We are staff working in the health sector in Solomon Islands. We are concerned that the amount of time planning and attending donor-led workshops can overwhelm the implementation of national priorities. We are frequently required on short notice to attend planning meetings and development partner issue specific conferences to a degree that interferes with our responsibilities to implement programs for the populations we serve.

Communication of such concerns needs to be viewed as legitimate, system-wide and not merely the expressions of individual staff, who may potentially be regarded as lacking the capacity to implement services and attend multiple planning meetings and conferences. A group expression of these concerns is a better approach, more likely to be heard rather than dismissed.

We propose the following strategies:

- Our group will clarify how each meeting or workshop is generated, whether by the Ministry of Health and Medical Services or by development partners and agencies, and whether these are included in annual operating plans.
- A communication policy should be developed to clarify issues related to communication with development partners, identifying who is endorsed to communicate with them at the provincial level, and the protocols required to ensure communication is effective rather than disruptive.
- Where implementation will be compromised by attendance at a workshop, and it is not possible to either attend or to send a delegate, the Provincial Health Directors concerned should correspond with the Under-Secretary Health Care conveying their thanks for the invitation, apologising for their inability to attend, citing the implementation reason for non-attendance, requesting a copy of the meeting’s
minutes, and offering commitment to address the issue when time becomes available and when implementation will not be compromised.

- People with technical expertise relevant to a meeting agenda should be sent as delegates of the Provincial Health Directors where their attendance does not compromise implementation of existing plans.

- A presentation should be made to the annual National Health Conference identifying the number of meetings and conferences the group has been asked to attend in the previous year and producing evidence on the implementation issues that have been delayed or re-scheduled because of their attendance.

- Side meetings at the annual National Health Conference should be held in which these issues could be discussed, and a group statement forwarded to the Under-Secretary Health Care for representation to the Permanent Secretary for Health.

- To communicate concerns among peers, a social media group should be created for mutual support. Here, common issues could be expressed and effective solutions developed for discussions with higher levels.

It is not our intention to discount the importance of planning meetings and issue-specific conferences and workshops, as they do introduce new ideas and strategies. What is required now is forward planning and the development of a meeting schedule well in advance, so that staff can weave these meetings into their schedules without compromising the implementation of national priorities. The example was given of a neighbouring country that allocates the months of July and September for development partner planning meetings and conferences. Such an approach would allow for planned attendance that does not compromise implementation of the priority actions identified in annual operational plans and budgets.

This article is based on a short paper produced by participants of the first cohort in the Postgraduate Certificate in Health Leadership and Management at the Solomon Islands National University (SINU). Read it here.

A post by the same authors on unspent health funding can be found here.

About the author/s

A group of Solomon Islands health staff

G. Vahimolo, N Pego, M. Ifumae, C. Qalo, R. Maegerae, J. Harara, M. Gavira, B. Kiokimo, H. Orihao, A. Simbe, E. Thoa, R. Lebo, J. Denty, E. Titiulu, L. Irobaea, L. Bunabo, and G. Roberts. The authors are Solomon Islands health staff undertaking a Postgraduate Certificate in Health Leadership and Management at the Solomon Islands National
University. Graham Roberts is the Program Director of the Health Leadership and Management Program and Director, Human Resources Development Alliance.

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