

Public-Private Partnerships in Healthcare- A Look at Dialysis Services in Barbados

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Contracting Private Providers for Specialist Care for Health Services in Barbados

- **Overview**
- **Contractual Agreement**
- **Disputes**
- **Successes**
- **Limitations**
- **The Way Forward**

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- ▶ Health budgets are challenged in many countries, and Barbados is no exception.
- ▶ Public- Private Partnerships (PPP) are long-term contracts between private and public entities to provide health facilities, equipment or services.
- ▶ PPPs need to be an integral part of countries' health financing, purchasing and organizational strategies.

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Many countries face challenges such as:

- ▶ lack of capacity at the primary care level;
- ▶ obsolete infrastructure;
- ▶ high out-of-pocket payments, or
- ▶ inadequate amount of hospitals and specialized facilities.

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'Ensuring funds for health that allow people in society to access needed services without experiencing financial catastrophe.'

THIS IS WHAT WE CALL

UNIVERSAL HEALTH COVERAGE

To ensure Universal Health Coverage there must be: *Availability, Accessibility, Affordability and Quality*

*End Stage Kidney Disease is funded by the Government of Barbados and is free at the point of delivery. The **Government of Barbados** in 2011 acknowledged the great demand for dialysis services entered into a partnership with **SILS dialysis Services Ltd.** to ensure increased access to quality dialysis services.*

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Risk Factors

- ▶ 1 in 10 adults had an NCD, and 1 in 3 was being managed for at least one NCD.
- ▶ 1 in 3 had hypertension, 1 in 5 had diabetes, and of those with known hypertension or diabetes, at least 1 in 3 of those receiving treatment had suboptimal control.
- ▶ 8 in 10 men, and 9 in 10 women, had at least one risk factor.
- ▶ 2 of every 3 adults was overweight or obese; about 1 in 10 women, and almost 1 in 20 men, had 'gross' obesity (body mass index [BMI] ≥ 35 kg/m²).

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Country	CKD %	Death attributed to CKD	DALYS attributed to CKD	Treated ESKD Prevalence (per million population)	Chronic Dialysis Prevalence (per million population)
Antigua and Barbuda	10.79	4.61	3.15		
Barbados	13.63	3.68	2.62	682.5	678.8
Jamaica	10.67	3.22	2.89	137.4	131.5
St. Lucia	11.17	4	3.04		
St. Vincent and the Grenadines	11.65	3.64	2.83		

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Costs of NCDs to Barbados

- ▶ Current spending estimates of BBD 64 million, or approximately BBD 220 per capita, per year, on CVD and diabetes
- ▶ NCD-related OOP spending, prevention and treatment expenditures, and decreased productivity cost Barbados not less than BBD 375 million and could be costing as much as BBD 825 million, per year, a situation that is not sustainable, especially given the burgeoning NCD epidemic.

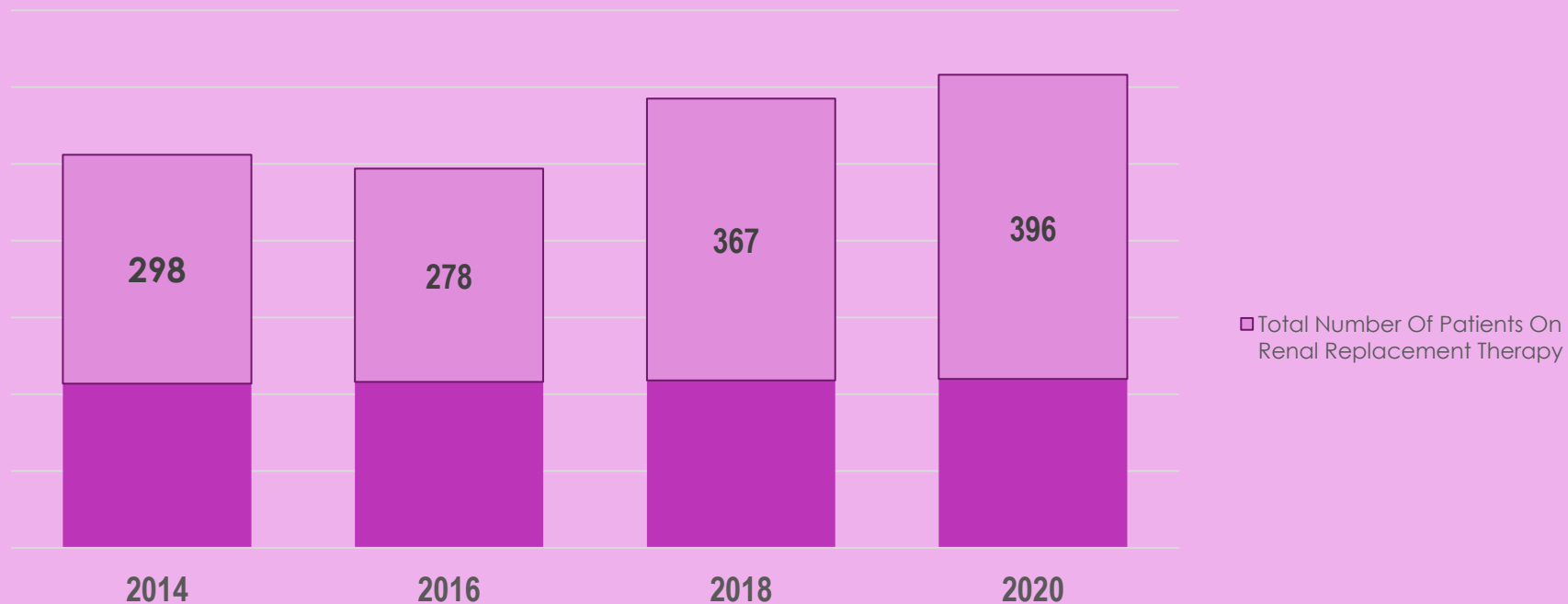
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Costs of NCDs to Barbados

- ▶ The current cost to dialyze a stable outpatient at The AKU is \$55,000. 00 BDS per year.
- ▶ The cost for treatment for dialysis for each patient is \$352.00 per visit, with patients requiring three treatments per week at the Artificial Kidney Unit (AKU).
- ▶ The Queen Elizabeth Hospital spends more than 7.2 million dollars on haemodialysis in its AKU annually.

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GROWTH OF PATIENTS ON RENAL REPLACEMENT THERAPY



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Contractual Agreement:

- ▶ In 2011, the Government of Barbados through the Queen Elizabeth Hospital entered an agreement with SILS Dialysis Barbados to provide dialysis services.
- ▶ SILS decreased the cost from the inherited contract price in 2011 by 25 per cent.
- ▶ The current contract price is now calculated at \$235.00 per treatment per patient based on thrice weekly treatment protocols for 194 patients.
- ▶ This translates to a total of \$7.1M per contract year.
- ▶ SILS currently provides treatment for 122 to 125 patients at about 4.5 million dollars.

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Outsourced Haemodialysis Service _ January – December 2022

Source: SILS Dialysis Barbados

	Warrens Site		Belleville Site		St. John Site	
	Patients	Cost [BBD]	Patients	Cost [BBD]	Patients	Cost [BBD]
January	46	\$138,180	51	\$150,165	21	\$57,340
February	49	\$128,680	50	\$136,300	21	\$51,935
March	47	\$149,460	49	\$152,280	20	\$59,455
April	48	\$140,295	53	\$143,290	22	\$64,390
May	46	\$136,300	55	\$154,395	22	\$61,805
June	47	\$141,940	53	\$161,445	24	\$65,800
July	49	\$142,175	60	\$158,155	22	\$65,300
August	45	\$135,360	60	\$190,350	22	\$61,100
September	44	\$133,010	58	\$176,720	21	\$63,450
October	45	\$137,240	57	\$171,785	22	\$66,740
November	48	\$139,590	57	\$158,155	24	\$70,030
December						
Total		\$1,661,820		\$1,911,195		\$761,605

Cumulative Total: \$4,334,620

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Disputes

- ▶ Alternate Care of the Elderly Programme assists in the annual registration and licensing of SILS Dialysis Barbados.
- ▶ SILS Dialysis Barbados is regulated by the Health Services (Private Hospitals, Senior Citizens Homes and Maternity Homes) Act 2005.

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Success from the Partnership:

- ▶ Patient results are above the global average of 65 with an average Urea Reduction Ratio at SILS in 2022 of 69.6.
- ▶ Developed strategic partnerships with local alliances and programs:
 - ▶ Ross University School of Medicine and SILS formed a program in 2019
 - ▶ SILS Dialysis Barbados started a fistula program with the QEH in 2019, where SILS subsidizes the cost for the theatre nurse.
 - ▶ A partnership with the Barbados Diabetes Foundation.

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Limitations of the programme:

- ▶ Inadequate amount of skilled dialysis nurses in Barbados.
- ▶ Inadequate measurements of patient satisfaction.
- ▶ Inadequate supply of consistent medication.

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The Way Forward:

- ▶ Engagement of PPPs should be selected in areas where it is more cost-effective.
- ▶ It is more cost-effective for dialysis services to be provided by SILS Dialysis Barbados at \$235.00 per visit as opposed to the AKU at \$352.00 per visit.
- ▶ Additional benefits such as:
 - ❖ Decentralisation of services
 - ❖ Sterile environment away from the main hospitals.

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The Way Forward

- ▶ Core functions that are essential to government should still be provided by the Central Government.
- ▶ Queen Elizabeth Hospital is investing and expanding the dialysis services currently provided, to ensure access and continuity of this essential service in the public sector.
- ▶ Active monitoring and evaluation,
- ▶ assistance with procurement practices to minimize financial risk.

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Conclusion

- ▶ Public-private partnerships can be beneficial due to deficits in relation to funding.
- ▶ The Government of Barbados through the QEH should take advantage of the programme by possibly increasing the numbers by 70 more patients.
- ▶ Dialysis services are provided more efficiently with SILS Dialysis Barbados.



THANK YOU

Prepared by the Planning & Research Department

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