Health and Social Services in the Falkland Islands

A close-knit team, a pleasant environment, and time to care.

The Falkland Islands Government Department of Health, Education and Social Services provides primary, community and secondary healthcare in the Islands as well as social services to vulnerable people in the community. It also provides a range of benefits for those most in need.

Our mission is to provide high quality, cost-effective health and social services which address the identified needs of the populations we serve, in order to preserve life, treat illness and promote lifelong well-being.

The resident population of the Islands is approximately 3,000. We also provide secondary care services to a further 1,800 military personnel and associated civilians at Mount Pleasant Airfield, 35 miles southwest of Stanley. We offer urgent and emergency care services to approximately 50,000 people who visit the islands each year. These include the crews of the foreign fishing vessels who fish in South Atlantic waters.

The service is headed by the Director of Education, Health and Social Services, who is responsible to the Chief Executive of the Falkland Islands Government. Overall clinical responsibility lies with the Chief Medical Officer who is also the Government’s adviser for all clinical and public health matters.

Health of the Nation

The general standard of health in the Islands is good, with a pattern of disease similar to that of most developed countries. There are slightly lower rates of cancer generally but higher rates of lung disease. There are also significant levels of mild to moderate mental health problems and alcohol abuse. Oral health is generally poor. To date, problems of drug misuse are virtually unknown, as is HIV/AIDS. In recent years, there has been a significant increase in the elderly population (approximately 87% in 10 years) coupled with an increasing birth rate, creating an inevitable increase in demand on health and social services.
History of the Department

Before 1982, the Islands had a small, basic hospital service close to the site of the current hospital. In 1984, the military took over the running of the hospital service. Later in 1984, the King Edward VII Memorial Hospital was almost totally destroyed by a devastating fire. It was rebuilt, and re-opened in 1987.

The hospital remained military-run until 2000 but is now fully civilianised, although the MOD continue to contribute a significant proportion of the costs of running the service. All primary, secondary and community care services for the Islands are run from the hospital.

The social services department is of much more recent date. Originally, there was a ‘welfare’ service provided by a team of unqualified staff. The first qualified social worker arrived in around 1999. Initially based in the hospital, the team moved to the Welcome Centre at the east end of Stanley in 2002.

Facilities and Staffing

All medical, dental and community health services are based in the hospital. The 29 bed complement is made up of 18 acute beds, a maternity bed, a single-bedded isolation unit, 2-bed intensive care unit, and 7 long-stay nursing home beds. There are modern facilities for outpatients and community health care, a day centre, 2 dental surgeries, and a single theatre with anaesthetic room.

In close proximity to the hospital, there are 3 blocks of sheltered housing, consisting of a total of 22 units, providing either single person or married accommodation. The Social Services Department is housed approximately a mile from the hospital in the Welcome Centre with the Young Person’s Residential Unit, Longdon House, in the same street.

The health and social services department consists of approximately 93 whole time equivalent staff. The Hospital has a staff of 6.3 doctors, including surgeon and anaesthetist, and a range of nurses and other health professionals including midwives, theatre team, health visitor, district nurse, mental health worker, physiotherapist, speech and language therapist, podiatrist and dentists. There is a small pharmacy with two staff, one of whom is a qualified pharmacist. The Hospital has the normal range of supporting and domestic services including engineering and catering.

Around half of the staff are local residents and the remainder generally come from the UK or the commonwealth countries.

The Social Services Department consists of two qualified social workers and 4 social work assistants.

Finances

The expenditure of the Medical Department in 2009/10 was approximately £6.3 million, offset by income of £1.5 million, mainly from charges for treatment of tourists and visiting fishermen. A significant proportion of this funding (around £1 million) is derived from the Ministry of Defence. This is done via a cost-sharing agreement enshrined in a Memorandum of Understanding between Falkland Islands Government (FIG) and the MOD.

Most services, including prescriptions, are free to residents. However, charges have recently been introduced for some dental procedures, for spectacles, travel vaccines and a limited number of medical services; The Government reserves the right to alter these charges when it is deemed appropriate. Charges are also levied for patients who are not entitled to free treatment in the Falkland Islands.
Emergency Services

Minor and major emergencies of all kinds are dealt with initially in the small casualty department. During the day, the department is staffed by a senior nurse. At night, the nurse provides on call cover from home. The medical officers are rostered to provide emergency care on a daily rota. All medical officers attend an Advanced Trauma Life Support (ATLS), and a local trauma course is also run on a regular basis.

There is a full theatre team on duty throughout the normal working week and on call at all other times.

The hospital provides the ambulance service, using 'untrained' drivers accompanied by one of the casualty nurses. In addition, Mount Pleasant (MoD) Airbase provides Search and Rescue helicopters to transport seriously injured patients to and from the hospital.

The team also provide telephone consultations to Camp residents ('Camp' is the local term for rural areas) who cannot easily attend the hospital.

Very seriously ill patients can be provided with intensive care in the 2-bedded ITU unit, but the hospital capacity is such that this cannot be maintained over a long period. Patients in this situation are stabilised and evacuated out of the islands either via a Chilean civilian aeromedical evacuation team to Santiago, or via military aircraft to Montevideo. The latter route is used only in the most pressing emergencies, on average two to three times each year.

The department has a major accident plan, which forms part of the overall major incident plan for the islands, which is also linked into the MoD.

The Social Services Department provides emergency child protection service out of hours.

Primary Care

The 5 (4wte) 'medical officers' provide general practitioner services modelled on those in the UK. Surgeries are usually held twice a day on each working week day. Appointments are 10 minutes duration. During 2005, over 19,000 consultations were undertaken across outpatients and casualty.

Each week, one of the doctors makes a 'camp' visit, either by landrover or light aircraft, depending on location. Each settlement is visited approximately every 6 weeks in rotation.

The practice nurse runs chronic disease management clinics, well woman (including cervical screening) and the drug (including anticoagulation) monitoring service. We operate a recall system for patients with asthma and diabetes.

Two dentists provide dental care for the population, supported by dental nurses and a part-time hygienist. There is no resident qualified optician, although a UK optician visits at intervals of (normally) about six months.

Preventive Services

As well as the secondary prevention services described above, the practice nurse offers a range of primary prevention services including smoking cessation and weight management.

Our limited resources inevitably restrict us from doing more, but a range of staff (including health visitor, social workers, CPN, dental team) have a preventive element to their role.
Diagnostics

We have a one-room x-ray unit. Areas of study include I.V.U., O.P.G. and theatre mobile studies. All images are digitised and specialist advice/interpretation is provided at arms length by a consultant radiologist, or by Haslar for military x-rays. A radiography service is also provided for the local veterinary and fisheries departments. There is no facility for MR or CT.

Two medical officers are trained in ultrasonography and one undertakes endoscopies, including colonoscopy.

We undertake bowel screening of over 56's and 'at risk' people identified through their family history or symptomatically. This is done in conjunction with St Marks Hospital, London. Screening is offered as a sigmoidoscopy followed up by colonoscopy as indicated. 95—98% of the population that are offered screening take it up.

All routine haematology, biochemistry and microbiology tests are completed by the hospital laboratory, with histopathology and more specialised tests and screening, including cervical cytology, going to a variety of UK hospitals via the military hospital at Haslar. The department participates in the NEQAS quality control and achieves excellent results in all areas.

A small blood bank is supplied on a monthly basis from the UK. In addition, an emergency 'walk-in donor' panel is organised by the department. Volunteers are screened twice a year and their blood used at the time of need.

Secondary/Inpatient Care

Ward nurses are expected to nurse patients across all specialities (with the exception of midwifery), including patients undergoing elective surgery undertaken by visiting specialists. Several nurses are trained in intensive care.

Ward occupancy levels average around 50% but this can change dramatically in the event of a specialist visit or major incident. Ward staffing levels are generally good and the standard of nursing care excellent.

Patients are nursed in single-sex bays of 2 to 4 beds. ITU normally has two beds but has capacity for up to 4 ventilated patients. The isolation unit has one bed and there is another single-bedded side room.

Foreign fishermen and tourists present an additional challenge as nursing care has to take account of cultural differences and overcome language barriers.

The elderly care unit consists of 7 single rooms with en-suite facilities for patients with long-term nursing care needs. Residents pay a contribution towards their accommodation of 50% of their state pension.

The nursing team is led by the Chief Nursing Officer. Medical care is provided by the general practitioners for medical patients and the surgeon for surgical cases.

Surgery

We have a well-equipped theatre suite with 24 hour capability. The consultant general surgeon and anaesthetist are supplied via a company set up for the purpose, with which we entered a 5 year contract in July 2005, which has since been extended until mid 2012. We undertake over 500 procedures each year including over 90 'emergencies' in which life is at serious risk. This figure excludes procedures carried out by visiting specialists. Regular minor operations lists are also carried out.

Specialist Treatment and Advice

Patients who cannot be treated in the Islands can be referred to UK hospitals under the reciprocal agreement between the UK NHS and the Islands Health Service. Increasing numbers of patients are also referred to Santiago in Chile for treatment. This tends to be for investigative and more minor procedures as the cost of more major treatment is
much greater than flying patients to the UK.

A variety of specialists visit on an annual or biennial basis, depending on need. Specialist services provided in this way include Obstetrics & Gynaecology, Ophthalmology, Psychiatry, Orthopaedics, ENT and Oral and Maxillo-facial surgery. Visiting specialists provide consultation and surgery for some elective cases which can wait until the visit. We also arrange other visits on an ad hoc basis such as occupational and speech and language therapy.

Patients who need more urgent attention or specialist treatment can be flown to Chile by air ambulance or to UK via the weekly service. The Royal Air Force also provides an aeromedical evacuation service to the UK or to Uruguay for the very seriously ill.

Community Services

There is a single health visitor. The main focus of the role is to provide advice, child surveillance, immunisation programmes and a resource to families with children under the age of five. The role is extensive with health promotion work and involvement in personal and social education programmes in the school. Close liaison with the schools, Social Services Department, GPs, Speech and Language Therapist, Midwives and Counsellors mean an active participation in the Primary Health Care Team.

The single district nurse provides nursing care to patients in their own homes supported by a team of nursing auxiliaries and carers.

Mental health services are led by the community psychiatric nurse, who is the only mental health practitioner in the islands. She provides support for people with severe and enduring mental illness, as well as those with mild to moderate illness, and with problems of alcohol misuse. She also provides advice to the inpatient nursing team.

Pharmacy

The pharmacy in the Hospital is the only one on the Islands and is staffed by a full time pharmacist and a technician who undertakes an extended role. The vast majority of items issued are by prescription. Prescriptions are free to all Falkland Island Residents as well as U.K. residents. The pharmacy sells a limited range of over the counter medicines.

The Camp populations are sent medicine through the post once the doctor prescribes them. Each settlement has a medicine chest with basic drug requirements and these are replenished as directed. Ships’ medicine chests are also provided and replenished as needed. Stock is obtained from AAH via the MOD medical supplies function, Med S IPT, in the U.K.

Therapy Services

In the Falklands Islands, physiotherapy is provided by a single therapist working across all specialties including orthopaedics, neurology, elderly care, paediatrics, including children with disabilities, and sports injuries. Under the Memorandum of Understanding with the MOD, the physiotherapist works two days per week at Mount Pleasant Airbase. The majority of the workload is outpatient based, but the physiotherapist is also required to cover the ward. The post carries no on-call commitment.

Currently there is 1 Speech and Language Therapists. This person works closely with the schools. All age groups are catered for: infants and toddlers, pre-school children, school children (a service is provided to the schools), adults, and elderly people. The service also includes provision of hearing aids.

A part-time podiatrist offers general podiatric services. We have no occupational therapist or dietician.
Services continued....

Maternity Care

All women are offered a choice of midwife, who then provides the care throughout the pregnancy and birth. Three midwives share the workload between. There are between 30 and 50 live births each year.

All of our medical officers are required to have training in Obstetrics and Gynaecology and they are responsible for providing ante- post- and intra-partum care. Two of our GPs are trained in diagnostic ultrasound. The surgeons are trained to undertake emergency caesarean sections. In addition, we have the facility to bring a consultant gynaecologist to the islands to perform planned caesareans.

When the consultant gynaecologist visits, he reviews the cases of all pregnant women, in order to review and advise on our maternity care.

We are not able to offer an epidural service.

Elderly Care

The majority of elderly people in the islands are cared for by relatives at home. The social services department provides some support and assistance to older people, and can provide financial assistance in the form of attendance allowance. The district nurse provides nursing care where necessary, supported by nursing auxiliaries and carers. Home helps are provided by the social services team.

22 sheltered housing units are now available. The Public Works Department is responsible for their upkeep but places are jointly allocated by the social services department and the district nurse. Mobile Wardens visit residents on a daily / twice daily basis and are responsible for responding to any calls made using the call system.

Those elderly people who need nursing care which can not be provided at home are looked after in the 7-bedded elderly care unit, which is adjacent to the main ward. All residents have their own room and en-suite facility.

There is a Day Centre in the hospital which offers activities for elderly and disabled islanders, and a dining room which provides meals cooked in the hospital kitchen. We also provide 'Meals on Wheels' in the community and meals for prisoners.

Paediatrics

There is no dedicated paediatric service. A health visitor provides a normal health visiting service, primarily to the under 3s. The Speech and Language Therapist also works predominantly with children. Children needing inpatient care will be nursed in a side room and their parents are asked to stay with them at all times.

Estates and Engineering

The hospital looks after its own estates with a team of qualified estates and bio-medical engineers. The team provide routine, planned maintenance as well as an emergency repairs service. They also plan and manage capital development schemes.

Support Services

The clinical services are supported by a highly dedicated team of administrative and ancillary staff including receptionists, medical secretaries, cooks, cleaners, laundry assistants, drivers, handyman.
The Dental Department is responsible for providing dental services to the civilian population of the Falkland Islands. The department is also responsible for providing urgent treatment for temporary visitors such as tourists and fishermen. The latter are vital to the economy of the islands. The team undertakes occasional GA procedures on behalf of the Mount Pleasant Complex.

Based in the hospital (KEMH), the department consists of a team of two full time dental surgeons and three dental nurses, led by the Senior Dental Officer. There is funding for a therapist/hygienist to be employed on an occasional basis throughout the year.

There are three surgeries, all upgraded in 2007. There is a small laboratory, though the majority of laboratory work is sent overseas. Dental equipment and supplies are regularly updated to maintain a high standard of cross infection control. The hospital x-ray department provides OPGs immediately on request.

A wide range of treatments are undertaken, including endodontics, complex extractions, minor oral surgery, basic prosthetics and orthodontics, and emergency treatment including facial trauma. Dental extractions and oral surgery requiring general anaesthesia are undertaken in the operating theatre of the hospital under full support of theatre and anaesthetic staff.

Orthodontic treatments are limited. Most are carried out using removable appliance therapy. For reasons of both logistics and cost, FIG cannot provide fixed appliance orthodontic treatment and will not fund it overseas, except in the most severe cases.

Oral health in the islands has been very poor historically across all age ranges, largely due to poor access to dental services in the past. One key area of activity is the annual screening programme for school children. Those who need treatment are then encouraged to attend the dental department. Recent audit results from the screening and treatment programme show improvements in the dental health of school children.

Demand for treatment is high. Once treatment is complete, patients are recalled at a date specified in accordance with their dental health and predicted need.

The majority of dental treatment is provided free of charge to residents. However, charges are made for certain aesthetic items such as veneers, complex treatments, and the restoration to dental fitness of those who have neglected their teeth.

Out of hours emergency dentistry is undertaken by the two dental teams on weekly rotation. Call outs are generally triaged by the casualty team in order to minimise the frequency of attendance for the dentist. Evening call outs are restricted to facial trauma. Weekend call outs are generally for foreign fishermen who are in port for one day only and need an extraction: this can usually be predicted the day before.

The dental officers co-operate with the military dental officer at Mount Pleasant by providing occasional emergency cover and support for any referrals for oral surgery under general anaesthetic requiring the operating theatre in the KEMH.
The Social Services Team was set up in May 1999 when the first qualified social worker was recruited to the island. Before that ‘Social Welfare’ consisted of two ‘welfare workers’ based at the hospital who offered a broad-ranging service, including daily support for people out of work, form-filling for housing and other benefits, and general ad hoc support for individuals and families.

Initially viewed with suspicion, professional social work has gradually become a positive and accepted part of the government and the community.

The Falkland Islands have their own legislation, although this is largely modelled on UK legislation and guidance. The Children’s Ordinance is independent from the UK’s Children Act 1989 and other relevant legislation and there are some significant differences. At present it has provision for Safeguarding Children, Care Orders and Emergency Orders. Children in need and support/respite/voluntary accommodation is not covered. Work is being carried out to update the safeguarding children procedures and also the development of policy and procedures for the recruitment of foster carers.

Ethos/Philosophy

The team has been working hard to develop a service which is professional, consistent, and transparent. The philosophy of working together and working in partnership with parents / carers and other professionals has developed over time and has had a positive impact on individuals who come in contact with the team. Issues of confidentiality and sharing information are complex for community members and professionals, due to the nature of living and working in a small community. The team is therefore required to be sensitive and approachable whilst maintaining professional boundaries.

In July 2010, a Mental Health Ordinance was introduced as legislation in the Falkland Islands. This now provides governance for the care and treatment of mental health issues in the Islands.

Staffing

There are three qualified social workers, one of whom is the team leader, 3 social work assistants, 2 sheltered housing wardens and 2 home helps, and an administrative assistant.

The Social Services Team Leader is a member of the Heath and Education Department’s Senior Management Team.

Premises

The Social Services Team has its own self contained office building with wheelchair access at the East End of Stanley. The offices also contains an video interview suite used jointly with the Royal Falkland Islands Police.

The team is also responsible for the residents of 27 sheltered housing units in the town (although the Housing Department maintains the buildings).

Services

The team provides a generic social work service which includes:
- Child protection and children in need
- Support for vulnerable adults, people with mental health problems and those with complex needs including people of all ages with physical or learning disabilities
- fostering and adoption.
- support for vulnerable older people, 
- co-ordination and delivery of day centre activities for older people
- provision of pre-sentencing reports and overseeing probation orders.
- allocation of sheltered housing and on-going support
- assessment of welfare allowances

A transition service for a school-leaver and
Social Services continued....

people with severe physical and learning disabilities is in the process of being developed through the vulnerable people strategy.

More details about a few of these services is outlined below.

Probation Service. The team carries a small probation caseload and write pre-sentence reports for the court. The social work assistants and social worker undertake the probation programmes such as alcohol awareness and responsible living programme. Community service orders are also co-ordinated by the team.

We have a small number of foster carers on the East and West Islands and are currently recruiting for more carers. It is hoped that we will be able to establish a pool of carers in the community, which will be able to provide emergency, short-term placements for children and young people.

Services for children, young people and adults with additional needs are integrated with mainstream services, such as education and employment services. The process for transition planning is currently being developed, as is a process for supporting young adults in the work place.

A parents support group for children with additional needs is held once a month. This is led by the parents themselves.

The team provides support to the Community Psychiatric Nurse (CPN) and the district nurse. Community needs led assessments are undertaken jointly with the District Nurse. Attendance Allowance, social support from the social work assistants and home help is provided.

The team is also responsible for an adult community group, Acorns, which meets three times a week in the Day Centre at the Hospital. It is a registered charity and a group of service users manage the activities, funds and remit for the group. Staff member facilitate sessions, working alongside service users, core volunteers and other health staff. The group includes young adults with additional needs, adults with mental health needs, older people from the community and residents from the sheltered housing.

All assessments for welfare assistance and Attendance Allowance are undertaken by the staff team and reviewed regularly. This system works closely with the Employment Programme. This programme provides placements and support for those people who have been out of employment for 6 weeks or more and / or have special needs and require mentoring in the work place.

We have a number of sheltered housing units over three sites in Stanley, two within close proximity to the hospital and the other in the centre of town. The mobile wardens visit the residents, deal with day-to-day tasks and provide emergency cover.

The social work team provides 24hr cover to the community through an on-call rota.

The Falkland Islands has a NVQ Centre that provides a range of qualifications. The social work assistants work towards the NVQ level 3 in Caring for Children and Young People.
Quality and Standards

We are proud of the quality of service that we provide and we endeavour to maintain standards in a variety of ways, as set out below.

Professional Registration

It is a requirement of working in the Falkland Islands that all qualified staff are registered with the appropriate UK registering body or be eligible to register by dint of registration with a UK-recognised international equivalent. These might include Australia, New Zealand, South Africa, Canada, some other Commonwealth and EC countries, and USA, depending on the profession.

As far as possible, we seek to employ staff who are familiar with the professional culture and approaches of the UK NHS so that they can be assimilated easily into our own service.

All staff undergo a police check and all staff members who will work with children are required to have an enhanced disclosure.

Advisers

We have a number of advisers who either advise us at a distant or visit periodically. Advisers include:

- surgical and anaesthetic advisers who vet all applicants for the surgeon and anaesthetist posts, and review the service on a periodic basis;
- a range of engineering advisers who review systems and procedures e.g. decontamination; medical gases etc;
- consultant microbiologist who advises on infection control policy, antibiotics policy etc;
- dental advisor who provides dental public health input to the service;
- radiation protection inspection/advisors who assess our compliance with radiation protection standards

NSFs, NICE and Other UK Guidance

As we are not part of the NHS, we are not obliged to follow UK guidance and adhere to UK standards. However, we endeavour to do so as far as reasonably practical within our slender resources and isolated circumstances.

Clinical Governance

We have recently appointed a healthcare governance and development facilitator to take forward the implementation of our clinical and healthcare governance framework. The framework is drawn from UK models and standards of good practice.

Continuing Professional Development

We have a local programme of training and CPD which includes mandatory training such as fire, manual handling, infection control. Our accredited trainers offer ILS courses and a local version of the ATLS course. We have an active NVQ programme and a number of our health care and social work assistants have achieved NVQs at Levels 2 and 3.

In addition, we provide opportunities for many staff to train overseas each year in order to maintain registration and further develop the skills needed to run our services.

Infection Control

We have stringent infection control standards which are monitored by our infection control team and committee.

Working Environment

KEMH is generally a pleasant place to work. Most UK-based health professionals react with surprise to the levels of cleanliness, the range of services we provide, and the sophistication of medical equipment. The ward area has recently been upgraded and the environment for our elderly residents has improved significantly. However, the hospital is now over 20 years old and some sections still need to be updated.
Other Services

Occupational Health

The hospital houses the FIG Occupational Health team, which is provided, on a sessional basis, by one of the doctors and an occupational health nurse. The team also provides private occupational health services to companies throughout the islands. Staff can self-refer, request a referral from a doctor, or be referred by a manager.

Public Health

The Chief Medical Officer is also the Government’s chief adviser on health issues and public health. His responsibilities incorporate some aspects of environmental health including food handling and hygiene, though this tends to be a reactive role. Medical officers are responsible for de-ratting ships visiting the harbour. Our pathology laboratory also acts as the Public Health Laboratory, analysing samples of water, milk, meat, fish etc..

Further Information

For further information is available from the King Edward VII Memorial Hospital, St Mary’s Walk, Stanley, Falkland Islands, FIQQ 1ZZ

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For further information on the Falkland Islands, please go to: www.falklands.gov.fk or www.falklandislands.com

November 2010