusive in planning	
	1. Integrated programs	
	2. National and provincial plans in place	
	3. Better planning	
	4. Review of current services	

	5. New models 6. DSA review	
Staff concentration - RDP - 1 experienced staff refusing to be transferred to rural areas 2 Spouse working in village 3 Staff houses 4 Wrong time to transfer 5 Comfort zone not wanting to move	1 Strong transfer policy and enforced 2 RDP 3 Career pathway 4 Remote allowance 5 Incentive scheme to attract community nurses and Drs 6 Develop specialist outreach 7 Review staffing patterns 8 redesign staffing based on service needs	No clear policy in place to guide all solutions
Imbalance between supplies, equipment and human resources - lack of equipment and supplies hamper ability of staff to do their job – creates cycle e.g. Staff cannot do their job, people don't access the service, higher utilisation of hospitals - reinforces patients' behaviour to seek care at tertiary care outpatient facilities.	Better planning System to integrate Better supervision	
Limited integration of curative and public health service - leading to poor coordination and inefficiencies in resources, including human resource use.	Better Planning	

APPENDIX B2 – CONSULTATION FEEDBACK TABLE (GROUP 2 ONLY)

Critical Issue and challenges -	Possible options to address challenges and critical issues NOTE: many solutions may cut across several areas	In relation to the solutions what is preventing this from being implemented now? NOTE: The reasons may cut across all areas
Organisational culture- Workplace culture is critical to the success or failure of any organisation. A strong supportive organisational culture that values its people and encourages and supports continuous learning can affect the overall performance of the organisation and inspire and motivate staff to improve performance resulting in better health service delivery for the community.	<ol style="list-style-type: none"> 1. Internal Policy 2. Induction 3. Work place environment 4. Staff Behaviour/Attitude 5. Sharing of information 6. Succession Planning 7. Career Planning 8. Conflict of Interest 9. Politics 	<ol style="list-style-type: none"> 1. Implement Code of Conduct 2. Implement Induction at all level 3. Office setup (infrastructure) 4. Implementing staff disciplinary procedures 5. Conduct regular staff meeting (Management, HOS, General) 6. All levels to have a succession plan 7. All levels to have a career planning 8. Implement 9. No solution
Health financing - Need to ensure sufficient recurrent budget and alternative funding sources to enable adequate delivery of health services (purchase of assets and hr) and growth in workforce numbers	<ol style="list-style-type: none"> 1. Politics Spending 2. Spend outside of Business Plan 3. Joint and integration Planning between National Public Health, and Provincial Health, (Hospital & Rural Health) 4. Personnel Expenditure 5. Health Community Act 6. No transparency on expenditures 7. Health facilities not included in planning. 	<ol style="list-style-type: none"> 1. No Solution 2. Enforce Policy of Own Plan, Own Budget 3. Implement Planning & Budgeting together 4. Similar to operation procedure to approve personnel costs. (HR & Finance Officers at provincial level) 5. Report to be provided back to Managers 6. Monthly reporting to managers (training of all managers on finance) 7. All facilities operations & HR must appear on micro planning.
Workforce shortages - A major factor limiting the fair distribution of health services. Many public health facilities are understaffed, particularly in rural areas, and some are not staffed at all.	<ol style="list-style-type: none"> 1. Shortage of staff 2. Shortage of Doctors 3. Shortage of Nurses 4. HF staff not appropriately remunerated 	<ol style="list-style-type: none"> 1. Training in all categories 2. Fair distribution 3. Increase of intake and regularity to VCNE, recruit overseas nurses 4. Incentive – Remote allowance
The lack of workforce planning- Has contributed to the current staff shortages and resulted in a reactive rather than planned and systematic approach to recruitment, creating the gap between staffing requirements and available workforce, particularly in nursing	<ol style="list-style-type: none"> 1. Staff serve too long in one Health Facility. 	<ol style="list-style-type: none"> 1. Introduce Rotation plan
Access to accurate workforce data to inform planning - Without accurate workforce data workforce planning is delayed.	<ol style="list-style-type: none"> 1. Lack of Data base at the provincial Level 	<ol style="list-style-type: none"> 1. Create a data base to monitor HR at provincial level
Knowledge, skills and capability - Developing knowledge, skills and capabilities at all levels and across all areas, will ensure staff are equipped to effectively undertake their role.	<ol style="list-style-type: none"> 1. Performance Appraisal System 2. Role delineation 3. Supervisory Visits 	<ol style="list-style-type: none"> 1. Doing Appraisal Regularly and properly 2. Implantation of role delineation policy

		3. Conduct regular supervisory visits to health facility (Direction to Managers, Managers to health facilities)
The lack of strong leadership and good management -The lack of strong leadership and good management is seen as one of the primary causes of many of the workforce challenges facing MoH. Without strong leadership and good management the wp cannot be implemented.	<ol style="list-style-type: none"> 1. Positions are filled on acting basis 2. Lack of support from leader 3. Unclear channel of communication 4. Politic interference 5. No proper training for managers 	<ol style="list-style-type: none"> 1. Acting position to be formalise 2. Regular mentoring from managers to staff 3. Provide clarity of reporting from provinces to national 4. No solution 5. Upskilling of managers on strong leadership and good management.
Weak governance - Means a lack of oversight of the performance of the health sector and little coordinated reporting of health service outputs, financial information and business planning activities. This has resulted in limited understanding of how resources are being utilised.	<ol style="list-style-type: none"> 1. Weakness in leadership and communication 2. Feedback reporting 3. No access on finance information to individual cost centres managers 4. Policy Compliance 5. Decentralisation 	<ol style="list-style-type: none"> 1. Emphasis Bottom up approach & regular meetings. 2. Feedback reporting from director level to Managers on a timely basis. 3. Allow smart stream to all Cost centre managers 4. All Managers to be well informed about Policies. 5. Strengthen capacity of power in the provincial level
Mismatch between Government policy (NSDP 2016-2030) and health expenditure - Resource allocation is currently skewed towards curative services particularly those at Vila Central Hospital (VCH) which acts against the policy commitment to Primary health care. PHC is the key to achieving universal health coverage.	<ol style="list-style-type: none"> 1. Allocative efficiency 2. Request more recourses from government and development partners 3. Innovative means of health financing 	<ol style="list-style-type: none"> 1. In a Business Planning & Budgeting we need to consider all level of service delivery. 2. Develop and emphasis on public, private partnership
Information systems and data analysis There is a lack of or limited analysis leading to minimal flow of information back to staff managing and delivering services, and for use in planning and decision making.	<ol style="list-style-type: none"> 1. System for reporting Capacity and skill development in data analysis 	<ol style="list-style-type: none"> 1. Improve usage of tools in place (DHIS2 & Tuppai)
Mechanisms to ensure staff productivity, welfare and empowerment - Leads to low motivation, poor work performance, and exploitation of workplace/position PMDS better implemented.	<ol style="list-style-type: none"> 1. Supervisory visit 2. Rewards 	<ol style="list-style-type: none"> 1. Managers to do regular visits to all facilities 2. Rewards to staff/Sections
Unclear staff roles, functions, tasks; lack of access to incentives to boost retention - If staff are not clear about the expectations and responsibilities of their jobs and supervised and managed poor staff productivity and work performance prevails.	<ol style="list-style-type: none"> 1. JD 2. Policy of role delineation 	<ol style="list-style-type: none"> 1. Review JD 2. Proper induction

Operational management of workforce staff leave accruals - Results in rising costs. It is vital that leave policies are implemented to reduce leave balances and align entitlements with prescribed levels.	<ol style="list-style-type: none"> 1. Information of Leave Balance to all staff 2. Only technical personnel to be considered 3. Review long service leave (72 days) 	<ol style="list-style-type: none"> 1. Managers to be aware of leave balance to be disseminate to respective staffs 2. Payoff for accrued leaves 3. Review employment act
Scope of practice for health workforce professionals. - Limited resources better utilised, People driven health services e.g. taking services to where the people are; outreach models to meet the needs of remote communities.	<ol style="list-style-type: none"> 1. Better utilisation of existing staff 2. Some staff are overloaded 3. All HF should be inclusive in planning 4. Integrated outreach 5. Development of outreach policy 	<ol style="list-style-type: none"> 1. Existing staff must be able to be polytalent/multi-tasked 2. Address shortage of HR 3. Bottom up approach 4. To be encouraged to minimise resources 5. Ex: HCF
Staff concentration - RDP - experienced staff refusing to be transferred to rural areas	<ol style="list-style-type: none"> 1. Review of scope of practice for each category of staff and HF 2. Insubordination 	<ol style="list-style-type: none"> 1. Upskilling staff 2. Proper consultation with staff concerned & MoH code of practice
<p>Imbalance between supplies, equipment and human resources - lack of equipment and supplies hamper ability of staff to do their job – creates cycle e.g. Staff cannot do their job , people don't access the service, higher utilisation of hospitals - reinforces patients' behaviour to seek care at tertiary care outpatient facilities.</p> <p>Limited integration of curative and public health service - leading to poor coordination and inefficiencies in resources, including human resource use.</p>	<ol style="list-style-type: none"> 1. Supervisory visits to HF 2. Outreach programs 3. Specialised clinics in hospitals should take leading role in outreach services 	<ol style="list-style-type: none"> 1. Managers to do regular visits to HFs 2. Proper planning of outreach to all HF 3. No allocated budget for outreach programs

APPENDIX B3 - WORKFORCE PLANNING AND HR CONSULTATION PARTICIPANT LIST (JUNE 2018)

GROUP 1 Hospital and Curative services		
1	Willie Tokon Facilitator	Director – Curative and Hospital Services
2	Dr. Andy Ilo Co- facilitator	Medical Superintendent – NPH
3	Leipakoa Matariki Co facilitator /HR support	Principal HRD officer
4	Sanny Marafi HR support	Senior HRO
5	Agnes Mathias	Acting Principal Pharmacist
6	Bertha Tarileo	Acting PNO
7	Dr. Santus Wari	Medical Superintendent - VCH
8	Paul Makikon	General Services Manager - VCH
9	Dr Robert Vocor	Acting Medical Superintendent – Lenakel
10	Roderick Mera	Acting Medical Superintendent – Lolowai
11	Noelin Teilemb	General Services Manager - Norsup
12	Gerollyn Tagaro	GSM NPH (Acting)
13	Sophie Morris	Acting Manager PH
14	Tousei Lestour	Nursing Unit Manager
15	Jacques Honore	Nursing Unit Manager
16	Beverley Tosiro	Nursing Unit Manager
GROUP 2 Public and provincial		
1	Len Tarivonda (Facilitator)	Director – Public Health
2	Nelly Ham (Co facilitator)	Acting Manager – Environmental Health
3	Meriam Ben (HR support)	Principal HRM officer
4	Lilly Phillips (HR support)	Senior HRO
5	Jean Jacques Rory	Acting Manager – Health Promotion
6	Esau Naket	Manager – Malaria
7	Morris Amos	SHEFA Provincial Administrator
8	Jivi Mele	SANMA Provincial Health Manager
9	Mackleen Tagaro	PENAMA Acting Provincial Administrator
10	Sala Nial	Finance officer NPH
11	Isabel Maxwell	Finance officer Lenakel
12	Angela Tari	Finance officer VCH
13	Fiona Antfalo	Finance officer Shefa
14	Kepoue Andrew	MALAMPA Acting Provincial Administrator
15	Simon Saika	TAFEA Provincial Manager
16	Henry Wetul	TORBA Provincial Manager
GROUP 3 Corporate Services		
1	Posikai Samuel Tapo (Facilitator)	Director – Policy Planning Corporate Services
2	Carol Rovo (Co- facilitator)	Principal Health Planner
3	Charlie Harrison (Co-facilitator HR support)	Manager – Human Resource
4	Tony Tataki (HR Support)	Senior HRD officer
5	Edmond Tavala	Assets
6	Evelyne Emile	VCNE
7	Henry Lakeleo	Acting Manager - Finance
8	Wilson Liplip	Manager – Central Medical Stores
9	Rachel Takoa	Manager – Health Information Systems
10	Julian Lasekula	Assistant – Information Technology Unit
11	Viran Tovu	Health Sector Analyst
12	Scott Monteiro	VHRM Team leader

APPENDIX C - GRT PERMANENT POSITIONS LIST

No	Status	EMPLOYEE NAME	Cost Centre Name	Dept/Unit	Facility Type	Cost Centre	New Structure Position Title	Cadres of Employee	New PN
2	P	Abel Merani	MALAMPA	Baiap	Health Centre	61SK	Registered Nurse	Nurses	11567
3	P	Adeline Lolten	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Registered Nurse	Nurses	10428
5	P	Agnes Mathias	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Pharmacist Paediatrics	Allied Health	9588
4	P	Agnes Malau	PENAMA	Kerembei	Health Centre	61SJ	Nurse Aide	Nurses	11219
7	P	Aki An Dorin Gaviga	VILA CENTRAL HOSPITAL	ENT Nursing	Hospital	61RB	Nurse in charge Ear, Nose and Throat	Nurses	9140
6	P	Aintip Dorah	MALAMPA	Amelatin	Dispensary	61SK	Nurse Aide	Nurses	11608
10	P	Albert Toukouné	VILA CENTRAL HOSPITAL	Surgery	Hospital	61RB	Registrar Surgeon	Doctor	9845
8	P	Sanny Marafi	CORPORATE SERVICES	Human Resources Management and Development	Administration	61VA	Senior HRO Systems Management and Staff Liaison Officer	Corporate Services	8114
9	P	Albert Honorine	MALAMPA	Lambubu	Dispensary	61SK	Nurse Aide	Nurses	11600
11	P	Alfred Kamoi	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Registered Nurse	Nurses	9271
15	P	Alick Nelly	SHEFA	Ngala	Dispensary	61RH	Registered Nurse	Nurses	9723
12	P	Alfredo Virvir	NORSUP HOSPITAL	Accident and Emergency Ward	Hospital	61SF	Nurse Aide	Nurses	11400
13	P	Alick Leipakoa	SHEFA	Silimaui	Health Centre	61RH	Nurse Aide	Nurses	9698
14	P	Alick Nellie	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Nurse Aide	Nurses	10379
16	P	Aloma Hazel Sitobata	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10397
19	P	Amel Edwin Jeffrey	NORTHERN PROVINCIAL HOSPITAL	PRIMARY EYE CARE	Hospital	61SB	Nurse In charge Primary Eye Care	Nurses	10272
17	P	Alwin Nego	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Senior Hospital HIS officer	Corporate Services	9417
18	P	Alwyn Ionnée	PUBLIC HEALTH	Health Promotion	Administration	61UA	Graphic Artist	Public Health	8345
21	P	Amos Tutu Toka	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Medical imaging Technologist	Allied Health	9579
20	P	Amitalu Eliette	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Cleaner	Support Services	11506
22	P	Amsaline Lui	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Senior Pharmacist OPD	Allied Health	9582
23	P	Anastasie Backloulou	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Registered Nurse PAEDs	Nurses	9311
25	P	Andrew Loreen	VILA CENTRAL HOSPITAL	General Outpatient Department	Hospital	61RB	Senior Nurse Practitioner	Nurses	9135

24	P	Anderson Lilly	MALAMPA	Aulua	Dispensary	61SK	Nurse Aide	Nurses	11610
26	P	Andy Ilo	NORTHERN PROVINCIAL HOSPITAL	Anesthesia Medical	Hospital	61SB	Senior Registrar Anaesthetist	Doctor	10192
27	P	Angele Malai Tavi	MALAMPA	Carolyn Bay	Dispensary	61SK	Registered Nurse	Nurses	11611
28	P	Anita Mabon Bulere	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Registered Nurse	Nurses	9253
29	P	Anita Malessy	NORSUP HOSPITAL	Laboratory Services	Hospital	61SF	Assistant Laboratory Officer	Allied Health	11365
30	P	Anna Jack Joseph	MALAMPA	Lehili	Dispensary	61SK	Registered Nurse	Nurses	11629
32	P	Anna Tari William	TORBA HOSPITAL	General Outpatient Department	Hospital	61SD	Senior Nurse	Nurses	11748
31	P	Anna Ruth Henry	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Laundress	Support Services	9994
34	P	Anne Brenda Wellin Tamata	VILA CENTRAL HOSPITAL	Rehabilitation Services	Hospital	61RB	Physiotherapist	Allied Health	9599
33	P	Annaline Malessy	NORSUP HOSPITAL	Eye Clinic	Hospital	61SF	Nurse Aide	Nurses	11445
35	P	Anne Pakoa Enkae	SHEFA	Shefa Provincial Public Health	Administration	61RH	Mother Child Health Nurse	Nurses	8836
36	P	Annette Garae	VILA CENTRAL HOSPITAL	Paediatrics	Hospital	61RB	Senior Registrar Paediatrics	Doctor	9021
39	P	Annjerry Warasak	TORBA HOSPITAL	Nursing Services	Hospital	61SD	Registered Nurse	Nurses	11750
37	P	Annie Jimmy	LENAKEL HOSPITAL	Pediatric Ward	Hospital	61RG	Nurse Aide	Nurses	9905
38	P	Annie Taissets	MALAMPA	Malampa Provincial Public Health	Administration	61SK	HIV/STI Officer	Public Health	8741
41	P	Anthony Mermer	SHEFA	Vaemali	Health Centre	61RH	Registered Nurse	Nurses	9715
40	P	Anson Rosita Melysa	MALAMPA	Liro	Health Centre	61SK	Nurse Aide	Nurses	11580
49	P	Avok Locy Kai Titomat	SHEFA	Vaemauri	Health Centre	61RH	Registered Nurse	Nurses	9709
42	P	Antoine Telukluk	MALAMPA	Malampa Provincial Public Health	Administration	61SK	TB& Leprosy officer*	Public Health	8740
43	P	Aru Miswyn Acklet	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	Secretary	Support Services	11141
44	P	Arugogona Martha Juanita	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Clerk	Support Services	10610
45	P	Atpatun Saturnin	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Senior Grounds man	Support Services	10630
46	P	August Joel	SHEFA	Shefa Provincial Public Health	Administration	61RH	Tuberculosis/Leprosy officer	Public Health	8842
47	P	Augustine Aru	CORPORATE SERVICES	Finance and Accounts	Administration	61VA	Finance Officer*	Corporate Services	8020
48	P	Avock Dolcy Oval	SANMA	Malau	Health Centre	61SI	Nurse Aide	Nurses	10821
50	P	Bahor Tabi Rolline	SANMA	Malau	Health Centre	61SI	Registered Nurse	Nurses	10820
52	P	Bani Graig	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Dispenser OPD	Allied Health	9584

51	P	Bamboe Mark	PUBLIC HEALTH	Malaria and other Vector Borne Diseases	Administration	61UA	Field Officer	Public Health	8325
53	P	Bani Julienne Orren	VILA CENTRAL HOSPITAL	General Outpatient Department	Hospital	61RB	Senior Nurse GOPD	Nurses	9127
56	P	Basil Aitip	NORSUP HOSPITAL	Eye Clinic	Hospital	61SF	Nurse In charge Eye Clinic	Nurses	11442
54	P	Barako Rosaria	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Nurse Aide	Nurses	10437
55	P	Barton Greg Baro	TORBA	Loh	Health Centre	61SH	Nurse Aide	Nurses	11832
58	P	Batsari Blaise Tabilip	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Registered Nurse	Nurses	9254
57	P	Batick Maritha	MALAMPA	South West Bay (Wintua)	Health Centre	61SK	Nurse Aide	Nurses	11549
59	P	Becky Iaruel	LENAKEL HOSPITAL	Surgical Ward	Hospital	61RG	Registered Nurse	Nurses	9909
61	P	Berry Jea Dickson Heindrix Kalotip Micky	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Senior Nurse PAEDs	Nurses	9307
60	P	Ben Charles	SHEFA	Saupia	Health Centre	61RH	Handyman/Driver(Saupia)	Support Services	9705
62	P	Betina Kalotang	SHEFA	Erakor	Dispensary	61RH	Registered Nurse	Nurses	9741
63	P	Betrand Sakama Tom	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Midwife	Nurses	9928
64	P	Betty Massing	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Medical imaging Technologist	Allied Health	9580
65	P	Biagke Marie Noelle Mabonlala	MALAMPA	Lamap	Health Centre	61SK	Registered Nurse	Nurses	11542
66	P	Blaise Resen	PENAMA	Melsisi	Health Centre	61SJ	Registered Nurse	Nurses	11203
67	P	Blandine Taripu	SHEFA	Saupia	Health Centre	61RH	Nurse Practitioner	Nurses	9701
69	P	Bobby Steeve Jairo Charles	TORBA HOSPITAL	Laboratory Services	Hospital	61SD	Microscopist	Allied Health	11727
68	P	Bob Delwin	MALAMPA	Uripiv	Dispensary	61SK	Nurse Aide	Nurses	11598
70	P	Bomwell Elliane	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Senior Nurse	Nurses	10462
71	P	Bong Jenny Willie	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Consultant Dentist Public Health	Dental	9659
73	P	Borris Rory	MALAMPA	Malama Provincial Public Health	Administration	61SK	MCH Nurse	Nurses	8747
72	P	Bongnaim Edwin Bong	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Cleaner	Support Services	9486
75	P	Brian Korty	VILA CENTRAL HOSPITAL	Eye Nursing	Hospital	61RB	Registered Nurse PEC	Nurses	9118
74	P	Bosara Hellen	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cook/Kitchen Hand	Support Services	10674

76	P	Brown Kalsim Leuan	LENAKEL HOSPITAL	Pediatric Ward	Hospital	61RG	Registered Nurse	Nurses	9904
81	P	Bulememea Marie claire	VILA CENTRAL HOSPITAL	Nursing Services	Hospital	61RB	Clinical Nursing Supervisor	Nurses	9095
77	P	Brown Toka	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	Grounds man	Support Services	11152
78	P	Bue Worthie Delight	PENAMA	Penama Provincial Corporate Services	Administration	61SJ	Finances Officer	Support Services	8261
79	P	Bule Cornelson	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Porter	Support Services	9510
80	P	Buleban Renata Mabonsingsing	CORPORATE SERVICES	VCNE	Administration	61VY	Midwife Educator	Corporate Services	8039
85	P	Cedric Meltek	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Registered Nurse OT	Nurses	9352
82	P	Bulewak Gantin	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Nurse Aide	Nurses	9339
83	P	Carolynne Marineth Tebbi	LENAKEL HOSPITAL	Family Planning	Hospital	61RG	Nurse Aide	Nurses	9931
84	P	Cassimir Liwuslili	SANMA	Sanma Provincial Public Health	Administration	61SI	Health Promotion Education and Communication Officer	Public Health	8554
87	P	Charlie Annie Margaret	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Senior Midwife	Nurses	9203
86	P	Charles Womel	TORBA	Torba Provincial Corporate Services	Administration	61SH	Captain	Support Services	8283
88	P	Charlie Hannah Dorinnie	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Midwife	Nurses	9209
89	P	Charlotte Lingbu	MALAMPA	Baiap	Health Centre	61SK	Midwife	Nurses	11566
92	P	Chrisilla Tavue	SHEFA	Rafaremauri	Dispensary	61RH	Registered Nurse	Nurses	9739
90	P	Charlton Willie Iata	LENAKEL HOSPITAL	Anesthetic Ward	Hospital	61RG	Nurse Aide	Nurses	8985
91	P	Chire Timah	MALAMPA	Espigles Bay	Health Centre	61SK	Nurse Aide	Nurses	11537
94	P	Christian Mabon Ruvu	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Registered Nurse	Nurses	10471
93	P	Christian Asial	PENAMA	Baie Barrier	Dispensary	61SJ	Nurse Aide	Nurses	11321
95	P	Christina Nikalen	LENAKEL HOSPITAL	Surgical Ward	Hospital	61RG	Registered Nurse	Nurses	9910
96	P	Christina Rapouel	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Registered Nurse	Nurses	10371
97	P	Cindy Mahit	NORSUP HOSPITAL	Surgical Ward	Hospital	61SF	Registered Nurse Surgical ward	Nurses	11411
99	P	Clayton Tari	PENAMA	Sakau	Dispensary	61SJ	Registered Nurse	Nurses	11275
98	P	Cindy Waimini	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Nurse Aide	Nurses	10479
103	P	Crystal Garae	VILA CENTRAL HOSPITAL	Pathology	Hospital	61RB	Consultant (Pathologist)	Doctor	9078
100	P	Clement Loli	LOLOWAI HOSPITAL	Pharmacy Services	Hospital	61SG	Supply officers	Allied Health	11033

101	P	Colenso Silas	TORBA	Torba Provincial Public Health	Administration	61SH	HIV/STI Officer	Public Health	8471
102	P	Collen Horo	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	Porter	Support Services	11171
104	P	Cullwick Trevor	VILA CENTRAL HOSPITAL	Surgery	Hospital	61RB	Senior consultant Surgeon	Doctor	9037
105	P	Cynthia Woleg	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9335
106	P	Daniel Charlie	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Senior Nurse	Nurses	9231
107	P	Daniel Peter	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Registered Nurse	Nurses	9238
108	P	Daniel Tuvuaie	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Registered Nurse	Nurses	10472
109	P	Daniel Upakai	VILA CENTRAL HOSPITAL	Antenatal Clinic	Hospital	61RB	Registered Nurse AC	Nurses	9167
110	P	David Amos	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Medical imaging Technologist	Allied Health	9667
111	P	David Berry Louis	NORSUP HOSPITAL	Laboratory Services	Hospital	61SF	Microscopist	Allied Health	11367
116	P	David Natonga	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10394
112	P	David Dorin	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cleaner	Support Services	10644
113	P	David Lauwauwa George	TAFEA	Green Hill	Health Centre	61RI	Nurse Aide	Nurses	10039
114	P	David Leimos	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Laundress	Support Services	9548
115	P	David Mahuri Siro	PENAMA	Penama Provincial Corporate Services	Administration	61SJ	Captain	Support Services	8258
117	P	David Serah	LOLOWAI HOSPITAL	Medical Ward	Hospital	61SG	Nurse in charge MEDICAL Ward	Nurses	11045
118	P	David Silapo Jimmy	LENAKEL HOSPITAL	Eye Clinic	Hospital	61RG	Registered Nurse	Nurses	9942
119	P	David Tevi	PENAMA	Lesasa	Dispensary	61SJ	Registered Nurse	Nurses	11255
120	P	Debbie Fred	VILA CENTRAL HOSPITAL	Antenatal Clinic	Hospital	61RB	Senior Midwife AC	Nurses	9163
122	P	Dexter Takau	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Phlebotomist	Allied Health	9635
121	P	Deleguy Jeanette	NORSUP HOSPITAL	General Support Services	Hospital	61SF	OPD Filing clerk	Support Services	11486
124	P	Dobe Nancy Frank	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Senior Midwife	Nurses	10360
123	P	Dingely Lester Evans	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Senior Hospital HIS officer	Support Services	10685
125	P	Dominique Viragos	PENAMA	Melsisi	Health Centre	61SJ	Registered Nurse	Nurses	11204
127	P	Douglas Wilson	TORBA HOSPITAL	General Outpatient Department	Hospital	61SD	Nurse Practitioner	Nurses	11743
126	P	Dorah Dick	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Nurse Aide	Nurses	9221
129	P	Eben Niavi	LENAKEL HOSPITAL	Pediatric Ward	Hospital	61RG	Registered Nurse	Nurses	9903

130	P	Edina Tavo	VILA CENTRAL HOSPITAL	NCD	Hospital	61RB	Registered Nurse NCD	Nurses	9109
132	P	Edvina Ngwerabita	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Registered Nurse	Nurses	9189
133	P	Edwige Tabi	LOLOWAI HOSPITAL	Maternity Ward	Hospital	61SG	Senior Midwife	Nurses	11077
131	P	Edna Iercet	SANMA	Sanma Provincial Public Health	Administration	61SI	TB/Lep officer	Public Health	8572
134	P	Eliane Coulon	MALAMPA	Espigles Bay	Health Centre	61SK	Registered Nurse	Nurses	11536
135	P	Eliane Sale Rosie	TORBA HOSPITAL	Maternity Ward	Hospital	61SD	Midwife in charge Maternity Ward (REMOVE SENIOR IN STRUCTURE)	Nurses	11762
136	P	Elkem Jackline	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Midwife	Nurses	10365
141	P	Erimel Pierre Paul	SANMA	Tasmalum	Health Centre	61SI	Nurse Practitioner	Nurses	10842
142	P	Ernestine Q Garae	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Senior Nurse	Nurses	10388
137	P	Emile Evelyn	CORPORATE SERVICES	VCNE	Administration	61VY	Principal Nurse Educator	Corporate Services	8026
138	P	Emma Meralolo	LOLOWAI HOSPITAL	Ear, Nose and Throat	Hospital	61SG	Nurse Aide	Nurses	11093
139	P	Enock Ruth Rota	MALAMPA	Endu	Dispensary	61SK	Nurse Aide	Nurses	11624
140	P	Erevoke Tamumu	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Mechanic	Support Services	10635
143	P	Esau Philippe	VILA CENTRAL HOSPITAL	ENT Nursing	Hospital	61RB	Registered Nurse	Nurses	9144
144	P	Esline Ala	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Dispenser Inpatient	Allied Health	9593
147	P	Esther Naomi Aru	PENAMA	Nduindui	Health Centre	61SJ	Midwife	Nurses	11195
148	P	Ethline Taripu	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Registered Nurse	Nurses	9192
145	P	Ester Noe	LENAKEL HOSPITAL	Medical Ward	Hospital	61RG	Nurse Aide	Nurses	9896
146	P	Esther Dingley	VILA CENTRAL HOSPITAL	Eye Nursing	Hospital	61RB	Nurse Aide	Nurses	9122
151	P	Ezra Talo	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Blood Bank Technician	Allied Health	9637
153	P	Fancy Rolland	TORBA	Lequel	Dispensary	61SH	Registered Nurse	Nurses	11850
149	P	Eveva Ephraim	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Maintenance supervisor	Support Services	11487
150	P	Evievi Elizabeth Vemanu	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cleaner	Support Services	10646
154	P	Fiona Titus Nalau	VILA CENTRAL HOSPITAL	Family Planning	Hospital	61RB	Registered Nurse	Nurses	9180
152	P	Fabienne Tura	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Hospital HIS officer	Support Services	10686
156	P	Florina Albert	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Registered Nurse	Nurses	9270
157	P	Florita Toa Toamatanini	NORSUP HOSPITAL	Surgical Ward	Hospital	61SF	Registered Nurse Surgical ward	Nurses	11410
155	P	Floriane Atingting	NORSUP HOSPITAL	Medical Ward	Hospital	61SF	Nurse Aide	Nurses	11393

158	P	Frank Bob Natiang	LENAKEL HOSPITAL	Ear, Nose and Throat	Hospital	61RG	Registered ENT Nurse	Nurses	9937
160	P	Frank Rebecca	MALAMPA	Vinmavis	Dispensary	61SK	Registered Nurse	Nurses	11601
166	P	Gaston Kalsakau	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Registered Nurse OT	Nurses	9353
159	P	Frank Haidriv	MALAMPA	Maskelynes (Vanmaur)	Dispensary	61SK	Nurse Aide	Nurses	11618
167	P	George Nathan Tasso	MALAMPA	South West Bay (Wintua)	Health Centre	61SK	Registered Nurse	Nurses	11548
161	P	Gabriel Wailarang	MALAMPA	Vinmavis	Dispensary	61SK	Nurse Aide	Nurses	11602
162	P	Garae Caleb Navui	PUBLIC HEALTH	HIV & STI	Administration	61UA	Coordinator HIV/STI	Public Health	8372
163	P	Garae Jackson	PENAMA	Penama Provincial Corporate Services	Administration	61SJ	Provincial HIS Officer	Support Services	8264
164	P	Garae Lois	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental clerk	Support Services	10748
165	P	Garae Macklyne Katenga	PUBLIC HEALTH	Neglected Tropical Diseases	Administration	61UA	Neglected Tropical Diseases Officer	Public Health	8385
170	P	Georgina Bule	PENAMA	Pangi	Health Centre	61SJ	Registered Nurse	Nurses	11224
171	P	Gerodian Kwari Spooner	TORBA	Mataka	Health Centre	61SH	Registered Nurse	Nurses	11845
168	DG	GEORGE TALEO	CORPORATE SERVICES	Director General	Administration	60BA	Director General	Director General	8000
169	P	George Worwor	PUBLIC HEALTH	Surveillance	Administration	61UA	Senior Surveillance Officer	Public Health	8449
175	P	Glenis Tari	SANMA	Tasiriki	Health Centre	61SI	Midwife	Nurses	10855
178	P	Grace Hinge Sasaro	PENAMA	Angoro	Dispensary	61SJ	Registered Nurse	Nurses	11247
172	P	Gibson Athens	TAFEA	White Sands	Health Centre	61RI	Nurse Aide	Nurses	10051
173	P	Gladys Joseph	SHEFA	Shefa Provincial Corporate Services	Administration	61RH	Cleaner	Support Services	8165
174	P	Glen Joel	CORPORATE SERVICES	VCNE	Administration	61VY	Driver	Corporate Services	8031
179	P	Graham Serah Nerry Timbaci	NORTHERN PROVINCIAL HOSPITAL	Antenatal Clinic	Hospital	61SB	Senior Midwife	Nurses	10319
176	P	Golow Glency Daniel	TORBA	Hannington	Dispensary	61SH	Nurse Aide	Nurses	11857
177	P	Gongeiley Dickson Mala	TORBA	Lehali	Dispensary	61SH	Nurse Aide	Nurses	11854
180	P	Graham Tasso	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Registered Nurse	Nurses	9236
182	P	Graziela Tildena Mandavah	VILA CENTRAL HOSPITAL	Anesthesia Medical	Hospital	61RB	Senior consultant Anaesthesia and Intensive Care	Doctor	9011
185	P	Guenola Matan Lesiness	MALAMPA	Wallarano	Health Centre	61SK	Registered Nurse	Nurses	11596
181	P	Gram Bal	PENAMA	Pangi	Health Centre	61SJ	Nurse Aide	Nurses	11226

187	P	Hariette Manni	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Senior Midwife	Nurses	9205
183	P	Grey Natu Margarette	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	Laundress	Support Services	11157
184	P	Griselda Rapouel	CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	Administration	61VA	Receptionist	Corporate Services	8074
191	P	Harry John Tony	VILA CENTRAL HOSPITAL	Obstetrics & Gynaecology	Hospital	61RB	Senior Consultant O/Gynecologist	Doctor	9027
186	P	Ham Maeva	MALAMPA	Malama Provincial Public Health	Administration	61SK	Nurse Aide	Nurses	8763
193	P	Heheina Regina	NORTHERN PROVINCIAL HOSPITAL	Pharmacy Services	Hospital	61SB	Senior Pharmacist OPD	Allied Health	10756
188	P	Harris Etienne Alexandre	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Clerk	Support Services	10611
189	P	Harrison John	PENAMA	Penama Provincial Public Health	Administration	61SJ	Environmental Health Officer	Public Health	8652
190	P	Harry Iata	TAFEA	Tafea Provincial Public Health Services	Administration	61RI	Malaria Supervisor	Public Health	8918
195	P	Hellenson Bani	LOLOWAI HOSPITAL	Surgical Ward	Hospital	61SG	Senior Nurse	Nurses	11061
192	P	Harry Michel Upakai	TAFEA	Tafea Provincial Corporate Services	Administration	61RI	EPI Officer*	Public Health	8925
196	P	Hellenson Gao	PENAMA	Abwatuntora	Health Centre	61SJ	Midwife	Nurses	11209
194	P	Hellen Mahit	MALAMPA	Lamap	Health Centre	61SK	Nurse Aide	Nurses	11555
197	P	Hellyette Molu	NORTHERN PROVINCIAL HOSPITAL	Pharmacy Services	Hospital	61SB	Dispenser OPD	Allied Health	10758
199	P	Henry Wetul	TORBA HOSPITAL	General Outpatient Department	Hospital	61SD	Nurse Practitioner	Nurses	11745
200	P	Hermine Laga	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Registered Nurse PAEDs	Nurses	9314
198	P	Henry Lakeleo	CORPORATE SERVICES	Finance and Accounts	Administration	61VA	Coordinator Budget Development & Control *	Corporate Services	8015
201	P	Hinge Leo Lawrence	VILA CENTRAL HOSPITAL	Mental Health Ward	Hospital	61RB	Nurse In charge Mental Health	Nurses	9293
202	P	Hitler Garae	PENAMA	Lolovange	Dispensary	61SJ	Registered Nurse	Nurses	11267
203	P	Hoke Bani Claudine	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Nurse In charge Accident and Emergency	Nurses	10382
205	P	Honore Maurice	VILA CENTRAL HOSPITAL	Nursing Services	Hospital	61RB	Nursing services Manager*	Nurses	9092
206	P	Honore Mwai	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10398
204	P	Honore Lingtamat	CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	Administration	61VA	Printing Clerk*	Corporate Services	8073
208	P	Hopsen Rosineth	NORSUP HOSPITAL	Anesthetic Ward	Hospital	61SF	Registered Nurse	Nurses	11360
209	P	Iakapas Nais Kopin	LENAKEL HOSPITAL	Laboratory Services	Hospital	61RG	Microscopist	Allied Health	8989

207	P	Honore Rosaria Taissets	CORPORATE SERVICES	VCNE	Administration	61VY	Senior clinical Nurse Educator*	Corporate Services	8035
213	P	Iata Albert Kaiapam	VILA CENTRAL HOSPITAL	Rehabilitation Services	Hospital	61RB	Principal Physiotherapist	Allied Health	9665
214	P	Ines Alwyn	NORSUP HOSPITAL	Medical Ward	Hospital	61SF	Registered Nurse Medical Ward	Nurses	11391
210	P	Iaruel Arnold	LENAKEL HOSPITAL	Pharmacy Services	Hospital	61RG	Supply Officer	Allied Health	8999
211	P	Iaruel Jerry	PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	Administration	61UA	Coordinator Mental Health	Public Health	8399
212	P	Iaruel Madley	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Housekeeping Supervisor	Support Services	9989
216	P	Ious Dick Jean Yves Nangia	LENAKEL HOSPITAL	Medical Ward	Hospital	61RG	Registered Nurse	Nurses	9895
217	P	Isaac Jivi	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Registered Nurse	Nurses	10429
215	P	Ioan Collin	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Plumber	Support Services	9471
219	P	Jack Luen Jenny	VILA CENTRAL HOSPITAL	NCD	Hospital	61RB	Nurse in charge NCD Clinic	Nurses	9105
221	P	Jack Viso	NORTHERN PROVINCIAL HOSPITAL	SURGICAL WARD	Hospital	61SB	Registered Nurse	Nurses	10488
218	P	Jack Bani	PENAMA	Lolovange	Dispensary	61SJ	Nurse Aide	Nurses	11268
223	P	Jacky John Toka	NORTHERN PROVINCIAL HOSPITAL	Imaging Services	Hospital	61SB	Medical Imaging Technologist	Allied Health	10786
220	P	Jack Robert	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Ambulance Drivers	Support Services	9449
224	P	Jacob Lenika	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9332
222	P	Jack Wensi	CORPORATE SERVICES	Central Medical Store	Administration	61VW	Stock Control officer*VILA	Corporate Services	8148
226	P	Jacqueline Tebi	TAFEA	Tanyepa	Dispensary	61RI	Registered Nurse	Nurses	10068
231	P	Janrethy Lunabek	NORSUP HOSPITAL	Pediatric Ward	Hospital	61SF	Registered Nurse Paediatric ward	Nurses	11404
225	P	Jacob Marie	SHEFA	Marowia	Dispensary	61RH	Nurse Aide	Nurses	9732
232	P	Japhet Bakon	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Dental Therapist	Dental	9567
227	P	Jacques Buleban	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Driver	Corporate Services	10602
228	P	Jacquier Bertrand	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Driver	Corporate Services	10601
229	P	Janet Eric	SHEFA	Shefa Provincial Public Health	Administration	61RH	Reproductive Health and Family Planning Supervisor	Public Health	8834
230	P	Janita Tamla	PENAMA	Point Cross	Dispensary	61SJ	Nurse Aide	Nurses	11260
233	P	Japhet Lilly May Hanah	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Senior Nurse	Nurses	9151
235	P	Jean Batkae	PENAMA	Namaram	Dispensary	61SJ	Registered Nurse	Nurses	11245

237	P	Jean Francois Niramath	NORTHERN PROVINCIAL HOSPITAL	Childrens Outpatient Department	Hospital	61SB	Senior Nurse	Nurses	10309
234	P	Jarina Tari	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	OPD Filing clerk	Support Services	11145
239	P	Jeanette Wari	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Registered Nurse	Nurses	10370
236	P	Jean Bosco Bakon	MALAMPA	Baiap	Health Centre	61SK	Handy man/Driver	Support Services	11569
240	P	Jeffery Naparau	TAFEA	Futuna	Dispensary	61RI	Registered Nurse	Nurses	10080
238	P	Jean Ruru	CORPORATE SERVICES	Central Medical Store	Administration	61VW	Store keeper*	Corporate Services	8151
241	P	Jeffery Samana	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Senior Nurse	Nurses	9232
243	P	Jeffrey Ati	NORSUP HOSPITAL	Laboratory Services	Hospital	61SF	Microscopist	Allied Health	11366
244	P	Jendy Fred	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Nurse In charge Pediatrics Ward	Nurses	9303
242	P	Jefflyn Tete	PENAMA	Angoro	Dispensary	61SJ	Nurse Aide	Nurses	11248
245	P	Jenery Kalo Joseph	SHEFA	Vaemali	Health Centre	61RH	Registered Nurse	Nurses	9745
247	P	Jenny Naurman Saur	NORSUP HOSPITAL	Maternity Ward	Hospital	61SF	Midwife	Nurses	11424
248	P	Jerry Nalau Scott	LENAKEL HOSPITAL	General Outpatient Department	Hospital	61RG	Registered Nurse	Nurses	9898
246	P	Jenny Mabon	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Nurse Aide	Nurses	9197
249	P	Jessica Ores	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Registered Nurse PAEDs	Nurses	9315
251	P	Jill Sutherland Tavao	LOLOWAI HOSPITAL	Medical Ward	Hospital	61SG	Registered Nurse	Nurses	11048
252	P	Jillina Kamsel	SANMA	Hoghabour	Dispensary	61SI	Registered Nurse	Nurses	10874
250	P	Jeuvavohoso Noela Vivian Vondom	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Nurse Aide	Nurses	10404
254	P	Jimmy Jenny	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Registered Nurse OT	Nurses	9349
255	P	Jimmy Joe Kapen	TAFEA	Jet	Dispensary	61RI	Registered Nurse	Nurses	10070
253	P	Jimmy Anmol Poporo	SANMA	Tataikala	Dispensary	61SI	Nurse Aide	Nurses	10883
258	P	Jivi Mele	SANMA	Sanma Provincial Public Health	Administration	61SI	MCH Nurse	Nurses	8565
259	P	Joanne Thain	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Registered Nurse PAEDs	Nurses	9312
256	P	Jimmy Mata	MALAMPA	Utas	Health Centre	61SK	Nurse Aide	Nurses	11574
257	P	Jimmy Sakius	MALAMPA	Liro	Health Centre	61SK	Handy man/Driver	Support Services	11581
260	P	Jocelyn Joel Peter	TAFEA	White Sands	Health Centre	61RI	Midwife	Nurses	10049
261	P	Jocelyn Namu Stephen	LENAKEL HOSPITAL	Ear, Nose and Throat	Hospital	61RG	Nurse in charge ENT	Nurses	9935
262	P	Jocelyne Sandy	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Registered Nurse	Nurses	9256

263	P	Joe Firiam	SHEFA	Shefa Provincial Public Health	Administration	61RH	Mother Child Health Nurse	Nurses	8838
267	P	John Seth Ala	VILA CENTRAL HOSPITAL	Anesthetic Ward	Hospital	61RB	Nurse Anaesthetic - Trainee	Nurses	9370
271	P	Johnny White	LENAKEL HOSPITAL	Infectious Ward	Hospital	61RG	Registered Nurse	Nurses	9914
264	P	Joe Lilly	SHEFA	Amoh	Dispensary	61RH	Nurse Aide	Nurses	9728
265	P	Joel Martha	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Laundress	Support Services	9503
266	P	John Gideon	NORSUP HOSPITAL	Pharmacy Services	Hospital	61SF	Supply Officer	Allied Health	11374
274	P	Jot Kovia	TAFEA	Imaki	Health Centre	61RI	Nurse Practitioner	Nurses	10054
268	P	John Sylviane	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Cook/Kitchen Hand	Support Services	9529
269	P	Johnny Fredson Din	TORBA HOSPITAL	Pharmacy Services	Hospital	61SD	Supply officers	Allied Health	11736
270	P	Johnny Heribert	NORTHERN PROVINCIAL HOSPITAL	Surgical Ward	Hospital	61SB	Nurse Aide	Nurses	10497
275	P	Joycelyne Loten Kalkandi	MALAMPA	Utas	Health Centre	61SK	Midwife	Nurses	11572
272	P	Jones Wilkins James	TORBA	Sarawia	Dispensary	61SH	Nurse Aide	Nurses	11859
273	P	Josina Webas	TORBA	Mataka	Health Centre	61SH	Nurse Aide	Nurses	11846
278	P	Juliana Warput	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10396
279	P	Julie Paniel	NORSUP HOSPITAL	Infectious Ward	Hospital	61SF	Registered Nurse	Nurses	11416
276	P	Judy Taren	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Senior Laundress	Support Services	10652
277	P	Julian Lasekula	CORPORATE SERVICES	Information Communication Technology	Administration	61VA	Desk support officer*	Corporate Services	8130
280	P	Julienne Tobo	PENAMA	Pangi	Health Centre	61SJ	Midwife	Nurses	11223
282	P	Juline Mattaha Ken	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Registered Nurse Maternity Ward	Nurses	9951
283	P	Justin Alain	MALAMPA	Unmet	Dispensary	61SK	Registered Nurse	Nurses	11589
281	P	Juliet Kessaiah	MALAMPA	Nebul	Health Centre	61SK	Nurse Aide	Nurses	11561
285	P	Kakou Colette	MALAMPA	Espigles Bay	Health Centre	61SK	Midwife	Nurses	11535
286	P	Kalkandi Kalanga	MALAMPA	Utas	Health Centre	61SK	Registered Nurse	Nurses	11573
284	P	Kaenbo Gino	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Housekeeping Supervisor	Support Services	10639
288	P	Kallon Finnau Finali	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Head of Section - Medical imaging Technologist	Allied Health	9576
290	P	Kalo Malau John	LENAKEL HOSPITAL	Laboratory Services	Hospital	61RG	Medical Lab Officer	Allied Health	8987
287	P	Kalkoa Kaltamat	SHEFA	Shefa Provincial Public Health	Administration	61RH	Malaria Supervisor	Public Health	8830

292	P	Kalorib Terry	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Biochemist	Allied Health	9644
289	P	Kalmal Rosaria Barthelemy	MALAMPA	Vao	Dispensary	61SK	Nurse Aide	Nurses	11586
294	P	Kalotrip Kalotiti Michel	VILA CENTRAL HOSPITAL	Anesthetic Ward	Hospital	61RB	Anesthetic Scientific Officer Incharge	Nurses	9362
291	P	Kalokis Dorothy	SHEFA	Erakor	Dispensary	61RH	Nurse Aide	Nurses	9742
295	P	Kalpukai Mark Ben	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Senior Dental registrar	Dental	10740
293	P	Kalorip Madlen Lynros	SHEFA	Saupia	Health Centre	61RH	Nurse Aide	Nurses	9704
296	P	Kalsongi Donald	SHEFA	Vaemaauri	Health Centre	61RH	Registered Nurse	Nurses	9719
297	P	KALTERIKIA HENRI	SHEFA	Imere	Health Centre	61RH	Registered Nurse	Nurses	9691
298	P	Kalwat Kalter Poilapa	SHEFA	Imere	Health Centre	61RH	Nurse Practitioner	Nurses	9689
300	P	Karine Lile Smith	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Senior Nurse	Nurses	10421
302	P	Kaspa Clifton Kajituga	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Senior Nurse	Nurses	9185
299	P	Karai Ferdinand	SANMA	Port Olry	Health Centre	61SI	Handy man/Driver	Support Services	10828
303	P	Kasso Johnson Wilson	NORTHERN PROVINCIAL HOSPITAL	ENT Dept	Hospital	61SB	Senior Consultant Ophthalmologist	Doctor	10227
301	P	Kaso Tom lamouh	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Cook	Support Services	10001
305	P	Kayline Tabi	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Registered Nurse PAEDs	Nurses	9310
306	P	Keimol Rock	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Registered Nurse	Nurses	10529
304	P	Kaye Meven Vuvu	LOLOWAI HOSPITAL	Pediatric Ward	Hospital	61SG	Nurse Aide	Nurses	11059
308	P	Kemuel Samuel	VILA CENTRAL HOSPITAL	Surgery	Hospital	61RB	consultant Surgeon	Doctor	9038
312	P	Keren Slyviane Quai	SANMA	Saramauri	Health Centre	61SI	Registered Nurse	Nurses	10862
307	P	Keith Jacob	SANMA	Sanma Provincial Public Health	Administration	61SI	Environmental Health Officer	Public Health	8597
313	P	Kevin Kata Marafi	LENAKEL HOSPITAL	Infectious Ward	Hospital	61RG	Nurse incharge Tuberculosis / Infectious ward	Nurses	9912
309	P	Ken Mera	PENAMA	Penama Provincial Public Health	Administration	61SJ	Malaria Supervisor	Public Health	8648
310	P	Kender Lila	MALAMPA	Atchin	Health Centre	61SK	Nurse Aide	Nurses	11543
311	P	Kepoue Andrew	CORPORATE SERVICES	VCNE	Administration	61VY	Senior VHW Educator*	Corporate Services	8038
314	P	Kevin Serel	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Registered Nurse	Nurses	9269

319	P	Lambi Nathkambat Lambert	MALAMPA	Uripiv	Dispensary	61SK	Registered Nurse	Nurses	11597
321	P	Lauru Lina Leitarea	VILA CENTRAL HOSPITAL	General Outpatient Department	Hospital	61RB	Senior Nurse GOPD	Nurses	9126
315	P	Kilet Helena	SANMA	Vulesepe	Health Centre	61SI	Nurse Aide	Nurses	10839
316	P	Kokoi Karaikokoi Karai	SANMA	Wailapa Isu	Dispensary	61SI	Nurse Aide	Nurses	10887
317	P	Kombe Marie-Irene	MALAMPA	Wallarano	Health Centre	61SK	Nurse Aide	Nurses	11679
318	P	Kotopeu Catherine	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cashier	Support Services	10585
323	P	Lawrence Boe	NORTHERN PROVINCIAL HOSPITAL	Internal Medicine	Hospital	61SB	Registrar Physician	Doctor	10215
320	P	Larry Stephens	CORPORATE SERVICES	Central Medical Store	Administration	61VW	Supply and Clearance officer VLA	Corporate Services	8147
324	P	Lawrence Tabi	PENAMA	Melsisi	Health Centre	61SJ	Nurse Practitioner	Nurses	11201
322	P	Lawac Sylvain	MALAMPA	Malampa Provincial Public Health	Administration	61SK	Provincial Microscopist	Public Health	8749
325	P	Leddie Rose Leo	PENAMA	Abwatuntora	Health Centre	61SJ	Registered Nurse	Nurses	11210
326	P	Leimatuk Michael	SHEFA	Saupia	Health Centre	61RH	Midwife	Nurses	9702
328	P	Leisale Toara Rovet	NORTHERN PROVINCIAL HOSPITAL	Ear, Nose and Throat	Hospital	61SB	Nurse in charge Ear, Nose and Throat	Nurses	10298
329	P	Leisale Umau Lekari	SHEFA	Shefa Provincial Public Health	Administration	61RH	Mother Child Health Nurse	Nurses	8837
327	P	Leina Ruth Homai	TAFEA	Tafea Provincial Public Health Services	Administration	61RI	Reproductive Health and Family Planning Supervisor	Public Health	8919
330	P	Leitare Flora Daniel	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Registered Nurse	Nurses	9257
331	P	Lelekele Rosienne	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Nurse In charge Intensive care Unit	Nurses	9184
334	P	Leodoro Basil	NORTHERN PROVINCIAL HOSPITAL	Surgery	Hospital	61SB	Senior Consultant Surgeon	Doctor	10206
337	P	Lesteour Tousei Berthel	NORTHERN PROVINCIAL HOSPITAL	OPERATING THEATRE	Hospital	61SB	Registered Nurse	Nurses	10506
332	P	Len Tarivonda	PUBLIC HEALTH	Director Public Health	Administration	61UA	Director Public health	Director	8300
333	P	Leo Lines Serveux	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Cook/Kitchen Hand	Support Services	9530
338	P	Letley Arukesa	PENAMA	Nduindui	Health Centre	61SJ	Registered Nurse	Nurses	11196
335	P	Leon Agustine	TAFEA	Imaki	Health Centre	61RI	Nurse Aide	Nurses	10057
336	P	Lesly Bong	MALAMPA	Nebul	Health Centre	61SK	Handy man/Driver	Support Services	11562
339	P	Lewa Markson	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Incharge CT Tech	Allied Health	9676
340	P	Lewia Ruby Dick	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Medical Laboratory officer	Allied Health	9643

341	P	Leyrou Romeo	NORTHERN PROVINCIAL HOSPITAL	SURGICAL WARD	Hospital	61SB	Senior Nurse	Nurses	10482
343	P	Lilian Elizabeth Haggai	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Midwife	Nurses	9207
350	P	Lilon Konali	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental clerk	Dental	10749
342	P	Liatlatmal Anna	SANMA	Port Olry	Health Centre	61SI	Cleaner/Laundress	Support Services	10829
351	P	Lindsay Lui	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Registered Nurse	Nurses	9237
344	P	Lilian Mabon	PENAMA	Tsingbwege	Dispensary	61SJ	Nurse Aide	Nurses	11244
345	P	Lilian Rasa Tavo	PENAMA	Penama Provincial Public Health	Administration	61SJ	Reproductive Health and Family Planning Supervisor	Public Health	8649
346	P	Lilip Wilson Saramai	CORPORATE SERVICES	Central Medical Store	Administration	61VW	Manager Central Medical Store	Corporate Services	8150
347	P	Lillian Gila	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Nurse Aide	Nurses	9361
348	P	Lillian Sailas Hambu	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cleaner	Support Services	10650
349	P	Lilly Philip	CORPORATE SERVICES	Human Resources Management and Development	Administration	61VA	Senior HRO - Policies and Procedures	Corporate Services	8113
357	P	Loli Bennington	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9330
359	P	Lorna Batena	MALAMPA	South West Bay (Wintua)	Health Centre	61SK	Midwife	Nurses	11547
352	P	Lionel Rovette	NORTHERN PROVINCIAL HOSPITAL	Central Medical Store	Hospital	61VW	NPH Sub center CMS Supervisor*	Corporate Services	8153
353	P	Lishi Jack Nanupi	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Porter	Support Services	9513
354	P	Lite Norbert	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Driver	Support Services	11490
355	P	Loit Kalterekia	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Nurse Aide	Nurses	9280
356	P	Loleen Spooner Tari	SANMA	Atariboe	Dispensary	61SI	Nurse Aide	Nurses	10891
360	P	Losalini Leodoro	LOLOWAI HOSPITAL	Pediatric Ward	Hospital	61SG	Registered Nurse	Nurses	11057
358	P	Lolyne Jeremiah	PUBLIC HEALTH	HIV & STI	Administration	61UA	HIV/STI officer	Public Health	8373
366	P	Lui Daniel	SHEFA	Silmoli	Dispensary	61RH	Registered Nurse	Nurses	9729
369	P	Lydian Lopez Wai	LOLOWAI HOSPITAL	Medical Ward	Hospital	61SG	Registered Nurse	Nurses	11049
361	P	Lucia Matate	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Plumber	Support Services	11497
362	P	Lucy Fresa	LOLOWAI HOSPITAL	General Support Services	Hospital	61SG	Cook	Support Services	11167
363	P	Lucy Seresere	SHEFA	Tavalapa	Dispensary	61RH	Nurse Aide	Nurses	9736
364	P	Lucy Wollen	PENAMA	Melsisi	Health Centre	61SJ	Nurse Aide	Nurses	11205
365	P	Lui Ansen	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Porter	Support Services	9511

370	P	Lyen Manliwos	TORBA HOSPITAL	Maternity Ward	Hospital	61SD	Midwife	Nurses	11765
367	P	Luke Mary	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cook/Kitchen Hand	Support Services	10675
368	P	Lulu Maelin Dorah	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Nurse Aide	Nurses	10478
371	P	Mabonlala Isabel (Midwife)	MALAMPA	Atchin	Health Centre	61SK	Midwife	Nurses	11541
372	P	Mahit Sam Haitong	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Midwife in charge Maternity Ward	Nurses	9199
375	P	Malere Claudine	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Nurse In charge Medical Ward	Nurses	10420
376	P	Malili Elty	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Nurse Practitioner	Nurses	9150
373	P	Mahlon Tari	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Hospital HIS officer	Corporate Services	9537
374	P	Maleb Marie France	SANMA	Sanma Provincial Public Health	Administration	61SI	Senior Environmental Health Officer	Public Health	8574
379	P	Maltahial Yolland	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Senior Nurse OT	Nurses	9345
381	P	Manlumgep Abigale	TORBA	Pemisas	Health Centre	61SH	Midwife	Nurses	11837
377	P	Malisa Oswald Peter	SANMA	Sanma Provincial Corporate Services	Administration	61SI	Assets & Infrastructures officer	Support Services	8244
378	P	Malres Peter	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Driver	Corporate Services	11492
382	P	Manruru Jimmy Obed	VILA CENTRAL HOSPITAL	Mental Health	Hospital	61RB	Senior Registrar Mental Health	Doctor	9088
380	P	Maltureneim Bruno Morin	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Driver /Messenger	Support Services	9410
384	P	Mantai Manuel Lendal	LENAKEL HOSPITAL	Infectious Ward	Hospital	61RG	Registered Nurse	Nurses	9915
385	P	Manu Alfred	LENAKEL HOSPITAL	General Outpatient Department	Hospital	61RG	Nurse Practitioner	Nurses	9886
383	P	Mansale Helene	SHEFA	Imere	Health Centre	61RH	Nurse Aide	Nurses	9692
386	P	Manuel Wokeke	SANMA	Saramauri	Health Centre	61SI	Nurse Practitioner	Nurses	10860
387	P	Manwo Auguste	NORTHERN PROVINCIAL HOSPITAL	General Outpatient Department	Hospital	61SB	Nurse In charge General Outpatient Department	Nurses	10281
388	P	Manwo Marie-Michele	NORTHERN PROVINCIAL HOSPITAL	Family Planning	Hospital	61SB	Senior Midwife	Nurses	10331
389	P	Mao Veronique	NORTHERN PROVINCIAL HOSPITAL	OPERATING THEATRE	Hospital	61SB	Senior Nurse	Nurses	10502
390	P	Marae Willie Reuben	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Senior Nurse Practitioner	Nurses	9243
391	P	Marcel Bongnaim	VILA CENTRAL HOSPITAL	General Outpatient Department	Hospital	61RB	Registered Nurse GOPD	Nurses	9134

393	P	Margaret Tarere	VILA CENTRAL HOSPITAL	Obstetrics & Gynaecology	Hospital	61RB	Senior Registrar O/G	Doctor	9031
395	P	Maria Tevi	PENAMA	Latano	Dispensary	61SJ	Registered Nurse	Nurses	11249
392	P	Margaret Solomon	CORPORATE SERVICES	Director General	Administration	60BA	Executive secretary*	Corporate Services	8006
396	P	Marian Lulu	SANMA	Tasiriki	Health Centre	61SI	Registered Nurse	Nurses	10856
394	P	Margareth Matan	PENAMA	Ledungsivi	Health Centre	61SJ	Nurse Aide	Nurses	11233
397	P	Marian Takau	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Head of SectionMammographer	Allied Health	9673
398	P	Marie Anicet Rapulpul	SANMA	Wunavae	Dispensary	61SI	Registered Nurse	Nurses	10870
400	P	Marie Jean Vira	LENAKEL HOSPITAL	Accident and Emergency Ward	Hospital	61RG	Registered Nurse Accident and Emergency	Nurses	9945
401	P	Marie Josee Kath	SANMA	Vulesepe	Health Centre	61SI	Registered Nurse	Nurses	10838
399	P	Marie Denis	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Laundress	Support Services	10655
403	P	Marie Paul Molwak	PENAMA	Pangi	Health Centre	61SJ	Nurse Practitioner	Nurses	11222
404	P	Marie Rene Mabon	VILA CENTRAL HOSPITAL	Padiatrics Ward	Hospital	61RB	Senior Nurse PAEDs	Nurses	9306
402	P	Marie Pascal worgon	SANMA	Fanafo	Health Centre	61SI	Nurse Aide	Nurses	10833
405	P	Marie Rose Frank	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Midwife	Nurses	10364
407	P	Mariko Iapatu	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10395
408	P	Marina Lekai Willie	SANMA	Fanafo	Health Centre	61SI	Registered Nurse	Nurses	10832
406	P	Marie Yavis	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Cleaner	Support Services	9995
409	P	Marinette Avock	NORTHERN PROVINCIAL HOSPITAL	NCD	Hospital	61SB	Registered Nurse	Nurses	10267
410	P	Mark Madeline Hellen	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Dispensers Stores	Allied Health	9682
413	P	Markson Tabi	PENAMA	Ledungsivi	Health Centre	61SJ	Registered Nurse	Nurses	11231
414	P	Mary Anne Tosul	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Medical Laboratory officer	Allied Health	9626
411	P	Markleen Tagaro	PENAMA	Penama Provincial Public Health	Administration	61SJ	TB& Leprosy officer*	Public Health	8650
412	P	Markson Iasi	SHEFA	Shefa Provincial Corporate Services	Administration	61RH	Driver	Support Services	8164
415	P	Mary Buleling	PENAMA	Nasawa	Dispensary	61SJ	Registered Nurse	Nurses	11279
416	P	Mary Estelle Iesul	LENAKEL HOSPITAL	Pediatric Clinic	Hospital	61RG	Registered Nurse	Nurses	9920
417	P	Mary Madgalyne Johnny	VILA CENTRAL HOSPITAL	Family Planning	Hospital	61RB	Registered Nurse	Nurses	9179

418	P	Massing D Bongneme	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental assistant	Dental	10747
421	P	Matansue Josina	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Midwife	Nurses	9208
423	P	Mathew Nasse	SHEFA	Saupia	Health Centre	61RH	Registered Nurse	Nurses	9703
419	P	Yakeula Frederick	PUBLIC HEALTH	Malaria and other Vector Borne Diseases	Administration	61UA	Field Officer	Public Health	8328
420	P	Matalue Jeflyn Kweto	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Nurse Aide	Nurses	10403
424	P	Mathias Tabeva	PENAMA	Ledungsivi	Health Centre	61SJ	Nurse Practitioner	Nurses	11229
422	P	Matariki Loreen	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Tailor	Support Services	9524
425	P	Matty Kalo	MALAMPA	Tanmaru	Dispensary	61SK	Registered Nurse	Nurses	11587
427	P	Mawa Joel	NORTHERN PROVINCIAL HOSPITAL	Mental Health Ward	Hospital	61SB	Senior Nurse	Nurses	10452
429	P	Maxley Malanga	LOLOWAI HOSPITAL	Pediatric Ward	Hospital	61SG	Registered Nurse	Nurses	11058
426	P	Maurice Amos Willie	SHEFA	Shefa Provincial Public Health	Administration	61RH	Provincial Health Administrator Shefa	Support Services	8162
430	P	May Tariroi	NORSUP HOSPITAL	Maternity Ward	Hospital	61SF	Midwife	Nurses	11425
428	P	Mawa Stanley Daniel	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Porter	Support Services	9512
431	P	Mckenzie Sitobata	NORSUP HOSPITAL	Dental Services	Hospital	61SF	Dental Registrar	Dental	11355
433	P	Melanie Kalorip	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Midwife	Nurses	9206
435	P	Meltecoin Angelina Lally	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Registered Nurse	Nurses	9155
432	P	Meatour Roselyne	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Secretary	Support Services	10581
438	P	Meltenale Lina	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Senior Nurse	Nurses	10422
434	P	Melteck Netty	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cook/Kitchen Hand	Support Services	10673
439	P	Meltenoven Theophile	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Senior Nurse	Nurses	9229
436	P	Meltek Jerome	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Driver	Support Services	10600
437	P	Meltemal Kenole	NORSUP HOSPITAL	Anesthetic Ward	Hospital	61SF	Nurse Aide	Nurses	11361
441	P	Meltetake Lolita	NORTHERN PROVINCIAL HOSPITAL	General Outpatient Department	Hospital	61SB	Nurse Practitioner	Nurses	10282
442	P	Mento Angela Mary	VILA CENTRAL HOSPITAL	Antenatal Clinic	Hospital	61RB	Senior Midwife AC	Nurses	9161
440	P	Melterore Jean Bernard	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Grounds man	Support Services	10631

443	P	Mera Ricky	VILA CENTRAL HOSPITAL	Surgery	Hospital	61RB	Registrar Surgeon	Doctor	9042
444	P	Mera Roderick Alistair Didi	LOLOWAI HOSPITAL	Medical, Dental and Allied Health Services	Hospital	61SG	Medical Officer 1	Doctor	11004
448	P	Meriam Nampil	TAFEA	Port Narvin	Dispensary	61RI	Registered Nurse	Nurses	10060
449	P	Mermer Marie Madeline	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Senior Midwife	Nurses	9201
445	P	Mercy Jimmy	VILA CENTRAL HOSPITAL	Antenatal Clinic	Hospital	61RB	Nurse Aide	Nurses	9171
446	P	Merelyn Leotari	CORPORATE SERVICES	Director General	Administration	60BA	Filing Clerk	Corporate Services	8008
447	P	Meriam Ben	CORPORATE SERVICES	Human Resources Management and Development	Administration	61VA	Principal Human Resource Management	Corporate Services	8110
451	P	Metack Yellie	NORTHERN PROVINCIAL HOSPITAL	OPERATING THEATRE	Hospital	61SB	Nurse In charge Operating Theatre	Nurses	10500
453	P	Michael Ala	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Laboratory Officer	Allied Health	10771
450	P	Mermer Morris Gabriel	SANMA	Sanma Provincial Public Health	Administration	61SI	Malaria Field Officer	Public Health	8563
455	P	Minado Paul	VILA CENTRAL HOSPITAL	Internal medicine	Hospital	61RB	Consultant Physician	Doctor	9046
452	P	Micah Moffet Charley	TORBA HOSPITAL	Surgical Ward	Hospital	61SD	Nurse Aide	Nurses	11761
456	P	Minah William Nagof	SANMA	Tiroas	Dispensary	61SI	Registered Nurse	Nurses	10876
454	P	Mikal Natnaur	SANMA	Sanma Provincial Public Health	Administration	61SI	Provincial HIS Officer	Support Services	8242
458	P	Molmele Ana Maria	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Nurse in charge Maternity Ward	Nurses	10357
459	P	Morino Malapa	SHEFA	Shefa Provincial Public Health	Administration	61RH	Mother Child Health Nurse	Nurses	8835
457	P	Molivakarua Raylene Kwegani	CORPORATE SERVICES	VCNE	Administration	61VY	Librarian*	Corporate Services	8029
460	P	Morris Vea Tom	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Registered Nurse	Nurses	9191
461	P	Morrison Watson	NORSUP HOSPITAL	Infectious Ward	Hospital	61SF	Registered Nurse	Nurses	11415
462	P	Mwai Jino	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Registered Nurse	Nurses	10469
464	P	Nadia Ala	PENAMA	Aute	Dispensary	61SJ	Registered Nurse	Nurses	11251
466	P	Naket Esau	LENAKEL HOSPITAL	Eye Clinic	Hospital	61RG	Nurse Practitioner	Nurses	9939
463	P	Nabong Brigitte	NORSUP HOSPITAL	Surgical Ward	Hospital	61SF	Nurse Aide	Nurses	11412
467	P	Naki Elvi	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Registered Nurse OT	Nurses	9350
465	P	Naimeleun Reuben Taso	MALAMPA	Baiap	Health Centre	61SK	Nurse Aide	Nurses	11568
468	P	Nako Stephen	TORBA	Mataka	Health Centre	61SH	Nurse Practitioner	Nurses	11843

469	P	Nakomahanga Lapi Jocelyne	TORBA	Mataka	Health Centre	61SH	Midwife	Nurses	11844
471	P	Nalo Myriam	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Senior Nurse	Nurses	9230
473	P	Namel Elanie Elise	VILA CENTRAL HOSPITAL	Anesthetic Ward	Hospital	61RB	Senior Anesthetic Scientific officer	Nurses	9378
470	P	Nalau Eric Jacob	CORPORATE SERVICES	VCNE	Administration	61VY	Senior PH Nurse Educator*	Corporate Services	8036
474	P	Nampas Jenny	NORTHERN PROVINCIAL HOSPITAL	Childrens Outpatient Department	Hospital	61SB	Nurse Practitioner	Nurses	10308
472	P	Nalpini Henry	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Maintenance supervisor	Support Services	9980
475	P	Namu Angelyn Janet	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Senior Nurse	Nurses	9251
476	P	Nancy Rose Bule	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Registered Nurse	Nurses	9156
477	P	Napau Eslina Joel	VILA CENTRAL HOSPITAL	ENT Nursing	Hospital	61RB	Senior Nurse	Nurses	9142
479	P	Narai Harry	TAFEA	Ipota	Dispensary	61RI	Registered Nurse	Nurses	10082
480	P	Naru Evlyn	LENAKEL HOSPITAL	Antenatal Clinic	Hospital	61RG	Mid wife incharge Antenatal	Nurses	9932
478	P	Naplui Tony	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Electrician	Support Services	9469
481	P	Nase Iopa Jason	VILA CENTRAL HOSPITAL	Pharmacy Services	Hospital	61RB	Senior Pharmacist Inpatient	Allied Health	9587
482	P	Nasse Alphine	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Senior Nurse	Nurses	10387
485	P	Natalie Manu	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Midwife	Nurses	9926
487	P	Nathnaour Mandre	LOLOWAI HOSPITAL	Surgical Ward	Hospital	61SG	Registered Nurse	Nurses	11064
483	P	Nasse Ella	PUBLIC HEALTH	Director Public Health	Administration	61UA	Cleaner	Public Health	8307
484	P	Nataivi Tubi	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Driver Supervisor	Support Services	9444
491	P	Natuman Sereana Ledua	VILA CENTRAL HOSPITAL	Internal medicine	Hospital	61RB	Senior consultant Physician	Doctor	9045
486	P	Nathan Noel Gibson	MALAMPA	Malampa Provincial Corporate Services	Administration	61SK	Finances officer	Support Services	8215
492	P	Natuman Walesi	VILA CENTRAL HOSPITAL	Paediatrics	Hospital	61RB	Senior Registrar Paediatrics	Doctor	9022
488	P	Nato Alroy	MALAMPA	Malampa Provincial Corporate Services	Administration	61SK	Maintenance officer	Support Services	8221
489	P	Natuake Dick	VILA CENTRAL HOSPITAL	General Outpatient Department	Hospital	61RB	Nurse Aide	Nurses	9138

490	P	Natuman Jimmy	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Cashier	Support Services	9978
494	P	Nelly Samuel	VILA CENTRAL HOSPITAL	Intensive Care Unit	Hospital	61RB	Registered Nurse	Nurses	9190
495	P	Niaui Alick	TAFEA	White Sands	Health Centre	61RI	Nurse Practitioner	Nurses	10048
493	P	Nellie Ham Muru	PUBLIC HEALTH	Environmental and Sanitation	Administration	61UA	Environmental Health Officer Legislation, Standards and Compliance	Public Health	8362
496	P	Nicholas Akii Soso	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Registered Nurse	Nurses	9154
498	P	Nicholas Bage	PENAMA	Tari Ilo	Dispensary	61SJ	Registered Nurse	Nurses	11322
499	P	Nicholetta Teilemb	NORSUP HOSPITAL	Pharmacy Services	Hospital	61SF	Dispenser Stores	Allied Health	11373
497	P	Nicholas Aru Toko	PENAMA	Naviso	Dispensary	61SJ	Nurse Aide	Nurses	11272
502	P	Nital Jimmy	TAFEA	Kitow	Health Centre	61RI	Nurse Practitioner	Nurses	10042
503	P	Nockrac Jenny	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Dental Registrar	Dental	9562
500	P	Nipiko Neprei Sebastien	LENAKEL HOSPITAL	Antenatal Clinic	Hospital	61RG	Nurse Aide	Nurses	9934
501	P	Niptick Aline	MALAMPA	Leviamp	Dispensary	61SK	Nurse Aide	Nurses	11592
504	P	Noe Tabitiri Tantsu	PENAMA	Lelevia	Dispensary	61SJ	Registered Nurse	Nurses	11253
505	P	Noeline Teilemb	NORSUP HOSPITAL	Maternity Ward	Hospital	61SF	Midwife	Nurses	11426
506	P	Noranmanaihec Tevita Roger Novanetevon	TAFEA	Yorien	Dispensary	61RI	Registered Nurse	Nurses	10062
507	P	Olul Warri Russel	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Senior Dental Therapist	Dental	9565
508	P	Omawa Roslinda Aline	SHEFA	Vaemali	Health Centre	61RH	Midwife	Nurses	9714
512	P	Pakoa George Junior	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Histologist	Allied Health	9622
514	P	Pakoa Risko	SHEFA	Leimarowia	Dispensary	61RH	Registered Nurse	Nurses	9733
509	P	Paiamerei Obed Pulu	SANMA	Hope	Dispensary	61SI	Nurse Aide	Nurses	10897
510	P	Pakoa Alexandra	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Senior OPD Clerk	Support Services	9419
511	P	Pakoa David	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Senior Driver	Support Services	9540
517	P	Pascaline Viso	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Registered Nurse	Nurses	10372
513	P	Pakoa Lui	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Oxygen Plant Officer	Support Services	9482
518	P	Patison Wai	PENAMA	Penama Provincial Public Health	Administration	61SJ	MCH Nurse	Nurses	8657
515	P	Pakoa Siri	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Biomedical Supervisor	Support Services	9545

516	P	Paniel Romain	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Carpenter*	Support Services	9467
519	P	Patunvanu Trelly Samuel	VILA CENTRAL HOSPITAL	Accident & Emergency Medical	Hospital	61RB	Senior Registrar Accident and Emergency	Doctor	9066
520	P	Paul Makikon Apenisa	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Senior Laboratory Officer In Charge	Allied Health	10768
521	P	Paulin Karai	LENAKEL HOSPITAL	Anesthetic Ward	Hospital	61RG	Registered Nurse	Nurses	8983
522	P	Paulina Meltekun	SANMA	Avunatari	Health Centre	61SI	Registered Nurse	Nurses	10850
523	P	Pauline Lishie	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Registered Nurse	Nurses	9274
526	P	Peter Napuat	VILA CENTRAL HOSPITAL	Mental Health Ward	Hospital	61RB	Registered Nurse	Nurses	9298
527	P	Peter Rarua Tosul	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Medical Laboratory officer	Allied Health	9639
524	P	Perei Peter Olo	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Nurse Aide	Nurses	10438
525	P	Peter Hellen	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Cleaner	Support Services	9547
528	P	Phatu Jocelyn Kwemoli	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Anaesthetic Scientific Officer	Nurses	10521
529	P	Phatu Timothy	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Serologist	Allied Health	9632
530	P	Philip Iau	TAFEA	Ikiti	Dispensary	61RI	Registered Nurse	Nurses	10078
531	P	Philippe Missoeve	NORSUP HOSPITAL	General Outpatient Department	Hospital	61SF	Nurse Practitioner	Nurses	11385
534	P	Premila Hinge	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Dental Hygienist	Dental	9570
535	P	Prescilla Mabon Buleuru	VILA CENTRAL HOSPITAL	Medical Ward	Hospital	61RB	Registered Nurse	Nurses	9273
532	P	Piney Ati	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Grounds man	Support Services	11493
533	P	Pollifay Hinge	PENAMA	Abwatuntora	Health Centre	61SJ	Nurse Aide	Nurses	11212
536	P	Priscilla Bae	TORBA	Sarawia	Dispensary	61SH	Registered Nurse	Nurses	11858
537	P	Puperave Siano Garae	NORTHERN PROVINCIAL HOSPITAL	SURGICAL WARD	Hospital	61SB	Registered Nurse	Nurses	10489
538	P	Rachel Rerevuru	SANMA	Tasmalum	Health Centre	61SI	Midwife	Nurses	10843
539	P	Radiant Stanely	SANMA	Port Olry	Health Centre	61SI	Registered Nurse	Nurses	10826
541	P	Rauapepe Clelia	SANMA	Port Olry	Health Centre	61SI	Nurse Practitioner	Nurses	10824
546	P	Rekina Gideon Joshua	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Senior Nurse	Nurses	9249
540	P	Ratu Bani	PUBLIC HEALTH	Environmental and Sanitation	Administration	61UA	Compliance Officer	Public Health	8365
548	P	Rex Turi	SHEFA	Amauri	Dispensary	61RH	Registered Nurse	Nurses	9737
542	P	Rauvupey Nicole	SANMA	Saramauri	Health Centre	61SI	Nurse Aide	Nurses	10863
543	P	Raynolds Kollen Ores	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Laundress	Support Services	9504

544	P	Regenvanu Mackrena	NORSUP HOSPITAL	Maternity Ward	Hospital	61SF	Nurse Aide	Nurses	11431
545	P	Reginald Telma	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Clerk	Corporate Services	9420
549	P	Rexly Bule	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9334
547	P	Rex Namel	VILA CENTRAL HOSPITAL	ENT Nursing	Hospital	61RB	Nurse Aide	Nurses	9148
550	P	Rezel Maine	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Senior Dental Registrar	Dental	9561
552	P	Rita Rojo	VILA CENTRAL HOSPITAL	Neonatal	Hospital	61RB	Registered Nurse	Nurses	9255
553	P	Ritchie Francisco	SANMA	Tasiriki	Health Centre	61SI	Nurse Practitioner	Nurses	10854
551	P	Rihambath Nicole	MALAMPA	Tanmaru	Dispensary	61SK	Nurse Aide	Nurses	11588
556	P	Robert James Moise	LENAKEL HOSPITAL	Surgical Ward	Hospital	61RG	Senior Nurse	Nurses	9908
128	P	Robert Vocor	LENAKEL HOSPITAL	Medical, Dental and Allied Health Services	Hospital	61RG	Medical Officer 2	Doctor	8967
554	P	Robert Robeity	NORSUP HOSPITAL	Pediatric Ward	Hospital	61SF	Nurse Aide	Nurses	11406
555	P	Robert Elina	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Cook	Support Services	9527
557	P	Robertson Aru	LOLOWAI HOSPITAL	General Outpatient Department	Hospital	61SG	Nurse Practitioner	Nurses	11040
559	P	Rodolph Avou	VILA CENTRAL HOSPITAL	ENT Nursing	Hospital	61RB	Registered Nurse	Nurses	9145
558	P	Robin Tamata	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Ambulance Drivers	Support Services	9450
560	P	Roger Jelpao Poita	VILA CENTRAL HOSPITAL	Nursing Services	Hospital	61RB	Clinical Nursing Supervisor	Nurses	9093
561	P	Roger Nelou	TAFEA	Dillons Bay	Dispensary	61RI	Registered Nurse	Nurses	10034
562	P	Rolenas Bogilu	PENAMA	Aligu	Dispensary	61SJ	Registered Nurse	Nurses	11277
563	P	Rolland Kolland Orrah	MALAMPA	Lamap	Health Centre	61SK	Registered Nurse	Nurses	11554
564	P	Rolline Solomon	LENAKEL HOSPITAL	Dental Services	Hospital	61RG	Dispenser OPD	Allied Health	8977
566	P	Rona Willie	NORSUP HOSPITAL	Pediatric Clinic	Hospital	61SF	Registered Nurse	Nurses	11419
565	P	Ron George Wotal	TORBA	Lequel	Dispensary	61SH	Nurse Aide	Nurses	11851
570	P	Rose M Sogari	LENAKEL HOSPITAL	Accident and Emergency Ward	Hospital	61RG	Registered Nurse Accident and Emergency	Nurses	9946
567	P	Ronny Anika	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Cleaner	Support Services	9997
568	P	Rory Jean-Jacques	PUBLIC HEALTH	Health Promotion	Administration	61UA	Manager Health Prmotion	Public Health	8340
569	P	Rory Sylvie	NORTHERN PROVINCIAL HOSPITAL	Operating Theatre	Hospital	61SB	Nurse Aide	Nurses	10518
571	P	Roselyne Rowell Toto	NORTHERN PROVINCIAL HOSPITAL	Antenatal Clinic	Hospital	61SB	Registered Nurse	Nurses	10325
572	P	Roslyne Cyrus	NORSUP HOSPITAL	Pediatric Ward	Hospital	61SF	Registered Nurse Paediatric ward	Nurses	11405

575	P	Rowsy Axelle	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental assistant	Dental	10746
573	P	Roslyne Kissel	TAFEA	Tafea Provincial Public Health	Administration	61RI	MCH Nurse Aide	Nurses	8927
574	P	Roupone Meriame	SANMA	Aore	Dispensary	61SI	Nurse Aide	Nurses	10889
576	P	Ruben Mawa Joseph	VILA CENTRAL HOSPITAL	Imaging Services	Hospital	61RB	Principal Medical imaging Officer	Allied Health	9575
577	P	Saika Simon	TAFEA	Green Hill	Health Centre	61RI	Nurse Practitioner	Nurses	10036
580	P	Sale Vurobaravu	VILA CENTRAL HOSPITAL	Internal Medicine	Hospital	61RB	Registrar Physician	Doctor	9850
578	P	Sakary Toumata Mary	SHEFA	Silmoli	Dispensary	61RH	Nurse Aide	Nurses	9730
579	P	Saksak Peter	MALAMPA	Sameou	Dispensary	61SK	Nurse Aide	Nurses	11614
581	P	Sally Stephanie Sale	NORTHERN PROVINCIAL HOSPITAL	Childrens Outpatient Department	Hospital	61SB	Registered Nurse	Nurses	10312
584	P	Sam Mahit Albert	MALAMPA	Liro	Health Centre	61SK	Registered Nurse	Nurses	11579
582	P	Sam Hopsen	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Cook	Support Services	11510
583	P	Sam Johnny	TAFEA	Jet	Dispensary	61RI	Nurse Aide	Nurses	10071
586	P	Samuel Bakon	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Laboratory Officer	Allied Health	10773
585	P	Samson Simo	MALAMPA	Malampa Provincial Public Health	Administration	61SK	EPI Officer*	Public Health	8745
590	P	Sandy David	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	Hospital	61RB	Registered Nurse	Nurses	9235
587	P	Samuel Mary	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Cleaner	Support Services	9485
588	P	Samuel Sacsac	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Senior clerk	Support Services	10608
589	P	Sandrine Avock	CORPORATE SERVICES	VCNE	Administration	61VY	Cleaner	Corporate Services	8043
591	P	Sandy Firiam	SHEFA	Silimaui	Health Centre	61RH	Registered Nurse	Nurses	9697
592	P	Sandy Niere	LENAKEL HOSPITAL	Medical Ward	Hospital	61RG	Registered Nurse	Nurses	9894
593	P	Saniel Barry Dick	VILA CENTRAL HOSPITAL	Nursing Services	Hospital	61RB	Clinical Nursing Supervisor	Nurses	9098
594	P	Santhy Wilfred	TORBA HOSPITAL	General Outpatient Department	Hospital	61SD	Nurse Practitioner	Nurses	11744
596	P	Saur John Andiere	NORSUP HOSPITAL	Medical Ward	Hospital	61SF	Nurse In charge Medical Ward	Nurses	11387
595	P	Sasen Atnelo	TAFEA	Dillons Bay	Dispensary	61RI	Nurse Aide	Nurses	10035
597	P	Sebessur Beatrice	NORSUP HOSPITAL	Accident and Emergency Ward	Hospital	61SF	Registered Nurse Accident and Emergency	Nurses	11399
599	P	Selwin Betty Bravo	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Midwife incharge Maternity ward/Nursery	Nurses	9921

598	P	Selnaguey Erick	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Driver	Corporate Services	11491
600	P	Serah Nako Mala	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Midwife	Nurses	9925
601	P	Serah Tangat Wersetts	NORSUP HOSPITAL	Maternity Ward	Hospital	61SF	Senior Mid Wife	Nurses	11435
602	P	Sero Kalkie	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Microbiologist	Allied Health	9625
603	P	Seru Jenette Falolo	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Laboratory Officer	Allied Health	10770
604	P	Seule Raymond	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Virologist TB/Leprosy	Allied Health	9628
606	P	Shamina Ulaim	LENAKEL HOSPITAL	Imaging Services	Hospital	61RG	Senior Medical Imaging Technologist	Allied Health	8973
605	P	Seule Tavo	TAFEA	Port Narvin	Dispensary	61RI	Nurse Aide	Nurses	10061
607	P	Shem Johanna	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9329
608	P	Shirley Iercet	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Laboratory Assistants	Allied Health	9653
609	P	Simon Marie Norah	VILA CENTRAL HOSPITAL	Mental Health Ward	Hospital	61RB	Registered Nurse	Nurses	9297
610	P	Simon Nompuat	LENAKEL HOSPITAL	General Outpatient Department	Hospital	61RG	Nurse Practitioner	Nurses	9888
616	P	Smithy Neamek Serah	LENAKEL HOSPITAL	Medical Ward	Hospital	61RG	Nurse in Charge Medical Ward	Nurses	9891
611	P	Simone Wanemay	SANMA	Sanma Provincial Public Health	Administration	61SI	Executive Secretary	Support Services	8552
612	P	Sine Thompson	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Porter	Support Services	9509
613	P	Singo Arolyne	NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	Hospital	61SB	Nurse Aide	Nurses	10378
614	P	Siro Doreen	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Senior OPD Clerk	Support Services	9418
615	P	Slyvana Belsat Robert	NORSUP HOSPITAL	Infectious Ward	Hospital	61SF	Nurse Aide	Nurses	11417
618	P	Solomon Valuwolu Kora	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9331
617	P	Solomon Natang Namri	TAFEA	Ikawaramanu	Dispensary	61RI	Nurse Aide	Nurses	10077
619	P	Sonia Andy	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Registered Nurse	Nurses	9215
624	P	Stephen Bambie	MALAMPA	Maskelynes (Vanmaur)	Dispensary	61SK	Registered Nurse	Nurses	11617
620	P	Sope Leisiel Jannette	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Nurse Aide	Nurses	9220
621	P	Sophie Serake	NORSUP HOSPITAL	General Support Services	Hospital	61SF	Cleaner	Support Services	11505
622	P	Stephana Restutun	MALAMPA	Tontar	Dispensary	61SK	Nurse Aide	Nurses	11584
623	P	Stephanie Joseph Kaso	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Nurse Aide	Nurses	9952

625	P	Steve Bihu	PENAMA	Naviso	Dispensary	61SJ	Registered Nurse	Nurses	11271
626	P	Steve Dan	LENAKEL HOSPITAL	Laboratory Services	Hospital	61RG	Laboratory Assistants	Allied Health	8988
627	P	Steven Leo	PENAMA	Kerembei	Health Centre	61SJ	Registered Nurse	Nurses	11217
628	P	Steward Taridena Tari	VILA CENTRAL HOSPITAL	Outpatient Dept	Hospital	61RB	Junior Registrar OPD	Doctor	9059
630	P	Susan Letin Sewen	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Laboratory Officer	Allied Health	10769
629	P	Stinstianus Anabelle	NORTHERN PROVINCIAL HOSPITAL	Operating Theatre	Hospital	61SB	Nurse Aide	Nurses	10519
1	P	Susan Wokeke	SANMA	Saramauri	Health Centre	61SI	Midwife	Nurses	10861
631	P	Susan Natum	TAFEA	Ipota	Dispensary	61RI	Nurse Aide	Nurses	10083
632	P	Tabe Siro Helivson	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	Hospital	61SB	Nurse In charge Pediatrics	Nurses	10461
633	P	Tabi Glenis	NORTHERN PROVINCIAL HOSPITAL	OPERATING THEATRE	Hospital	61SB	Senior Nurse	Nurses	10501
634	P	Tabi Helina	VILA CENTRAL HOSPITAL	Nursing Services	Hospital	61RB	Clinical Nursing Supervisor	Nurses	9096
635	P	Tabi Lily	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Senior Nurse	Nurses	9323
636	P	Tabi Rodney Mahit	CORPORATE SERVICES	VCNE	Administration	61VY	Science Nurse Educator	Corporate Services	8040
637	P	Tabibang Daniella	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Senior Laundress	Support Services	10653
638	P	Tabimal Amos	SANMA	Malau	Health Centre	61SI	Nurse Practitioner	Nurses	10818
639	P	Tabkandy Olga	NORSUP HOSPITAL	Anesthetic Ward	Hospital	61SF	Nurse Aide	Nurses	11362
640	P	Tagaro Gerollyne	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Human Resource Officer	Support Services	10583
641	P	Tahi Gregoire	PENAMA	Lolopuepue	Dispensary	61SJ	Registered Nurse	Nurses	11316
642	P	Tahi Monique	VILA CENTRAL HOSPITAL	Eye Nursing	Hospital	61RB	Nurse Practitioner PEC	Nurses	9115
643	P	Taia Mary Tom	CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	Administration	61VA	Cleaner	Corporate Services	8076
644	P	Taissets Gabriel	NORSUP HOSPITAL	General Outpatient Department	Hospital	61SF	Nurse Practitioner	Nurses	11383
645	P	Takoa Rachel	CORPORATE SERVICES	Health Information System	Administration	61VA	HIS Manager	Corporate Services	8099
646	P	Tamashiro Simone Bakone	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Senior Midwife	Nurses	9202
647	P	Tamata Adel	CORPORATE SERVICES	VCNE	Administration	61VY	Senior Science Nurse Educator	Corporate Services	8034
648	P	Tamata Ethline	NORTHERN PROVINCIAL HOSPITAL	SURGICAL WARD	Hospital	61SB	Nurse In charge Surgery Ward	Nurses	10480
649	P	Tanghwa Nelson	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Senior Dental Registrar	Dental	9560

650	P	Tapasei Nies	LENAKEL HOSPITAL	General Outpatient Department	Hospital	61RG	Nurse Aide	Nurses	9899
651	P	Tapisal Philip Tadi Kenneth	MALAMPA	Lambubu	Dispensary	61SK	Registered Nurse	Nurses	11599
652	P	Taravaki Phyllis Tountano	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Tailor	Support Services	9523
653	P	Tarboi Genevieve	NORTHERN PROVINCIAL HOSPITAL	Antenatal Clinic	Hospital	61SB	Nurse Aide	Nurses	10329
654	P	Tari Danjeck	CORPORATE SERVICES	Information Communication Technology	Administration	61VA	Manager Information Technology*	Corporate Services	8128
655	P	Tari Hellen	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Cook	Support Services	9528
656	P	Tari Yvonne	PENAMA	Kerembei	Health Centre	61SJ	Provincial Microscopist	Public Health	11319
657	P	Tarip Anneth Leisilik	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	Hospital	61RB	Nurse Aide	Nurses	9159
658	P	Tasso Billy	MALAMPA	Liro	Health Centre	61SK	Nurse Practitioner	Nurses	11577
659	P	Tati Jean Remo	TAFEA	Yorien	Dispensary	61RI	Nurse Aide	Nurses	10063
660	P	Tavoa Elizabeth Mary Metarimala	NORTHERN PROVINCIAL HOSPITAL	Imaging Services	Hospital	61SB	Senior Medical Imaging Technologist	Allied Health	10750
661	P	Tavunwo Grennethy Sandy	MALAMPA	Malampa Provincial Public Health	Administration	61SK	Health promotion Education & Communication officer*	Public Health	8733
662	P	Tebi Aron	TAFEA	TAFEA PROVINCIAL CORPORATE SERVICES	Administration	61RI	Provincial HIS Officer	Support Services	8195
663	P	Telina Serau	MALAMPA	Aulua	Dispensary	61SK	Registered Nurse	Nurses	11609
664	P	Temakon Leisong	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Senior Nurse OT	Nurses	9343
665	P	Terry Balkonan	VILA CENTRAL HOSPITAL	Infectious ward	Hospital	61RB	Registered Nurse	Nurses	9285
666	P	Tesyanebel Bibi Joshua	TAFEA	Futuna	Dispensary	61RI	Nurse Aide	Nurses	10081
667	P	Tete Roslyne	MALAMPA	Tisman	Dispensary	61SK	Nurse Aide	Nurses	11606
668	P	Tevi Julianne Kayleen	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental Registrar	Dental	10741
669	P	Theophile Duduni Hingeleo	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	Hospital	61SB	Senior Anaesthetic Scientific Officer	Nurses	10533
670	P	Thomas Lapisai Alexi	SANMA	Pesana	Dispensary	61SI	Registered Nurse	Nurses	10868
671	P	Thor Fabiano	PENAMA	Baie Barrier	Dispensary	61SJ	Registered Nurse	Nurses	11320
672	P	Thyna Orelly	VILA CENTRAL HOSPITAL	Paediatrics	Hospital	61RB	consultant Paediatrcs	Doctor	9019
673	P	Tias Eric Tensly	TORBA	Torba Provincial Public Health	Administration	61SH	Health promotion Education & Communication officer *	Public Health	8463
674	P	Timothy Jennifer Rae	VILA CENTRAL HOSPITAL	Dietetics Services	Hospital	61RB	Dietetics supervisor	Allied Health	9609

675	P	Timothy Wayne	CORPORATE SERVICES	VCNE	Administration	61VY	Driver	Corporate Services	8030
676	P	Tobibi Adeline	NORTHERN PROVINCIAL HOSPITAL	NCD	Hospital	61SB	Nurse Practitioner	Nurses	10264
677	P	Tololo Edith	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cleaner	Support Services	10642
678	P	Tom Lillian	LENAKEL HOSPITAL	Eye Clinic	Hospital	61RG	Nurse Aide	Nurses	9943
679	P	Tom Netty Molisa	SANMA	Wunpuku	Dispensary	61SI	Nurse Aide	Nurses	10867
680	P	Tom Robert Daniel	VILA CENTRAL HOSPITAL	Laboratory Services	Hospital	61RB	Senior Hematologist	Allied Health	9618
681	P	Tom Sylvie Fenillia	TAFEA	TAFEA PROVINCIAL CORPORATE SERVICES	Administration	61RI	Executive Secretary	Support Services	8187
682	P	Tom Tasso	NORSUP HOSPITAL	Ear, Nose and Throat	Hospital	61SF	Senior Nurse	Nurses	11438
683	P	Tony Rosita Aru	LOLOWAI HOSPITAL	Maternity Ward	Hospital	61SG	Senior Midwife	Nurses	11076
684	P	Tore Hugeth	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Cleaner	Support Services	10649
685	P	Tosiro Beverlyn Annie	LOLOWAI HOSPITAL	General Outpatient Department	Hospital	61SG	Registered Nurse	Nurses	11052
686	P	Toukoune Robinson	VILA CENTRAL HOSPITAL	Anesthesia Medical	Hospital	61RB	consultant Anaesthesia	Doctor	9012
687	P	Tracy Matan Warong	PENAMA	Ranmawat	Dispensary	61SJ	Registered Nurse	Nurses	11257
688	P	Trevor Francis	TORBA	Womal Dolap	Dispensary	61SH	Registered Nurse	Nurses	11860
689	P	Tugunaboe Errollyn Kwengele	VILA CENTRAL HOSPITAL	Obstetrics & Gynaecology	Hospital	61RB	Consultant O/G	Doctor	9029
690	P	Tuk Daniel	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Porter*	Support Services	10003
691	P	Tulili Nicole	MALAMPA	Leviamp	Dispensary	61SK	Registered Nurse	Nurses	11591
692	P	Tusai Marielea Alguet	NORTHERN PROVINCIAL HOSPITAL	NCD	Hospital	61SB	Senior Nurse	Nurses	10265
693	P	Tyson K Hapi	NORTHERN PROVINCIAL HOSPITAL	Imaging Services	Hospital	61SB	Medical Imaging Technologist	Allied Health	10785
694	P	Tzania Wilbur	NORTHERN PROVINCIAL HOSPITAL	Medical Ward	Hospital	61SB	Registered Nurse	Nurses	10430
695	P	Uren Leah	NORSUP HOSPITAL	Anesthetic Ward	Hospital	61SF	Nurse Aide	Nurses	11363
696	P	Valerie Hungai	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Registered Nurse	Nurses	9333
697	P	Valerie Taise	MALAMPA	Lamap	Health Centre	61SK	Cleaner/Laundress	Support Services	11557
698	P	Varu Fabiola	SANMA	Sanma Provincial Public Health	Administration	61SI	Executive Secretary	Support Services	8234
699	P	Victor Mintu	MALAMPA	Olal	Dispensary	61SK	Registered Nurse	Nurses	11627

700	P	Viji Vutilolo Jeffery	NORTHERN PROVINCIAL HOSPITAL	Laboratory Services	Hospital	61SB	Medical Lab Officer	Allied Health	10774
701	P	Vira Jean Marie	SANMA	Roustron	Dispensary	61SI	Registered Nurse	Nurses	10892
702	P	Virali Elsie	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Laundress	Support Services	10654
703	P	Viranmeme Lina	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Nurse In charge Operating Theatre	Nurses	9342
704	P	Vire Darren	VILA CENTRAL HOSPITAL	Surgical Nursing	Hospital	61RB	Nurse In charge Surgical Ward	Nurses	9322
705	P	Vocor Anita Pindaluh	NORTHERN PROVINCIAL HOSPITAL	Pharmacy Services	Hospital	61SB	Pharmacist OPD	Allied Health	10757
706	P	Voleo Ruth Aka	SANMA	Avunatari	Health Centre	61SI	Nurse Aide	Nurses	10851
707	P	Warri June	VILA CENTRAL HOSPITAL	Operating Theatre	Hospital	61RB	Registered Nurse OT	Nurses	9351
708	P	Warsal Joe Rudolf	VILA CENTRAL HOSPITAL	Radiology	Hospital	61RB	Senior Registrar radiologist	Doctor	9073
709	P	Wass Jose	NORTHERN PROVINCIAL HOSPITAL	Accident and Emergency Ward	Hospital	61SB	Registered Nurse	Nurses	10393
710	P	Wayne Joshua Aranhabath	VILA CENTRAL HOSPITAL	Dental Services	Hospital	61RB	Dental Technician	Dental	9569
711	P	Welin Jarethy	NORTHERN PROVINCIAL HOSPITAL	Dental Services	Hospital	61SB	Dental Registrar	Dental	10754
712	P	Welvusi Vira	SANMA	Tasmate	Dispensary	61SI	Registered Nurse	Nurses	10872
713	P	Wemel Luke Weul Richard	TORBA	Torba Provincial Corporate Services	Administration	61SH	Provincial Health Information System officer	Support Services	8290
714	P	Wetang Viona	MALAMPA	Rensarie	Dispensary	61SK	Nurse Aide	Nurses	11604
715	P	William Elizabeth Magaret	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Registered Nurse	Nurses	9213
716	P	William Ethna Leiwia	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Cleaner	Support Services	9489
717	P	William Ray Brooker	TORBA HOSPITAL	General Outpatient Department	Hospital	61SD	Senior Nurse	Nurses	11749
718	P	William Ruth Nasuaiu	LENAKEL HOSPITAL	Maternity Ward	Hospital	61RG	Midwife	Nurses	9927
719	P	Willie Alick Essau	VILA CENTRAL HOSPITAL	NCD	Hospital	61RB	Senior Nurse NCD	Nurses	9108
720	P	Willie Ioan	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Electrician	Support Services	10625
721	P	Willie raymond	VILA CENTRAL HOSPITAL	General Support Services	Hospital	61RB	Senior Grounds Man	Support Services	9544
722	P	Willie Sawa	TORBA	Torba Provincial Public Health	Administration	61SH	TB& Leprosy officer *	Public Health	8470
723	P	Willie Tangis	SANMA	Fanafo	Health Centre	61SI	Nurse Practitioner	Nurses	10830
724	P	Winnie Liu	VILA CENTRAL HOSPITAL	Maternity Ward	Hospital	61RB	Registered Nurse	Nurses	9216
725	P	Winnifer Boe Tari	LOLOWAI HOSPITAL	Surgical Ward	Hospital	61SG	Registered Nurse	Nurses	11063

726	P	Wolu Qohwai Philip Jimmy	LENAKEL HOSPITAL	Pharmacy Services	Hospital	61RG	Dispenser Stores	Allied Health	8997
727	P	Posikai Samuel Tapo	CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	Administration	61VA	Director Planning, Policy & Corporate Services	Director	8068
728	P	Ruth Billy	CORPORATE SERVICES	Finance and Accounts	Administration	61VA	Project Finance officer	Corporate Services	8018
729	P	Amanda Taleo	CORPORATE SERVICES	Central Medical Store	Administration	61VW	Finance officer* VILA	Corporate Services	8149
730	P	Angella Tary	VILA CENTRAL HOSPITAL	VCH General Services	Hospital	61RB	Finance Officer	Support Services	9413
731	P	Sala Nial	NORTHERN PROVINCIAL HOSPITAL	General Support Services	Hospital	61SB	Finance Officer	Support Services	10584
732	P	Isabelle Maxwel	LENAKEL HOSPITAL	General Support Services	Hospital	61RG	Finance Officer	Support Services	9977
733	P	Steveson Moli	SANMA	Sanma Provincial Corporate Services	Administration	61SI	Finance officer	Support Services	8239
734	P	Bruton Tari	SHEFA	Shefa Provincial Corporate Services	Administration	61RH	Human Resource Officer	Support Services	8168
735	P	Julian Nipiko	TAFEA	Tafea Provincial Corporate Services	Administration	61RI	Human Resource Officer	Support Services	8193
736	P	Bob Maki	MALAMPA	Malampa Provincial Corporate Services	Administration	61SK	Human Resource Officer	Support Services	8216
737	P	Michelline Ala	SANMA	Sanma Provincial Corporate Services	Administration	61SI	Human Resource Officer	Support Services	8240
738	P	Charlie Harrison	CORPORATE SERVICES	Human Resources Management and Development	Administration	61VA	Manager Human Resource Development and Management	Corporate Services	8109
739	P	Tony Tataki	CORPORATE SERVICES	Human Resources Management and Development	Administration	61VA	Senior HRD (Professional Development and Learning)	Corporate Services	8111
740	P	Carol Rovo	CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	Administration	61VA	Principal Health Planner*	Corporate Services	8083
741	P	Fiona Atnelo	SHEFA	Shefa Provincial Corporate Services	Administration	61RH	Finance officer	Support Services	8167

(END) APPENDIX C - MOH GRT PERMANENT POSITION LIST

APPENDIX D – MOH ORGANISATIONAL STRUCTURE VACANT POSITIONS

Old PN	Status	Cost Centre Name	New Structure Position Title	Cadres of Employee	New PN
1161	V	VILA CENTRAL HOSPITAL	Hospital Pharmacy Manager	Allied Health	9679
1167	V	NORTHERN PROVINCIAL HOSPITAL	Hospital Pharmacy Manager	Allied Health	10755
1168	V	NORTHERN PROVINCIAL HOSPITAL	Pharmacist Paeds	Allied Health	10787
1171	V	SHEFA	Pharmacist	Allied Health	8171
1172	V	VILA CENTRAL HOSPITAL	Pharmacist OPD	Allied Health	9583
1173	V	VILA CENTRAL HOSPITAL	Pharmacist Paediatrics	Allied Health	9589
1174	V	VILA CENTRAL HOSPITAL	Pharmacist Inpatient	Allied Health	9590
1175	V	VILA CENTRAL HOSPITAL	Pharmacist Inpatient	Allied Health	9591
1176	V	VILA CENTRAL HOSPITAL	Senior Clinical Pharmacist	Allied Health	9594
1177	V	VILA CENTRAL HOSPITAL	Senior Drug Information Pharmacist	Allied Health	9680
1178	V	TAFEA	Pharmacist	Allied Health	8188
1179	V	LENAKEL HOSPITAL	Senior Pharmacist	Allied Health	8975
1180	V	LENAKEL HOSPITAL	Pharmacist OPD	Allied Health	8976
1181	V	MALAMPA	Pharmacist	Allied Health	8223
1182	V	NORSUP HOSPITAL	Senior Pharmacist OPD	Allied Health	11352
1183	V	NORSUP HOSPITAL	Pharmacist OPD	Allied Health	11353
1185	V	NORTHERN PROVINCIAL HOSPITAL	Senior Pharmacist Inpatient	Allied Health	10761
1186	V	NORTHERN PROVINCIAL HOSPITAL	Pharmacist Paeds	Allied Health	10762
1187	V	NORTHERN PROVINCIAL HOSPITAL	Pharmacist Inpatient	Allied Health	10788
1188	V	NORTHERN PROVINCIAL HOSPITAL	Pharmacist Inpatient	Allied Health	10789
1189	V	NORTHERN PROVINCIAL HOSPITAL	Senior Clinical Pharmacist	Allied Health	10792
1191	V	LOLOWAI HOSPITAL	Senior Pharmacist OPD	Allied Health	11011
1192	V	LOLOWAI HOSPITAL	Pharmacist OPD	Allied Health	11012
1193	V	TORBA	Pharmacist	Allied Health	8295
1194	V	TORBA HOSPITAL	Senior Pharmacist OPD	Allied Health	11723
1195	V	TORBA HOSPITAL	Pharmacist OPD	Allied Health	11724

(END) - APPENDIX D – MOH ORGANISATIONAL STRUCTURE VACANT POSITIONS

APPENDIX E – PRIORITY RECRUITMENT LIST

No	Status	Employee Name	Cost Centre Name	Dept/Unit	Cost Centre	New Structure Position Title	Comments	Cadres of Employee
88	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Executive secretary	Advertisement Closed	Support Services
130	V		VILA CENTRAL HOSPITAL	Director of Curative and Hospital Services	61QA	Executive Secretary	Advertisement Closed	Support Services
147	V		CORPORATE SERVICES	Finance and Accounts	61VA	Revenue officer	Advertisement Closed	Corporate Services
152	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	General and Support Services Manager	Advertisement Closed	Support Services
155	V		VILA CENTRAL HOSPITAL	General Support Services	61RB	General and Support Services Manager	Advertisement Closed	Support Services
156	V		VILA CENTRAL HOSPITAL	General Support Services	61RB	Executive secretary	Advertisement Closed	Support Services
171	V		VILA CENTRAL HOSPITAL	Directorate of Curative and Hospital Services	61RB	Medical Superintendent VCH	Advertisement Closed	Doctor
172	V		LENAKEL HOSPITAL	Directorate of Curative and Hospital Services	61RG	Medical Superintendant Lenakel	Advertisement Closed	Doctor
174	V		NORTHERN PROVINCIAL HOSPITAL	Directorate of Curative and Hospital Services	61SB	Medical Superintendant	Advertisement Closed	Doctor
192	V		CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	61VA	Monitoring & Evaluation officer	Advertisement Closed	Corporate Services
193	V		MALAMPA	Malampa Provincial Corporate Services	61SK	Provincial Health Administrator Malampa	Advertisement Closed	Support Services
194	V		SANMA	Sanma Provincial Corporate Services	61SI	Provincial Health Administrator Sanma	Advertisement Closed	Support Services
195	V		PENAMA	Penama Provincial Corporate Services	61SJ	Provincial Health Administrator Penama	Advertisement Closed	Support Services
196	V		TORBA	Torba Provincial Corporate Services	61SH	Provincial Health Administrator Torba	Advertisement Closed	Support Services
197	V		TAFEA	TAFEA PROVINCIAL CORPORATE SERVICES	61RI	Provincial Health Administrator Tafea	Advertisement Closed	Support Services
203	V		PUBLIC HEALTH	Director Public Health	61UA	Executive Secretary	Advertisement Closed	Public Health
211	V		MALAMPA	Malampa Provincial Corporate Services	61SK	Executive secretary	Advertisement Closed	Support Services
212	V		MALAMPA	Malampa Provincial Public Health	61SK	Executive Secretary	Advertisement Closed	Support Services
213	V		PENAMA	Penama Provincial Corporate Services	61SJ	Executive secretary	Advertisement Closed	Support Services
214	V		PENAMA	Penama Provincial Public Health	61SJ	Executive Secretary	Advertisement Closed	Support Services
215	V		TORBA	Torba Provincial Corporate Services	61SH	Executive secretary	Advertisement Closed	Support Services
216	V		TORBA	Torba Provincial Public Health	61SH	Executive Secretary	Advertisement Closed	Support Services

217	V		TAFEA	Tafea Provincial Public Health Services	61RI	Executive Secretary	Advertisement Closed	Support Services
21	V		SHEFA	Shefa Provincial Public Health	61RH	Executive secretary	Advertisements closed	Support Services
134	V		CORPORATE SERVICES	Director General	60BA	Executive Officer* (EO)	Advertisements closed	Corporate Services
129	V	Tousei Lesteour	NORTHERN PROVINCIAL HOSPITAL	Nursing Services	61SB	Clinical Nursing Supervisor	Based on Performance Appraisals and directly appointed	Nurses
144	V	Vanua Sikonyes	PUBLIC HEALTH	Surveillance	61UA	Senior Emergency and Disaster Response Officer	Based on Performance Appraisals and directly appointed	Public Health
157	V	Lola Iavro	SHEFA	Shefa Provincial Corporate Services	61RH	HIS Officer	Based on Performance Appraisals and directly appointed	Support Services
165	V	Yann Johnny	PUBLIC HEALTH	Environmental and Sanitation	61UA	Compliance Officer	Based on Performance Appraisals and directly appointed	Public Health
166	V	Marie Bani	PUBLIC HEALTH	Environmental and Sanitation	61UA	Compliance Officer	Based on Performance Appraisals and directly appointed	Public Health
177	V	Obed Manwo	SHEFA	Shefa Provincial Public Health	61RH	Neglected Tropical Diseases officer	Based on Performance Appraisals and directly appointed	Public Health
181	V	Nerida Hinge appointed	PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	61UA	Nutrition and Dietetics Officer	Based on Performance Appraisals and directly appointed	Public Health
182	V	Roslyn Kaissing (9cadet)	PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	61UA	Non Communicable Diseases officer	Based on Performance Appraisals and directly appointed	Public Health
185	V	Pauline Lishie	LENAKEL HOSPITAL	General Outpatient Department	61RG	Nurse In charge	Based on Performance Appraisals and directly appointed	Nurses
186	V	Berry Emille	LENAKEL HOSPITAL	Accident and Emergency Ward	61RG	Nurse In charge	Based on Performance Appraisals and directly appointed	Nurses
187	V	Adeline Tobibi (Currently Acting)	NORTHERN PROVINCIAL HOSPITAL	NCD	61SB	Nurse In charge	Based on Performance Appraisals and directly appointed	Nurses
189	V	Omawa Roslinda Aline	SHEFA	Vaemali	61RH	Nurse Practitioner	Based on Performance Appraisals and directly appointed	Nurses
204	V	Melissa Binihi	PUBLIC HEALTH	Health Promotion	61UA	Community Mobilization & BBC Officer Community	Based on Performance Appraisals and directly appointed	Public Health
205	V	Prudence Rymil	PUBLIC HEALTH	Environmental and Sanitation	61UA	Compliance Officer	Based on Performance Appraisals and directly appointed	Public Health
207	V	Helina Tabimuel	PUBLIC HEALTH	Reproductive Health and Family Planning	61UA	Family Planning Officer	Based on Performance Appraisals and directly appointed	Public Health

218	V	Ezekiel Joel Maway	NORTHERN PROVINCIAL HOSPITAL	Mental Health Ward	61SB	Senior Nurse	Based on Performance Appraisals and directly appointed	Nurses
219	V	Eliane Bomwell Metak	NORTHERN PROVINCIAL HOSPITAL	Padiatrics Ward	61SB	Senior Nurse	Based on Performance Appraisals and directly appointed	Nurses
220	V	Veronique Mao Roy	NORTHERN PROVINCIAL HOSPITAL	OPERATING THEATRE	61SB	Senior Nurse	Based on Performance Appraisals and directly appointed	Nurses
225	V	Wendy William	PUBLIC HEALTH	Surveillance	61UA	Public Health Surveillance Officer	Based on Performance Appraisals and directly appointed	Public Health
118	V	TBA	VILA CENTRAL HOSPITAL	General Outpatient Department	61RB	Nurse Aide	Based on performance appraisal and directly appointed	Nurses
178	V	Nelly Ham	PUBLIC HEALTH	Environmental and Sanitation	61UA	Manager Environmental Health and Sanitation	Based on performance Appraisals Direct Appointment - Financial Visa Available	Public Health
11	V	Renata Amos (cadet)	PUBLIC HEALTH	Tuberculosis and Leprosy	61UA	Tuberculosis /Leprosy officer	Based on Performance Appraisals Direct Appointment - Financial Visa Available	Public Health
57	V	Charlie Annie Margaret	VILA CENTRAL HOSPITAL	Maternity Ward	61RB	Midwife in charge Maternity Ward	Based on Performance Appraisals Direct Appointment - Financial Visa Available	Nurses
81	V	Bani Julienne Orren	VILA CENTRAL HOSPITAL	General Outpatient Department	61RB	Nurse In charge General Outpatient Department	Based on Performance Appraisals Direct Appointment - Financial Visa Available	Nurses
95	V	Theophile Duduni Hingeleo	NORTHERN PROVINCIAL HOSPITAL	Anesthetic Ward	61SB	Anesthetic Scientific Officer Incharge	Based on Performance Appraisals Direct Appointment - Financial Visa Available	Nurses
98	V	Direct appointment tba	LENAKEL HOSPITAL	Pediatric Ward	61RG	Nurse in charge Paediatrics	Direct Appointment - Financial Visa Available	Nurses
1	V		NORTHERN PROVINCIAL HOSPITAL	Infectious Ward	61SB	Nurse In charge	Financial Visa Available	Nurses
2	V		NORTHERN PROVINCIAL HOSPITAL	Antenatal Clinic	61SB	Nurse In charge	Financial Visa Available	Nurses
3	V		CORPORATE SERVICES	Finance and Accounts	61VA	Senior Finance officer*	Financial Visa Available	Corporate Services
4	V		TAFEA	Aniwa	61RI	Nurse Aide	Financial Visa Available	Nurses
5	V		SANMA	Nokuku	61SI	Nurse Practitioner	Financial Visa Available	Nurses
6	V		VILA CENTRAL HOSPITAL	Nursing Services	61RB	Clinical Nursing Supervisor	Financial Visa Available	Nurses
7	V		VILA CENTRAL HOSPITAL	VCH General Services	61RB	Human Resources Officer	Financial Visa Available	Support Services
9	V		MALAMPA	Lamap	61SK	Nurse Practitioner	Financial Visa Available	Nurses
10	V		NORTHERN PROVINCIAL HOSPITAL	Imaging Services	61SB	Medical Imaging Technologist	Financial Visa Available	Allied Health

12	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Cleaner	Financial Visa Available	Support Services
13	V		PUBLIC HEALTH	Director Public Health	61UA	Adminstration & Support officer	Financial Visa Available	Corporate Services
14	V		VILA CENTRAL HOSPITAL	General Support Services	61RB	Chief Cook	Financial Visa Available	Support Services
15	V		VILA CENTRAL HOSPITAL	VCH General Services	61RB	Supervisor OPD clerk	Financial Visa Available	Support Services
16	V		VILA CENTRAL HOSPITAL	Medical Ward	61RB	Senior Nurse	Financial Visa Available	Nurses
17	V		TAFEA	Tafea Provincial Corporate Services	61RI	Finances officer	Financial Visa Available	Support Services
18	V		MALAMPA	Nebul	61SK	Registered Nurse	Financial Visa Available	Nurses
19	V		NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	61SB	Senior Midwife	Financial Visa Available	Nurses
20	V		PENAMA	Nduindui	61SJ	Cleaner/Laundress	Financial Visa Available	Support Services
22	V		NORSUP HOSPITAL	General Support Services	61SF	Chief Cook	Financial Visa Available	Support Services
23	V		SANMA	Tasmalum	61SI	Registered Nurse	Financial Visa Available	Nurses
24	V		MALAMPA	Lamap	61SK	Malaria Microscopist	Financial Visa Available	Public Health
25	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Senior Cook	Financial Visa Available	Support Services
26	V		LENAKEL HOSPITAL	General Support Services	61RG	Laundress	Financial Visa Available	Support Services
27	V		LENAKEL HOSPITAL	General Support Services	61RG	Driver	Financial Visa Available	Support Services
28	V		PUBLIC HEALTH	Health Promotion	61UA	Village Health Worker Coordinator	Financial Visa Available	Public Health
29	V		TORBA	Mataka	61SH	Handy man/Driver	Financial Visa Available	Support Services
30	V		NORSUP HOSPITAL	Anesthetic Ward	61SF	Anesthetic Scientific Officer Incharge	Financial Visa Available	Nurses
31	V		PENAMA	Ledungsivi	61SJ	Midwife	Financial Visa Available	Nurses
32	V		VILA CENTRAL HOSPITAL	Anesthetic Ward	61RB	Senior Anesthetic Scientific officer	Financial Visa Available	Nurses
33	V		VILA CENTRAL HOSPITAL	Accident and Emergency Ward	61RB	Senior Nurse Practitioner	Financial Visa Available	Nurses
34	V		NORTHERN PROVINCIAL HOSPITAL	Maternity Ward	61SB	Senior Midwife	Financial Visa Available	Nurses
35	V		SHEFA	Imere	61RH	Midwife	Financial Visa Available	Nurses
36	V		VILA CENTRAL HOSPITAL	Maternity Ward	61RB	Senior Midwife	Financial Visa Available	Nurses
37	V		VILA CENTRAL HOSPITAL	General Support Services	61RB	Senior Cleaner	Financial Visa Available	Support Services
38	V		VILA CENTRAL HOSPITAL	VCH General Services	61RB	Switch Board Supervisor	Financial Visa Available	Support Services
39	V		MALAMPA	Malampa Provincial Public Health	61SK	Malaria Supervisor*	Financial Visa Available	Public Health
40	V		VILA CENTRAL HOSPITAL	NCD	61RB	Senior Nurse Practitioner	Financial Visa Available	Nurses
41	V		PENAMA	Abwatuntora	61SJ	Handy man/Driver	Financial Visa Available	Support Services

42	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Driver	Financial Visa Available	Support Services
43	V		NORTHERN PROVINCIAL HOSPITAL	Rehabilitation Services	61SB	Orthotist Technician	Financial Visa Available	Allied Health
44	V		NORTHERN PROVINCIAL HOSPITAL	Childrens Outpatient Department	61SB	Senior Nurse	Financial Visa Available	Nurses
45	V		VILA CENTRAL HOSPITAL	Infectious ward	61RB	Nurse In charge Infectious Ward	Financial Visa Available	Nurses
46	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Clerk	Financial Visa Available	Support Services
47	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Cleaner - Supervisor	Financial Visa Available	Support Services
48	V		SHEFA	Vaemaui	61RH	Midwife	Financial Visa Available	Nurses
49	V		SHEFA	Silimaui	61RH	Midwife	Financial Visa Available	Nurses
50	V		VILA CENTRAL HOSPITAL	VCH General Services	61RB	Switch Board Officer	Financial Visa Available	Support Services
51	V		VILA CENTRAL HOSPITAL	Neonatal	61RB	Nurse In charge NEONATAL INTENSIVE CARE	Financial Visa Available	Nurses
52	V		LOLOWAI HOSPITAL	General Support Services	61SG	Chief Cook	Financial Visa Available	Support Services
53	V		LOLOWAI HOSPITAL	Maternity Ward	61SG	Midwife In charge Maternity ward and Nursery	Financial Visa Available	Nurses
54	V		SANMA	Sanma Provincial Public Health	61SI	EPI officer	Financial Visa Available	Public Health
55	V		SHEFA	Saupia	61RH	Cleaner/Laundress (Saupia)	Financial Visa Available	Support Services
56	V		VILA CENTRAL HOSPITAL	Pharmacy Services	61RB	Pharmacist Logistics	Financial Visa Available	Allied Health
58	V		LENAKEL HOSPITAL	General Support Services	61RG	Chief Cook	Financial Visa Available	Support Services
59	V		NORSUP HOSPITAL	General Support Services	61SF	Secretary	Financial Visa Available	Support Services
60	V		LOLOWAI HOSPITAL	Medical Ward	61SG	Senior Nurse	Financial Visa Available	Nurses
61	V		NORSUP HOSPITAL	Medical Ward	61SF	Senior Nurse	Financial Visa Available	Nurses
62	V		CORPORATE SERVICES	Director General	60BA	Internal Auditor*	Financial Visa Available	Corporate Services
63	V		VILA CENTRAL HOSPITAL	Operating Theatre	61RB	Nurse Aide	Financial Visa Available	Nurses
64	V		PUBLIC HEALTH	Malaria and other Vector Borne Diseases	61UA	Field Officer	Financial Visa Available	Public Health
65	V		NORSUP HOSPITAL	Maternity Ward	61SF	Mid Wife in charge Maternity Ward/Nursery	Financial Visa Available	Nurses
66	V		TORBA	Loh	61SH	Midwife	Financial Visa Available	Nurses
67	V		TORBA	Loh	61SH	Nurse Practitioner	Financial Visa Available	Nurses
68	V		NORSUP HOSPITAL	General Outpatient Department	61SF	Nurse Practitioner	Financial Visa Available	Nurses
69	V		VILA CENTRAL HOSPITAL	Medical Ward	61RB	Senior Nurse	Financial Visa Available	Nurses
70	V		LENAKEL HOSPITAL	General Support Services	61RG	Cleaner	Financial Visa Available	Support Services

72	V		VILA CENTRAL HOSPITAL	Nursing Services	61RB	Clinical Nursing Supervisor	Financial Visa Available	Nurses
73	V		LENAKEL HOSPITAL	General Outpatient Department	61RG	Nurse Practitioner	Financial Visa Available	Nurses
74	V		LENAKEL HOSPITAL	Surgical Ward	61RG	Nurse Aide	Financial Visa Available	Nurses
75	V		MALAMPA	Malampa Provincial Public Health	61SK	Provincial microscopist	Financial Visa Available	Public Health
76	V		TORBA	Torba Provincial Public Health	61SH	Reproductive Health/Family planning supervisor *	Financial Visa Available	Public Health
77	V		SANMA	Sanma Provincial Public Health	61SI	Reproductive Health and Family Planning Supervisor	Financial Visa Available	Public Health
78	V		VILA CENTRAL HOSPITAL	General Support Services	61RB	Housekeeping Supervisor	Financial Visa Available	Support Services
79	V		PENAMA	Bwatnapni	61SJ	Registered Nurse	Financial Visa Available	Nurses
80	V		PENAMA	Asanvari	61SJ	Registered Nurse	Financial Visa Available	Nurses
82	V		SANMA	Sanma Provincial Public Health	61SI	Malaria Supervisor	Financial Visa Available	Support Services
83	V		PUBLIC HEALTH	Environmental and Sanitation	61UA	Environmental Health Officer Water Sanitation and Pollution Control	Financial Visa Available	Public Health
84	V		TAFEA	Tafea Provincial Public Health	61RI	NCD Officer	Financial Visa Available	Public Health
85	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Cleaner	Financial Visa Available	Support Services
86	V		CORPORATE SERVICES	VANUATU COLLEGE OF NURSING EDUCATION	61VY	Senior Midwife Educator*	Financial Visa Available	Corporate Services
87	V		VILA CENTRAL HOSPITAL	Operating Theatre	61RB	Senior Nurse	Financial Visa Available	Nurses
89	V		LENAKEL HOSPITAL	Infectious Ward	61RG	Senior Nurse	Financial Visa Available	Nurses
90	V		VILA CENTRAL HOSPITAL	Medical Ward	61RB	Senior Nurse	Financial Visa Available	Nurses
91	V		NORTHERN PROVINCIAL HOSPITAL	General Outpatient Department	61SB	Nurse Practitioner	Financial Visa Available	Nurses
93	V		VILA CENTRAL HOSPITAL	Surgery Medical	61RB	Senior consultant Surgeon	Financial Visa Available	Doctor
94	V		VILA CENTRAL HOSPITAL	Antenatal Clinic	61RB	Senior Midwife AC	Financial Visa Available	Nurses
96	V		LENAKEL HOSPITAL	General Support Services	61RG	Driver	Financial Visa Available	Support Services
97	V		VILA CENTRAL HOSPITAL	NCD	61RB	Senior Nurse	Financial Visa Available	Nurses
99	V		SHEFA	Leimarowia	61RH	Nurse Aide	Financial Visa Available	Nurses
101	V		MALAMPA	Malampa Provincial Public Health	61SK	RH supervisor*	Financial Visa Available	Public Health
102	V		VILA CENTRAL HOSPITAL	General Outpatient Department	61RB	Senior Nurse Practitioner	Financial Visa Available	Nurses
103	V		NORSUP HOSPITAL	Accident and Emergency Ward	61SF	Registered Nurse	Financial Visa Available	Nurses
104	V		LOLOWAI HOSPITAL	Pharmacy Services	61SG	Pharmacy Technician	Financial Visa Available	Allied Health
105	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Senior Cook	Financial Visa Available	Support Services
106	V		VILA CENTRAL HOSPITAL	General Outpatient Department	61RB	Senior Nurse	Financial Visa Available	Nurses

107	V		TAFEA	Tafea Provincial Corporate Services	61RI	Maintenance officer	Financial Visa Available	Support Services
108	V		NORTHERN PROVINCIAL HOSPITAL	SURGICAL WARD	61SB	Senior Nurse	Financial Visa Available	Nurses
110	V		LENAKEL HOSPITAL	Anesthetic Ward	61RG	Nurse Aide	Financial Visa Available	Nurses
111	V		SHEFA	Vaemali	61RH	Nurse Aide	Financial Visa Available	Nurses
112	V		NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Maintenance supervisor	Financial Visa Available	Support Services
113	V		SANMA	Avunatari	61SI	Midwife	Financial Visa Available	Nurses
114	V		SANMA	Avunatari	61SI	Nurse Practitioner	Financial Visa Available	Nurses
115	V		LOLOWAI HOSPITAL	Family Planning	61SG	Midwife in charge family Planning	Financial Visa Available	Nurses
116	V		SANMA	Vulesepe	61SI	Midwife	Financial Visa Available	Nurses
117	V		VILA CENTRAL HOSPITAL	Padiatrics Ward	61RB	Senior Nurse	Financial Visa Available	Nurses
119	V	Mento Angela	VILA CENTRAL HOSPITAL	Antenatal Clinic	61RB	Midwife In charge	Financial Visa Available	Nurses
120	V		LOLOWAI HOSPITAL	Maternity Ward	61SG	Nurse Aide	Financial Visa Available	Nurses
121	V		VILA CENTRAL HOSPITAL	Padiatrics Ward	61RB	Senior Nurse	Financial Visa Available	Nurses
124	V		CORPORATE SERVICES	Assets and Infrastructure	61VA	Assets Manager	In Progress to Recruit	Corporate Services
191	V		CORPORATE SERVICES	DIRECTORATE OF PLANNING AND POLICY	61VA	Executive Secretary	Interviews held	Corporate Services
146	V		CORPORATE SERVICES	Finance and Accounts	61VA	Manager Finance and Accounts*	Interviews held	Corporate Services
100	V		PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	61UA	Coordinator Non Communicable Diseases	Priority One	Public Health
122	V	George Junior Pakoa	VILA CENTRAL HOSPITAL	VCH Administration	61RB	Manager Allied Health Services	Priority One	Allied Health
123	V		NORTHERN PROVINCIAL HOSPITAL	NPH ADMIN	61SB	Manager Allied Health Services	Priority One	Allied Health
125	V	Jude Monturala	CORPORATE SERVICES	Assets and Infrastructure	61VA	Senior Infrastructure Officer	Priority One	Corporate Services
126	V		CORPORATE SERVICES	Assets and Infrastructure	61VA	Infrastructure officer	Priority One	Corporate Services
127	V		CORPORATE SERVICES	Assets and Infrastructure	61VA	Senior Asset and Inventory officer	Priority One	Corporate Services
128	V		CORPORATE SERVICES	Directorate of Planning and Policy	61VA	Principal Pharmacist	Priority One	Corporate Services
131	V	Malao Kalo	LENAKEL HOSPITAL	Medical, Dental and Allied Health Services	61RG	Medical, Dental and Allied Health Manager	Priority One	Allied Health
133	V	Lawrence Boe	NORTHERN PROVINCIAL HOSPITAL	NPH ADMIN	61SB	Manager Dental and Medical services	Priority One	Allied Health
135	V		VILA CENTRAL HOSPITAL	Anesthesia Medical	61RB	Head of Department Anesthesia	Priority One	Doctor

136	V		VILA CENTRAL HOSPITAL	Paediatrics	61RB	Head of Department - Paediatrics	Priority One	Doctor
137	V		VILA CENTRAL HOSPITAL	Obstetrics & Gynaecology	61RB	Head of Department - Obstetrics and Gynecology	Priority One	Doctor
138	V	Cullwick Trevor	VILA CENTRAL HOSPITAL	Surgery Medical	61RB	Head of Department - Surgery	Priority One	Doctor
139	V		VILA CENTRAL HOSPITAL	Internal medicine	61RB	Head of Department - Internal Medicine	Priority One	Doctor
140	V		VILA CENTRAL HOSPITAL	Outpatient Dept	61RB	Head of Department - OPD	Priority One	Doctor
141	V		VILA CENTRAL HOSPITAL	Accident & Emergency Medical	61RB	Head of Department - Accident and Emergency	Priority One	Doctor
142	V	Crystal Garae	VILA CENTRAL HOSPITAL	Pathology	61RB	Head of Department - Pathology	Priority One	Doctor
143	V		VILA CENTRAL HOSPITAL	Mental Health	61RB	Head of Department - Mental Health	Priority One	Doctor
145	V		PUBLIC HEALTH	Neglected Tropical Diseases	61UA	Coordinator Neglected Tropical Diseases	Priority One	Public Health
148	V	Robinson Charlie	CORPORATE SERVICES	Finance and Accounts	61VA	Senior Procurement Officer	Priority One	Corporate Services
149	V	Andre Natir	CORPORATE SERVICES	Finance and Accounts	61VA	Procurement Officer	Priority One	Corporate Services
150	V	Rober Moise	LENAKEL HOSPITAL	General Support Services	61RG	General and Support Services Manager	Priority One	Support Services
151	V	Noel Nathan	NORSUP HOSPITAL	General Support Services	61SF	General and Support Services Manager	Priority One	Support Services
153	V	Worthie Delight Bue	LOLOWAI HOSPITAL	General Support Services	61SG	General and Support Services Manager	Priority One	Support Services
154	V		TORBA HOSPITAL	General Support Services	61SD	General and Support Services Manager	Priority One	Support Services
158	V	Miswyn Aru	PENAMA	Penama Provincial Corporate Services	61SJ	Human Resource Officer	Priority One	Support Services
159	V		CORPORATE SERVICES	Human Resources Management and Development	61VA	Assistant HRO Filing and Data Support	Priority One	Corporate Services
160	V		CORPORATE SERVICES	Human Resources Management and Development	61VA	Assistant HRD Officer	Priority One	Corporate Services
162	V	George Junior Pakoa	VILA CENTRAL HOSPITAL	Laboratory Services	61RB	Principal Laboratory officer	Priority One	Allied Health
163	V		PUBLIC HEALTH	Malaria and other Vector Borne Diseases	61UA	Manager Communicable Diseases	Priority One	Public Health
164	V	Esau Naket	PUBLIC HEALTH	Malaria and other Vector Borne Diseases	61UA	Coordinator Malaria and Other VBD Control	Priority One	Public Health
167	V	Noeline Teilemb	NORSUP HOSPITAL	Nursing Services	61SF	Nursing Services Manager	Priority One	Nurses

168	V	Tousei Lesteour	NORTHERN PROVINCIAL HOSPITAL	Nursing Services	61SB	Nursing Services Manager	Priority One	Nurses
169	V		LOLOWAI HOSPITAL	Nursing Services	61SG	Nursing Services Manager	Priority One	Nurses
170	V		TORBA HOSPITAL	Nursing Services	61SD	Nursing Services Manager	Priority One	Nurses
173	V		NORSUP HOSPITAL	Directorate of Curative and Hospital Services	61SF	Medical Superintendent	Priority One	Doctor
175	V		LOLOWAI HOSPITAL	Directorate of Curative and Hospital Services	61SG	Medical Superintendent	Priority One	Doctor
176	V		TORBA HOSPITAL	Directorate of Curative and Hospital Services	61SD	Medical Superintendent	Priority One	Doctor
179	V		PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	61UA	Manager Non Communicable Diseases	Priority One	Public Health
180	V		PUBLIC HEALTH	Nutrition and Dietetics, Mental Health and Non Communicable Diseases	61UA	Coordinator Nutrition and Dietetics	Priority One	Public Health
183	V	Temakon Leisong	VILA CENTRAL HOSPITAL	Childrens Outpatient Department	61RB	Nurse In charge childrens outpatient Department	Priority One	Nurses
184	V	Nalo Myriam	VILA CENTRAL HOSPITAL	Accident and Emergency Ward	61RB	Nurse In charge Accident and Emergency	Priority One	Nurses
190	V	Regina Heheina	NORTHERN PROVINCIAL HOSPITAL	Pharmacy Services	61SB	Hospital Pharmacy Manager	Priority One	Allied Health
198	V		TAFEA	Tafea Provincial Public Health Services	61RI	Provincial Public Health Manager (Tafea)	Priority One	Public Health
199	V		MALAMPA	Malampa Provincial Public Health	61SK	Provincial Public Health Manager (Malampa)	Priority One	Public Health
200	V		SANMA	Sanma Provincial Public Health	61SI	Provincial Public Health Manager (Sanma)	Priority One	Public Health
201	V		PENAMA	Penama Provincial Public Health	61SJ	Provincial Public Health Manager (Penama)	Priority One	Public Health
202	V		TORBA	Torba Provincial Public Health	61SH	Provincial Public Health Manager (Torba)	Priority One	Public Health
206	V		PUBLIC HEALTH	Reproductive Health and Family Planning	61UA	Manager Family Health	Priority One	Public Health
208	V		PUBLIC HEALTH	Expanded Program Immunization	61UA	Coordinator EPI/IMCI	Priority One	Public Health
221	V		SHEFA	Shefa Provincial Public Health	61RH	Executive Scretary	Priority One	Support Services
222	V		SHEFA	Shefa Provincial Public Health	61RH	Provincial Public Health Manager (Shefa)	Priority One	Public Health
224	V		PUBLIC HEALTH	Surveillance	61UA	Manager Surveillance Research and Emergency Response Manager	Priority One	Public Health
226	V	Saen Fanai	PUBLIC HEALTH	Tuberculosis and Leprosy	61UA	Coordinator Tuberculosis /Leptosy	Priority One	Public Health

8	V	Tahi Monique	VILA CENTRAL HOSPITAL	Eye Nursing	61RB	Nurse In charge Primary Eye Care	Priority One - Financial Visa Available	Nurses
71	V		LENAKEL HOSPITAL	Nursing Services	61RG	Nursing Services Manager	Priority One - Financial Visa Available	Nurses
92	V		CORPORATE SERVICES	Human Resources Management and Development	61VA	Assistant HRO Procedures	Priority One - Financial Visa Available	Corporate Services
109	V		PUBLIC HEALTH	Reproductive Health and Family Planning	61UA	Coordinator Reproductive Health (Maternal Neonatal Child Adolescent Health) & Family Planning	Priority One - Financial Visa Available	Public Health
132	V		NORSUP HOSPITAL	Medical, Dental and Allied Health Services	61SF	Manager Dental, Medical and Allied Health Services	Soon to be Advertise & approved by PSC	Allied Health
227	V		PUBLIC HEALTH	Director Public Health	61UA	Finance Officer	Soon to be advertise & approved by PSC	Public Health
161	V	Jino Kaenbo	NORTHERN PROVINCIAL HOSPITAL	General Support Services	61SB	Kitchen Supervisor	To be Advertised	Support Services
209	V		PUBLIC HEALTH	Expanded Program Immunization	61UA	Cold Chain Technician	To be Advertised	Public Health
210	V		PUBLIC HEALTH	Expanded Program Immunization	61UA	Cold Chain Officer	To be Advertised	Public Health
223	V	Kalwat Poilapa	SHEFA	Shefa Provincial Public Health	61RH	Health promotion education and Communication officer	To be Advertised	Public Health
228	V		NORSUP HOSPITAL	Pharmacy Services	61SF	Pharmacist OPD	To be Advertised	Allied Health
188	V		NORTHERN PROVINCIAL HOSPITAL	FAMILY PLANNING	61SB	Nurse In charge	To be advertised	Nurses

(END) APPENDIX E - PRIORITY RECRUITMENT LIST

