

PERFORMANCE HIGHLIGHTS REPORT FINANCIAL YEAR 2024 | 2025

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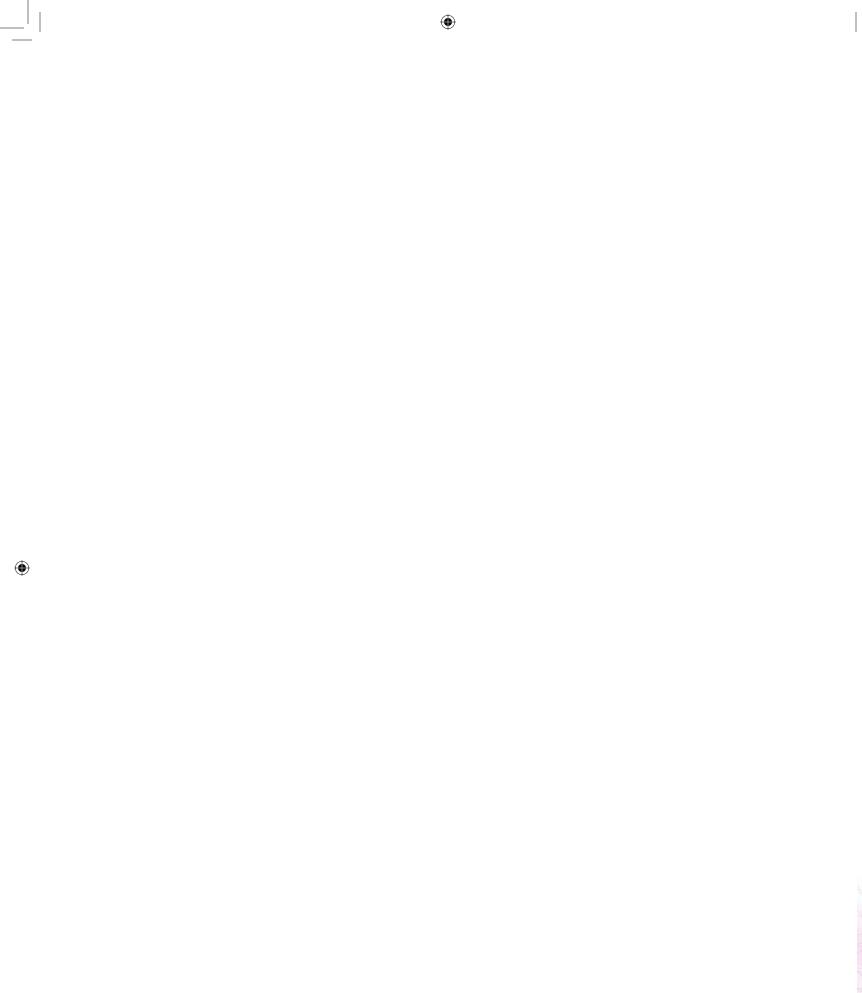


TABLE OF CONTENTS

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5	Introduction
6	MOHW Performance Overview
7	Executive Management
10	Projects & Health Facilities Maintenance
21	Internal Audit
22	Technical Services
34	Policy, Planning & Development
40	Enabling Environment in Health & Client Services
43	Finance & Accounts
45	National Public Health Laboratory
47	SPECIAL REPORTS
48	Know Your Numbers
51	Operation Refresh
52	Strengthened Immunization Coverage
57	REPORT FROM ENTITIES
58	National Healthcare Enhancement Foundation

۲

FINANCIAL YEAR 2024 | 2025

TABLE OF CONTENTS

۲

۲

- 62 North East Regional Health Authority
- 69 South East Regional Health Authority
- 79 Western Regional Health Authority
- 83 University Hospital of the West Indies
- 84 National Health Fund
- 87 Medical Council of Jamaica
- 89 Council for Professions Supplement to Medicine
- 91 Nursing Council of Jamaica
- 93 National Council on Drug Abuse
- 95 Department of Government Chemist
- 96 Southern Regional Health Authority
- **102 Pesticides Control Authority**

PERFORMANCE HIGHLIGHTS REPORT

INTRODUCTION

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The Ministry of Health and Wellness (MOHW) is dedicated to advancing its mission for excellence by continuously improving the accessibility, quality, and effectiveness of healthcare services for all Jamaicans. This Performance Highlights Report for the financial year (FY) 2024-25 summarizes the Ministry's diligent efforts, achievements, and challenges faced in its unwavering commitment to safeguarding the health and well-being of the Jamaican population.

This report provides an overview of the Ministry's performance against its established Operational Plan for the recently concluded financial year. It highlights key focus areas, including healthcare infrastructure, disease prevention and control, mental health services, and the strengthening and resilience of the health system. Additionally, it analyses the Ministry's accomplishments, initiatives undertaken, and progress made toward achieving the strategic goals outlined in the Vision for Health 2030 Strategic Plan. This report is organized to provide a clear and comprehensive overview of the Ministry's performance during the reference period, FY 2024-25, in comparison to the preceding financial year. It begins with a high-level summary of the Ministry's overall performance, followed by a review of the Ministry's Divisions and selected Branches/Units. This section includes performance assessments against set targets for the operational year, complemented by brief narratives highlighting notable initiatives undertaken. The report then presents a series of special features on key initiatives that were launched or continued during the period. It concludes with a concise summary of major milestones and achievements across the Ministry's departments, agencies, and professional councils.

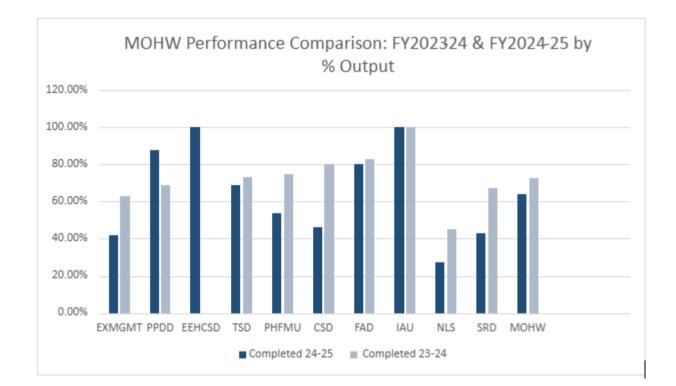
The lessons learned and insights gained from the past financial year will be utilized to enhance the Ministry's commitment to promoting a culture of health and wellness, improving accessibility and equity in healthcare delivery, and ensuring the resilience of the public health system to meet the needs of its citizens.

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MOHW Performance Overview

Aligned with national priorities, efforts focused on strengthening the governance framework and applying evidence-based decision-making to transform the public health system. The Ministry accomplished 64% of the 137 deliverables outlined in its Operational Plan for FY 2024-25, representing a decline compared to the previous financial year and falling short of its established minimum standard of at least 75% of operational outputs achieved for the organization as a whole and its respective divisions, units, and departments.

The next section of this report outlines the advancements and achievements of these functional units focussing on select initiatives undertaken by the Ministry for the FY 2024-25.



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Executive Management

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TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET FOR FY 2024-25	% OUTPUTS MET FOR FY 2023-24	
13	42	63	
Direction of Change: 21% ↓			

The Executive Management Division is responsible for providing leadership, oversight, and strategic guidance in the creation, execution, and management of health policies, programmes, and projects that support the Ministry of Health and Wellness's vision and mission. This Division encompasses the Office of the Permanent Secretary, the Legal Services Unit, the Public Relations and Communication Unit, and the Internal Audit Unit. Compared to the previous financial year, the Division's performance has seen a decline of 21 percentage points.

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Vision for Health 2030 Strategic Goal	The stewardship capacity of the Ministry of Health & Wellness is strengthened to improve leadership and governance to achieve universal access to health and universal health coverage.	
Strategic Outcome:	Effective stewardship	
Focus	To advance key pieces of legislative to strengthen implementation and enforcement of the WHO FCTC, improve health service delivery, advance the public bodies rationalization initiatives.	
Select FY 2024-25 Operational	 Draft Bill amendments to the Nursing and Midwives Act for legal recognition and prescriptive authority of select nursing groups. 	~
Target	• Tobacco legislation debated and finalised.	×
	• Food and Drugs (amendment) Bill submitted to Legislative Committee.	×

Legislative Agenda

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Nursing and Midwives Act:

The amendments to the Nursing and Midwives Act in Jamaica marked a pivotal moment in the country's healthcare landscape, particularly for Advanced Practice Registered Nurses (APRNs) such as Family Nurse Practitioners and Mental Health Psychiatric Nurse Practitioners. These changes represented a comprehensive overhaul aimed at integrating APRNs more effectively into the healthcare system, granting them expanded authority and recognition, including prescriptive rights under specific conditions.

The amendments outlined stringent requirements for APRNs registration and licensure, overseen by the Nursing Council of Jamaica, to ensure adherence to training standards and continuing education. While initially focusing on Family Nurse Practitioners and Mental Health Psychiatric Nurse Practitioners, the amendments also acknowledged the critical role of nurse anaesthetists, aiming to formalize their licensure and registration. Overall, these reforms aligned with Jamaica's vision for health and laid the foundation for a more inclusive and efficient healthcare system, ultimately driving positive health outcomes for the nation. The Draft Bills (amendments to Nursing & Midwives Act and Pharmacy Act) are currently under review by the Chief Parliamentary Counsel.



Tobacco Legislation:

The Tobacco Control Bill initiated in 2020, aimed to create comprehensive legislation that restricts all forms of tobacco advertising, promotion, and sponsorship. Its primary objectives were to safeguard the health of Jamaicans, minimize exposure to second-hand smoke, and comply with global tobacco control standards established by the World Health Organization. The intention of the legislation is to fill gaps in current regulations and align with the WHO Framework Convention on Tobacco Control Treaty. The Bill also emphasized the vulnerability of youth to tobacco use and presented concerning statistics regarding the prevalence of non-communicable diseases (NCDs) in Jamaica. The Joint Select Committee of Parliament has completed their feedback report and this has been resubmitted for Parliament's consideration.

PERFORMANCE HIGHLIGHTS REPORT



Food and Drugs Amendment Bill:

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At the end of the fiscal year, the Food and Drugs Amendment Bill, which provides the framework for regulating foods, drugs, cosmetics, and medical devices — both those produced locally and overseas, was still under development. The proposed amendments are to facilitate the effective regulation of natural health products including nutraceuticals. Efforts are ongoing to secure the Attorney General's Chambers' approval to advance submission to the Legislative Committee.

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FINANCIAL YEAR 2024 | 2025

Projects & Health Facilities Maintenance Branch

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24	
13	54%	75	
Direction of Change: 21% ↓			

The Projects and Health Facilities and Maintenance Branch reports to the Executive Management Division and is responsible for overseeing capital projects and infrastructure works and establishing standards for and monitoring the maintenance of facilities and medical equipment across the public health sector. In comparison to the prior financial year, there was a 21% decline in performance recorded for the Branch for the period 2024/25.

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Vision for Health 2030 Strategic Goal	Making Reliable and Modern Infrastructure Available for Health Service Delivery	
Strategic Outcome:	Best practice aligned standards for construction and maintenance of health facilities established and maintained	
Focus	Strengthen preventative/corrective maintenance for equipment across RHAs	
	 Electro-Mechanical Maintenance Management Policy finalised and disseminated to all RHAs 	
Select FY 2024-25 Operational	Health Infrastructure Building Guidelines/Policy finalised	
Target	Built Environment and Electrical Maintenance Policy finalised	
	• Finalized Standards for SMART Health Care Facilities disseminated to all RHAs	

Equipment and Infrastructure Operational Policies

PERFORMANCE HIGHLIGHTS REPORT

10

Electromechanical Maintenance Management Policy:

This Policy is a comprehensive framework designed to optimize maintenance practices in line with international standards. Its primary goals are to minimize downtime, prevent wastage, and extend the life of equipment. The Policy establishes procedures for maintaining critical electromechanical systems, such as generators, pumps, and medical gas systems, focusing on preventative upkeep to avert breakdowns. It emphasizes equipment lifecycle management, maintenance protocols, safety standards, and training to ensure efficient and effective operations.

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Health Infrastructure Building Guidelines:

Establishing comprehensive architectural, engineering, and operational standards for healthcare infrastructure in Jamaica is crucial for enhancing the quality of care and ensuring the safety and resilience of healthcare facilities. As healthcare demands continue to evolve, these guidelines will not only improve the quality of care but also strengthen the overall safety and sustainability of healthcare operations nationwide. The established guidelines will ensure that health facilities can deliver uninterrupted, high-quality care while promoting safe, compliant, and environmentally sustainable buildings. They will also serve as a roadmap for development, renovation, and operations across all public healthcare facilities. To facilitate the implementation of these comprehensive standards, several key documents and

codes will be referenced, including:

- Jamaican Building Code (JBC)
- International Standards (ISO 31000, ASHRAE, PAHO, IAEA)
- WA Health Facility Guidelines (WAHFG)
- · Local fire, building, and occupational health codes

Built Environment and Electrical Maintenance Management Policy:

The Ministry recognizes the critical importance of maintaining a safe, reliable, and efficient built environment and electrical systems to support the delivery of high-quality healthcare services. This policy outlines the guidelines, procedures, and standards for the maintenance management of the built environment and electrical systems within health facilities.

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Smart Facilities Operational Policy:

This Policy outlines operational guidelines for the implementation and monitoring of SMART health facilities across Jamaica, defined as those that are Safe, Green, Resilient, and Energy-Efficient. The objectives of this initiative include promoting disaster resilience and environmental sustainability, enhancing health service continuity during emergencies, and improving energy, water, and waste efficiency within health infrastructure. Key components of the Policy involve a Monitoring and Evaluation Framework to track implementation progress, as well as clearly defined roles and responsibilities for stakeholders involved in health and facility management.

During the fiscal year, all four policies and guidelines were finalized and disseminated to the RHAs. They are scheduled for implementation in FY 2025-26, marking a significant advancement in the Ministry's commitment to enhancing healthcare infrastructure and service delivery across Jamaica.

Cornwall Regional Hospital Rehabilitation

Vision for Health 2030 Strategic Goal	Making reliable and modern infrastructure available for health service delivery
Strategic Outcome:	Provide and maintain an adequate health infrastructure to ensure efficient and cost- effective service delivery
Focus	Rehabilitating the CRH to include ventilation and air-conditioning (HVAC) systems; mechanical, electrical and plumbing (MEP) systems; information and communications technology (ICT) and equipping the institution with state-of-the-art infrastructure.
Select FY 2024-25 Operational Target	• 48% Phase 3 Sectional Completion

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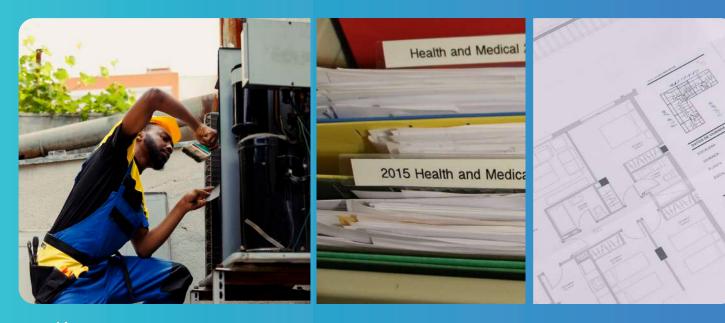
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The Cornwall Regional Hospital Rehabilitation Project is approximately 40% complete, encompassing design, construction, and equipment procurement aimed at significantly enhancing hospital capabilities. Advancement during the period were as follows:

- Design Phase: Fully completed (100%) as of May 31, 2024.
- **Construction Phase:** Currently 35% completed, with primary efforts on plumbing, mechanical, and ICT infrastructure on floors 1-5. Significant preparatory work for service integration on floors 6-10 is also underway.
- Equipment Procurement: 11% complete; all 267 medical equipment items have been inspected and updated, with procurement and shipping pending.
- Administration Department: Fully built out (100%)
- Medical Records Department: 70% completed
- Accident & Emergency Expansion: 50% completed
- Bunker C Oil Tank: Successfully removed.

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14 — PERFORMANCE HIGHLIGHTS REPORT

Two (2) successful medical equipment review missions to China were conducted, with the second mission concluding in March 2025. Planning approval was received on September 5, 2024, after necessary revisions to architectural drawings. Formal construction officially commenced on October 1, 2024.

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Additionally, various consultancies and surveys have been successfully completed, including:

- Structural engineering assessments
- Quantity surveying

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- Topographical evaluations
- Environmental health and safety consultancy
- Specialist procurement evaluations

Despite facing significant challenges, the CRH Rehabilitation Project is progressing steadily. Continued focus on resolving procurement issues, adhering to construction timelines, maintaining financial oversight, and ensuring technical compliance is essential for the project's success.

Western Child and Adolescent Hospital

Vision for Health 2030 Strategic Goal	Making reliable and modern infrastructure available for health service delivery
Strategic Outcome:	Provide and maintain an adequate health infrastructure to ensure efficient and cost- effective service delivery
Focus	Provide increased access to and availability of specialised paediatric and adolescent care
Select FY 2024-25 Operational Target	80% completion of WCAH

The Western Child and Adolescent Hospital will be the first of its kind in the English-speaking Caribbean, offering specialist medical care for children and young people up to the age of 18 years. It will complement the Bustamante Hospital for Children by providing increased access to specialised paediatric and adolescent care.

The construction of the comprehensive medical and technical building has made substantial progress, marked by the 75% completion of critical activities across various levels and sections of the facility. Key achievements in the project include over 90% completion of fire, plumbing, electrical, and HVAC systems in critical areas, alongside the full delivery of structural works for all major buildings. The successful mobilization of a multi-national labour force and resources has been a significant milestone, enabling efficient progress.

15

Comprehensive Medical and Technical Building:

In the medical and technical building, several tasks have been finalised. The waterproofing and protective layers for the toilets and soiled washrooms on the third to sixth floors have been completed, ensuring that the facility is safeguarded against water damage. The installation of floor tiles across these same floors has also been finalized, providing a durable and hygienic surface that meets health standards.

Additionally, the treatment of light partition panels from the fourth to sixth floors has been completed. Fire safety is paramount in healthcare facilities, and thus, the installation of fire sprinkler mains and branches on the lower floors has been successfully completed.

Furthermore, the installation of glass partition electric piping and the unclogging of firewall pipes have been mostly completed. The power threading and fire alarm system installations have also been accomplished for several floors.

Smart Facilities Operational Policy:

The staff apartments have reached 100% completion for waterproofing coatings and protection layers from the first to the fourth floors. This critical step ensures that the living quarters for healthcare staff are not only comfortable but also protected from the elements. Additionally, all electrical installations, cable laying, and plumbing work have been successfully completed, creating a ready-to-use living space.

Mortuary, Equipment Rooms, and Utility Structures:

Significant structural progress has been made in the mortuary, equipment rooms, and utility structures. Most areas have completed structural and concrete works. Secondary masonry work is nearly complete at 95%.

Additionally, embedded electrical piping and cleaning tasks have been finalized, integrating essential services into the building's infrastructure. The construction of septic and disinfectant tanks has also been completed, with foundations, walls, and roof structures fully established. This is crucial for the facility's waste management and sanitation processes. The roofing waterproofing for the connecting corridor has been completed, ensuring that all structural connections are secure and protected from water intrusion.

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PERFORMANCE HIGHLIGHTS REPORT

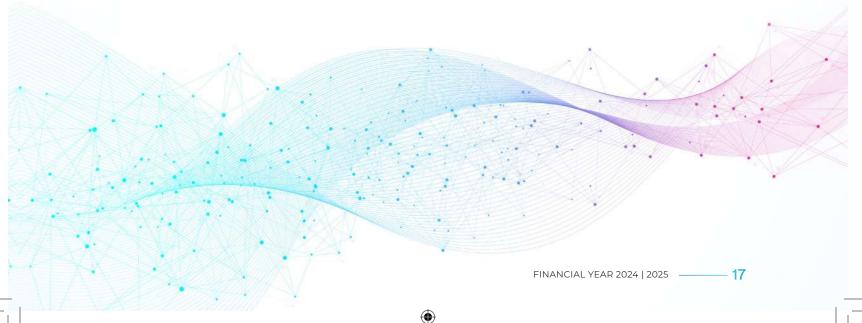
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Outdoor Works:

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In the outdoor areas, concrete foundation and wall structures for the second septic tank have been completed, further supporting the facility's waste management capabilities. Soil backfilling and tamping for tank areas have also been finished, ensuring that the site is wellprepared for the next stages of development.



Health Systems Strengthening Programme: Component 1, Phase 1

Vision for Health 2030 Strategic Goal	Making Reliable and Modern Infrastructure Available for Health Service Delivery	
Strategic Outcome:	Provide and Maintain an Adequate Health Infrastructure to Ensure Efficient and Cost- Effective Service Delivery	
Focus	Provide increased access to and availability of specialised paediatric and adolescent care	
Select FY 2024-25	 15% of project executed for the Spanish Town Hospital expansion 10% of project executed for the Saint Jago Park Health Centre upgrading 	×
Operational Target	• 10% of project executed for the Greter Portmore Health Centre upgrading'	×
	• 5% of project executed for the Old Harbour Health Centre construction	×

The Health Systems Strengthening Programme (HSSP) commenced in November 2018 with the approval of the first Programmatic Policy-Based Loan (PBL) (JA-L 1080) by the Board of Directors of the Inter-American Development Bank (IDB). This hybrid operation was complemented by an investment Ioan (JA-L 1049), with each providing financing of USD \$50 million. In November 2020, the European Union Caribbean Investment Facility (EU-CIF) approved a €10.2 million investment grant (IGR) for the "Support for the Health Systems Strengthening for the Prevention and Care Management of Non-Communicable Diseases Programme" (JA-G1005; GRT/ER-17830-JA).

Together, the first PBL, the investment loan, and the EU investment grant formed a comprehensive support package for this Programme. To further bolster these efforts, in September 2020, the IDB approved a second PBL amounting to USD \$100 million, titled "Support for the Health Systems Strengthening for the Prevention and Care Management of Non-Communicable Diseases Programme II" (JA-L 1086).

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PERFORMANCE HIGHLIGHTS REPORT

The overarching objective of the Programme is to enhance the health of Jamaica's population by strengthening comprehensive policies aimed at preventing risk factors associated with non-communicable diseases and improving access to an upgraded and integrated primary and secondary healthcare network in select areas.

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The specific development objectives are as follows:

• To provide a more efficient and higher quality of care for patients with chronic noncommunicable diseases.

• To improve access to an upgraded and integrated primary and secondary healthcare network in select areas, with a focus on chronic disease management.

• To strengthen comprehensive policies to prevent risk factors associated with noncommunicable diseases.

Vision for Health 2030 Strategic Goal	Spanish Town Hospital (STH)	Old Harbour Health Centre (OHHC)	Greater Portmore Health Centre (GPHC)	Saint Jago Park Health Centre (SJPHC)
Project Scope	Renovation & expansion of a six-story facility	New facility construction	New facility construction	Expansion of existing facility
Progress	Site handed over April 20, 2024 Civil works currently at 3% completion. Foundation excavation, termite treatment, waterproofing, and steelwork in progress	Site handed over to Cinetech Engineering Solutions on February 3, 2025. Hoarding completed, site office placed, and excavation works commenced.	Site handed over to China Civil Engineering Construction Company on February 17, 2025. Contractor mobilized and preparing for full site activity.	Site handed over to China Civil Engineering Construction Company on February 17, 2025. Contractor mobilized and preparing construction area.
FY 2024-25 Approved Budget: JMD \$3.35 billion GoJ: JMD \$980.9M EU: JMD \$971.5M IDB: JMD \$1.397B				

Table 1. Summary of Key Achievements by Facilities:

FINANCIAL YEAR 2024 | 2025



ST. JAGO PARK HEALTH CENTRE Ground-breaking



Greater Portmore Health Centre Ground-breaking

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PERFORMANCE HIGHLIGHTS REPORT

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Internal Audit

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
4	100%	100%

The Internal Audit is a unit within the Corporate Services Division, it serves to advise and recommend improvements in the governance, internal controls and risk management processes within the Ministry to ensure they are adequate and effective. During the current FY 2024-25, the Unit maintained the completion of 100% of their outputs.

Vision for Health 2030 Strategic Goal:	Increased and improved health financing for equity and efficiency	
Strategic Outcome:	Improved efficiency of how funds provided to the public health sector isallocated and utilized for the delivery of health care services	
Focus	Ensure Ministry's governance, internal control and risk management processes are effective	
Select FY 2024-25 Operational Target	 Annual Risk-Based Audit Plan prepared and submitted for approval of PS and Audit Committee 80% of Audit Plan effected Audit Report on the Redundancy and Termination Payment for staff assigned to NCDA submitted to Executive Management Audit Report on the Redundancy and Termination Payment for staff assigned to NCDA submitted to Executive Management 	

Audit Function

The Annual Risk-Based Audit Plan for 2025-2026 was carefully developed and submitted for approval to both the Permanent Secretary and the Audit Committee. Over the course of the year, the audit team maintained a strong performance, meeting the target of completing 80% of planned audits, a standard that reflects consistent effort and diligence.

Audit reports related to redundancy and termination payments for staff of the National Council on Drug Abuse and the National Family Planning Board were successfully submitted to Executive Management for review and action.

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Technical Services Division

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
45	69%	73%
Direction of Change: 4 % ↓		

The core responsibility of the Technical Services Division is to ensure that healthcare policies and programmes effectively address the health needs of the population while maintaining quality standards throughout the healthcare system. During the reporting period, the performance of the Technical Services Division declined in comparison to FY 2023-24, with performance decreasing by 4 percentage points.

Strengthening Mental Health Services

Vision for Health 2030 Strategic Goal:	Safeguarding access to equitable, comprehensive and quality healthcare	
Strategic Outcome:	Improved population health status	_
Focus	Strengthen community mental health services	
Select FY 2024-25 Operational Target	 Draft evaluation report of PM+ submitted to Health Systems Planning and Integration directorate for review Final draft of SMHL Programme evaluation report submitted to the Chief Medical 	
	Officer	

Problem Management Plus:

The Problem Management Plus (PM+) intervention aims to strengthen community mental health services by assisting individuals in managing everyday problems. This initiative has successfully improved access to basic mental health services at the community level through the capacity building of community workers. During the FY four (4) online seminars were held on topics such as Coping with Trauma, Managing Grief, Building Resilience, and Recognizing and Managing Compassion Fatigue, with attendance reaching 46, 38, and 34 participants in the first three (3) sessions. The PM+ intervention benefited a total of 147 individuals during the period, compared to 49 persons in FY 2023-24, significantly exceeding the target of 80 beneficiaries. In March 2025, the Draft Evaluation Report of PM+ was submitted for internal review.

PERFORMANCE HIGHLIGHTS REPORT

School Mental Health Literacy Programme:

The School Mental Health Literacy (SMHL) programme aims to strengthen community mental health services by enhancing the mental health literacy of secondary school students, education staff, and their parents or guardians. This initiative, in collaboration with the Ministry of Education, Skills, Youth & Information, is expected to decrease mental health stigma, increase awareness, and promote willingness to access mental health services. The Mental Health Unit has facilitated the training of Health and Family Life Educators and reached 570 students from five (5) schools in Grades 7 and 8 with the programme's curriculum. To improve curriculum delivery, the MOHW and MOEY have agreed to train Guidance Counsellors for more effective implementation of the programme. At the end of the FY, an evaluation report of the SMHL Programme was drafted and submitted for internal review. The findings of this report will support continuous improvement in the delivery of this intervention.

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/ision for Health 2030 Strategic Goal:	 Safeguarding access to equitable, comprehensive health care and quality health care; The Stewardship Capacity of the MOHW is strengthened to improve leadership and governance to achieving Universal Access to Health and Universal Health Care
Strategic Outcome:	 Modernized and efficient hospitals, specialised care centres and support services Improved population health status
	 Effective stewardship and governance of the health sector at all levels
	• Full implementation of the International Health Regulations
Focus	Responsive, Strong and Resilient Health System
Select FY 2024-25 Operational Target	 Competency Training and Assessment Two (2) Audit Reports of Priority Facility for Emergency Medical Care Health System State of Readiness Report for Hurricane Season IHR State Party Annual Report Performance testing for emergency and disaster response through National Simulation Exercise
	• Standards document for Health Service Resiliency

Emergency and Disaster Management Services

FINANCIAL YEAR 2024 | 2025

Health services resilience has important implications for the protection and improvement of human life, and tools that include standards for assessing resilience are critical. Examining the system's performance in responding to a real-life or simulated events is recognized as part of a country's emergency management programme. This process serves as an important learning tool and an effective method for identifying best practices, challenges, and key lessons to strengthen preparedness and response capabilities.

Jamaica's public health system requires annual training of at least 500 persons to ensure current knowledge and competencies for Emergency and Disaster Management. During FY 2024-25, 682 persons were trained and certified in mission critical courses.

Additionally, full compliance with the International Health Regulations (IHR) Monitoring and Evaluation Framework requires that Jamaica as a Member State, include simulation exercises as part of monitoring and evaluation. Jamaica's States Parties Self-Assessment Annual Reporting (SPAR) for 2024 was completed and steps are being taking to conduct an external evaluation under the IHR (2005).

Health system resilience was verified during the FY 2024-25, and areas for strengthening identified. The passage of Hurricane Beryl in July 2024, as well as the Simulation Exercises (SimEx) in January 2025, provided capability assessments of the resiliency of Jamaica's Public Health System. The Smart Concept, in which health facilities assessed with smart assessment metric of A70 are deemed to be resilient, was adopted in FY 2024-25 and has demonstrated transferability and is now validated in country.

Hurricane Beryl placed Jamaica's critical infrastructure to the test and provided a critical examination of the island's climate resilient or "Smart" (A70) Health Centres. Beryl was a Category 4 storm that was particularly destructive especially in the southern parishes and provided a defining moment for the Mandeville and Santa Cruz Health Centres, which were Two (2) of the four (4) facilities upgraded to the resilient A70 standard under the Strengthening Healthcare Facilities in the Caribbean initiative (Smart Hospitals Programme Phase 2). Prior to the project, the island's public health facilities had either a B (average but safe -51%), or C (vulnerable-49%) rating. Preliminary assessments of the retrofitted facilities conducted after the storm revealed minimal damage to both A70 health centres in contrast to many other structures in the regions that were significantly impacted by the storm. In addition, capacity built through the annual training and competency certification allowed for the capability of the systems to effectively maintain core services during and after the response. The system was further evaluated through a National Simulation Exercise conducted on January 23, 2025, that demonstrated the public health system's adaptability and agility while revealing areas for strengthening.

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PERFORMANCE HIGHLIGHTS REPORT



Three (3) points of entry under the IHR (2005), Two (2) Accident and Emergency Departments and five (5) public Pre-hospital Emergency Medical Services sites were inspected during the year and recommendations for improvement to enhance emergency medical care, health system resiliency and health security provided. The process for development of evidencebased planning documents based on external evaluation are far advanced for Jamaica's Emergency Care System, Climate and Health Adaptation Plan (H-NAP) and National Health Security Action Plan.

These are being undertaken under the following projects respectively:

- 1. Enhancing Emergency Medical Care in the Americas Project
- 2. Strengthening Climate Resilience in the Caribbean Project
- 3. Global Health Security Project

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FINANCIAL YEAR 2024 | 2025 _____ 25

The National Health Research Agenda is a prioritized list of research areas deemed crucial for national development and deserving of support. Originally developed and ratified in 2017, the Agenda underwent an update in FY 2022-23. In FY 2023-24, research stakeholders participated in a survey to prioritize thematic research areas, culminating in a ratification meeting held on September 22, 2023, where the prioritization results were officially endorsed. This prioritized list encompasses the needs of the Jamaican population, facilitating the availability of essential data for government health-related initiatives.

This effort aligns directly with the Vision for Health 2030 strategic action, which aims to develop and implement a funded Health Research Agenda that generates evidence to inform policy-making and support monitoring and evaluation. The focus for FY 2024-25 was to disseminate the updated National Health Research Agenda to stakeholders and to create a monitoring and evaluation plan to guide its implementation. As of March 2025, all targets have been successfully achieved. This includes hosting Two (2) dissemination session, one in September 2024 and another in March 2025-each attended by over 50 stakeholders. Additionally, the monitoring and evaluation plan for the research agenda was completed in September 2024.

National Research Agenda

Vision for Health 2030 Strategic Goal:	The Stewardship Capacity of the MOHW is strengthened to improve leadership and governance to achieving Universal Access to Health and Universal Health Care	
Strategic Outcome:	Evidenced –based policy, planning, implementation, monitoring and evaluation	
Focus	Develop and implement a funded Health Research Agenda to generate evidence to guide policymaking and monitoring and evaluation	
Select FY 2024-25 Operational Target	 Two (2) Dissemination Sessions (to present the NationalResearch Agenda) held for the FY M&E Plan for National Health Research Agenda developed 	~

Central Health Data Repository

Vision for Health 2030 Strategic Goal:	The Stewardship Capacity of the MOHW is strengthened to improve leadership and governance to achieving Universal Access to Health and Universal Health Care	
Strategic Outcome:	Evidenced –based policy, planning, implementation, monitoring and evaluation	
Focus	Central Health Data Repository implementation	
Select FY 2024-25 Operational Target	CHDR System Requirement Completed	

The Ministry is spearheading the development of a central health data repository aimed at consolidating and storing health-related data, thereby enhancing management and dissemination. Currently, over 1,000 health indicators that measure service delivery and population health outcomes are spread across various sources. The Ministry is required to report on many of these indicators annually, necessitating the collation of data from multiple origins. Establishing a centralized repository will offer a reliable, up-to-date source for these indicators, enabling Jamaica to effectively track its progress toward both national and international health obligations.

The system requirements for this repository were completed and approved ahead of schedule in December 2024, and a consultant is now working on a demonstration of the system.

Annual Jamaica Population Health Status Report

Vision for Health 2030 Strategic Goal:	The Stewardship Capacity of the MOHW is strengthened to improve leadership and governance to achieving Universal Access to Health and Universal Health Care
Strategic Outcome:	Evidenced –based policy, planning, implementation, monitoring and evaluation
Focus	Jamaica Population Health Status Report focusing on over 100 indicators spanning the period 1995-2023
Select FY 2024-25 Operational Target	Population Health Status Monitoring Annual report completed target

The target for the FY was to complete the second edition of the Jamaica Population Health Status Annual Report, which encompasses data from 1995 to 2023. The report aims to provide a comprehensive assessment of the health and well-being of the Jamaican population. It utilizes over 100 indicators focusing on sociodemographic factors, health status, risk factors, service coverage, and health systems to highlight the country's performance.



Maternal Mortality Surveillance

Vision for Health 2030 Strategic Goal:	The Stewardship Capacity of the MOHW is strengthened to improve leadership and governance to achieving Universal Access to Health and Universal Health Care	
Strategic Outcome:	Strengthened surveillance	
Focus	Review and Classification of Maternal Deaths	
Select FY 2024-25 Operational Target	 Competency Training and Assessment Two (2) Audit Reports of Priority Facility for Emergency Medical Care Health System State of Readiness Report for Hurricane Season 	~



Jamaica is dedicated to achieving Sustainable Development Goal 3, which seeks to reduce the maternal mortality ratio to 70 per 100,000 live births by 2030. Supporting the achievements of this goal requires data-driven interventions, supported by a multidisciplinary team responsible for collecting, collating, analysing, and interpreting relevant information.

A key strategy for the Ministry is the classification of maternal deaths, which is essential for accurately monitoring and reporting on targets related to the maternal mortality ratio. Of particular importance, the maternal mortality reviews—through which this classification is conducted—also highlight developmental areas for strengthening the provision of maternal health services within the public health system. For the year under review, the objective was to classify 85% of maternal deaths for 2023, 100% of unclassified deaths for 2021 and 95% of unclassified deaths for 2022.

At the end of the period, the Ministry successfully reviewed and classified 100%, 98.6%, and 90.5% of maternal deaths for 2021, 2022, and 2023, respectively. Although challenges remain in obtaining the necessary information to review the few remaining cases, ongoing efforts are focused on ensuring that all outstanding cases are classified.

The Stewardship Capacity of the MOHW is strengthened to improve leadership and	
governance to achieving Universal Access to	
Health and Universal Health Care	
Safeguarding access to Equitable and	
comprehensive and Quality	
Healthcare	
Strengthened surveillance	
 Improved Population Health Status 	
Validation of HIV deaths	
80% of deaths on the end of year 2023 probable HIV deaths list validated by field and updated in HATS database	

HIV Surveillance



The validation of HIV deaths is a crucial ongoing effort aimed at improving estimates of the number of persons living with HIV (PLHIV). For the year under review, the goal was to validate at least 80% of the probable HIV deaths identified for 2023. The team successfully validated 87% of the deaths on the 2023 probable deaths list, leading to an update of the HIV/AIDS Tracking System (HATS) database. Despite this achievement, the validation process continues to face challenges due to inaccurate or missing data. Despite the challenges, the team remains committed and the process of confirming the 2024 list of probable deaths has been initiated.

Ongoing data monitoring is essential for gaining a clearer understanding of the HIV epidemic in Jamaica. This knowledge is vital for making informed decisions, organizing targeted interventions, and allocating resources efficiently. By enhancing data accuracy and completeness, the Ministry can better address the needs of those affected by HIV and improve overall health outcomes in the country.

Healthy Eating in Workplaces

National Policy for the Promotion of

Health 2030 Strategic Goal:	Safeguarding access to Equitable and comprehensive and Quality Healthcare
Strategic Outcome:	Improved Population Health Status
Focus	Improving Eating in the Work Environment
Select FY 2024-25 Operational Target	Final Concept Paper to develop National Policy for Health Eating in Workplaces submitted to PPDD

In 2024, the Ministry developed a concept document to support the establishment of a National Policy on Healthy Eating in Workplaces. It is acknowledged that nutrition behaviours can be positively influenced by worksite health promotion strategies and programmes that encourage both individual and corporate behavioural changes. A supportive work environment, combined with increased awareness and knowledge of nutrition, can empower employees to adopt healthy eating practices at work. With Jamaica's working-age population comprising 69.4% of the total population, targeted policy interventions aimed at reducing non-communicable diseases (NCDs) among this demographic are crucial.

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From September to November 2024, the Ministry conducted a survey in 26 workplaces across the public and private sectors, as well as educational institutions. The findings indicated that all surveyed workplaces had access to physical spaces conducive to healthy eating, such as designated eating areas, handwashing sinks, refrigerators, and microwaves, as well as healthy food and drink options.

PERFORMANCE HIGHLIGHTS REPORT

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Additionally, 85% of workplaces met at least 75% of the criteria for providing healthy choices at meetings and events. However, few had policies or guidelines promoting healthy eating, providing adequate breastfeeding support, or facilitating activities to raise awareness of healthy eating among staff.

The survey results highlight the need to create both a physical environment and psychosocial support to promote healthy eating practices in workplaces. Effective strategies to cultivate a culture of healthy eating must be developed and implemented, with necessary tools and support to foster positive dietary choices. Structured interventions are essential to promote health and wellness among workers in both the public and private sectors. Therefore, a National Policy for Healthy Eating in the Workplace is vital to create a supportive work environment, potentially leading to improved health, social, and economic outcomes for the workforce and the broader population.

HIV/STI Prevention and Control Vision for Safeguarding access to Equitable and comprehensive and Quality Healthcare Improved Population Health Status HIV/STI Prevention and Control 50% of Type 3 health centres assessed for HIV service delivery Assessment report for health centres assessed in 2023-24 produced Select FY HIV Services Implementation Plan for 2024-25 health centres developed • 90% of persons living with HIV diagnosed, 68% of those diagnosed on treatment, 85% of those on treatment virally suppressed >75% expenditure of donor funds (UCSF, CTECH, GEATM)

Continuing from the previous year's assessment of 50% of Type 3 health centres for HIV

service delivery, the remaining facilities were assessment of 50% of Type's health centres for hiv on findings from the 2023-2024 assessments, a comprehensive guide for implementing and expanding the availability and accessibility of HIV services was created. This guide promotes an integrated service delivery model, incorporating HIV services into the routine curative care offered at these facilities.

As a result, five (5) health centres began offering comprehensive HIV services in FY 2024-25, with plans for additional centres to follow in 2025/2026 and beyond. This expansion of integrated service access points is anticipated to enhance retention in care and help reduce stigma and discrimination associated with HIV.

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Jamaica remains committed to advancing the UNAIDS 90-90-90 HIV targets. As of January 2025, 90% of individuals living with HIV had been diagnosed, with 65% of those diagnosed receiving treatment, and 80% of those on treatment achieving viral suppression. However, retention in HIV care remains a significant barrier to achieving optimal health outcomes. The expansion of access points will be complemented by initiatives such as extended clinic hours and targeted efforts to reduce stigma and discrimination to improve retention levels.

In May 2024 Jamaica received certification from the World Health Organization (WHO) for eliminating the mother-to-child transmission of HIV and syphilis (EMTCT).

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UNAIDS 90-90-90

• 90% of people living with HIV to know their status

• 90% of those diagnosed to be on treatment

• 90% of those treated to have viral suppression, b 2030

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Environmental Health

Vision for Health 2030 Strategic Goal:	Safeguarding access to Equitable and comprehensive and Quality Healthcare
Strategic Outcome:	 Modernised and efficient hospitals, specialized care centres and support services
	 Improved Population Health Status
Focus	Improvement in Environmental Health Systems
Select FY 2024-25 Operational Target	 Progress Report re Climate Proofing of Facilities (WASH) Concept Note re Revised policy and framework for Food Handlers' Certification Programme 20% reduction of Breteau Indices in all high-risk communities

PERFORMANCE HIGHLIGHTS REPORT

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The Ministry, in collaboration with UNICEF, launched the Water, Sanitation, and Hygiene (WASH) Project aimed at improving hygiene standards in healthcare facilities. This initiative focuses on strengthening Infection Prevention and Control (IPC) measures throughout the health sector. To date, over 353 health facilities have been inspected to evaluate their WASH status, and approximately 14 health centres are set to be upgraded to become climate resilient.

A key outcome of the project is a comprehensive analysis of policy gaps related to WASH. This assessment will identify areas for improvement, facilitating policy revisions that promote sustainable enhancements in WASH standards within healthcare settings. At the end of the fiscal year, a progress report was submitted for internal review.

To strengthen the healthcare workforce, significant progress has been made in environmental health staffing. Over the past two (2) years, the number of vector control posts has increased from 213 to 762, adding 549 new positions. Additionally, Public Health Inspector roles have expanded by 500, increasing the total from approximately 385 to 885. This expansion ensures enhanced oversight and intervention capabilities.

In recognition of the ongoing threat posed by vector-borne diseases, substantial investments have been made to improve the programme's effectiveness. Upgrades in equipment and materials have allowed for broader coverage and more robust interventions, thereby minimizing the risk of disease outbreaks. Over the past four (4) years, 56 pickup vehicles and 45 vehicle-mounted fogging machines have been purchased. As of the end of November 2024, the Breteau index was reported at 26.8 which was above the minimum threshold of 25 or less.

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Policy, Planning & Development

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
16	88%	69%
Di	rection of Change: 19	9%↑

The Policy, Planning, and Development Division (PPDD) facilitates and supports evidencebased policy development and provides policy recommendations for improving Jamaica's health system, monitoring and evaluation, the analysis of strategic developmental changes and strengthening of Information Systems for Health. The PPDD experienced a 19% increase in performance for the period when compared to financial year 2023-24.

Health Systems Strengthening

Vision for	The stewardship capacity of the Ministry of	
Health	Health is strengthened to improve leadersh	
2030 Strategic and governance to achieve universal a		
Goal:	health and universal health coverage	
Stratagia	Evidence-based policy, planning,	
Strategic	implementation, and monitoring and	
Outcome:	evaluation	
Feetre	Improve use of evidence in decision making	
Focus	Improve use of evidence in decision-making	
Select FY 2024-25 Operational Target	 First Draft of PPP five (5) years Strategy for the public health sector 2 Economic evaluation of health intervention reports 4 Quarterly Health Trends Bulletins 	

Public-Private Partnership for Non-Communicable Diseases Evaluation:

The Public-Private Partnership for Non-Communicable Diseases (PPP4NCD) programme was created in response to the COVID-19 pandemic to help manage patients with diabetes and hypertension while reducing their risk of exposure at public health centres. The programme referred patients to private physicians for routine care.

An economic analysis was conducted for the PPP4NCDs initiative using a mixed-method approach. The findings suggest that while the performance of the status quo model of care for NCD patients was mixed relative to the PPP arm across several indicators, it outperformed the PPP model when assessed against the primary outcome-proportion of patients achieving disease control. Based on the incremental cost-effectiveness ratio (ICER), the status quo emerged as the more cost-effective option, as the cost per additional patient achieving control was lower compared to the PPP intervention.

PERFORMANCE HIGHLIGHTS REPORT

Health Technology Assessments (HTAs):

Two (2) Health Technology Assessments (HTAs) were completed for drugs proposed for consideration for inclusion in the Ministry's Vital Essential Necessary (VEN) List, focusing on important oncological concerns. One (1) assessment evaluated the addition of abemaciclib to standard endocrine therapy for women with hormone receptor-positive, HER2-negative early breast cancer at high risk of recurrence. The other compared the six-month 45 mg formulation of leuprolide acetate with the traditional three-month 11.25 mg dose for advanced prostate cancer.

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Both assessments combined systematic literature reviews with economic modelling. Clinical evidence indicated that abemaciclib, when added to standard endocrine therapy, reduced the risk of invasive disease recurrence in high-risk early breast cancer patients. The six-month 45 mg formulation of leuprolide acetate was found to be as effective as the three-month 11.25 mg dose in maintaining testosterone suppression in men with advanced prostate cancer. However, neither drug was found to be cost-effective. While both showed modest improvement in clinical outcomes, these benefits did not justify their high costs. This reflects the broader issue with many new pharmaceuticals: they often come with significant costs but offer only marginal clinical advantages. When such drugs are added to, rather than replace, existing treatment regimens, they can drive up healthcare expenditures without meaningful improvements in healthcare outcomes. In fact, making some of these drugs cost-effective would likely require drastic price reduction, in some cases approaching zero.

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Overall, these HTAs translated complex clinical and economic data into actionable recommendations. The goal was to optimize resource allocation, improve policy transparency, and ultimately enhance cancer care health outcomes in Jamaica.

Health Issues Quarterly Bulletins:

Throughout FY 2024-25 significant strides were made to disseminate information on public health system utilization and provision through the production of the Health Issues Quarterly bulletins. These quarterlies provided information on utilization and health care service provision organized around the "life-course" theme. They combined administrative data from the Hospital Monthly Summary Reports, the Monthly Clinical Statistical Reports, and the Medical Record Case Abstracts, as well as literature synthesis to add value and clarity.

In the early life stages, the over 200,000 well-child visits each year show that most children are growing and developing healthy. However, for every 50 well-care visits, 3 children were overweight/obese, and 4 were at risk of being overweight. Moreover, a critically low percentage (4.6%) of babies visiting at 6 months were exclusively breastfed. Nevertheless, most children aged 0-5 were assessed as normal for the major age-appropriate milestones. Children and adolescents account for 36% of all casualty department attendances, shifting from primarily respiratory issues in the aged under-10 to injuries in older teens, and hospital stays are most often for pneumonia, asthma, anaemia, sickle cell crises, accidental injuries, and adolescent pregnancy-related conditions.

In the prime working years (20-59), curative care dominates public health centre visits: hypertension (147 per 1,000 visits) and combined diabetes/hypertension (97 per 1,000) lead caseloads, each having more than doubled since 2000, alongside genito-urinary, respiratory, and musculoskeletal disorders. Despite this growing burden of non-communicable diseases, screening uptake was generally low. Young and middle-aged adults also comprise over half of all casualty department attendances, where "other medical" reasons, injuries, and obstetric/gynaecological issues predominate, and top risks include transport accidents, falls, and lacerations.

Among older adults (60+), chronic-disease management shapes service use: musculoskeletal disorders, cardiovascular disease, hypertension and diabetes featured most prominently, with combined hypertension/diabetes caseloads up 73% since 2000. Casualty department attendances commonly stem from general medical, surgical, and respiratory causes, while hospital stays are longest for anaemias, pneumonia/influenza, and renal failure. Falls and motor-vehicle accidents remain critical risks, and as healthy life expectancy narrows and old-age dependency rises, the bulletins underscore the need for age-tailored preventive care, chronic-disease management, and supportive services across the entire life course.

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Vision for	The stewardship capacity of the Ministry of	
Health	Health is strengthened to improve leadership	
2030 Strategic	and governance to achieve universal access to	
Goal:	health and universal health coverage	
Strategic	Strengthened National Health Information	
Outcome:	Systems	
Focus	Improving Critical Health Infrastructure	
Select FY 2024-25 Operational Target	 Eight (8) Digital Health/Data Standards 2 Formative Reports on EHR implementation Final Enterprise Master Patient Index (EMPI) comprehensive requirements specifications for Standard Bidding Document to procure a digital solution 	

Information Sytems for Health

Digital Health Data Standards and Enterprise Master Patient Index (EMPI):

The identification of the key Digital Health Standards and vale sets is intended to enable the foundation for the safe, data-first, resilient, agile, innovative and patient centric ecosystem for health information. The standards and value sets are both local and international. They will also enable interoperable systems by design. Otherwise, monolith, siloed digital systems will continue to be established with afterthought interconnections at great cost. The standards will be implemented largely in components of the Digital Health Interoperability and Intelligence Platform. These components include the Enterprise Master Patient Index with the registries for patients, providers and health facilities, the Clinical Data Repository for storing, querying and persisting structured data, and the Terminology Server which is the knowledge or semantics service that contains terminologies, classifications, concept mapping tools and an array of local and international value sets and reference sets.

The following Digital Health Standards/Value Sets were developed:

- 1. Patient Registry
- 2. Provider Registry
- 3. Healthcare Facility Registry
- 4. Health Record Number
- 5. Unique Health Identifier
- 6. OpenEHR
- 7. SNOMED-CT
- 8. Stack of Standards including OpenEHR, SNOMED CT, HL7 FHIR and IHE Profiles
- 9. International Patient Summary
- 10. Fast Healthcare Interoperability Resources (FHIR)
- 11. Integrating the Healthcare Enterprise (IHE) profiles

Electronic Health Records:

The Electronic Health Record (EHR) system represents a critical step in modernizing Jamaica's health sector in alignment with the Vision for Health 2030 strategy. Introduced in a phased rollout across selected healthcare facilities, the EHR system is designed to improve clinical documentation, support data-driven decision-making, and increase efficiency in patient care management.

Given the scale and importance of the implementation, a formative evaluation was undertaken to assess how well the system was functioning during early and mid-stage deployment. The purpose of this evaluation was to gather feedback on the system's current performance, identify gaps and provide recommendations that would inform improvements. This evaluation supports iterative learning and system enhancement, ensuring that the rollout was responsive to the needs of healthcare providers and patients while identifying and addressing implementation challenges early.

For the year ahead, the Ministry will focus on the integration of SNOMED CT, supported by targeted training and system updates, with the view of improving data quality and clinical decision-making. Overall, aligning these improvements with the Vision for Health 2030 will help realize the full potential of the EHR system and contribute significantly to a more responsive and data-driven health system in Jamaica.

PERFORMANCE HIGHLIGHTS REPORT

Health Facilities Piloting the Electronic Health Records System by Parish

Parish	Health Facility
Clarendon	May Pen Hospital May Pen Health Centre West Mocho Health Centre May Pen Health Centre East Chapelton Community Hospital
Saint Catherine	Spanish Town Hospital Saint Jago Park Health Centre Portmore Health Centre Old Harbour Health Centre
Saint Ann	Saint Ann's Bay Hospital Saint Ann's Bay Health Centre Ocho Rios Health Centre Brown's Town Health Centre

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Enabling Environment In Health & Client Services Division

TOTAL OUTPUTS FOR FY	% OUTPUTS MET
2024-25	FOR 2024-25
11	100%

The Government of Jamaica's efforts to streamline public bodies as part of the Public Sector Transformation Programme resulted in the integration of the National Family Planning Board into the MOHW as a Division. The Enabling Environment in Health and Client Services Division (EEHCSD) became operational on August 2, 2024, as the National Family Planning Board (Repeal) Bill 2023 was gazetted on December 18, 2023, with an effective repeal date of July 31, 2024.

The EEHCSD is to champion a new era of quality care and equitable access in our health care system. The division provides strategic direction on reorientation of staff; adaption of Health in All Policies Approach; fosters collaboration and partnerships that create a more responsive and equitable healthcare system and piloting strategies that promote equitable access to healthcare services for all demographics. During the period under review, the EEHCSD completed 100% of their outputs.

Vision for Health	The stewardship capacity of the Ministry of Health is strengthened to improve leadership
2030 Strategic Goal:	and governance to achieve universal access to health and universal health coverage
Strategic Outcome:	Efficient and effective organisational and management structure of the public health system.
Focus	Provision of Grants to support vulnerable Jamaicans
Select FY 2024-25 Operational Target	 All business processes requiring updating revised 5% of the Service Delivery Enhancement Plan for the Compassionate Fund Programme implemented

Compassionate Fund Programme

PERFORMANCE HIGHLIGHTS REPORT

The Compassionate Fund Programme (CFP) in Jamaica is managed by the MOHW through a grant from the National Health Fund. This Programme provides grants to Jamaicans to access healthcare services, covering specialized procedures, diagnostics, X-rays, and certain medications, some of which are not available in the public health system.

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During the fiscal year FY 2024-25, the Ministry embarked on an assessment of the processes and procedures of the programme. The assessment led to a revision of the application checklist, updated/revised operational guidelines for the CFP inclusive of a process flow for applications, terms of reference for an appeal process and a revised application form.

Vision for Health 2030 Strategic Goal: Strategic Outcome:	The stewardship capacity of the Ministry of Health is strengthened to improve leadership and governance to achieve universal access to health and universal health coverage Efficient and effective organisational and management structure of the public health
Focus	system. Resolution of Client Complaints
Select FY 2024-25 Operational Target	 80% of investigations of medico-legal & non-medicolegal issues referred within 5 working days 60% of escalated medicolegal complaints processed within 45 working days 60% of escalated non-MRP complaints processed within 45 working days

Resolution of Complaints

The Ministry has a responsibility through the Client Affairs Research and Resolution Unit to initiate processing of complaints within five (5) working days and close out the management of medicolegal and non-medicolegal cases/complaints within forty-five (45) working days of receiving the complete case files.

By the end of the FY 2024-25, the Ministry achieved notable results: 90% (112 out of 125) of medicolegal and non-medicolegal issues were referred within the five-day window. Furthermore, 78% (14 out of 18) of escalated medicolegal complaints were processed within the forty-five days, while 92% (49 out of 53) of escalated non-MRP complaints were resolved in the same timeframe.

These achievements reflect the Ministry's commitment to ensuring that clients' concerns are handled promptly and effectively, reinforcing trust in the system.

Corporate Services Division

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
13	54%	80%
Direction of Change:26%		

The Corporate Service Division (CSD), comprising General Administration, Human Resources Management and Development, Public Procurement and Information and Communication Technology (ICT), continued its dedicated efforts towards enhancing efficiency and service quality throughout the Ministry during the financial year. The Division is driven by its core service values of being Relevant, Responsive, and Reliable (3Rs). The CSD recorded a 26-percentage point decline in performance for the period, compared to the 2023-24 financial year.

Vision for Health 2030 Strategic Goal:	The stewardship capacity of the Ministry of Health is strengthened to improve leadership and governance to achieve universal access to health and universal health coverage
Strategic Outcome:	Efficient and effective organisational and management structure of the public health system.
Focus	Appraise Employees Performance
Select FY 2024-25 Operational Target	 90% of annual performance assessments submitted to OD/PMAS 60% of mid-year employee appraisals submitted to OD/PMAS

Resolution of Complaints

Employee appraisal plays a vital role in organizational development by promoting growth and accountability among staff. In FY 2024-25, 94% of annual performance evaluations were completed, showcasing a strong commitment to assessing employee contributions. Additionally, 77% of mid-year employee appraisals were done, highlighting the organization's dedication to providing timely feedback and supporting professional development.

PERFORMANCE HIGHLIGHTS REPORT

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Finance & Accounts Division

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TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
5	83%	80%
Direction of Change: 3%↑		

The Finance and Accounts Division ensures the financial management systems and processes comply with GOJ's policies and procedures and supports the administration and execution of programmes towards advancing the Ministry's vision and mission. The FAD recorded a 3 percentage point increase in performance for the period, compared to the 2023/2024 financial year.

Vision for Health 2030 Strategic Goal:	Equitable and Efficient Health Financing	
Strategic Outcome:	Improved efficiency in the allocation & utilisation of funds provided to the public health sector for delivery of health care services	
Focus	To responsibly manage public funds through planning and transparency, in compliance with regulations.	
Select FY 2024-25 Operational Target	 Three (3) Appropriation Accounts completed and submitted to the MOFPS by the 31st of July % of commitments completed within 60 days % of payments completed within 3 working days 	

Financial Management

The primary objective of financial management within the Ministry is to ensure that public funds are utilized wisely and responsibly. Effective stewardship focuses on delivering value for money through careful planning, procurement, expenditure, and transparency. Adhering to financial regulations and international standards for internal controls, risk management, and record-keeping supports the mission of the Ministry of Health and Wellness (MOHW) by facilitating responsible oversight and resource allocation to achieve health outcomes and priorities.

In terms of payment processing, there have been significant accomplishments, with an average of 97% of payments completed within 72 hours. Additionally, an average of 95% of commitments outstanding for over 60 days was maintained. Two (2) Appropriation Accounts for FY 2023-24 were completed and submitted to the MOFPS in July 2024. The Ministry is actively engaged in activities to complete the outstanding Appropriation Accounts Reports.

Standards and Regulation Division

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
7	43%	67%
Direction of Change: 24%+		

The Standards and Regulation Division provides quality assurance services for the management of the health sector. This involves developing standards, regulating the importation and distribution of designated products and regulating the operations of designated private healthcare facilities. The Division recorded a 24-percentage point decline in performance for the period, compared to the 2023-24 financial year.

Vision for Health 2030 Strategic Goal:	The stewardship capacity of the Ministry of Health is strengthened to improve leadership and governance to achieve universal access to health and universal health coverage	
Strategic Outcome:	Effective stewardship and governance of the health sector at all levels	
Focus	Optimise processing of import permits	
Select FY 2024-25 Operational Target	• 80% of permit applications processed within 3 working days	

Resolution of Complaints

The Ministry continued to support the Government of Jamaica's trade facilitation initiatives by processing import permits for medical supplies, equipment, pharmaceuticals, and other healthcare-related items. A standard for processing permit applications on a quarterly basis was established and consistently exceeded throughout the financial year. Specifically, 89.5% of permit applications were processed within three (3) working days, with 4,209 out of 4,704 approved applications completed in that timeframe. Overall, there were 5,980 total applications, with 4,704 approved, reflecting a 79% approval rate. Since March 3, 2025, all import permits have been submitted and processed exclusively through the JSWIFT platform.

PERFORMANCE HIGHLIGHTS REPORT

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National Public Health Laboratory

TOTAL OUTPUTS FOR FY 2024-25	% OUTPUTS MET	% OUTPUTS MET FOR FY 2023-24
11	27%	45%
Direction of Change: 18%↓		

The National Public Health Laboratory (NPHL) provides clinical and public health services and serves as the National Reference and referral laboratory in disease surveillance, food safety and environmental health.

The National Blood Transfusion Service is responsible for the collection, testing and distribution of all blood and blood products for hospitals and healthcare facilities across the country ensuring the safety and adequacy of supplies. The donor recruitment team focuses on building a sustainable donor pool through education and outreach. An 18-percentage point decline in performance was observed for the period when compared to the FY 2023-24.

National Public Health Laboratory / National Blood Transfusion Services

Vision for Health 2030 Strategic Goal:	Safeguarding access to equitable, comprehensive and quality health care	
Strategic Outcome:	Modernized and efficient hospitals, specialized care centres and support services	
Focus	Health system resilience – improvement in laboratory services	
	• Enhanced biosafety and biosecurity practices in laboratories with bio-risk level determined	×
Select FY	 NPHL/NBTS Physical Infrastructure risk assessment completed 	~
2024-25 Operational Target	• Quality Management System implemented in public hospital laboratories with a one-star rating attained	×
	Revised Quality Assurance Plan implemented	~
	Eleven Environmental Health Laboratory tests with ISO 17025:2017 accreditation	~

FINANCIAL YEAR 2024 | 2025

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A key output for the laboratory focused on strengthening health system resilience through improvements in laboratory services. This involved enhancing biosafety and biosecurity practices to safeguard both personnel and the public from accidental or intentional exposure to biological agents, as well as ensuring the safe handling and storage of potentially hazardous materials.

An assessment of the physical and environmental infrastructure was conducted to identify issues that could impact worker safety and the quality of results. Notably, 88% of the revised Quality Assurance Plan was implemented, and 11 Environmental Health Laboratory tests received ISO 17025:2017 accreditation.



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Special Reports

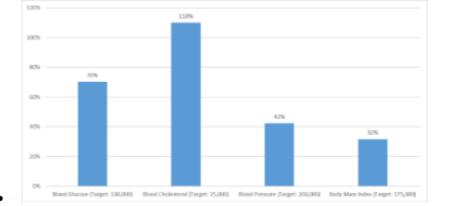
Know Your Numbers (KYN)

Vision for Health 2030 Strategic Goal:	Safeguarding access to Equitable, Comprehensive and Quality Healthcare
Strategic Outcome:	Improved population health status
Focus	Increased screening for common NCDs and linkage to care

Over the 21 months period from May 2023 – January 2025, the Know Your Numbers screening initiative made considerable efforts towards achieving the respective national and regional test-based targets set by the MOHW. Nationally, a total of 237,721 screenings tests have been conducted as of the end of January 2025. This represents 47.5% of the target (500,000 tests) set to be achieved over a period of 32 months.

Provisional data on the disaggregation of tests by sex indicates that a total of 204,104 screening tests were recorded with sex-disaggregated information, representing 85.8% of the total screening tests conducted to date (237,721). Of these 204,104 screenings, the majority were conducted among females (124,139 or 60.8%), while males accounted for 79,965 (39.2%).

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Figure 1. Test Targets Achieved for period May 2023 – January 2025

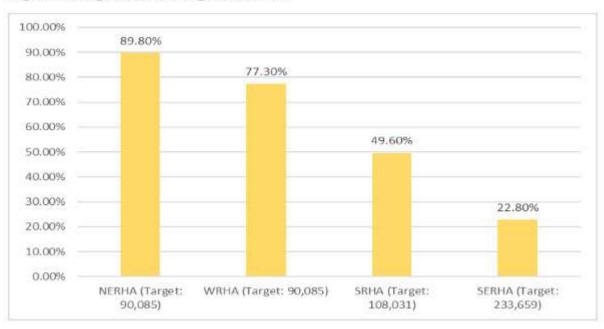
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FINANCIAL YEAR 2024 | 2025

At the regional level, the NERHA has made considerable progress towards achieving its regional test target (68,225 test) by conducting 61,286 tests (89.8% of its target) to date. The WRHA follows with 69,666 tests conducted to date, representing 77.3% of its target (90,085 tests). Notably, there has been slower progress made by the SRHA and the SERHA who have achieved 49.6% (target of 108,031) and 22.8% (target of 233,659) of their respective regional screening targets.



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Figure 2. Regional Test Targets Achieved

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As at the reporting period, twenty-three (23) major health screenings have been conducted across the parishes of Trelawny, Saint Elizabeth, Saint Catherine, Saint Ann, Saint James, Saint Thomas, Manchester, Westmoreland, Portland, Clarendon, Hanover, Saint Mary, Kingston and Saint Andrew.

50. PERFORMANCE HIGHLIGHTS REPORT

Operation Refresh

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Vision for Health 2030 Strategic Goal:	Making Reliable and Modern Infrastructure Available for Health Service Delivery
Strategic Outcome:	Provide and Maintain an Adequate Health Infrastructure to Ensure Efficient and Cost- Effective Service Delivery
Focus	Enhance Healthcare Delivery

In May 2024, the Ministry announced a renewed commitment to enhancing primary care by allocating one billion dollars to improve selected health centres across the island. This funding, to be utilized over an 18-month period, supports a programme titled "Operation Refresh," aimed at transforming the appearance, functionality, and overall experience at health centres nationwide.

Operation Refresh aims to standardize the look and feel of facilities by implementing cohesive signage and colour schemes. Improvements include upgrades to waiting areas and staff quarters, as well as the addition of sustainable features, such as solar panels, to promote energy efficiency. Enhancements to sanitary facilities were also made to ensure a more comfortable experience for patients and visitors. This initiative reflects the Ministry's vision of transforming healthcare perception and delivery for every Jamaican citizen. At the end of the FY 2024-25, the Buff Bay Health Centre, Port Morant Health Centre, and Arcadia Health Centre have been completed.

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FINANCIAL YEAR 2024 | 2025

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Strenthening Immunization Coverage

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Vision for Health 2030 Strategic Goal:	Safeguard access to Equitable, Comprehensive and Quality Healthcare
Strategic Outcome:	Improved population health status
Focus	Improving Jamaica's Immunization Coverage

Maintenance of High Vaccination Coverage Rates

All antigens except MMR1 and MMR2 met the coverage target of >/= 95% for both years. There was however commendable improvement of MMR coverage in 2024 over 2023, especially with MMR2:

Antigen	1	2022			2023			2024	
Target Population	Target Population	Doses Given	Coverage (%)	Target Population	Doses Given	Coverage (%)	Target Population	Doses Given	Coverage (%)
BCG	32294	31856	99	29439	28926	98	25946*	25231	97
Polio3		29506	506 91 29527 100	100		25771	99		
DTP3		30782	95		29426	100		25626	99
Hib3		30731	95		29465	100		25619	99
НерВЗ		30707	95		29429	100		25599	99
MMR1	33126	30067	91	32294	29920	93	29439	27581	94
MMR2		27460	83		28760 89		27493	93	

Table 3. Vaccination Coverage 2022, 2023 and 2024





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PERFORMANCE HIGHLIGHTS REPORT

Commemoration of the 22nd Vaccination Week in the Americas

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Jamaica celebrated the 22nd Vaccination Week in the Americas 2024 with sessions aimed at narrowing the immunization gaps not accomplished by the routine immunization activities. The main national event with the Launch Ceremony and Vax Fest Health Fair was held on April 24, 2024 at the HEART College of Construction Services (formerly Portmore HEART Academy) in Saint Catherine.

A total of 229 vaccination sessions across the 13 parishes were conducted targeting children, adolescents, the elderly and other vulnerable populations. There were church services, mounting of public displays and community sensitization sessions. Jamaica also partnered with the Senior Citizen Association, Early Childhood Commission, Social Development Commission and local community influencers to promote vaccination and strengthen community support for the immunization programme. A total of 8,447 people were vaccinated, and 15,209 doses of antigens were utilized. Additionally, several promotional items were distributed to all parishes for staff and clients.



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Protection Branch (also representing the Chief Medical Officer)

(Left to Right): Mr. Ian Stein – PAHO/WHO Representative to Jamaica, Bermuda, and the Cayman Islands; Mr. Dunstan E. Bryan – former Permanent Secretary, MOHW, and keynote speaker; Dr. Susan Wright – Assistant Regional Technical Director, South-East Regional Health Authority; The Hon. Alando Terrelonge, MP – State Minister in the Ministry of Foreign Affairs and Foreign Trade, and for East Central, Saint Catherine; Dr. Simone Spence – Director, Health Promotion & ۲

PERFORMANCE HIGHLIGHTS REPORT

Jamaica Wins the Henry C. Smith Award for the Most Improved Immunization Coverage 2023 – October 2024

(38th Caribbean EPI Managers Meeting, Grenada)



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The Henry C Smith Immunization Award was established in 2004 in honour of Mr Henry C Smith, the first PAHO-EPI (Expanded Programme on Immunization) Technical Officer for the Caribbean. The immunization trophy is awarded to the country/territory that has made the greatest improvement in immunization rates and is presented at the end of the EPI Managers' Meeting each year.

The award was received by Jamaica, which achieved 100% for BCG (for Tuberculosis protection), Polio, Diphtheria-Pertussis-Tetanus (DPT), Hepatitis B and H. Influenzae type b coverage on infants 0-11 months old and 92 and 89% coverage for MMR 1st and 2nd dose respectively, in 2023.

Dissemination of the Updated Expanded Programme on Immunization (EPI) Field Guide

The EPI has made significant strides in enhancing Jamaica's defence against vaccinepreventable diseases through a workshop held on December 16-17, 2024, which was aimed at disseminating the EPI Field Guide for Health Workers. The event trained 106 health workers, providing essential resources and tools to address current challenges in achieving broader vaccine coverage.

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FINANCIAL YEAR 2024 | 2025



Key highlights included the introduction of the updated EPI Field Guide, which offers practical guidance on immunization procedures and cold chain management. The workshop emphasized the importance of a life course approach to vaccination, addressing barriers related to gender, age, and culture, and integrating vaccination services with other health services. Supported by international partners, the initiative aims to enhance public health outcomes by ensuring equitable access to vaccines and improving the effectiveness of immunization efforts.

Interactive exercises during the session focused on applying surveillance concepts to strengthen the capacity to detect and respond to vaccine-related issues. Ongoing community engagement and public education activities were also discussed to combat misinformation and reduce vaccine hesitancy. The workshop represents a crucial step in equipping health workers to meet emerging immunization challenges, thereby contributing to improved public health outcomes and global immunization goals.

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Reports from Entities

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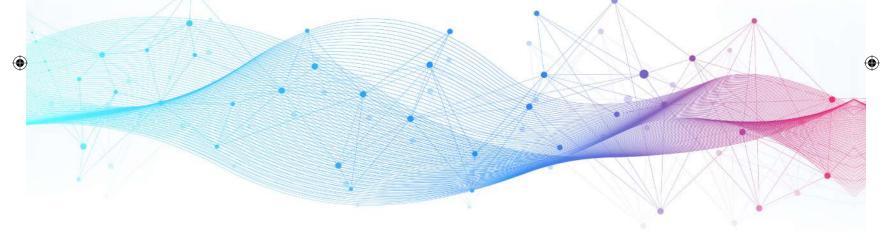
National Healthcare Enhancement Foundation

The National Healthcare Enhancement Foundation (NHEF) was established as a registered non-profit with the Companies Office of Jamaica in Feb 2022 and received its initial charity status approval in Sep 2022. A nine (9) member Board with a diversified background (lawyers, businesspersons, doctor) is in place to strengthen the governance and leadership of the organization. Whilst the organization was established in 2022, its official budget funding via subvention from the MOHW began in 2023 and its staffing took place in 2024.

The NHEF strategically emphasises:

- Strengthening systems of health.
- Building the foundation for healthy lifestyle.
- Strengthening health promotion, education and communication.
- Strengthening connection & collaboration with stakeholders.
- Strengthening organizational capacity, governance, leadership & operation efficiency and effectiveness.

For the reference period, the NHEF received approximately J\$559M in donations.



Adopt-A-Clinic

The Adopt-A-Clinic Programme continues to be strong with 55 health centres or 55% adopted to-date of a target of 100 adoptions and a donor commitment of J\$220M or 71% of a target of J\$300M. Of the J\$220M commitment received to-date, approximately 62% or J\$136M in cash and kind has been received. The support of the Diaspora to the Adopt-A-Clinic Programme continues to be strong with 33 or 60% adoption by Diaspora (\$91M Commitment) and 22 or 40% by Local Private Sector (\$129M Commitment).

As of Mar 31, 2025, J\$107M has been used to enhance the adopted health centres with the procurement of much needed medical and facility equipment (autoclaves, examination lamps, blood pressure machines, dental equipment, AC units, washing machines, microwave, etc). Every parish has benefited from having at least two (2) health centre adopted with the top four (4) parishes Kingston, St Catherine, Westmoreland and St James having 7, 7, 6 and 5 adoptions respectively In FY 2024 - 25 the Programme received \$22.5M in cash (\$10M) and in-kind (\$12.5M) donations to support adopted health centres.

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58 — PERFORMANCE HIGHLIGHTS REPORT

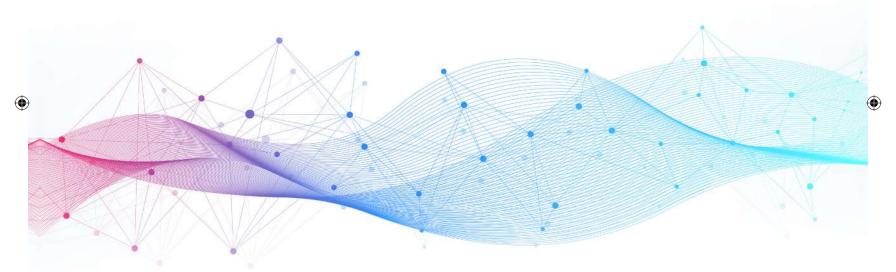
Volunteer Overseas Medical Missions

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The Foundation processed the credentialing for 25 medical missions in FY 2024 -25 with an estimated value of \$246M. The below three (3) inaugural missions in FY24/25 represents the Foundation's plan to proactively increase the number of surgical missions to address surgery backlog and clinical areas of high need to include children cardiac treatment, neuro-surgery and women's health to address hysterectomy and fibroid issues:

- Northwell Centre for Global Health (Women's health Hysterectomy; 12 women benefited).
- Memorial Healthcare System (Neurosurgery; 5 patients benefited).
- Gift of Life (Cardiac Electrophysiology, 10 children benefited).

Progress was made during the reference period to enhance the application and credentialing process of Overseas Medical Missions to include the removal of the cost of per person registration fees paid to the professional councils and the Customs clearance cost of the importation of clinical supplies and equipment for the conduct of missions. These costs are now borne by the Foundation.



Donations of Goods

The total in-kind facilitated and mobilized donations of goods to the public health sector in FY24/25 totaled \$303M to beneficiaries as follows:

- \$172M in in-kind donation of medical equipment & supplies to benefit 17 hospitals from the four Regional Health Authorities.
- \$76M in in-kind donation from Emergency Relief and Health Fairs to benefit communities affected by hurricane Beryl.
- \$39M in facilitation of in-kind donation of medical equipment and supplies to Ministry, Department and Agencies (MDAs).
- \$16M in in-kind donation of medical equipment and supplies to benefit 3 health centres affected by hurricane Beryl (Newell, Barbary Hall, Southfield).



Emergency Relief

In collaboration with Consul General Oliver Mair, Miami the NHEF engaged with international relief entity, Global Empowerment Mission (GEM), to facilitate airlift of supplies valued at \$23.4M within 48hrs of the aftermath of hurricane Beryl the first relief support to impacted communities in St Elizabeth, Clarendon and Manchester to include:

- 1,700 emergency/care packages serving 3,400 persons from 19 communities.
- Provision of 15 generators to support essential services establishments in communities to include 11 restaurants; 2 police stations and 2 food distribution entities.
- Provision and distribution of 150 tarpaulins to community members.

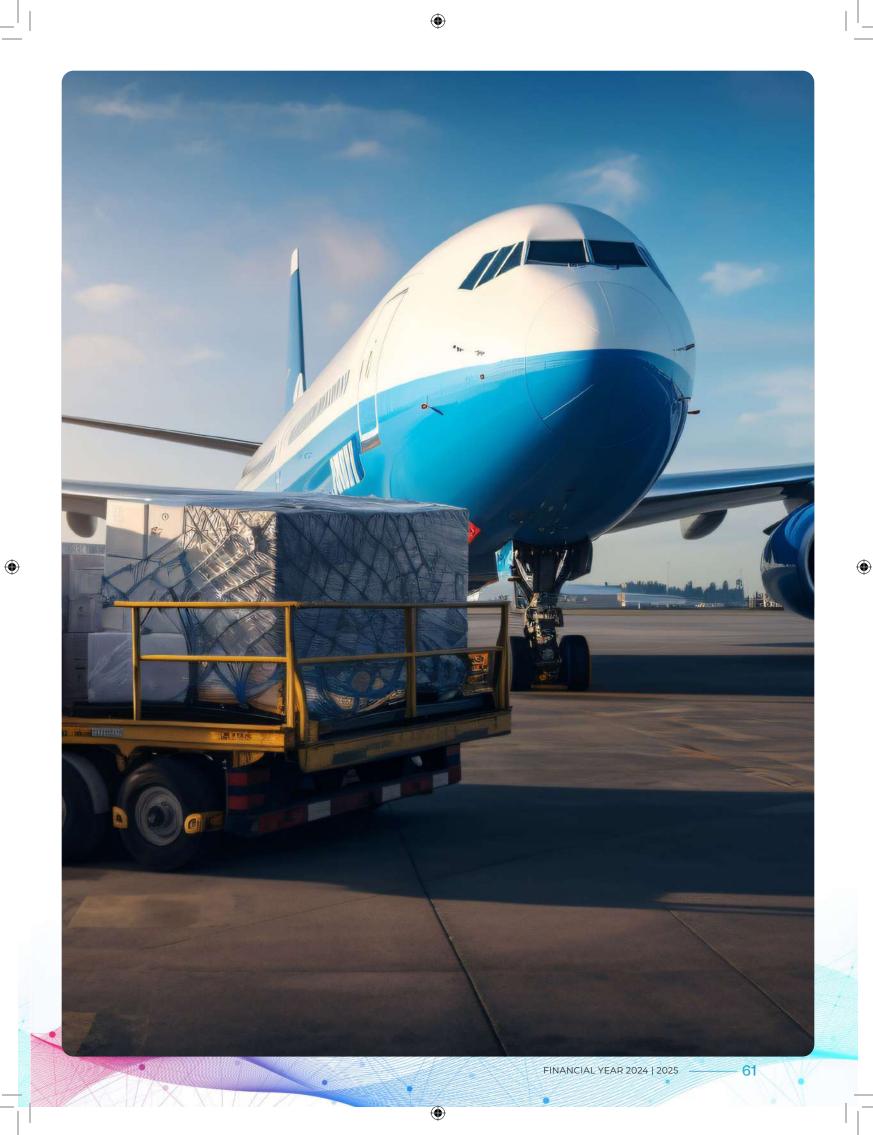
In the immediate aftermath of hurricane Beryl, the NHEF engaged with relief NGO International Medical Corp (IMC) to provide support to the hard-hit Southfield Health District where its three health centres (Newell, Southfield, and Bellevue) had to be shuttered. The support provided totaled \$31M and entailed the following:

- Retrofitting of Barbary Hall Community Centre as an alternative site for the shuttered Newell Health Centre (\$892K).
- Provision of clinical and facility equipment for the Newell, Bellevue and Southfield Health centres to replace the hurricane damaged equipment (\$26.4M).

- Provision of relief/care packages to the communities of the Southfield District (\$3.4M).
- Provision of mattresses for the Black River Hospital (\$413K).

PERFORMANCE HIGHLIGHTS REPORT

60



NORTH- EAST REGIONAL HEALTH AUTHORITY

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The North-East Regional Health Authority (NERHA) was born out of the National Health Service Act in 1997 and the Government of Jamaica's Health Reform Programme which saw the decentralizing of health service delivery. NERHA comprises the parishes of Saint Ann, Saint Mary and Portland, a geographic area of 1018 sq. miles (2637 km2), and a population of approximately 356, 000. It constitutes 13.8% of the general population and is the smallest of the 4 health regions in Jamaica.

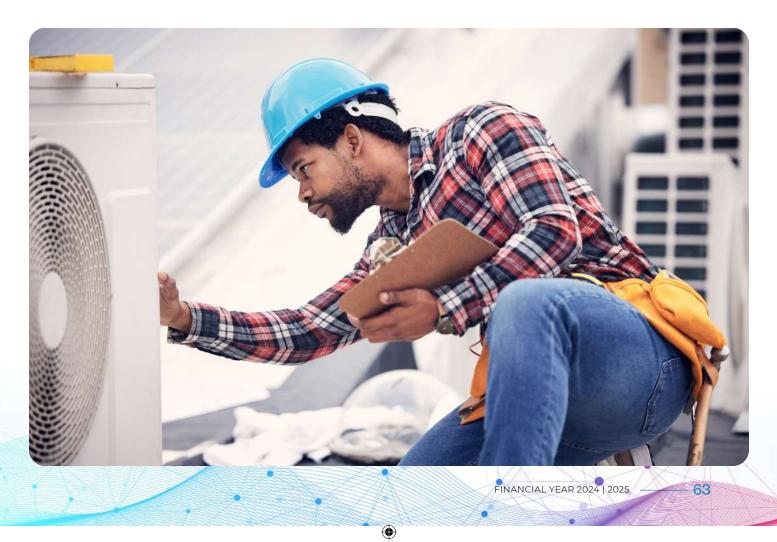
The North-East health region has a care delivery network formed by 73 health centres, four (4) general hospitals, two (2) community hospitals and 1400 health and administrative workers.

Projects, Operations and Maintenance

The North-East Regional Health Authority (NERHA) has made significant strides in advancing healthcare infrastructure and services within the region from April 2024-March 2025. Through strategic investments and dedicated efforts, NERHA has successfully undertaken multiple projects aimed at enhancing medical facilities, improving patient care and strengthening the overall healthcare system. This section outlines the key achievements during the captured period in relation to major upgrades, renovations, and new constructions that have contributed to the wellbeing of the communities within the region.



ltem	Programme/Item	Cost (\$)	Status
1.	Supply, delivery, installation and commissioning of UPS systems for radiology units	46,804,547.72	Completed
2.	Supply and retrofitting of 40ft containerized storage solution for Regional Office	4,797,440.00	Completed
3.	Supply, delivery, installation of commissioning of central AC units for physiotherapy and laboratory building at Annotto Bay Hospital (NHF Funded)	81,000,000.00	In progress
4.	Supply, delivery, installation of commissioning of central AC units for operating theatres at Saint Ann's Bay Regional Hospital	25,119,484.18	Awaiting commissioning
5.	Renovations of office to accommodate Nursing Administration at Saint Ann's Bay Regional Hospital	5,636,000.00	Completed
6.	Construction of new Belfield Community Health Centre	101,817,598.00	In progress



ltem	Programme/Item	Cost (\$)	Status
7.	Supply and delivery of equipment and furniture for new Belfield Community Health Centre	20,000,000.00	In progress
8.	Renovation works to facilitate installation of dental x-ray unit at Saint Ann's Bay Health Centre	5,738,100.00	Completed
9.	Construction of Special Care Nursery and renovations to paediatric ward at Annotto Bay Hospital	130,987,233.80	Completed
10.	Renovation works at Oxford Community Health Centre	43,843,342.00	In progress
11.	Renovation works at Islington Community Health Centre	39,463,460.35	In progress
12.	Renovation works at Bamboo Community Health Centre inclusive of new furniture and equipment	60,000,000.00	In progress
13.	Construction and equipping of new Saint Ann Health Department building	400,000,000.00	In progress
14.	Renovation of the former Brown's Town Country Club Building to provide health centre services to make way for the construction of a new district health centre in Brown's Town	84,000,000.00	Completed

PERFORMANCE HIGHLIGHTS REPORT

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Item	Programme/Item	Cost (\$)	Status
15.	Renovation and expansion work to several buildings and service areas at Annotto Bay District Health Centre	120,000,000.00	Completed
16.	Construction and equipping of Child and Adolescent Health Clinic at Annotto Bay District Health Centre	20,022,023.30	Completed
17.	Supply, Installation and Commissioning of Stand-By Generator at Claremont Centre of Excellence	13,384,074.71	Completed
18.	Construction and equipping of Buff Bay District Health Centre	350,000,000.00	Completed
19.	Supply and delivery of modified containers for electronic health records at Saint Ann's Bay Regional Hospital	14,247,246.50	Completed
20.	Renovation works at operating theatre suites 1&2 at Saint Ann's Bay Regional Hospital	90,000,000	In progress
21.	Phase 2 Construction and Equipping of the Regional Health Facilities Maintenance Unit	68,220,963.00	Completed
22.	Renovation works to offices spaces at the Regional Office for ICT, Audit, Procurement, Finance and Technical Departments	7,734,420.00	Completed
23.	Supply, delivery, installation and commissioning of digital Xray Unit at Port Maria Hospital inclusive of a service contract	55,517,170.00	Completed
24.	Renovation works to radiology department and laboratory at Port Maria Hospital	13,085,263.50	Completed

FINANCIAL YEAR 2024 | 2025

ltem	Programme/Item	Cost (\$)	Status
25.	Supply, delivery, installation and commissioning of digital Xray Unit at Saint Ann's Bay Regional Hospital inclusive of a service contract	61,031,170.00	In progress
26.	Purchase of four (4) Toyota Hiace buses to be retrofitted into ambulances	39,881,779.20	Vehicles received
27.	Supply, installation and commissioning of surgical lights for Port Antonio and Saint Ann's Bay Regional Hospitals	4,470,275.40	Awaiting delivery
28.	Hurricane Beryl repairs at Port Antonio and Saint Ann's Bay Regional Hospital and Saint Ann Health Department	50,000,000.00	Completed
29.	Electrical upgrade to the Annotto Bay Hospital	419,329,344.99	In progress
30.	Supply, installation and commissioning of surgical beds for Port Antonio and Annotto Bay hospitals	12,000,000.00	Completed
31.	Supply, installation and commissioning of anaesthetic machines for Port Antonio and Annotto Bay Hospitals	12,183,111.50	Completed
32.	Civil works renovation and supply, installation and commissioning of waste disposal unit at Saint Ann's Bay Regional Hospital	59,765,500.00	In progress
33.	Supply, installation and commissioning of morgue refrigerator at Saint Ann's Bay Regional Hospital	16,110,378.75	Completed
34.	Supply, installation and commissioning of sterilizer at Saint Ann's Bay Regional Hospital	20,122,500.90	Completed

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Non-Communicable Diseases (NCDs)

Key Achievements:

1.Two (2) out of three (3) facilities (66%) scored over the target of 80% in the SLA target for compliance with National Guidelines for Diabetes/Hypertension Clinical Management: Runaway Bay Health Centre-88.2% and Gayle Health Centre-81.8%.

2.Two (2) out of three (3) facilities (Buff Bay and Brown's Town Health Centres) scored over 80% in the SLA target for compliance with National Guidelines for Cervical Cancer Screening with 90% and 84% respectively.

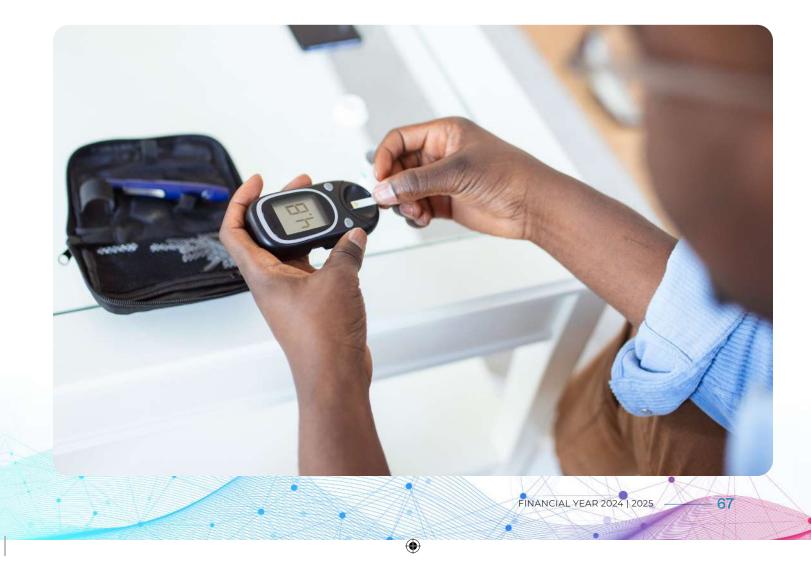
3.Reintegration of cervical cancer screening in secondary care at Port. Antonio Hospital in 2024.

4.0ver 2,000 persons were trained on NERHA's 4th Sunday virtual platform for Continuing Medical Education (CMEs) related to NCDs in 2024.

5.A Regional NCD Surveillance Officer joined the team in 2024 January.

6.The NERHA was acknowledged nationally as the best-performing Region for the Know Your Numbers (KYN) programme, having surpassed key coverage targets for the top three (3) categories of non-communicable diseases.

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Maternal and Child Health Outcomes

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Key Achievements:

1.Attainment for a second time of the Professor Graham Serjeant Award for Highest Sickle Cell Newborn Screening Coverage in Jamaica for the year 2023, on the 18th of June 2024.

2.Conducted the 4th Regional Maternal & Perinatal Health Programme Review on the 30th of September, which is an integrated approach for improving the quality of maternal and perinatal health across the Region.

3.Attainment of an award in the category "The Most Perinatal Reviews" at the 4th National Annual Perinatal Review on November 5, 2024.

4.Successful implementation of a training of a cohort of one hundred and five (105) stakeholders of Early Childhood Institutions (ECIs) across the region as Immunization Ambassadors to support the goal of the immunization programme and enable greater compliance of ECIs to the Immunization Regulation of 1986.

5.Attainment of at least 95% coverage of the target for all seven (7) antigens of the EPI, this includes Bacillus Calmette Guerin (BCG), Diphtheria Pertussis Tetanus (DPT), Haemophilus Influenza B (HiB) and Hepatitis B (HepB), and first and second doses for Measles, Mumps and Rubella (MMR).

6.Successful implementation of the Regional Locate and Vaccinate Initiative to identify defaulters resulted in a yield of 93.8% coverage of the target for outstanding antigens.

7.An annual regional review of the EPI was conducted that evaluated the implementation of strategies and accounted for a detailed analysis of coverage gaps aimed at strengthening the management practices involved in the provision of EPI services.

8.Attainment of the highest Rheumatic Fever Prophylaxis Coverage of 85% and a compliance rate of 74%.

South East Regional Health Authority

Since 1997, the South East Regional Health Authority became responsible for the delivery of healthcare services to the residents of Saint Catherine, Saint Thomas, Kingston and Saint Andrew. SERHA serves approximately 50% of the population of Jamaica, manages three (3) Parish Health Departments and ten (10) major hospitals. The Authority has made significant strides in advancing public health across key programme areas, strengthening healthcare delivery and improving health outcomes within the southeast region.



Non-Communicable Diseases

The NCD programme focused on prevention, early detection, and management to reduce the burden of chronic illnesses. Key indicators were managed and monitored for hypertension and diabetes management, injury surveillance, and chronic disease screenings.

Hypertension and Diabetes Clinical Management:

Hypertension Control: 40% (Target: 30%): Successfully achieved a 40% hypertension control rate, surpassing the target of 30% by 10 percentage points. This improvement reflects the effective implementation of evidence-based treatment protocols, enhanced patient education, and strengthened follow-up mechanisms. Key contributing factors include increased access to antihypertensive medications and improved patient adherence through counselling initiatives.

Diabetes Control: 33% (Target: 30%): Achieved a 33% diabetes control rate, exceeding the target of 30% and demonstrating steady progress in glycaemic management strategies. This success is attributed to comprehensive patient-centred diabetes care programmes, the use of continuous glucose monitoring (CGM) systems, structured lifestyle interventions, and increased patient engagement in self-management.

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Mental Health Programme: 40% (Target: 30%): Successfully achieved a 40% hypertension control rate, surpassing the target of 30% by 10 percentage points. This improvement reflects the effective implementation of evidence-based treatment protocols, enhanced patient education, and strengthened follow-up mechanisms. Key contributing factors include increased access to antihypertensive medications and improved patient adherence through counselling initiatives.

Diabetes Control: 33% (Target: 30%): Achieved a 33% diabetes control rate, exceeding the target of 30% and demonstrating steady progress in glycaemic management strategies. This success is attributed to comprehensive patient-centred diabetes care programmes, the use of continuous glucose monitoring (CGM) systems, structured lifestyle interventions, and increased patient engagement in self-management.

The Mental Health programme has expanded community-based services and interventions to enhance accessibility and support. During the period, 896 educational sessions were conducted by the community mental health team, which exceeded the target of 48 sessions per month for the Region and was 15% more than for the same period in FY 2023-24. Presentations were delivered virtually and face to face at health fairs, to community and church groups, teachers and students in schools, workplaces, patients attending curative, maternal and child health, and mental health clinics.

The Region also conducted training with Primary and Secondary Care non-mental health specialist medical workers in Primary and Secondary care in the mental health Gap Action Programme. Through collaborative efforts, MOHW, along with the SERHA, partnered with the Jamaica Psychiatric Association in raising awareness, health education, and mental illness prevention during commemorative days for Child's Month, Parenting Week, Mental Health Week, and World Mental Health Day.

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Maternal and Child Health

Maternal and Child Health initiatives have prioritized improved antenatal, postnatal, and paediatric care to ensure healthier outcomes for mothers and infants.

Expanded Programme on Immunization (EPI): Annual EPI coverage for childhood vaccines ranged from 83% to 91.2% for the various antigens based on projected live births. When analysed using preliminary live births from birthing facilities, coverage improved to 85.4 – 99.1%. A total of 751 dropouts were re-engaged and vaccinated throughout the reporting period, equating to 85.2%, exceeding the MOHW SLA target of 80%.

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Maternal Health: In 2024, the maternal mortality ratio was 165 per 100,000 live births (preliminary data), which remains above the SDG target of 70 per 100,000.



Other Key Milestones in Health Service Delivery

Bustamante Hospital for Children:

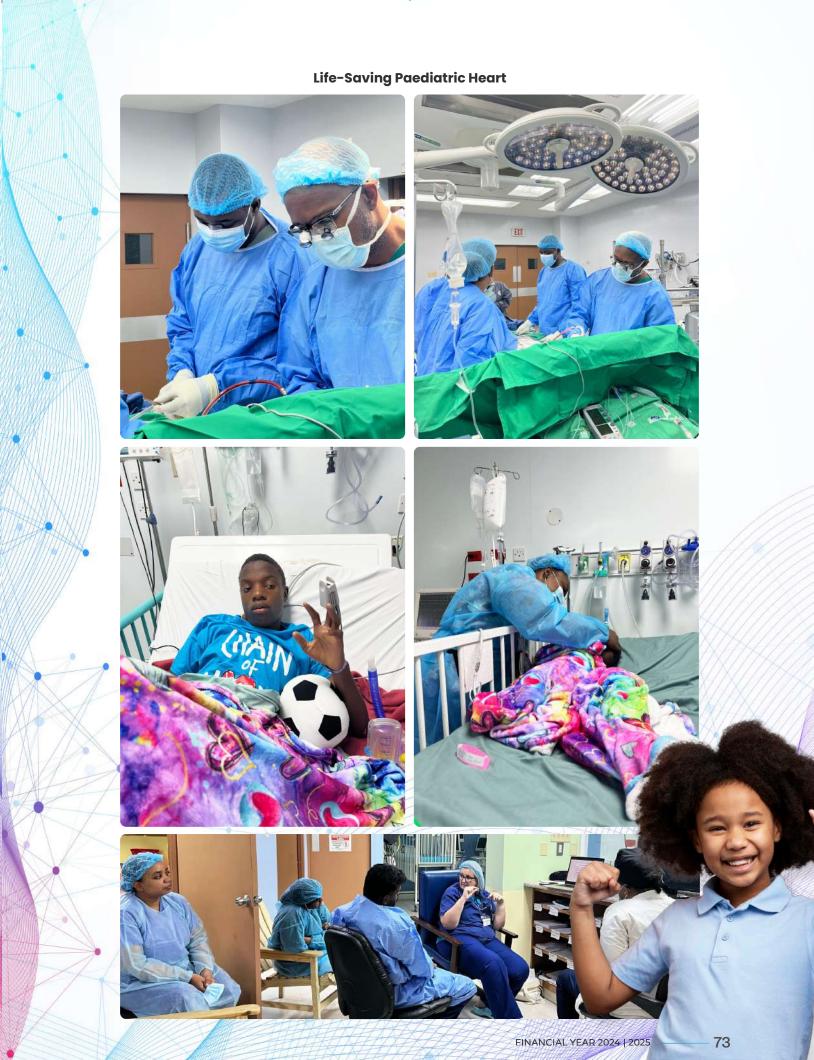


Paediatric surgery has reached a significant milestone at the Bustamante Hospital for Children (BHC) with the successful completion of its first laparoscopic procedures. This achievement marks a transformative advancement in surgical care for infants, children, and adolescents, introducing minimally invasive techniques that enhance recovery and improve patient outcomes. The hospital recently performed its first laparoscopic appendectomy and cholecystectomy (gallbladder removal), signalling a new era of advanced paediatric surgical care in Jamaica.

Fourteen children have been given a second chance at life thanks to a remarkable medical mission at the Bustamante Hospital for Children. From January 17–21, 2025, a team led by renowned cardiac surgeon Prof. Jeffrey Jacobs, along with over 50 dedicated volunteers, performed 14 life-saving open-heart surgeries.

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PERFORMANCE HIGHLIGHTS REPORT



In February2025, the BHC received a significant enhancement to its paediatric cardiac care services through a donation of critical medical equipment from Chain of Hope UK and its partners. The CEO of Chain of Hope UK officially handed over one (1) of 15 syringe pumps, valued at \$30,000. This donation is part of a larger contribution, with Chain of Hope UK and its partners providing an additional \$50,000 worth of medical equipment to strengthen the hospital's capacity for life-saving cardiac interventions.

Maternal and Child Health Outcomes

The Port Morant Health Centre, a Type II facility, recently underwent a significant upgrade at a cost of JA\$28 million, funded by the National Health Fund under the 'Operation Refresh' programme. The scope of work included retiling, repainting, replacement of fixtures and fittings, and roof repairs. External improvements featured the construction of a patient waiting area, landscaping, and paving. This upgraded facility now serves 34,000 residents in the communities of Land Top, Pear Tree River, Leith Hall, and Pamphret. The services offered include a child health clinic, medical clinic, nutrition counselling, environmental health services, pharmacy, postnatal care, family planning, pap smear screenings, and antenatal services.





Renovations to the Port Morant Health Centre

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The Arcadia Health Centre, a Type I facility, has been upgraded under 'Operation Refresh' at a cost of JA\$6,100,000 million. The renovation included repainting, retiling, and changing interior fixtures and fittings. Termite treatment, fence repairs, and de-bushing were also done to enhance care for 200 residents. The services offered are child and maternal health services, pap-smear, immunization, and family planning.



Renovation to the Arcadia Health Centre

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KPH Radiology Departmnt Upgraded with New CT Scan Machine and Specialist Training

The Radiology Department at Kingston Public Hospital (KPH) has been significantly enhanced with the acquisition of a brand-new, state-of-the-art CT scan machine.

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National Chest Hospital Upgrade Projects

The National Chest Hospital completed two (2) major projects at a cost of over JA\$10 million. The first project involved the paving works to provide a stable platform for the movement of heavy vehicles, particularly for the delivery of medical oxygen. This was done at a cost of JA\$4,678,220.00 million, funded by SERHA. The second project involved the construction of a concrete structure to accommodate a new air compression and vacuum system to serve the hospital.

The National Chest Hospital completed two (2) major projects at a cost of over JA\$10 million. The first project involved the paving works to provide a stable platform for the movement of heavy vehicles, particularly for the delivery of medical oxygen. This was done at a cost of JA\$4,678,220.00 million, funded by SERHA. The second project involved the construction of a concrete structure to accommodate a new air compression and vacuum system to serve the hospital.

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Ward 5 Renovation Project at Bustamante Hospital for Children

The Ward 5 Renovation Project at Bustamante Hospital for Children has been successfully completed. This upgraded facility, with a capacity of 30 beds, is designed to provide highquality care for medical patients in a modern and comfortable environment. The renovation, completed at a cost of JMD \$4,744,781, reflects the hospital's ongoing commitment to enhancing paediatric healthcare and improving patient outcomes.



The Princess Margaret Hospital (PMH) in Saint Thomas is poised for a significant transformation with a \$51.5 million JMD renovation and expansion project. This critical investment, slated for completion in the 2025/26 fiscal year, will enhance the hospital's infrastructure and service delivery, ultimately improving healthcare access for residents of Saint Thomas. One of the most impactful upgrades is the establishment of an on-site morgue, which will allow the hospital to manage its own mortuary services. This development is expected to reduce operational costs, streamline processes, and provide grieving families with a more dignified and efficient experience during difficult times.





SERHA and Lasco Distributors Limited have signed a major contract for supplying laboratory supplies, reagents, and equipment to five (5) health facilities including Bustamante Hospital, Princess Margaret Hospital, Linstead Hospital, Spanish Town Hospital, and the Kingston and Saint Andrew Health Department at a cost of over \$9million. The agreement was officially signed on Wednesday, August 27, 2024, at SERHA'S Corporate Office Conference Room.

Ten State-of-the-Art Anaesthetic Machines

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SERHA has signed a contract with IRAD Medical Supplies Limited for the supply, delivery, installation, and commissioning of 10 state-of-the-art anaesthetic machines across key hospitals in its network with a total contract value exceeding JMD \$133 million.



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PERFORMANCE HIGHLIGHTS REPORT

WESTERN REGIONAL HEALTH AUTHORITY (WRHA)

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The Western Regional Health Authority (WRHA) is a statutory body of the Ministry of Health. It is one of the four (4) Regional Health Authorities established by the National Health Services Act of 1997 as a result of the health sector reform.

The WRHA provides health services to 17.5% (491,600) of the population of Jamaica (Saint James, Trelawny, Westmoreland and Hanover) and is committed to providing exceptional healthcare services to our communities while striving for continuous improvement and innovation.

Investments

With an investment of \$1.16 billion in the WRHA during the FY, significant improvements have been made to hospital infrastructure. This funding has facilitated the introduction of advanced biomedical technology, the modernization of fleet operations, and the enhancement of electromechanical systems, all aimed at improving healthcare delivery across the region.

Biomedical Equipment Achievements

The WRHA made significant investments in biomedical technology to enhance diagnostic capabilities and improve patient care. A total of 83 biomedical equipment units were acquired, installed, and commissioned across hospitals and clinics. The estimated value of this capital investment is \$626,708,089.12.

Key Achievements:

1. Installation of 6 Digital Radiographic Units at Cornwall Regional (2), Falmouth (2), Savanna-La-Mar (1), and Noel Holmes (1) Hospitals providing advanced imaging services, reduced patient waiting times, and enhancing multidisciplinary approach to patient care enabling faster processing time.

2. Procurement and installation of 8 Dental X-Ray Systems across primary healthcare facilities, expanding diagnostic capabilities.

3. Implementation of a new Central Autoclave system in the Central Sterile Supply Department (CSSD) to enhance sterilization capacity at Falmouth Hospital.

4. Installation of 12 ECG Machines across hospitals to improve cardiac diagnostics.

5. Deployment of 7 Defibrillators in emergency units to support rapid emergency response.

6. Acquisition of 4 Orthopaedic Drills to support surgical procedures at CRH and SPGH.

7. Installation of 4 Dental Suction Units and Compressors in dental care facilities to modernize operations.

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8. Installation of new CT machine at CRH, which will allow for faster, more accurate diagnostics for critical and emergency cases, reduced referrals to external facilities. A total investment of \$137,798,965.72 to improve access to CT imaging within WRHA. Awaiting training schedule from the supplier (Bogues) for Biomed and applications to facilitate the quality assurance by the Medical Physicist to place the unit into service.

9. CT and Digital X-Ray units procured with 3-year service contracts to ensure sustainability and long-term maintenance.

10. \$78.1M in funding requested from CHASE to procure additional medical equipment.

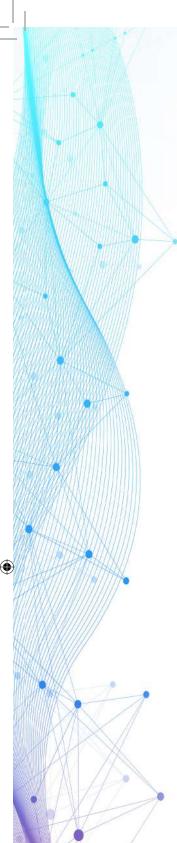


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Electromechanical Infrastructure Upgrades

To ensure reliable power supply, climate control, and mechanical support, WRHA implemented major electromechanical upgrades across several facilities, improving infrastructure resilience and functionality. The total electromechanical investment of over \$154,077,079.98 increased operational uptime, improved surgical readiness, and compliance with best practices.

80 — PERFORMANCE HIGHLIGHTS REPORT



Key Achievements:

1.Installation of five (5) major generators, including an 850KVA unit at Savanna-La-Mar Hospital (\$59,503,659.98), ensuring uninterrupted power supply. The generator at SPGH was commissioned into use ensure a more reliable standby power for the only Type B hospital in the Region.

2.New 50KVA generators installed at Maroon Town Health Centre, Falmouth Health Centre, and Warsop Health Centre to improve service delivery in rural locations. The units were commissioned into use.

3.Relocation of HVAC systems in major hospitals (FPGH), ensuring optimal climate control in patient care areas. This ensures that the roof repairs were addressed for improvement in OT time and usage for surgeries. This enabled greater access to Operating Theatres to carry out live saving surgeries.

4.Installation of 10HP Air Compressors with 120-gallon tanks at Noel Holmes and Falmouth hospitals (\$2,762,070.00) to support medical gas systems.

5.Purchase request for Installation of a 210lbs Barrier Washer at Savanna-La-Mar Hospital (\$38,456,000) to modernize laundry services. Awaiting delivery and installation which is expected in the new financial year. Supplier requesting funds.

6.Installation and commissioning of a 110lbs. Barrier Washer at Noel Holmes (\$28,462,500) and Falmouth (\$24,892,900.00) Hospitals to modernize laundry services with service contract.

7.Preventative maintenance programmes expanded for standby generators and elevator systems to ensure maximum uptime. Only regular elevator servicing was performed during the period.

8.Service contracts renewed for critical electromechanical equipment, including air conditioning systems CRH OT. Boilers, and power backup solutions contracts to be renewed.

9.The successful installation and commissioning of 17 vaccine generators and 3 vaccine refrigerators across designated health centres to bolster cold chain reliability and vaccine storage.

10.Replaced and installed over 11 air conditioning units across key healthcare facilities to improve patient comfort, climate control in critical care areas, and support optimal working conditions for medical equipment



UNIVERSITY HOSPITAL OF THE WEST INDIES (UHWI)

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The University Hospital of the West Indies (UHWI) is a Type A tertiary hospital, which has continuously expanded its services to meet the evolving health needs of the population. The hospital employs cutting-edge technology to support excellence in teaching, research, and patient care.

During the FY 2024-25 period, UHWI achieved significant advancements in infrastructure modernization, clinical care, staff development, and community engagement. Key accomplishments included the completion of 18 capital projects, the inaugural Neurovascular Medical Mission, and the celebration of NICU Awareness Month, all aligning with UHWI's strategic vision of enhancing healthcare delivery.

In terms of infrastructure, UHWI successfully completed several renovations, including ABC Hall A and the new car park. The hospital also finished a solar energy project, renovated the main kitchen through NHF funding, and upgraded various facilities, including the Occupational Team's accommodations. Electrical works were completed in Operating Theatres 1-5.





National Health Fund

The National Health Fund (NHF) is a statutory organization with its Board of Management appointed by the Minister of Health and Wellness. The NHF was, established in 2003 by the National Health Fund Act. It is committed to improving the health outcomes of the population in Jamaica by providing improved access to medicine and health care in general.

Drug Serv Pharmacies

The NHF has consistently demonstrated its commitment to enhancing access to pharmaceuticals in Jamaica. Drug Serv pharmacies, managed by the NHF, are located in public hospitals and health centres. During the financial year 2024/25, Drug Serv Pharmacies (public pharmacies) filled a total of 2,048,564 prescriptions from April to December 2024, compared to 2,800,000 prescriptions during the previous financial year (April 2023 – March 2024). This service enabled over 700,000 Jamaican residents to access essential medications.

Furthermore, the average waiting time in pharmacies was successfully reduced from 36 minutes to 31 minutes, reflecting the NHF's dedication to improving service quality and customer satisfaction. In the first quarter of the financial year, the NHF introduced Multi-Month Dispensing for outpatient prescriptions, aiming to decrease the frequency of patient visits to Drug Serv Pharmacies. This initiative not only streamlines access to medications but also enhances patient convenience and promotes adherence to treatment regimens by providing a larger supply of medications at once. In September 2024, a total of 32,359 prescriptions (17.2%) were dispensed as multi-month supplies, and by December 2024, this figure slightly decreased to 29,795 prescriptions (16.7%).

NHF Card Programme

NHF The Card Programme processed 3,694,674 claims and provided over \$7.5 billion in subsidies for cardholders, with the average subsidy rate increasing to 50.47% of the cost of medications. The programme welcomed 29,083 new beneficiaries, raising the total to 351,861 active participants. Additionally, modifications to the NHF and Jamaica Drug for the Elderly Programme (JADEP) Drug Lists were implemented, which included adjustments to drug limits, label names, and the introduction of new Active Pharmaceutical Ingredients (APIs). Notably, subsidies for over 600 drug items used to treat 13 of the 22 conditions covered under the NHF Card were increased in October 2024.

The NHF also expanded screening benefits with the introduction of subsidies for Pap Smear tests. Women aged 21 to 64 are now eligible for a \$1,300 subsidy for Pap Smear tests, promoting early detection of cervical cancer. Low-risk women can access this subsidy every three (3) years, while highrisk women can utilize it annually. In June 2024, the subsidy of \$1,600 for the Prostate-Specific Antigen (PSA) test was extended to all Jamaican men aged 40 to 75, allowing them to access this benefit annually to support early detection of prostate cancer.

Grants and Special Projects

In April 2024, the NHF received a USD \$3 million grant from Direct Relief to enhance Jamaica's climate resilience. This funding will facilitate the installation of a large solar energy system at the Pharmaceutical Distribution Facility, reinforcing the ongoing partnership aimed at strengthening the country's healthcare systems and infrastructure against natural disasters and emergencies.

84 PERFORMANCE HIGHLIGHTS REPORT

The NHF approved JMD \$1,407,982,249 under its Institutional Benefits Programme, further supporting healthcare initiatives.

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Additionally, the NHF has donated an artificial intelligence-powered ultrasound machine to the Foetal Diagnosis & Therapy Unit at the UHWI. Valued at USD \$96,356 (JMD \$15 million), the ultrasound machine was officially unveiled on December 10, 2024. This innovative technology enhances efficiency, provides superior imaging, and ensures greater diagnostic accuracy, empowering the hospital to deliver a higher standard of care for pregnant women and facilitating earlier detection of conditions requiring life-saving interventions.

Moreover, the annual allocation for the NHF EduCare Grant, designed to support students pursuing healthcare studies, has been increased from JMD \$15 million to JMD \$25 million. Launched in 2020, the EduCare Grant aims to alleviate the financial burden faced by aspiring health professionals, enabling them to complete their education and contribute significantly to healthcare delivery in Jamaica. To date, the NHF has invested over JMD \$95 million in scholarships, benefiting more than 200 students.

On November 29, 2024, the NHF supported the construction of a Special Care Nursery and the renovation of the Paediatric Ward to the Annotto Bay Hospital in Saint Mary. This JMD \$266 million investment reflects the government's commitment to improving healthcare facilities in rural areas.



Customer Service

In April 2024, the NHF delivered 50 braille-printed brochures on how to apply for the NHF Card to the Jamaica Society for the Blind (JSB) and the Salvation Army School for the Blind. In addition to this initiative, magnifying glasses were distributed at select Drug Serv locations to further assist this vulnerable group.

Furthermore, 27 staff members from Drug Serv Pharmacies and the Customer Care Department have completed training in Level One Certification in Jamaican Sign Language, enhancing their ability to communicate effectively with the deaf and hard-of-hearing community.

An independent survey conducted in February 2025 revealed a customer satisfaction score of 96%, reflecting the NHF's commitment to quality service. Additionally, the NHF has updated its website to facilitate easier access to information and services for all.

Awards and Recognition

During the FY 2024-25, the NHF won the following awards:

- > Greta Bogues Award for Overall Winner The top honour of the evening.
- > Financial Secretary's Award for Risk Measurement and Internal Controls 1st place.
- > Carlene O'Connor's Award for Corporate Governance Policies, Procedures & Practices 1st place.
- > Ann Marie Rhoden's Award for Compliance & Disclosure of Information 3rd place.
- > Best Website 1st place (special award).
- > Best Annual Report 2nd place (special award).



MEDICAL COUNCIL OF JAMAICA

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The Medical Council serves as the regulatory authority for doctors, operating under the framework established by the Medical Act of 1976. The council's responsibilities include overseeing the registration of doctors, promoting good professional practices to ensure patient safety and high-quality care, addressing concerns and complaints regarding medical practitioners, and facilitating continuous medical education for physicians. The Council comprises 15 members.

Registration Activities

The Medical Council of Jamaica classifies the registration of medical practitioners into four (4) categories. Full Registration allows doctors to practice without any restrictions, while Special Registration permits practice with specific limitations. Provisional Registration enables practitioners to work under supervision for one year, after which they can transition to full registration. Lastly, Provisional Locum Registration allows for supervised practice for at least one year, following which doctors must pass the CAMC examination to achieve full registration.

TYPES OF REGISTRATION	NUMBER OF PRACTIONERS
Full/Permanent	310
Renewal of Licenses	4827
Special/Temporary (Including Short Term Volunteers	193
Provisional (UWI trained)	250
Provisional Locum (Exam Before Registration)	120

Table 5. Registration of Medical Practitioners by Type of Registration FY 2024-25

Complaints

During the FY the Council received a total of 17 complaints; however, not all concerns warranted an investigation. Action was initiated only when there were indications of potential risks to patient safety or public confidence in the medical profession. In certain instances, provisional inquiries were conducted to examine information early in the process, facilitating a quicker resolution for both patients and the professional(s) involved. If the evidence indicated that there was no ongoing risk to patients and regulatory action was unnecessary, further investigation was not pursued. Conversely, if there were concerns regarding patient safety, a comprehensive investigation was carried out. There were challenges in following up on three (3) cases due to the inability to locate the doctors involved. Of the inquiries completed, one resulted in a one-year suspension for one (1) doctor, while another was sanctioned with a reprimand by the Council.

Educational Initiatives

Section 7A of the Medical Act stipulates that all individuals registered to practice medicine in Jamaica must hold a practicing certificate, which must be renewed annually. This requirement was established with the intent of encouraging medical practitioners to remain informed about significant developments in the field of medicine.

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For the renewal of practicing certificates, Senior House Officers and Medical Officers enrolled in Postgraduate Programmes are required to complete two (2) Continuing Medical Education (CME) hours in Ethics and two (2) in Mental Health and Wellness. It was concluded that these doctors, given their exposure to teaching rounds and sessions within their programmes, would not require an additional 18 hours of CME.

Ethics and Mental Health were designated as mandatory subjects to address complaints from patients and relatives regarding inadequate treatment by some physicians. Medical practitioners in both private and public practice must complete a total of 22 CME hours, which includes two (2) hours in Ethics, two (2) in Mental Health, and 18 in other medical areas. In January 2025, the Education and Ethics sub-committees of the Council successfully provided the required four (4) hours of training in Mental Health and Wellness and Ethics through a well-attended webinar.

Finance and Human Resources

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A goal-directed action plan was developed, serving as a blueprint to bring the Council's accounts up to date, enhance systems for optimal performance, and reinforce its commitment to excellent service. As part of this initiative, a part-time Accountant was recruited.

In addition, a Human Resource Consultant was hired to assist with reengineering the administrative business processes. This included updating job descriptions, realigning posts, and implementing the Government's new salary scale. Together, these efforts aim to improve both financial management and human resource effectiveness within the Council.

In furtherance of improving compliance with the Data Protection Act, the council engaged the services of a Data Protection Officer. A member of staff was assigned to work with this officer as required by the OIC so that the Councils repository will be data compliant.



COUNCIL FOR PROFFESSIONS SUPPLEMENTARY TO MEDICINE

The Council for Professions Supplementary to Medicine is governed by the Professions Supplementary to Medicine Act 1969 and Regulations 1974 to regulate allied Medical Professions that are not regulated by the Medical, Dental, Pharmacy and Nurses and Midwives Acts.

Professions Registered Under the PSM Act

- · Medical Technology
- · Radiography
- Physiotherapy
- · Occupational Therapy
- · Speech Therapy & Audiology
- · Public Health Inspection
- · Dietetics & Nutrition (to include Assistants)

During the fiscal year FY 2024-25, the following activities were successfully executed:

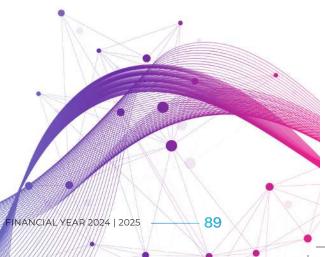
1. Registration of New Professionals: A total of two hundred thirty-two (232) new professionals were registered, which included thirteen (13) foreign nationals. This initiative aimed to expand the workforce and enhance the diversity of expertise available in the healthcare sector.

2. License Renewal: The Council facilitated the renewal of licenses for one thousand five hundred sixty-eight (1,568) professionals. This process ensured that practicing professionals-maintained compliance with regulatory standards, thereby promoting quality healthcare delivery.

3. Issuance of Good Standing Letters: Fifty (50) Good Standing Letters were issued on behalf of clients, primarily directed to institutions in Great Britain and the United States of America. These letters are essential for professionals seeking employment or further opportunities abroad, as they verify the individual's qualifications and standing with the Council.

4. Approval of Continuing Education Activities: Approvals were sought for forty-four (44) Continuing Education Activities, encompassing both virtual and in-person presentations. This initiative underscores the commitment to ongoing professional development and the enhancement of skills among healthcare professionals.

5. Amendment of the PSM Act: In April 2024, the Council initiated the renewal of proposals for amendments to the PSM Act. Engagement with professional associations was undertaken to gather further suggestions and justifications, ensuring that the proposed changes reflect the needs and insights of the healthcare community.





6. Database for Volunteer Professionals: A new database for volunteer professionals was introduced, and ID numbers were assigned for easy referencing. This system aims to streamline the process and reduce repeated requests for proof of qualifications from professionals who regularly visit.

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7. Establishment of Secure Communication: A secure email address (@cpsmja.org) was procured, and work commenced on developing the Council's website (CPSMJA). This advancement is crucial for enhancing communication and providing accessible information to stakeholders.

8. Email Migration and Technological Upgrades: During the transition to the secure domain, some emails were inadvertently deleted but were restored within a month. Considering these email issues, the ICTU/MOHW endorsed the decision to migrate to Microsoft 365. They also recommended investing in additional memory for devices and critically assessing the need to replace hard drives. The migration process and necessary adjustments are ongoing.



THE NURSING COUNCIL OF JAMAICA

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As a leading regulatory body for nursing and midwifery in the Caribbean, the Nursing Council of Jamaica is the vanguard for public safety, by ensuring that nursing and midwifery personnel are competently educated, trained and regulated to deliver evidence-based professional health care.

The Nursing Council under the Nurses and Midwives Act, 1964 and Regulations 1966, executes the authority to regulate the standards of education and training for nursing and midwifery personnel through credentialing, licensing and relicensing. It upholds the standards of education and practice of nursing and midwifery personnel by monitoring, evaluating, and sanctioning to ensure safe quality care to the public.

Registration Activities

Summary of Registration Activities undertaken for the Reporting Period; April 2024 to March 2025

- Registered Nurses- New graduates, April and October 2024 cohort 517 new nurses.
- Registered Midwives- New graduates, April and October 2024 -cohort -39 Registered Midwives
- Enrolled Assistant Nurses- New graduates, May and November 2024 cohort 48 Enrolled Assistant Nurses.

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Re-licensure

The table below provides a summary of the nurses and midwives who were relicensed with the Nursing Council of Jamaica during the period April 2024 to March 2025. This data highlights the Council's ongoing efforts to maintain high standards of practice within the healthcare sector.



April 2024- March 2025	Registered Nurses	Registered Midwife	Enrolled Assistant Nurses	Registered Mental Nurses	Total
April	73	15	7	-	95
Мау	180	17	17	-	214
June	362	113	62	-	537
July	121	80	27	-	228
August	80	27	14	-	121
September	80	25	18	-	123
October	107	41	6	-	154
November	340	100	18	1	459
December	793	327	56	5	1,181
January	518	237	40	-	795
February	140	71	11	-	222
March	123	50	10	-	183
Totals	2,917	1,103	286	6	4,312

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Nurses and Midwives Cadre

NATIONAL COUNCIL ON DRUG ABUSE

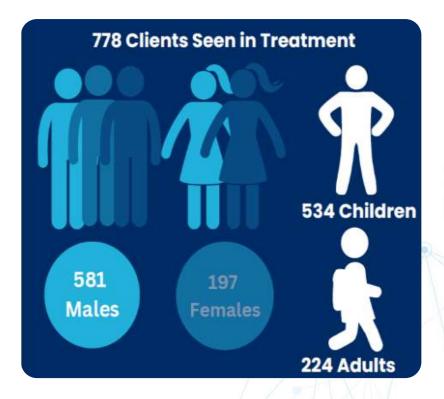
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The National Council on Drug Abuse (NCDA) was incorporated as a Department of the Ministry on August 2, 2025. The NCDA's primary mandate includes educating the public on the dangers of drug use, preventing the indiscriminate use of licit and illicit substances, and providing drug prevention and treatment services.

Treatment and Prevention

During the year, the NCDA impacted over 69,000 individuals through public education initiatives, which included presentations, social media engagement, and the delivery of five (5) evidencebased prevention programmes. In-school drug prevention initiatives reached 4.132 students in 82 institutions.

The interactive methodologies designed to enhance knowledge about the effects of drug use, build life skills, and strengthen protective factors against substance misuse were utilized. A total of 344 stakeholders were trained in Screening, Brief Intervention, and Referral to Treatment (SBIRT) to support community treatment efforts.



A total of 778 clients were seen in treatment for the period. An additional 201 non-treatment clients received drug testing and psychoeducation engagements.



National Drug Prevalence Survey: 2023

The results of the 2023 National Drug Prevalence Survey results were disseminated to increase national awareness on the prevalence and patterns of drug use among 12-65- year-old Jamaicans and provide evidence for policy and programme planning.

Alcohol, cannabis, and tobacco remain the commonly used substances in Jamaica. Approximately 8 in 10 Jamaicans (77.4%) have tried alcohol at some point in their lives, with 6 in 10 (60%) using it in the past year and 5 in 10 (46%) in the past month.



DEPARMENT OF GOVERNMENT CHEMIST

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The Department of Government Chemist (DGC) is a government regulatory laboratory which provides services in analytical chemistry to Government agencies and departments upon request. Technical advice and scientific opinions in matters within the expertise of the department are also provided as required. These services are also provided to non-government entities or individuals where the provision of these services would not conflict with statutory responsibilities which are of primary importance.

Analytical, Testing and Advisory Services

For FY 2024-25, the Department exceeded established targets for the analysis of pharmaceutical, toxicology and food samples.

ISO Certification

A significant highlight of the Department's performance this year was the successful attainment of Accreditation to the ISO/IEC 17025:2017 Standard. This standard is recognized globally for laboratory competence and quality management systems.

Accreditation enhances the Department's ability to support national health, safety, trade, and environmental protection objectives ensuring by accurate, traceable, and internationally recognized test results. With this accreditation, the Department of Government Chemist is positioned to enhance its service offerings and contribute even more effectively to regulatory enforcement and national development. It also strengthens Jamaica's competitiveness in international markets by facilitating acceptance of test results across borders.



Southern Regional Health Authority (SRHA)

The Southern Regional Health Authority (SRHA) functions as a statutory entity under the Ministry of Health and Wellness, providing vital healthcare services to over 600,000 residents in the parishes of Manchester, Clarendon and St. Elizabeth. As the second largest of Jamaica's four Regional Health Authorities, the SRHA is governed by a Board of Management in conjunction with a Regional Director, who is accountable for the daily operations of the organization.

With a workforce of 4,053 employees, the SRHA oversees an extensive network of 74 health centers, five hospitals, and one community hospital. The hospitals under its administration include Mandeville Regional, May Pen, Black River, Lionel Town, Percy Junor, and the Chapelton Community Hospital, all of which are dedicated to enhancing the health outcomes of the populations they serve.



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May Pen and Percy Junor Hospitals Achieved Remarkable Milestone with First Groundbreaking Colon Cancer Surgery and Cutting-edge Robotic Surgeries respectively

The May Pen Hospital (MPH) in Clarendon proudly completed its first laparoscopic colon cancer surgery (colectomy), ushering in a new era of innovative surgical care in southern Jamaica. This landmark procedure, performed on June 24, 2024, not only elevated MPH to the forefront of medical excellence but also symbolizes a commitment to advancing health care in the region.

This significant achievement positions MPH alongside other leading hospitals within the SRHA that are expanding their surgical capabilities. Percy Junor Hospital now offers cuttingedge robotic surgery, while Mandeville Regional and Black River hospitals have embraced laparoscopic techniques. With May Pen Hospital also joining the movement toward more widespread laparoscopic surgeries, the SRHA is clearly setting a new standard for advanced medical care across the region.

May Pen Hospital Successfully Completes First Ground-Breaking Colon Cancer Surgery



The procedure was led by Surgeon, Dr. O'Rane Thomas (4th left). Photographed also are: (left to right): Surgical Scrub Technician, Maxine Thompson; Consultant General Surgeon, Dr. Douglas Jefferson; Anaesthesia Resident, Dr Geneve Llewelyn; Head of Surgery Department, Dr. R. Xenophon Kirby; Surgery Resident; Dr Ranoine Peart; Senior Registrar in Surgery, Dr. Dale Laws; and Registered Nurse Roxania Lambert.

Percy Junor Hospital Successfully Completes First Surgery With Cutting-Edge 360 Degree Robotic Camera Holder



A team including Dr. Carlos Wilson (left) and Senior Registrar from the Department of Surgery at the Mandeville Regional Hospital, Dr. Ashok Kotagiri (right) performs the first surgery with the 360-degree freehand robotic camera holder. Pictured also is Operating Theatre Technician Richard Lewis from the PJH.

Recovering from Hurricane Beryl

In July 2025, Hurricane Beryl devastated several health facilities in the southern region, necessitating immediate and decisive action. An effective health response was launched, including mass sensitization sessions in affected communities and the distribution of care packages to impacted employees. Surveillance was intensified, and robust health strategies were implemented to empower residents to protect their health.

Recognizing the imperative to fortify infrastructure against future threats, renovations of the three severely damaged health centers in St. Elizabeth–Southfield, Newell, and Bellevue–were undertaken, transforming them into climate-resilient facilities at a cost of \$227,859,498.00. This initiative not only addressed urgent community needs but also positions the health system to withstand future challenges with strength and resilience. All other Beryl related repairs (Junction health centre, Regional Office, Lionel Town, Black River and Mandeville Regional Hospitals, amounted to \$67,162,554.38.

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Southfield Health Centre Before and After

Other Major Projects/Infrastructural Maintenance and Rehabilitation

The SRHA Projects department successfully implemented an additional 49 projects, at a total value of \$563,593,461.25. The significant projects included:

1.Operation Refresh - Primary Health Care Beautification (Malvern, Aenon Town, Craighead, Thompson Town and Frankfield Health Centres) - \$37,350,473.00.

2.Phase one of Building and Infrastructure Upgrade, Repair and Renovation Works to the Operating Theatre Suite at the Black River Hospital - \$110,851,295.00.

3.Renovation and Repair/Retrofitting Works to Thompson Town, Frankfield, Crosskeys, Ginger Hill, Maggoty, and Craighead Health Centres - \$162,483,022.07.

4.Extension of Fyffes Pen, Dental Department at Southfield, Re-roofing and Ceiling Replacement at Pratville Health Centres - \$51,407,883.66.



Newly Renovated Malvern Health Centre

PERFORMANCE HIGHLIGHTS REPORT

98



Before and After – Cross Keys Health Centre

Revolutionizing Healthcare Through Digital Transformation

In the fiscal year 2024-2025, the SRHA's ICT Department made remarkable advancements in digital transformation. Leveraging the expertise of its four key divisions-Network and Systems Administration, Client Support, Software and Database, and ICT Administration-the department has driven strategic initiatives that aligned perfectly with the SRHA Five Year Strategic Plan (2024-2029), and the MoHW' vision for digital health.

Among the standout achievements were the establishment of a Regional Data Warehouse for centralized data access, the successful launch of a digital helpdesk portal across the region, and the deployment of cutting-edge dashboards and visualization tools. These initiatives were bolstered by significant infrastructure upgrades and the implementation a robust cyber incident response plan, ensuring the security and reliability of the region's digital health systems.

The SRHA's unwavering commitment to elevating healthcare standards in the southern region has not gone unnoticed. In recognition of its exceptional contributions to public health and the advancement of high-quality digital health solutions, the SRHA proudly received the Digital Innovation Award at the prestigious Government of Jamaica Service Excellence Conference and Awards Ceremony in January 2025. This accolade underscored the region's dedication to innovation and excellence in healthcare delivery.

Human Resource Management and Development – A Critical Strategic Pillar The Human Resource Management and Development Unit was dedicated to empowering employees, boosting morale, and strategically aligning HR initiatives with the SRHA's overarching goals, all while adhering to established policies. To enhance effectiveness, the Unit refined its operations around three essential pillars: Human Resource Management, Human Resource Development, and Employee Relations.

Throughout the year, the SRHA unequivocally demonstrated its commitment to building a skilled, adaptable, and high-performing workforce across the region. A primary objective was to fortify institutional capacity by equipping employees with the vital knowledge, skills, and competencies required to meet the ever-evolving demands of the organisation and the healthcare sector. Remarkable strides were made toward this goal, driven by the steadfast support of SRHA leadership and a proactive strategy focused on investing in the professional growth of the workforce. This commitment not only enhanced individual capabilities but also strengthened the collective impact on healthcare delivery.

A total of 51 employees completed their courses of study while on approved study leave, showcasing an impressive increase from 45 the previous year—an outstanding 13% growth. This initiative significantly addressed critical skill gaps, especially within nursing services, and demonstrated the region's commitment to excellence in healthcare. During this period, study leave was granted to 69 employees, reflecting a 15% increase from the 60 employees who received study leave in 2023/2024. This increase underscored the organization's proactive approach to emerging staffing needs and a steadfast dedication to workforce development.

Moreover, 23 dedicated staff members pursuing higher education and professional certification in a variety of health-related disciplines were awarded the prestigious MoHW Barry Wint Scholarship, valued at up to \$1,000,000.00 per recipient for the 2024/25 academic year. In addition, 494 employees were appointed or granted permanency by the SRHA Board during this reporting period, marking a significant increase from the 447 appointments in 2024/25 an impressive 11% rise. Among these, 411 employees were first-time appointees, up from 369 in the previous period, also reflecting an 11% increase. Furthermore, there was a remarkable 6% growth in the number of existing employees who were promoted to higher positions, with 83 employees advancing in this reporting period compared to 78 in 2023/24. These numbers served as a testament to the region's commitment to nurturing talent and fostering professional growth within the organization.

Fleet Management

The SRHA has maintained strong performance in the fleet department, achieving an average availability of fleet vehicles of 85% or higher. Notably, there was an impressive average availability of 95% for active vector vehicles and 90% for ambulances.

This success can be attributed to the strategy of operating an in-house garage workshop, which enabled the servicing of an average of 90% of fleet vehicles within the manufacturer's recommended mileage of 5,000 kilometers. Additionally, the implementation of a digitized daily checklist for vehicles has contributed to this high performance. The Authority's commitment to defensive driving training for newly employed fleet drivers, along with hosting defensive driving training every two years, continued to have a positive impact on the availability of fleet vehicles.

A capital investment of \$33,102,762.60 was made for the ongoing retooling of the region's fleet, achieving 50% of the retooling target of 8%. The vehicles added to the fleet included: - 1 five-ton truck - 1 motor truck - 1 coaster bus (to be retrofitted into a mobile clinic).

SRHA Sweeps LASCO/NAJ Nurse of the Year Awards

There nurses employed to the SRHA copped the top three awards for the 2024 LASCO/NAJ Nurse of the Year Awards. Abigail James, Registered Nurse from the Black River Hospital in St. Elizabeth won the coveted 2024 LASCO/NAJ Nurse of the Year title. Roshelle Mendez, the 1st runner-up and Davia Dwyer, the 2nd runner-up, who are both from the Mandeville Regional Hospital in Manchester, rounded off the top prizes for the region.

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PERFORMANCE HIGHLIGHTS REPORT

100



The 2024/2025 Nurse of the Year, Abigail James, who works at the Black River Hospital.



First runner-up for 2024/2025 Nurse of the Year, Roshelle Mendez (left), and second runner-up, Davia Dwyer.

Pesticides Control Authority

The Pesticides Control Authority (PCA) is a Statutory Body in the Ministry of Health & Wellness, mandated by the Pesticides Act 1975. Currently there are two locations with a Head Office at 50 Half Way Tree Road, Kingston 5, and a regional office at the RADA Complex, Catherine Hall, Montego Bay. There are currently 12 members of staff, 11 staff posts on the establishment with additional staffing of an Office Attendant and a temporary Scientific Officer. All staff the establishment are on three year renewable contracts while the two additional posts are 2-year fixed term contracts with remuneration based on the Government salary scales. The position of driver has not been filled since August 6, 2021. The Authority earns approximately 80-90% of its revenues mainly from a 2% cess on the Cost, Insurance & Freight (CIF) value of all imported pesticides. The remaining 10% of its revenues is derived from fees for licences, registrations, certificates and exams – with the last fee structure increase in 1996; With a self-financing status effective fiscal year 2011/2012.



The Pesticides Control Authority (PCA) is a Statutory Body in the Ministry of Health & Wellness, mandated by the Pesticides Act 1975. Currently there are two locations with a Head Office at 50 Half Way Tree Road, Kingston 5, and a regional office at the RADA Complex, Catherine Hall, Montego Bay. There are currently 12 members of staff, 11 staff posts on the establishment with additional staffing of an Office Attendant and a temporary Scientific Officer. All staff the establishment are on three year renewable contracts while the two additional posts are 2-year fixed term contracts with remuneration based on the Government salary scales. The position of driver has not been filled since August 6, 2021. The Authority earns approximately 80-90% of its revenues mainly from a 2% cess on the Cost, Insurance & Freight (CIF) value of all imported pesticides. The remaining 10% of its revenues is derived from fees for licences, registrations, certificates and exams – with the last fee structure increase in 1996; With a self-financing



PERFORMANCE HIGHLIGHTS REPOR

Vision

By 2030, the Pesticides Control Authority is a fully digitized and resourced organization, efficiently delivering its services to stakeholders who are highly satisfied.

Mission Statement

To protect public health and the environment by regulating the importation, manufacturing, distribution, and use of pesticides.

The main highlights for the fiscal year 2024/25 are given below:

IMPORT PERMITS

The Cess collected by JSWIFT for the PCA from pesticide imports was approximately \$62.05 million from 314 permits processed.

REGISTRATION

Fifty-Eight (58) proposals for the registration of a pesticide were presented to the Board for approval. Forty-Seven (47) of the products were approved and Nine (9) were denied registration and Two (2) were referred for further assessment.

RE-REGISTRATION

Twenty-Three (23) proposals for the re-registration of a pesticide were presented to the Board for approval. The products were approved as the Board was satisfied that the requirements were met.

LICENCE TO MANUFACTURE

Two (2) proposals for a licence to manufacture a pesticide were presented to the Board for approval. Both products were approved as the Board was satisfied that the requirements were met.

LIMITED USE REGISTRATION

Six (6) proposals for limited use pesticides were presented to the Board for approval. Five (5) products were approved as the Board was satisfied that the requirements were met however One (1) was denied.

PEST CONTROL APPLICATOR CERTIFICATION

Thirty-Three (33) proposals for pest control applicator certification were presented for approval. Approval was granted as the Board was satisfied that the necessary criteria were met.

PEST CONTROL APPLICATOR RE-CERTIFICATION

Seventy-Three (73) proposals for pest control applicator re-certification were presented for approval. Approval was granted as the Board was satisfied that the necessary criteria were met. Three (3) Private pest control applicators were also granted re-certification.

PEST CONTROL OPERATOR BUSINESS LICENCE

Fifteen (15) proposals for the licencing of a pest control operator business were presented for approval. Approval was granted as the Board was satisfied that the necessary criteria were met.

RENEWAL OF PEST CONTROL OPERATOR BUSINESS LICENCE

Forty-Three (43) proposals for the renewal of a pest control operator business licence were presented for approval. Approval was granted as the Board was satisfied that the necessary criteria were met.

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FINANCIAL YEAR 2024

LICENCE TO SELL RESTRICTED PESTICIDES

Forty (40) proposals for a licence to sell restricted pesticide were presented for approval. Approval was granted for Thirty-Eight (38) as the Board was satisfied that the necessary criteria were met.

RENEWAL OF LICENCE TO SELL RESTRICTED PESTICIDES

Seventy-Two (72) proposals for the renewal of a licence to sell restricted pesticide were presented for approval. Approval was granted as the Board was satisfied that the necessary criteria were met.

CATEGORY	APPROVED	DENIED
Registration	47	9
Re-Registration	23	0
Licence to Manufacture	2	0
Limited Use Registration	5	1
Pest Control Applicator Certificate (new)	33	0
Pest Control Applicator Certificate (renew)	76	0
Pest Control Operator Licence (new)	15	0
Pest Control Operator Licence (renew)	43	0
Licence to Sell Restricted Pesticides (new)	38	2
Licence to Sell Restricted Pesticides (renew)	72	0

The Inspection, Public Relations and Training of the PCA are summarized below:

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	Inspection of Premises Which Store or Sell Pesticides	Inspections of facilities to monitor compliance	Inspections/Surveillance: 685 farm stores/importers/ hardwares and supermarkets 58 PCO storage facilities
	Pest Control Applicator Training	4 PCAp workshops	4 Pre-exam workshops for applicator certification (Virtual),1 Annual workshops for Pest Control Applicators (Virtual)
	Written & Practical Exams To Certify Pest Control Applicators	Exams executed each quarter	4 quarterly written Applicator exam conducted 35 Applicator practical exams 0 Serviceman exams
	Public Awareness	38 Farmer trainings, community meetings, seminars	Approximately 500 persons trained
AN INVESTIGATION OF	Expositions	Participate in 13 Expos	Expos participated in were mainly RADA and 4H parish shows



104

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PERFORMANCE HIGHLIGHTS REPORT

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