

YOUNG CAYMANIANS ON THE ROAD TO SUCCESScont'd from page 11

Dr. Pomares is the daughter of Pedro and Malsie Pomares. She is married to Errol Anthony Miller and is a new mother to six-month-old Zhane Solange.

Director of Health Services Mervyn Conolly says he is very proud and pleased by the decision of both Dr. Pomares and Dr. McLaughlin to return home and make a contribution to health care in the Cayman Islands.

"This is very encouraging and I hope it will help to stimulate more of our young

Caymanians to pursue careers in the field of health care."

He says both doctors have brought tremendous skills and knowledge from their training and work experiences overseas, which will add to the high calibre of the medical team at the Cayman Islands Hospital.

Health Services joins in extending welcome to Dr. McLaughlin and Dr. Pomares to the team.

NEW ELECTRONIC CHARTING SYSTEM GOES LIVE IN CRITICAL CARE UNIT

A new patient data information system went into operation on the Critical Care Unit on Wednesday, March 27.

The Spacelabs electronic charting system automatically downloads all information collected by the bedside monitor of a patient and displays the data in a chart format.

More on this new system in our next issue of Health Services News.

HUMOUR



A Sunday school teacher was teaching her class about the difference between right and wrong.

"All right children, let's take another example," she said. "If I were to get into a man's pocket and take his billfold with all his money, what would I be?" Little Johnny raises his hand, and with a confident smile, he blurts out, "You'd be his wife!"

A Sunday school teacher asked the children just before she dismissed them to go to church, "And why is it necessary to be quiet in church?" Annie replied, "Because people are sleeping."

A Sunday School teacher asked her class why Joseph and Mary took Jesus with them to Jerusalem. A small child replied: "They couldn't get a baby-sitter."

A Sunday school teacher was discussing the Ten Commandments with her five and six year olds. After explaining the commandment to "honor thy father and thy mother," she asked "Is there a commandment that teaches us how to treat our brothers and sisters?" Without missing a beat one little boy answered, "Thou shall not kill."

Submitted by Pat Bell

A new preacher moved into town and went out one day to visit his parishioners. All went well until he came to one house. It was obvious that someone was home, but no one came to the door even after he had knocked several times. Finally, he took out his card, wrote on the back "Revelation 3:20" and stuck it in the door.

The next day after service, as he was counting the offering he found his card in the collection plate. Below his message was a notation "Genesis 3:10"

Upon opening his Bible to the passage, his face turned red and he let out a roar of laughter.

Revelation 3:20 reads: "Behold, I stand at the door and knock. If any man hear my voice, and opens the door, I will come in to him, and will dine with him, and he with me."

Genesis 3:10 reads: "And he said, I heard thy voice in the garden, and I was afraid, because I was naked."

A civil servant has told of his anger and humiliation after a woman who said she was desperate to marry him posted his naked picture on the Internet.

Stephen McPherson, from Grays, Essex, achieved cult status when millions of

people around the globe saw the image of him in his birthday suit on Valentine's Day.

Sarah Jay, 23, who claimed to have been his girlfriend for seven years, put the saucy photograph on the web and begged other users to persuade him to propose.



In this issue

- No changes to employee benefits as of July
- Health Minister encourages staff to donate blood
- Strategic Plan reviewed
- Up close with Dr. Ruthlyn Pomares

EMPLOYEE BENEFITS GUARANTEED IN PROPOSED HEALTH SERVICES AUTHORITY LEGISLATION

All current benefits offered to Health Services employees have been guaranteed in the proposed Health Services Authority Legislation. Additionally, there will be no major restructuring of the organisation or job-loss as a result of the transition to a Health Services Authority on July 1.

Those are two of the key messages which are being relayed to employees in a series of meetings hosted by the Director of Health Services, Mr. Mervyn Conolly

and members of the senior management team.

Mr. Conolly disclosed that based on discussions with the Ministry one of the fundamental principles agreed to is that all employees of the Health Services Department will not be any worst off as a member of the new Health Services Authority than if they had remained a Civil Servant.

He noted that while the move to an

Authority will have some implications, the Health Services views its staff as its most valuable asset and therefore is committed to ensuring that all available information is provided in a timely manner.

All current employees will receive official notification of their intended transfer to the Health Services Authority along with other information on new policies and procedures which will be adopted by the Health Services Authority as of July 1st.

For those employees who will transfer to the Authority, there will be no change in the substantive terms of employment and employee benefits, including Pay, Pensions, Health Care benefits, holiday entitlement etc.

Mr. Conolly noted that the move to a Health Services Authority will bring about new and challenging opportunities for the Health Services. He cited several benefits which will result from this:-

- improved decision making
- improved recruitment process
- greater efficiency in operations
- service will operate as a business
- ability to determine own staff structure and remuneration

This month we continue to provide answers to the questions which many of you have submitted on the proposed Health Services Authority.

Turn to page 5 for all the answers to the questions you asked about the proposed Health Services Authority.

HEALTH MINISTER ENCOURAGES STAFF TO DONATE BLOOD



The Minister of Health, the Hon. Gilbert McLean, has suggested a staff blood donor pool, as part of a national programme aimed at sensitising people about the importance and benefits of donating blood.

Noting that he has been a blood donor since the 1960s, Mr. McLean says he "knows only too well how vital blood is in

helping to save lives. It's amazing how just one donation, given in 15 minutes, can help to save lives," he adds.

While on a visit to the Hospital on February 22 to donate blood himself, the Minister issued an appeal for local support, citing the link between blood donation and lifesaving.

The high cost of importing blood, and the possibility of being unable to get the required quantity of certain blood types when they are needed, can put lives at risk, he continues. He further notes that during surgery, it is important that blood is readily available should it be needed.

The Blood Bank, the only one on the island, is now on a drive to build its donor pool and increase the level of blood supplies by encouraging current and new donors to give blood.

INFORMATION SYSTEMS UPDATE

This column contains the answers to some of the most Frequently Asked Questions received at our Help Desk. Please take a few minutes to become familiar with these problems and solutions. It will save you a lot of time later on.



Your username is usually your first name, a period and your last name, all in lower case (such as john.doe).
- Your password must be entered in the same case as used when you chose it. For most people, this is lower-case, so make sure your Caps Lock is off (no green light beside the "A" symbol on your keyboard). Your domain is always "HS-NET".

I can't send email because my mailbox is full. What do I do?

One of the most frequent support calls received by our Help Desk is "my mailbox is full". The attached document contains some important tips on keeping your mailbox tidy and ensuring that your ability to send email is not revoked due to a full mailbox.

computer and then re-start it. If you do not follow this procedure, the "illegal operation" will continue to re-occur. Once you have restarted your computer, the error will be resolved and you can print normally.

Solving problems like these on your own will get you up and running faster, give you a sense of accomplishment and help us to improve our response time on other support calls.

As always, if you have tried these procedures and still have problems, please contact the Help Desk at Extension 2666.



When I print a document, it says my program has performed an "illegal operation" and nothing prints. What do I do?

An "illegal operation" message indicates that the program used to print your documents encountered an error. The only way to correct that error is to perform a shutdown command, turn off your

I cannot log in to the network. What do I do?

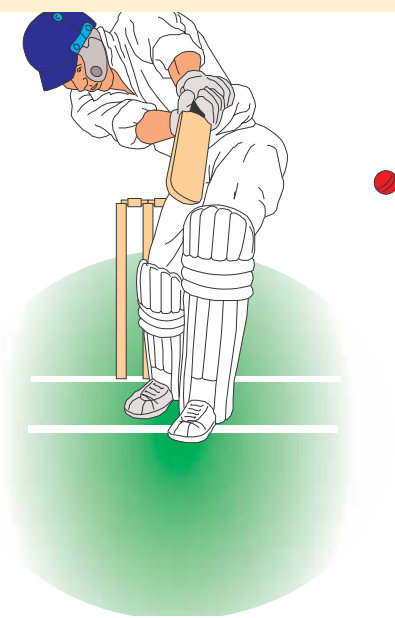
If you have made multiple attempts to log in without success, the system may have locked you out for 10 minutes. Shutdown the computer, wait 10 minutes, re-start the computer and try to log in again. Make sure you enter your username, password and domain correctly.

It's cricket lovely cricket

It's time for cricket, lovely cricket. Come out and support the Health Services Cricket team as they vie for championship honours in this year's domestic club competition.

Below is the schedule of games and their location. All matches begin at 10:00 a.m. The team needs your support. Please come and cheer them on.

| | | |
|--------------------|----------------------------------|------------|
| Saturday, March 9 | Health Services vs. West Bay | Smith Road |
| Saturday, March 16 | Health Services vs. Cayman Brac | Smith Road |
| Saturday, March 30 | Health Services vs. Paramount | Smith Road |
| Saturday, April 13 | Health Services vs. Greenies Too | Smith Road |
| Saturday, April 20 | Health Services vs. Roraima | Smith Road |



YOUNG CAYMANIANS ON THE ROAD TO SUCCESS

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She has juggled medicine, marriage and motherhood over the past eleven years in order to graduate with a specialist degree in emergency medicine.

Asked why she chose medicine as a career, Dr. Elizabeth McLaughlin reflects upon her Cayman Islands High School (now JGHS) experience as she explains. Her love for science led her to select mathematics, physics, and chemistry as subjects for A' Level studies.

The University of Toronto was next, where she earned a BSc. in microbiology. She then worked for a year at the George Town Hospital in the Laboratory and in the Emergency Room, before pursuing medicine at the Mona campus of the University of the West Indies (UWI), completing her degree in 1995.

She interned at the University Hospital in Jamaica, where her optional areas were Accident and Emergency (equivalent to the Emergency Room) and Orthopedics.

One of a pioneer group of seven who enrolled in the emergency medicine program at UWI, the birth of the first of her two children merely delayed her studies for a year. Now that Dr. McLaughlin has graduated and had her second child, all that remains for her to do is complete her oral exam in June.

Dr. McLaughlin points out that more young Caymanians are needed in all fields, who are willing to study and return home. For those teens interested in becoming doctors, Dr. McLaughlin encourages them to pursue that desire, but for the right reasons, "It is not something to pursue for prestige.

You can earn that in many other careers, and in a much shorter time, but if you enjoy interacting with and helping people, then medicine is very rewarding. It does take a lot of time but it is one of the few things in life where you can *directly* make a difference in the lives of others."

Dr. McLaughlin is the daughter of Althea and McNee McLaughlin and is married to Dr. Howard Deosaran.

Another Caymanian and Cayman Islands High School graduate who chose medicine as a career is Dr. Ruthlyn Pomares.

Following her graduation in 1992, she went on a one-year Rotary exchange programme in Hamilton, Ontario, prior to graduating from UWI in 1999 with a bachelor of medicine/bachelor of surgery (MBBS).

Dr. Pomares completed her internship at the Kingston Public Hospital (KPH) and is now a resident at the George Town Hospital. She plans to pursue a specialist degree next March in either internal medicine or surgery.

Citing a love for the sciences, a desire to help people and have a career at the same time, Dr. Pomares explains not only why she chose medicine but why she loves her job: "I like it, I really enjoy it! There's just something about helping people that is so rewarding. For example, I was working in the general practice clinic for about four months and I still have patients coming by just to say hi."

Dr. Pomares explains what her daily duties include. She completes ward rounds with (medical) consultants every morning, then clerks new admissions

throughout the day. Clerking involves researching patients' medical histories, then examining, diagnosing and deciding on admissions.

On Tuesdays and Thursdays, she is in charge of monitoring stress EKGs. Every other day, she is on call in the evenings for surgery. In an emergency, she may be called upon as an assistant surgeon.

As for advice to those considering medicine as a career, Dr. Pomares says, "Make sure it is what you want to do because it is a very long road. You have to be willing to commit yourself to constant study as medicine is an ongoing practice.

It is always changing: with the emergence of new diseases and new ways to treat them, it is your duty as a doctor to



keep up with everything. You also have to be the kind of person who won't get annoyed if you are called at two in the morning."

Dr. Pomares is the daughter of Pedro and Malsie Pomares. She is married to Errol Anthony Miller and is a new mother to six-month-old Zhane Solange.

Workplace Health Promotion Programme

As employees of Health Services, we are more aware than most of how important our health is. In order to support all our staff in maintaining and improving their health, the Workplace Health Promotion Programme (WHPP) will be launched at the end of March 2002.

In 1986, the World Health Organization recommended a move away from individual based health promotion towards the need to acknowledge the influence of the wider environmental 'settings' in which we live and work. The workplace was identified as one of those settings.

A wide range of scientific research has demonstrated the possible health and financial benefits from a WHPP.

The Cayman Islands Health Services recognised the potential to improve the well-being of the Cayman population through such programmes, and provided funding for two members of staff to attend training in the US so that effective WHPPs could be implemented.

The first WHPP will be piloted with you, Health Services staff. The initial step in developing a WHPP is to assess staff's health. This assessment was carried out with 222 staff members completing the questionnaire.

The data from the assessment was split into three areas:

1. Early detection (self-examination and screening)
2. Mental/emotional and social health
3. Lifestyle

As advised by the American Journal of Health Promotion, the WHPP is based on the Transtheoretical Model of behaviour change.

In summary, this model acknowledges that when people make any changes in their life, they go through a series of stages.

The model emphasises how important it is to target health promotion depending on where in this cycle of change a person is.

The aim is to support a person in progressing from one stage to the next.

It takes a realistic view that people do not make behaviour changes over night, and that priority should be placed on supporting and enabling people to make the changes they want to make.

Below is a selection of the results from the staff health assessment (for a copy of the results report contact Sarah Diggle):

- 72% of female participants have regular pap smears (at least every 2 years);
- Only 35% of females aged over 40 years have an annual mammogram;
- 20% of males have had a screening test for prostate cancer;
- Over a ¼ of the participants feel stressed frequently, 59% feel stressed sometimes;
- 84% of participants are currently attempting to reduce stress levels;
- 90% declare that they find meaning in their life all of the time, or most of the time;
- 40% have exercised (3 times a week for at least 20 minutes each time) for more than 6 months; 52% are in the cycle of change (intend to start exercising in the next 30 days – 6 months);
- Only 49% feel that they are within 15lbs of their ideal weight;
- 75% are already trying to, or intend to lose weight.

The assessment also showed that there was enthusiasm amongst staff for a WHPP, with 75% claiming that they would participate.

The assessment results have been used by the WHPP Working Group to devise an action plan of activities with the aim of improving staff health.

Upcoming WHPP projects are:

1. Staff Birthday cards (starting April/May 2002)

Keep a look out for your birthday card with health messages!

2. Breast health information (starting May 2002)

Keep checking your email for breast health information or ask your section supervisor for information

3. Prostate/testicular health information (starting June 2002)

Keep checking your email for breast health information or ask your section supervisor for information

4. Beat the stress & Cope with Change workshops (starting April/May 2002)

Due to rising stress levels, don't miss these workshops provided by EAP. Also included will be 'how to cope with change', as this becomes increasingly important as we become a Health Services Authority.

5. Weight Management Counselling Sessions (starting April 2002)

Want to lose weight? Need help? Make an appointment with the nutritionist at the Specialist Clinic by calling ext. 2530 or at the GT General Practice by calling ext.2800.

6. Nutrition Education Sessions (starting June 2002)

Don't miss these interesting sessions, which will give you all the information you need about healthy eating.

The first Nutrition Education Session will be held in the Hibiscus Conference rooms 8am until 9am on Friday June 21st. Just come along!

As 74% of you recommended that activities should be held during both work and non-work hours, we have requested supervisors to accommodate staff attending WHPP activities during work time wherever possible.

Don't forget the date mentioned in this article. For any further details about the WHPP, please contact Sarah Diggle at ext. 2632.

Strategic Plan for Health Reviewed



The Health Services Department recently undertook a major review of the National Strategic Plan for Health to ensure that the plan still remains current in a changing environment.

The Cayman Islands Strategic Plan for Health was developed between 1994 and 1997, reviewed in 1998 and 1999 and approved in its current form by Executive Council in October 2000.

At this Planning Session, 28 Planning team members were present, representing the Government Health Services, the private sector and the public in general from both Grand Cayman, Cayman Brac and Little Cayman.

The group met on Friday, February 22 at the Holiday Inn to review the progress of the plan's implementation and, if necessary, to develop new strategies and action plans for the way forward.

Minister of Health Services, District Administration and Agriculture, Hon. Gilbert McLean who delivered the opening address spoke of the individual responsibility of every resident in the Cayman Islands to ensure the sustainability of a quality health care system.

"There are several reasons for this; first and foremost I strongly believe that the future of a quality health delivery system requires to a large extent the involvement of everyone" he said.

He stressed however that government would have to continue providing subsidies for those persons unable to afford such responsibilities and for public health programmes.

The Minister drew particular reference to Strategy 3 of the National Strategic Plan which states, "we will encourage each member of the community to accept his/her responsibility to contribute to the maintenance of personal and community health."

In outlining his vision, Mr. McLean stated that "the time and era which we are presently in requires a different mindset about the role government must play in providing health services, and the need for organisations to work across disciplines to achieve the same objective."

Director of Health Services, Mr. Mervyn Conolly commended the team for the exhaustive work already done in accomplishing the strategies contained in the Strategic Plan



Mr. McLean expressed the view that "one way of dealing with the increasing cost of providing healthcare within the Cayman Islands, is to establish a health care delivery system that is based on individual responsibility."

Mr. Conolly said he was particularly pleased to note that many members of the very first planning team were in attendance and were willing to make a meaningful contribution to the on-going development, review and implementation of the Strategic Plan.

Deputy Director of Health Services, Mrs. Eloise Reid who gave a summary of the progress made in the plan's implementation noted that significant progress has been made in the implementation of the strategies outlined in the Strategic Plan for Health.

She disclosed that 70% to 80% of the action plans are considered either completed or are being worked at.

Mrs. Reid also reported that nearly 70% of the Action Steps of the Strategies directly related to the Sister Islands were already completed or being worked at.

She noted, however, that while significant progress had been made in the implementation of the Strategic Plan there were some strategies with action plans that were outside the control of the Health Services Department and other action plans that required inter-departmental support to be pursued.

Four teams of six to seven Planning Team members were formed to review two strategies each and make recommendations on the way forward.

At the end of the day the Planning Team reconvened in a plenary session to discuss the groups' recommendations for changes to the existing Strategic Plan.

These recommendations will be forwarded to Ex. Co. for approval via the Minister for Health and Action Teams formed to review and develop new strategies and action steps that will make the Strategic Plan for Health more relevant to the present reality of Health Care in the Cayman Islands.

News from Health and Medicine

II World's Population Ageing – Implications for Health and Care Services.

The state of health in the world in general and in particular in the European Union and North America is better than ever before. This is due to the enormous progress made in the second half of the 20th Century in medical research, health services provision and living conditions. These in turn translated into demographic changes characterised by increasing numbers of older people alive. Older people require more and different health and care services than younger people.

In the Caribbean, despite the existing economic challenges and where the demographic transition to an older population is taking place at an accelerated pace (2), health care systems must nevertheless meet the needs of an increasingly older population in the future.

Presently, the majority of old people in need of permanent assistance and care are attended to by family members, at home. However, in the future, the proportion of the young and the old will crossover. Thus, in the future, the number of old people suffering from chronic age-related diseases will surpass the number of young people available to attend to their needs. As a consequence, more professional services will be required such as: home nursing, old age assistance programmes, old age nursing homes and old age apartments (1). In addition, today's health preventative measures that promote a healthy lifestyle (better nutrition and exercise) should be seen as a cost-effective and crucial means to extend the number of healthy-life years. These measures are important contributing factors to the reduction in the number of years in dependency / care of the old of the future.

Therefore, today's challenge for health care policy makers is to ensure that new health policies will provide adequate and cost-effective responses to the problems of an ageing population. In this context it is crucial to balance quality of care with costs while improving health conditions among the most vulnerable age and income groups in society.

Contributor: P. Rodrigues (Ph.D.) – H.S Research Officer.

Sources:

1. European Symposium –Towards a society for all ages – European Commission (2001).
2. Eldemire-Shearer D., Ageing - A New Challenge to Health Care in the New Millennium, West Indian Med. J., 2001, 50 (2), 95-99.

What they are saying about us

Two weeks before Christmas, I was admitted to the George Town Hospital emergency Department at 10:30 in the evening for a respiratory ailment. The Emergency Room doctor determined that I stay in the hospital for the following five days for intensive treatment and rest.

I want to publicly thank all the staff on the Emergency and Medical Wards at the George Town Hospital for the wonderful care they gave me during those five days, including the maintenance, cleaning and food services personnel. Everyone who came into my room, at any time during the day or night, was pleasant and cheerful and very professional. The nursing and doctors' care was excellent, both in the Emergency and Medical Wards - I knew I was in good hands at all times, starting from the time I entered the hospital.

Your hospital is a credit to your island and Caymanians can take much pride in it. I'm an expatriate, living on the island for a few years, and I know that I would not have received the same quality care in my home country.

Thank you for giving me the opportunity to express my thoughts through your newspaper.

Christine Mills (Robb)

Dear Mrs. Reid:

I was recently a patient in your hospital. I had an emergency abdominal surgery for a small intestinal blockage. I was in the hospital for almost 2 weeks.

From the time I entered the hospital via the emergency room, I received excellent care. I was placed on the surgical floor. The nurse who took care of me were smart and very caring.

I believe I received better care here than I would have gotten in the USA.

When I turned my light on (nurses call button), it was answered within 2 minutes. I never had anyone answer my light who was not nice to me. They always acted like they wanted to help me.

I am getting a little stronger each day thanks to the excellent care I received at the G.T. Hospital from the Nurses and from Dr. Bromley.

Sincerely

Carolyn Nichols.

World Health Day 2002

Be active, Stay Healthy

April 7, 2002 is World Health Day and this year's World Health Organization (WHO) slogan is **Move for Health**.

This is a call to individuals, communities and countries to associate physical activity with the prevention of diseases and the consequent gain of a longer and healthier life.

The WHO estimates that by 2020 non-communicable diseases will cause over 70% of the global burden of disease.

Non-communicable diseases are those acquired over a period of time due to what we eat and how we live.

These diseases are not only affected by individual behaviour but also by poverty, violence, rapid social and economic changes, lack of education, inadequate or total lack of health services and lack of clear health policies.

The WHO estimates that worldwide the lack of physical activity leads to more than two million deaths per year.

The WHO also estimates that, a combination of improper diet, insufficient physical activity and tobacco use are the cause of up to 80% of all premature coronary heart diseases.

Lack of physical activity and consequent obesity substantially increases the risk of high blood pressure, lipid disorders, osteoporosis, depression, anxiety, type II diabetes and cardio-vascular diseases. Obesity is now a major public health problem in North America, many Latin American countries, the Middle East, Asia and the Western Pacific Islands.

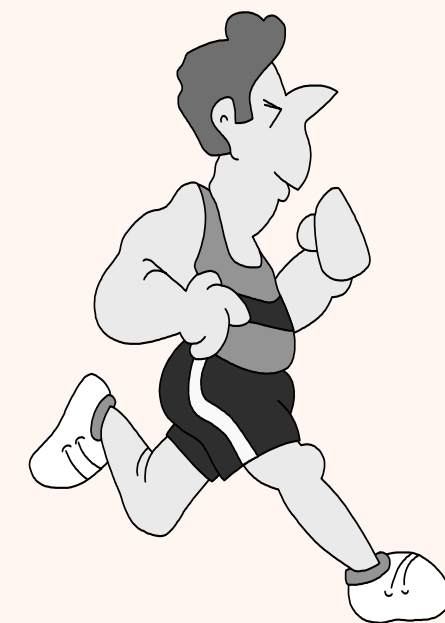
Just in the USA, obesity causes an estimated 300 000 deaths annually, this number is only exceeded by deaths related to tobacco use. In China, an estimated 200 million people could become obese in the next ten years.

Despite the health problems linked to lack of physical activity and obesity, the secret of good health has been known for a very

long time, as **good eating habits combined with adequate exercise**.

Today there is enough epidemiological information suggesting that moderate exercise combined with an adequate diet can reduce the occurrence of non-communicable diseases such as: heart attacks, strokes, type II diabetes and some forms of cancer.

Studies in various countries suggest that moderate changes in lifestyle are sufficient to prevent the development of almost 60% of type II diabetes cases. Also, one-third of cancers can be prevented by maintaining throughout life a healthy diet, normal weight and physical activity.



At both the individual and social levels, physical activity can be a practical means to achieving health gains such as:

- lowering the rates of violence among young people and promoting a tobacco-free and drug-free lifestyle,
- reducing feelings of isolation and loneliness among older people and improving their physical and mental agility,

- reducing obesity in all age groups and consequently the burden of non-communicable diseases associated to it.

What is physical activity?

Physical activity is the expenditure of energy through body movement such as walking, climbing stairs, dancing, swimming, skating, etc.

Why is physical activity important for one's health?

Physical activity is important as it prevents and controls several non-communicable diseases such as: cardio-vascular diseases, type II diabetes, obesity, osteoporosis, etc. Being physically active increases one's energy level, helps to reduce stress, lowers unhealthy cholesterol and blood pressure and reduces the risk of some forms of cancer.

Physical activity promotes healthy growth and development in children and young people, increases self-esteem and the feeling of achievement and improves the quality of life and independence of older people.

How much physical activity do I need in order to improve and maintain my health?

The minimum suggested is 30 minutes of moderate activity everyday.

Remember: We all need to **be active to stay healthy**.

Contributor: P. Rodrigues (Ph.D.) – H.S. Research Officer.

Sources:

1. WHO – **World Health Day 2002** – Move for Health.

Welcome!

This column is intended to give new users of Microsoft Outlook 97 important information to help maximise satisfaction and minimise frustration. Take the time to read and understand this information. If you have any questions, contact the Help Desk.

Your Mailbox

Your "mailbox" is a place in our computer system assigned to you to store your Outlook-related information. Your mailbox contains different folders for each type of information. These folders include an Inbox for incoming mail, a Sent Items folder for mail you have sent out, a Calendar for your appointments, a Contacts folder for names and addresses and several other folders. Your mailbox also includes a Deleted Items folder that temporarily holds Outlook items that you have deleted, until you "take out the trash" by emptying your Deleted Items folder.

We have a lot of Outlook users, but only a limited amount of space on our computer system. For this reason, each person's mailbox is has a maximum capacity. That way, everyone has an equal share of the computer system and no one person can take more than their share of space. It is important to manage your Outlook-based information to make sure your mailbox doesn't fill up. When your mailbox is full, Outlook will prevent you from sending any email messages until you remove some items from your mailbox.

Each night, Outlook checks to see how full your mailbox is. If it is close to being full, you will receive one or more messages from Outlook indicating that your mailbox is nearing its maximum capacity and asking you to reduce the size of your mailbox.

Once your mailbox is full, you will receive further messages each day, and you will be unable to send any emails until you reduce the size of your mailbox below the maximum allowed size.

Remember that your mailbox consists of

all of your Outlook folders including Inbox, Sent Items, Deleted Items, Calendar, Contacts, Journal, Notes and any additional folders that you created within Outlook.

When you start receiving warning messages, you should take steps immediately to reduce the size of your mailbox. Here are some pointers on how to do this.

1. Empty the Deleted Items folder. Right-click the Deleted Items folder and click on "Empty Deleted Items Folder". Items that are deleted from folders are not immediately removed from the mailbox. Instead they are moved to the Deleted Items folder which is part of the mailbox, therefore they continue to take up space. After deleting any items from any folder, you must also empty the Deleted Items folder to completely remove the items and free up space.

2. Check for very large file attachments. Most Outlook items such as emails and appointments are very small in size. But emails can sometimes contain attachments that are very large in size. Here is a technique for showing the size of each email item, in order to find very large attachments.

You should use this technique in your Inbox, your Sent Items folder and any in history folders that contain mail items. On the View menu, click Show Fields. Then click "Size", the Add button and the OK button. Click on the Size column heading twice to sort by size in descending order. Check for large items (ie. over 1 Mb in size) and delete them if possible.

If you wish to keep the attachment, save it to your U: drive before deleting it from your mailbox. Repeat these steps for each mail folder listed above. Remember to empty the Deleted Items folder afterwards.

3. Run the auto-archiver. Outlook will periodically archive old items based on user-defined auto-archive settings.



Archiving will move the old items out of your mailbox and into another area called your archive. Outlook periodically prompts you to run auto-archiving, but you can tell Outlook to run it immediately when you want to free up space in your mailbox right away. On the File menu, click Archive. Click "Archive all folders according to their auto-archive settings", then click "OK".

4. Empty your Journal folder. Most people do not use the Journal folder, which contains an entry for every Word or Excel document editing session. To empty this folder, click Journal on the Outlook bar, then click Edit > Select All, then Edit > Delete. Remember to then empty your Deleted Items folder to complete remove the items and free up space in your mailbox.

Profiles

Your mailbox is stored on our Windows file server, not on any individual PC. You can access your mailbox from any PC that has an Outlook "profile" set up for you. The Outlook profile tells the PC where to find your mailbox.

You must ask the Help Desk to set up an Outlook profile on each PC on which you wish to use Outlook. You will not be able to use Outlook on a PC that does not have a profile set up for you.

Once an Outlook profile has been set up for you on a PC, you can use that PC to access your mailbox. If you use a PC that is shared by other users, you will have to select your name from the list of profiles available on that PC when starting Outlook. If you are the only user on the PC, your profile will be selected automatically.

THE HEALTH SERVICES AUTHORITY & YOU

Here are the answers to the many questions submitted by you about the proposed Health Services Authority.

1. Will there be any cuts jobs/pay/benefits?

The Health Services Department values its employees as its most important asset and will do everything to protect employee benefits. In discussions with the Ministry, agreement has been reached on five key human resource principles which include the protection of salary and benefits.

HR Principle 1: This principle is that for the 1st July implementation, there will be no major restructure of the organisation or job-loss. It will not preclude re-organisation at a later date, but will exclude any major re-organisation or job-loss to be made on 1.7.02.

HR Principle 2: This principle is, that in the absence of any Employment Protection Legislation, then all employees of the Health Services Department and those contracted for the provision of services will be given new contracts of employment with the Health Services Authority from 1.7.02

HR Principle 3: This principle says there will be no change in the substantive terms of employment for those transferring on 1st July. Substantive terms are those that affect the pay or benefits enjoyed by the employee, including Pay, Pensions, Health Care benefits, holiday entitlement etc. Once again, this will not preclude subsequent review but will prevent change occurring on 1.7.02.

HR Principle 4: This principle will allow changes to be made to the non-substantive terms of employment for all HSA employees from 1st July. The non-substantive terms are behavioural and performance rules, disciplinary and grievance procedures etc.

HR Principle 5: This principle will allow for new terms to be introduced for those starting after 1st July, where appropriate and practical. This principle will require that such new terms as introduced for new starters for 1st July,

will not disadvantage those transferring, nor will they disrupt the future introduction of new terms applying to all employees of the Health Services Authority.

2. What policy if any, will be put in place to ensure that the C.O.S. will not be reborn/continue in it's existing form or some mutated form thereof?

His Excellency, the Governor, Mr. Peter Smith has signed an Executive Order which will abolish the payment of Contracted Officers' Supplement (C.O.S.) to overseas contracted workers as of July 1, 2002.

This was done to bring expatriate public servants employed on overseas contractual terms more in line with the terms of service of Caymanian public servants. The C.O.S payment will be replaced by the defined contribution pension arrangements offered to new Caymanian and local contracted public servants since 1st January 2000. This new policy also fulfils the requirements of the National Pension Law.

3. What will the organisational chart of the authority look like?

The Authority will have a Board of Directors (6-8 persons) chosen by the Governor and the Permanent Secretary in the Ministry of Health, the DHS, CMO and the Medical Officer of Health will also sit on the Board. This Board will be responsible to the Ministry for its actions

As agreed with the Ministry, there will be no major restructure of the organisation on the 1st of July. A few changes in titles have been proposed to reflect the change from a Department to a statutory authority.

4. Who makes the "final" decisions?

The Authority will have a Board of Directors, as provided for in the Law. The Board will be responsible for and have the full power and authority over the policies, direction, management and administration of the property, affairs and business of the Authority in the exercise of its functions and duties and with full powers of

delegation.

5. How/Will cost of living increases be determined/given?

While the Authority will have its own decision making authority, through the Board, it will be guided by the Employment Relations Law. However these details have not been determined as yet. As soon as the Board is set up these policies will be developed and shared with the Staff.

6. What is the plan for health insurance for us?

According to the Law the employees of the HSA will be entitled to receive the same medical benefits provided to them previously by the government, provided that if the government shall change the terms of medical benefits to public servants, the authority may elect to amend in like manner the medical benefits of the public servants transferred from the government.

7. Will any consideration be given to allow pensions to continue as is, instead of freezing them as it currently stands?

It is the intention of the HSA to continue to contribute funds equal to the sum currently contributed by government to the Public Servants Pension Scheme for all of its employees. This will allow employees to maintain their current pension status without losing any benefits offered by the scheme.

8. How will the terms of employment change for PP staff?

The substantive terms (salary, vacation and other leave etc), of employment for the PPE staff will not change. However they will no longer be civil servants but rather employees of the Authority and therefore the role currently played by the Public Service Commission will revert to the Authority Board. In light of this situation the Authority will have to develop its own disciplinary procedures, hiring practises etc utilising the new employment Law as the framework.

9. Will PP officers get official notice from the personnel unit now under the government before July 1, if not will we be paid three months salary as per general orders if we are not given proper notice?

Official notice will be given to staff as per the General Orders apprising them of their transfer to the Authority. Staff not wishing to transfer will then have time to seek alternative work should they not wish to work for the Authority.

10. Can PP staff remain under the present pension plan if no why?

Yes. It is the intention of the HSA to continue to contribute funds equal to the sum currently contributed by government to the Public Servants Pension Scheme for all of its employees. This will allow employees to maintain their current pension status without losing any benefits offered by the scheme.

11. Will my health plan change under the health authority?

According to the Law the employees of the HSA will be entitled to receive the same medical benefits provided to them previously by the government, provided that if the government shall change the terms of medical benefits to public servants, the authority may elect to amend in like manner the medical benefits of the public servants transferred from the government.

12. Will we still be using general orders as a guideline for personnel issues?

The Authority will be developing its own personnel policies utilising the new Employment Relation Law as its guide. This Law is expected to supersede the General Orders.

13. Can a person leave the Health Services next year July, at age 50 years and receive their pension at that time since they will be frozen?

There are no plans to freeze pensions. However the Public Services Pensions Plan makes provision for early retirement from the Plan. When you reach the age of 50, as long as you have at least ten years of Qualifying Service you can be considered for early retirement. However your pension would be on a reduced basis. Refer to Section A: The Defined Benefit Part ,pages 4-5

14. What is the ratio/percentage that will be withdrawn from a person's salary monthly as of July 2002 and added to the pensions?

The Public Service Pension Scheme for current Civil servants is funded by a government contribution of 6% and staff 6% (12%) to the scheme. However, staffs' basic salary remains the same as government adds the staff pension contribution to their monthly salary. It is then deducted to the pension plan. In essence government pays the full 12% (their contribution and staffs).

15. Pension contributions: if we have to change, how is it going to be done? So far, Govt. has in fact paid the full amount (12%) that goes to the Pension Fund. How is it to be done in the future?

There are no plans to change the pension contributions.

16. Retirement: Can those who wish to retire do it without having their pensions frozen until age 60 or 65?

The Public Services Pensions Plan makes provision for early retirement from the Plan. When you reach the age of 50, as long as you have at least ten years of Qualifying Service you can be considered for early retirement. However your pension would be on a reduced basis. Refer to Section A: The Defined Benefit Part ,pages 4-5

17. Will we still be under Government's "General Orders"?

The Staff of the Authority will be expected

to follow the policies and procedures of the HSA as they will no longer be civil servants and under the jurisdiction of the public service.

18. Any progress on new schemes for Health Insurance?

It is not expected that a new scheme will materialise before year end. The Mercer Group contracted by government to explore the concept of implementing a self funded health plan will be fulfilling its terms of reference in a phased manner. The report for Phase 1 is due on the 15th March 2002, Phase 11 in May 2002 and phase 111 will consist of procuring the services of a third party administrator to administer the agreed plan.

19. Will there be career paths for all staff?

The health service will have to abide by the Government and Immigration policies and as such will have to continue to support the concept of Caymanisation. However, in the absence of qualified Caymanians other serving officers would be entitled to apply for vacant positions.

20. Will we stay under the existing Government salary scales and increment system?

Officers will transfer into the Authority on their same salary scale. The Authority may opt at a later date to develop its own salary scale but there are no imminent plans to change same.

21. There is a rumour going around that overseas contracted officers will lose their C.O.S. and that they will have to pay 6% toward their pension, in effect making their monthly take home pay 21% less. I do not understand this to be the truth but am asking you to confirm this?

It is a fact that overseas contracted officers will lose their benefit of COS at the end of their current contract. All contracts offered to staff (new or old staff) on ,or after July 1

2002 will include pension benefits instead of COS. The basic salary for officers currently receiving COS will remain the same, as government will fund the 12% pension benefit.

22. For persons on a local contact (expat) what will happen to the current pension? Specifically will it be frozen until the individual retires? (65 years). Or will that individual be able to access the money accrued on cessation of employment as a civil servant, i.e. July 1st?

The Public Service pension plan makes an allowance for expatriate officers to receive their pension contributions and any accrued interest at the completion of their contracts. However this will be paid 30 days after they have left the island.

23. Will Pharmacy be allowed to run as a business & generate an income payable direct to the section, allowing investment in resources in the event of increased workload?

The Board will determine any resource investment of the Authority. All fund collected by the sections will become part of the operating budget of the Authority . Sections will have the privilege to submit request for equipment and supplies justify needed

24. Please can you clarify the position on the COS and pension situation (with regards to the Memo sent from the Permanent Secretary on 31/1/02) - will the employee lose the 15% COS and have to also contribute 6% from their pay check, i.e.: a total loss of 9% and a 21% decrease on current monthly take home pay?

Refer to response to question # 21.

25. Will there be any changes in the current terms and conditions for staff having to sign a new contract from 1/7/02, other than C.O.S.?

When will the contracts be available to see

the terms and conditions for staff who have to renew in order for this to be in effect on 1/7/02. and if not what will happen if you have agreed to stay and sign in principle and on 1/7/02 the terms and conditions are different from what has been speculated and you no longer wish to take up the contract. Staff who are in the position at present and have to decide whether to renew or terminate need something to base their decision upon apart from speculation.

There will be no change in the substantive terms and conditions of staff as a result of the transfer to the Authority. However as the staff will no longer be civil servants the rules of General Orders will not apply to them. Staff will be made aware of the Authorities policies and procedures by the 28th March 2002. The HRM is currently drafting these new policies in keeping with the new Employment Relations Law, which is to come into effect by July this year.

26. Can staff back date their contract renewal date to start before the 30th of June by forfeiting and giving back AL to the Govt or negotiating something else?

This is not possible. Staff will not lose any benefits by becoming a member of the Authority. The move to an Authority was not intended to disenfranchise any officers but rather to allow the service to become more efficient in carrying out its goals and objectives. This hopefully will reduce staff frustrations with operating within the confines of the government bureaucracy.

27. Will we be required to have work permits? If yes, will they be 1 or 2 year GOL's?

Staff will be required to have work permit just as they do now. However the service would be exempt from the immigration requirement for professional fees for its staff. The HR section will prepare the necessary document for the work permits.

28. Staff members continued education programmes. How will it effect them,

including those who are currently enrolled in courses?

Will current contract issues run until the expiry of that contract? e.g. salary, COS, return passage & baggage arrangements etc.? Yes. See above

29. Staff with long term service, due long term service awards, continue to be candidates for them?

Yes. There are no plans to change this arrangement.

30. Will the Authority continue to pay the 'employees' 6% as the Department does now?

The staff will transfer to the Authority on their same terms and conditions of service. Therefore the Authority will continue to contribute to the pension scheme to the same amount as the government currently is contributing.

31. Will the provision for leave passage and baggage arrangements in current contracts be changed?

The return air fare for overseas contracted employees and recognised dependents between renewed contracts will continue.

32. Will current overseas contracted officers receive the proposed resettlement allowance on renewal of contract?

The one off month's pay as a resettlement allowance will only be payable to those arriving from overseas for **the first time** to take up a NEW contract from 1st July onwards.

HEALTH SERVICES ANNIVERSARY

In next month's issue of Health Services News we will provide a full report and photographic highlight of some of the activities which were held in March as part of Health Services Week.