HEALTH CARE

The biggest health news in 2002 was the privatisation of government’s health care services as the Health Services Authority (HSA). To reflect its new independence, the HSA restructured the departments in the Cayman Islands Hospital. Legislators also passed a new Health Practice Law; now four councils will license and regulate health professionals.

The Department of Substance Abuse Services achieved another of its goals when it opened the Caribbean Haven Halfway House in May, and parents received a wake-up call from the National Drug Council when it launched a major inhalants abuse information campaign.

Health Services

The Ministry of Health Services, District Administration and Agriculture has responsibility for the oversight and regulation of health care services in Cayman. The Health Practitioners Board is responsible for registering health practitioners and health care provided by both the Health Services Authority (HSA) and by the private sector. In addition to general medical care, a wide range of specialist services is available locally.

On 1 July 2002, by legislation, Health Services Department operations were transferred to a newly created Health Services Authority. The authority now operates all healthcare facilities previously run by government, including a hospital in Grand Cayman, another in Cayman Brac, a public health unit, four district health centres (West Bay Nurses Health Centre, Jessie Ritch Memorial Health Centre in Bodden Town, Dica Brown Health Centre in North Side and Lilith McLaughlin Memorial Health Centre in East End) and a general practice clinic at the Cayman Islands Hospital, a dental clinic (including school dental services), the Lions Eye Clinic and a clinic in Little Cayman.

2002 Highlights

- The Legislative Assembly passed the new Health Practice Law in November, replacing the Health Practitioners Law of 1974. The new law dissolves the former Health Practitioners’ Board, replacing it with four councils that will be mainly responsible for regulating the professions. It also established a health commission and a health appeals tribunal.

- The Medical and Dental Council will regulate medical doctors, dentists, dental hygienists, dental therapists and similar professions. The Nursing and Midwifery Council will regulate various categories of nurses. The Pharmacy Council will regulate pharmacists and the Council for Professions Allied with Medicine is to regulate all other health care professionals, such as chiropractors, mental health counselors, opticians, optometrists, radiographers and those in similar positions.

- In 2002, the Ministry of Health also hired the consulting firm KPMG to analyze insurance premiums and determine how charges imposed by insurance companies would be affected by increases in HSA fees. Hospital services fees were increased in January and August 2002.

- Restructuring the Health Services Authority resulted in developing five departments at the Cayman Islands Hospital: Medical, Surgical, Accident & Emergency, General Practice and Clinical Support Services.
In February, two young Caymanians, Dr. Elizabeth McLaughlin and Dr. Ruthlyn Pomares returned home and joined staff at the Cayman Islands Hospital. Another Caymanian, Dr. Antonia Hawkins completed her doctorate in Clinical Psychology and she is the first and only Caymanian clinical psychologist certified by the Health Practitioners Board to practice on the Islands. In March, the Health Services also honoured 35 employees who had each served between 20 and 35 years.

Construction of a new Mental Health Unit and expanded laundry at the Cayman Islands Health Services Complex was completed in June. The new unit has eight beds and will provide inpatient and outpatient care.

His Excellency the Governor, Mr. Bruce Dinwiddy and his wife Emma toured the Health Services Complex in early 2002.

A major contract was signed with Cerner Corporation of the United States of America to provide a state of the art hospital information system. The new integrated system will electronically link caregivers with the support services needed to diagnose and treat patients. It will make the delivery of health care more efficient, ensure the capturing of charges and allow monitoring of patient volumes and resources. The system is expected to 'go live' in October 2003.

General State of Health

Life expectancy at birth in the Cayman Islands is 75.0 years for men and 79.0 years for women. There were 583 live births in 2002. The crude birth rate in 2002 was 13.7 per 1,000 population, a slight decrease from 15.0 in 2001.

Among the resident population, there were 120 deaths (106 in Grand Cayman, 14 in Cayman Brac), or 2.8 per 1,000 population, a slight decrease compared to 3.2 in 2001. There were also 16 visitor deaths. Major causes were diseases of the circulatory system, mainly heart diseases (39 deaths, or 9.2 deaths per 10,000 population) and malignant neoplasms (24 deaths, or 5.6 deaths per 10,000 population). There were eight infant deaths in 2002, corresponding to an infant mortality rate of 13.7 per 1,000 live births. Five of those were neonatal deaths or 8.6 per 1,000 live births.

The Health Services Authority

The Health Services Authority provides care through the 124-bed Cayman Islands Hospital and Cayman Brac's 18-bed Faith Hospital. Ancillary services are offered at district health centres, and clinics for dental and eye care. There were 576 staff members at the end of 2002, including public health, dental, ambulance service and Sister Islands' services.

In 2002, 40 doctors practiced in the authority service, including four based on Cayman Brac. Another 34 doctors were in full-time private practice.

Dental care from the authority provides a full range of services, including in schools. Ten dentists were in private practice, rounded out by visiting specialists in dentistry, including one periodontist and two orthodontists. A visiting team of orthopaedic surgeons from Canada provided services at a private medical centre and at the Cayman Islands Hospital.

The Cayman Islands Hospital

The Cayman Islands Hospital is a modern, 139,066 sq. ft., two-storey facility with 124 beds. At least one doctor is available around the clock. There are three operating theatres; a dialysis unit; physiotherapy, X-ray and laboratory facilities; a pharmacy; morgue; and a forensic and drug testing laboratory. Other facilities include: outpatient specialist clinics, administrative offices, a professional library and a medical records section. Inpatient admissions for 2002 were 4,148, similar to the previous year.

The authority held its second Careers Week in October, exposing students to career options in health facilities. Approximately 100 students from four local high schools visited the ten health services sections/units that provided display booths. In addition, 27 high school students gained work experience in the summer. Throughout the year, another ten high school students participated in work experience programmes.

Accident and Emergency Services

The authority's state-of-the-art Emergency Services Department is staffed with specially trained nurses and doctors, EMTs and paramedics. Round-the-clock emergency services to Grand Cayman are provided and the facility receives patients transferred from the Sister Islands and returning patients from overseas.

The department is equipped with nine observation beds, two trauma beds, one room with minor ops capabilities, two exam rooms, one paediatric room and an isolation room, as well as a waiting room, quiet room and triage area.
Outpatient and Inpatient Services
Specialist services are available in surgery, gynaecology & obstetrics, paediatrics, internal medicine, dermatology, anaesthesiology, public health, orthopaedics, psychiatry, cardiology, gastroenterology, rheumatology, radiology, neurology, ophthalmology, ear, nose and throat, periodontology, reconstructive surgery, faciomaxillary surgery, and urology.

The outpatient specialist clinics provide services by appointment or walk-in to patients who need assessment, treatment and overseas referral, regardless of financial status. The department is staffed by 17 resident physicians and several visiting specialists. Last year, 23,209 patient visits were made to outpatient specialist clinics at the C.I. Hospital, a slight decline of 1.6% compared to 2001’s total of 23,573. A weekly electroencephalography (EEG) and electromyography (EMG) clinic is available.

Support Services
X-ray and Ultrasound
The hospital’s X-Ray and Ultrasound Unit provides diagnostic mammography services, including fine needle aspiration biopsies and wire localization procedures. The unit continues its participation in the Lions Club’s Breast Cancer Service Programme and provided 665 mammography studies in 2002, a decrease of 7.8% over the 2001 figure of 721. X-ray and ultrasound patient numbers increased by 8.1%. The unit also carried out 1019 CT scans, an increase of 5.3% over 2001’s 968.

Laboratory
The pathology laboratory provides round-the-clock services and at least one medical technologist is on-site at all times. A total of 456,068 tests were carried out on 62,361 patients, a decrease of 3.9% over the previous year’s 474,364.

Forensic Laboratory
The forensic science laboratory continued to grow in 2002 and carried out 2818 tests. These included 1893 for toxicology; 48 blood alcohol content, 689 drug exhibits, 64 fire debris, 137 trace evidence, and 35 for post-mortem evidence. Items submitted in connection with sexual assault cases increased dramatically as police made use of the laboratory area to process evidence from these and other serious crimes, screening samples for trace evidence of semen and blood stains.

Analytical turn-around-times continued to be excellent, averaging three days. Education and training continued in 2002 with classes being held throughout the year.

Pharmacy
The purpose-built dispensary allows a more efficient workflow, reducing patient waiting time. A consultation room allows private medication counseling for complex or confidential prescriptions. In 2002 chemotherapy availability for cancer patients was enhanced, allowing 175 patient treatments (108 were treated in 2001).

Health Services pharmacists filled 170,925 prescriptions in 2002, a decrease of 4.1% over the 178,158 of 2001. Another 31,344 prescriptions were dispensed at district health centres.

In addition, 25 new drugs, primarily in the area of cardiology and infectious disease were added to the Health Services formulary, while six were deleted.

Medical Records
The medical records unit operates continuously, ensuring availability of medical dockets at all times. The unit is also responsible for all medical information from the charts and the International Classification of Diseases (ICD) coding. Staff work closely with the police, lawyers and the Legal Department, in matters being prosecuted by the Courts.

Surgical Department
This department was formed in December 2002 and comprises six sections: Critical Care, Paediatrics, Maternity, Operating Theatres, Central Sterile, and Ambulatory Care. The management structure includes a head of department, a business manager and a nurse manager.

Operating Theatre
There are three surgical suites in the operating theatre. Regular surgeries include ear, nose and throat; ophthalmic surgery; plastic surgery; orthopaedic surgery; laparoscopic surgery; general surgery and obstetrics and gynaecology. Private sector surgeons also use the operating rooms. In 2002, 2218 surgeries were performed, with a monthly average of 185 procedures, the same as the previous year.

In July 2002 the theatre also implemented a complete system of billing for over 275 surgical procedures, the impact of which can be seen in the increase in billed revenue.

During 2002 several training sessions were held for OT staff, including Cardiac Resuscitation, Total Knee Revision, Hemiarthroplasty of Knee and Percutaneous
Nephrolithotomy. Training was also given on the use of the new billing form.

Central Sterile Processing Department (CSPD)
This unit provides week-round sterile services to the Operating Room, Inpatient Units, District Health Centres and Specialist Clinics. The central sterile processing department has two sterilizers.

Ambulatory Care Unit (ACU)
The ACU is a six-bed facility, caring for patients requiring elective surgical procedures with an inpatient stay of less than eight hours. The unit also provides oncology patient service in a safe and caring environment, with two chemo-certified nurses co-coordinating chemotherapy sessions, investigations and specialist visits, to closely follow the oncology patient. A haematologist/oncologist visits monthly. ACU also looks after patients requiring minor procedures such as blood transfusions and epidurals.

In July 2002 a billing form was introduced for the first time, already generating a marked increase in billed revenue. In August 2002 a standardized outpatient satisfaction questionnaire was also initiated. In 2002 ACU’s annual activity was 1,299 patient days compared to 1,387 in 2001.

Critical Care Unit (CCU)
The six-bed CCU is designed and staffed to meet the needs of critically ill patients who require acute coronary care, intensive care or acute dialysis.

Designed as an eight-bed facility, the unit currently operates six beds, treating an average 28 patients monthly in 2002, with a daily occupancy of two patients for an average 3.5 days.

The CCU features the latest in bedside monitoring systems, ventilators, haemodialysis and other specialized equipment. In March 2002, a computerized charting system that automatically captures the haemodynamic parameters necessary to make treatment decisions was implemented.

Paediatrics
Infants and children through age 12 are cared for by doctors and nurses trained and experienced in this 13-bed unit which contains isolation rooms and a high-dependency area, capable of holding one child and a toddler. A treatment room is also available for minor procedures, as well as a counseling room for sessions with parents/families. To enhance the recuperation of children who are not confined to bed, there is a specially equipped play area.

In 2002 Paediatrics averaged a daily bed occupancy of three. The monthly bed occupancy ratio increased by 6.0%, from 2001’s 29% to 35% in 2002. The unit also provides outpatient treatments to an average nine patients per month.

Medical Department
Formed in December 2002, the Medical Department has four sections: Mental Health, Dialysis, Med/Surg and Extended Care Unit. Management structure consists of a head of department, a business manager and a nurse manager.

Mental Health Services
The Mental Health Department offers community, out- and in-patient services for residents and visitors. The department offers 24-hour crisis intervention services, assertive outreach and health education programmes. In October, a new consultant psychiatrist joined a staff of two clinical psychologists, a psychiatric social worker, four in-patient mental health nurses and three community mental health nurses.

In 2002 there were 130 admissions, staying an average
of five days. The community team saw 1656 outpatients and made 3493 community visits to homes, schools, social services facilities and both Northward and Fairbanks prisons. A community mental health nurse visited Cayman Brac twice weekly.

Dialysis Unit
The purpose-built Dialysis Unit provides quality hemodialysis treatment and related nursing care to patients who require renal replacement therapy. It is equipped with eight patient stations and one special care room, with two additional stations for infectious patients. The staff complement is four registered nurses and one ward clerk, supported by internists. The resident nephrologist oversees the medical aspects of the dialysis unit.

The unit serves local outpatients and inpatients, visitors and in-transit cruise ship passengers and in 2002, 28 residents and 13 visitors received 3694 treatments. To improve patient comfort, televisions donated by the Pink Ladies have been installed.

Med/Surg Unit
For operational efficiency, the Medical and Surgical wards were combined into the Med/Surg Unit, the combination admitting 2,130 patients in 2002 (a decrease of 3.6% compared to 2001’s 2,209 admissions). The unit offers primary and secondary care to medical and surgical inpatients and services are extended to mental health and social care patients.

Extended Care Unit
This unit, located in The Pines building, is designed to meet the needs of chronically ill patients. It comprises seven beds and the monthly bed occupancy averages 96%. There was one admission to the unit in 2002.

Other Services

Dental Services
The Dental Department has 19 staff members: five dentists (including the Chief Dental Officer and Schools Dental Officer); four dental nurses; two hygienists; two laboratory technicians; three dental auxiliaries, and three administrative staff members.

Continuing its drive for continued education, staff attended several in-house courses in 2002, including topics on dental implantation and oral surgery. One dental nurse was accepted by the Jamaican Dental Auxiliary School for a two-year programme in September.

For the first time, the Dental Department has the capability to do much of its crowns in-house, saving time and money on what was formerly done overseas.

Including school visits, 20,052 dental visits were made in 2002, a slight decline of 2% over 2001’s 23,491. Specialized referral services including oral surgery, children’s orthodontics, general anaesthetics and periodontics were provided.

Lions Eye Clinic
With its own resident ophthalmologist, the Lion’s Eye Clinic maintained a busy pace in assessing and treating childhood visual development diseases, as well as glaucoma and diabetic eye disease. Treatment regimes include laser and general eye surgery, including cataract procedures. In 2002, 4,528 consultations were carried out, similar to the 4,481 of 2001. Laser treatments increased from 167 in 2001 to 183 in 2002. There were 174 eye operations, an increase of 5.5% over the 165 carried out the previous year. An ophthalmologist visited Faith Hospital on Cayman Brac twice monthly.

Physiotherapy
The unit has a staff of seven—six physiotherapists and one physiotherapy aide—who gave 9,499 treatments in 2002. The unit offers care to inpatients and outpatients, including home visits. Twice monthly in-house training within the unit has continued throughout the year.

Public Health
The Health Services Authority shares responsibility for public health in the Cayman Islands with government departments such as Environmental Health, Agriculture, and the Mosquito Research & Control Unit. Through the Public Health Department, the Health Services Authority is responsible for public health programmes (under a purchase agreement with the Ministry of Health Services). A team of public health nurses, a public health surveillance officer, a health promotion officer, a genetics counsellor, a nutritionist and administrative staff, provides service.

Public Health programmes include:
- Health advice and vaccines for international travelers;
- Health assessment, including vision and hearing tests for children;
- Nutrition and dietary counseling clinics;
- Child growth and development monitoring;
- Communicable disease screening; and
### Health Statistics 2001 and 2002

<table>
<thead>
<tr>
<th>Hospital Services:</th>
<th>Grand Cayman</th>
<th>Cayman Brac</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beds available (inpatient)</td>
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<td>104</td>
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</tr>
<tr>
<td>Admissions</td>
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<td>4,148</td>
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<td>Discharges</td>
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<tr>
<td>Minor operations</td>
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<td>Intermediate Operations</td>
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<td>Outpatient clinic visits (total)</td>
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<td>Outpatient clinic visits (specialists)</td>
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<td>Outpatient clinic visits (G.P.)**</td>
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<td>Accident and emergency visits</td>
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<td>Laboratory work</td>
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<td>Radiology/ Ultrasound (patients)</td>
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<td>Mammograms (patients)</td>
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<td>Physiotherapy visits</td>
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<td>9,499</td>
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<td>Pharmacy (prescriptions)</td>
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<td>Dental Clinic visits</td>
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<tr>
<td>District health centres:</td>
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<tr>
<td>District clinic visits</td>
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<td>School clinic visits</td>
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<td>Home visits</td>
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<td>Vital statistics:</td>
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<tr>
<td>Deliveries</td>
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</tr>
<tr>
<td>Live births</td>
<td>609</td>
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<tr>
<td>Deaths (total)***</td>
<td>134</td>
<td>121</td>
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</tr>
<tr>
<td>Death (residents)</td>
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<td>106</td>
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<tr>
<td>Death (visitors)</td>
<td>12</td>
<td>15</td>
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</tr>
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(a) *Grand Cayman figures include 84 acute care beds plus 13 newborn baby cots and 7 ECU beds; exclude 8 ambulatory care and 12 observation beds. In late 2002 medical and surgical wards were combined as the Med/ Surg Unit with 30 beds, compared to previous 44 beds.

(b) Effective 2002, Cayman Brac outpatient clinic visits and dental visits includes figures for Little Cayman Clinic.

(c) **Starting in March 1999, all G.P. clinics were held in the George Town General Practice Unit.

(d) ***Total deaths include residents and visitors.
• Disease control programmes, including immunization. (The overall incidence of communicable disease remains low in the Cayman Islands.)

Though still cause for concern, reports of sexually transmitted infections have been declining since 1998. Since the first reported case of AIDS in 1985, 63 HIV infections have been identified among residents. At 31 December 2002, 24 persons had died, and 34 (nine AIDS and 25 HIV) are living with HIV/AIDS. Five HIV positives left the Islands. These statistics include two new HIV infections among residents reported in 2002.

Malaria and dengue fever are not endemic to Cayman. Reported cases (imported) included three and one, respectively, in 2002. There were no cases of TB in 2002. Chicken pox has steadily declined since 1998 with 42 reported cases in 2002 compared to 128 in 2001. Influenza, food-borne illnesses and gastroenteritis remain significant communicable diseases. Several cruise ships had outbreaks of gastroenteritis due to the Norovirus virus and guidelines to handle such situations were developed in conjunction with various government departments. For the first time in Cayman and the Caribbean, a case of West Nile Fever was diagnosed and treated. No further cases were detected.

Immunization
Resident children continued to be immunized against communicable diseases, namely tuberculosis, diphtheria, tetanus, whooping cough, poliomyelitis, haemophilus influenzae infections, hepatitis B, measles, mumps, rubella and chicken pox.

Immunization coverage, which continues to exceed World Health Organization (WHO) targets, were recorded at the following levels:
- Polio 93%
- DPT (diphtheria/whooping cough/tetanus) 93%
- Hib (Haemophilus influenzae b) 93%
- MMR (measles/mumps/rubella – 1st dose) 91%
- BCG (tuberculosis) 92%
- Hepatitis B (3 doses) 85%
- Varicella (chicken pox) 71%

Population, Births and Deaths 1991-2002

<table>
<thead>
<tr>
<th>Year Mid</th>
<th>Population '000</th>
<th>Births</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Rate</td>
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</tr>
<tr>
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<td>27.5</td>
<td>500</td>
<td>18.2</td>
</tr>
<tr>
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<td>28.7</td>
<td>521</td>
<td>18.2</td>
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<td>1994</td>
<td>31.3</td>
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<tr>
<td>2001</td>
<td>41.4</td>
<td>622</td>
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<tr>
<td>2002</td>
<td>42.5</td>
<td>583</td>
<td>13.7</td>
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</table>

Notes:
1 Residents only, including those with work permits.
2 Resident births outside of the Islands are excluded from these figures.
3 Rates are expressed as per thousand of the mid-year population.
4 From 1980 visitor deaths were excluded from total.
® Revised figure.
Source: Cayman Health Department and the Statistics Office.

Health Promotion
Highlights of health promotion activities included:
- The Diabetic Passport was produced, enabling persons with diabetes to have more control over the condition and encouraging and supporting helpful lifestyle changes.
- The Workplace Health Promotion Programme was initiated with Health Services staff, aimed at improving and maintaining staff health. The programme included: stress management workshops; nutrition education workshops; nutrition counseling for staff wanting to lose weight; distribution of breast self-examination information; and more than 180 mammogram invitations to female staff aged 40-plus.
A five-week sex education programme was developed and delivered to all grade 9 girls at George Hicks High School.

A Treating Minor Illnesses booklet was produced to help enable community self-help for minor conditions not requiring medical attention.

Staff from the Cayman Islands Marine Institute were trained to give sex education to students. A sexual health syllabus and teaching materials were also developed.

Healthy Shopping Guides were produced for both Hurley’s Marketplace and Foster’s Food Fair. The guide informs shoppers of healthy choices in the stores, detailing fat, sugar, fibre and salt content.

The Lions Club of Tropical Gardens received support as it organized and implemented activities for Breast Cancer Awareness Month.

An HIV Awareness Campaign was implemented including: an HIV fact sheet distributed to all PO Boxes in the three islands and published as a full page ad in the Compass and Cayman News; a World AIDS Day candle light vigil and church service; an Issues 27 television programme on HIV and discrimination; HIV discussed on Talk Today on Radio Cayman; in-service training for health care workers on HIV and discrimination; and school education sessions.

World Diabetes Day activities included: screening and information provided at the three supermarket chains; a Fun Walk/Run which attracted 58 participants; displays in each district health centre and the hospital foyer; media coverage; and a special Cayman Islands Diabetes Association Meeting.

The Prison Health Centre
The Northward Prison Health Centre is administered by a registered nurse and directed by a medical officer. The district medical officer, a psychiatrist and a dental officer visit regularly. Total clinic attendance in 2002 was 4,147, an increase of 15.6% over the previous year’s 3,587.

International Agencies
The Pan-American Health Organization (PAHO) offered fellowships for training in the areas of laboratory safety and epidemiology and helped to facilitate staff’s participation in various technical meetings. The Caribbean Epidemiology Centre (CAREC) provided technical assistance in epidemiology and laboratory services. A surveillance team from CAREC visited Cayman to review the Communicable Disease Surveillance and AIDS programmes in the Islands.

Faith Hospital
Faith Hospital is a dynamic community hospital, serving the residents of Cayman Brac and Little Cayman. A 18-bed facility, it provides primary, secondary, and emergency care and 64 of 70 staff positions are presently filled, including physicians, nurses, support services, administrative and clerical staff.

Faith Hospital physicians provide services in the fields of general medicine, surgery, anesthesia, and obstetrics and gynecology. Regular visits by specialist physicians from Grand Cayman’s Cayman Islands Hospital furnish pediatric, orthopedic, internal medicine, ophthalmology, urology, mental health, nutritionist, and E.N.T. services.

There is a modern inpatient unit, as well as an operating theater, maternity, accident and emergency department, outpatient clinics and a public health department.

An Emergency Medical Service provides emergency care and transport and Faith Hospital boasts a team whose members are nationally certified EMTs, plus one paramedic instructor. EMS personnel are also all certified in Advanced Cardiac Life Support.

The Public Health Unit is staffed by one community health nurse and one LPN. It provides preventative and supportive community care to Cayman Brac’s aging population; implements child and school health programmes; conducts health education classes and antenatal and diabetic clinics. A Body Mass Index (BMI) study has been initiated at the Cayman Brac High School.

The Radiology Department provides diagnostic X-ray and ultrasound procedures as well as some specialized procedures. The Laboratory is equipped to perform many services, including chemistry, hematology, serology, coagulation profiles, blood banking and EKG.

The Physiotherapy Department provides in- and outpatient treatments, plus home visits. It recorded a 10% increase in treatments in 2002. In the only pharmacy on the Brac, the busy Faith Hospital pharmacist processed over 24,650 prescription items in 2002.

The Dental Clinic’s auxiliary nurse provides complete dental care for all Cayman Brac school children. She also
provides cleanings and emergency services for adults, including denture repair. A visiting dentist from Cayman Islands Hospital visits the Brac Dental Clinic twice weekly and the service is supported by a dental assistant/receptionist.

Little Cayman Clinic
Medical and dental services to Little Cayman continued in 2002, provided by a resident nurse who is on round-the-clock call. Clinics are conducted Monday through Friday and Cayman Brac physicians visit routinely. The resident nurse also makes home visits. In 2002, 1,559 patients were treated, including Dental, GP and nurse visits.

Department of Substance Abuse Services (DSAS)
The Department of Substance Abuse Services is committed to providing high quality, cost-effective, community-based treatment services for chemically dependent clients and family members affected by chemical dependency.

Functions
The department’s primary mandate is to conduct intake and assessments on persons affected by chemical dependency and to develop and implement treatment plans to meet client needs. Treatment services include referral/case management, outpatient counselling, residential treatment, halfway house programming, family support services and aftercare counselling. Counselling is provided on an individual or group basis.

Outpatient treatment is provided for Grand Cayman residents at Caribbean Haven Outpatient Services at Paddington Place, and at Brac Haven, Cayman Brac, for those living in the Sister Islands. A four to six week residential treatment programme is also offered to residents of all three islands at Caribbean Haven Residential Treatment Centre in Breakers, Grand Cayman.

The Caribbean Haven programme was improved in September 2002 by adding a Halfway House for males. The house allows recovering addicts to develop skills in preparation for their eventual return to the community, while receiving ongoing peer and community support to reach short and long term goals.

The department also provides programmes either alone or through partnerships with other organizations such as the prison and local schools. Examples of outreach services include public education, community development, and special projects.

Treatment for Substance Abuse Clients and Relatives

Outpatient Services
Every outpatient undergoes initial intake screening to identify presenting problems. This is followed by a complete bio-psycho-social history and, for those who use drugs and/or alcohol, a comprehensive substance abuse assessment. After completion, the level of service the client requires can be assessed. If inpatient treatment is recommended, arrangements for treatment at the Residential Centre are facilitated by Outpatient Services staff. Clients retain a case manager at Outpatient Services to ensure smooth transition to aftercare services following discharge from inpatient treatment.

For those requiring counselling at the Outpatient Services, individualized treatment plans are developed to match identified needs. This is done for clients as well as those affected by the drug or alcohol use of a significant other. Clients have access to individual, group, family and couples counselling and are also encouraged to participate in self-help groups like Alcoholics and Narcotics Anonymous and Al-Anon. Referrals to other agencies within the network are facilitated if required (e.g., to the Department of Social Services, Mental Health, Employment Services, etc.). Progress is monitored and treatment plans are constantly revised.

Driving Whilst Impaired Programme
In January 2001 the first Driving Whilst Intoxicated group was offered at the Outpatient Services. This programme was a joint effort developed by the Department of Substance Abuse Services, the Judicial Department, Prohibition and Aftercare Services, the Ministry of Health, Social Welfare, Drug Abuse Prevention and Rehabilitation, the National Drug Council and Terry Delaney of Cayman Clinic.

In 2002, 68 clients graduated from the DWI Programme at the Outpatient Services. Plans are being formulated to introduce a group for Spanish speaking clients referred by the Court. Groups run for six weeks and typical group size is 8-10 clients. Participants usually have to wait for
approximately a month after registering to begin. The programme is multifaceted and offers education via presentations, videos and discussions; assessment of the client’s patterns of alcohol use and identification of any alcohol problems; and intervention by providing opportunities to change self-destructive behaviours and improve quality of life. At the end, individual final reports are submitted to the Court.

Residential Treatment
Offered at Caribbean Haven Residential Centre, treatment consists of a four to six-week intensive live-in process that utilizes a combination of group and individual approaches. It is available to men and women aged 18-plus, who have substance abuse problems and are assessed as needing residential treatment. The programme is based upon a bio-psycho-social-spiritual treatment philosophy that addresses all aspects of a client’s life. The daily schedule comprises educational and lifeskill groups, group therapy, creative arts, community groups, family education and family therapy sessions, as well as recreation and leisure timecounselling. Topics in the educational groups include: drug effects, relapse prevention, self-esteem, loss and grief, anger management, stages of change, importance of good nutrition, assertiveness and spirituality. Life-skills training includes meal preparation, personal hygiene, time management, budget counselling and job readiness.

Assisted by counsellors, each client determines specific goals to be addressed while in the programme and goals are reviewed and monitored each week. At the start of the programme each client is asked to identify a family member or significant other to attend the family education group. Family therapy is available to those in need.

Weekends give client residents the opportunity to come together as a community and plan healthy activities. On Sundays, guest clergy bring their ministries to the centre. Community volunteers offer their expertise and aid the success of the residential programme, working in areas such as creative arts, health care and as guest speakers and mentors.

The centre also emphasizes the importance of attendance at self-help groups and the residents are expected to attend AA meetings in the surrounding districts, accompanied by staff. Residents are taught to view treatment as an ongoing process. Clients who complete treatment are encouraged to participate in ongoing aftercare treatment, provided via the outpatient service or via self-help groups such as AA or through a combination of both.

Halfway House Programme
Residential treatment centre clients who are identified as requiring additional support after they have completed treatment are referred to the Halfway House Programme. The Caribbean Haven Halfway House was officially opened in May 2002 accepting its first clients that September. The programme is geared towards improving life skills in preparation for a return to life in the community. It also provides residents with individual and peer/community support around their short and long term goals and the programme’s flexibility provides for individual needs. Each resident must complete a weekly Halfway House Individual Plan with the House Custodian, for review by the case manager and any other relevant caregiver.

Attendance at community support groups is mandatory and is detailed in individual plans/contracts. Educational sessions on budgeting, job readiness skills, housekeeping, time management, cooking, and communication are offered individually or in groups. Individuals are encouraged to continue family counselling, and to attend all individual and group sessions as required by the case manager during their stay in the halfway house programme.

Outreach Programmes
HMPs Northward and Fairbanks: Counsellors from Caribbean Haven Outpatient Services visit HMP Northward and Fairbanks prisons to provide ongoing alcohol and drug assessment/treatment services with inmates eligible for parole or nearing completion of sentence. Counsellors provide both individual and group sessions.

Services to the prisons are to be enhanced in 2003 with additional resources being directed to increase the level of treatment offered for clients seen in the correctional facilities.

Caribbean Haven Outpatient Services and Caribbean Haven Residential Centre work closely with the Probation Department to develop programming that meets the needs of the substance abusing criminal offender. Continued development of appropriate alternatives in sentencing for this population will require increased collaboration between Caribbean Haven, the Probation Department, the Courts and other agencies of the Cayman criminal justice system, particularly as the Drug Treatment Court model is implemented.
Schools
In 2002 students from the two government high schools, the Cayman Islands Marine Institute, the Alternative Education Programme and several private schools received counselling through Outpatient Services. A variety of presenting problems led to referrals including: student use of alcohol and/or drugs on either an experimental or ongoing basis; parental use of alcohol and/or drugs; high-risk home environments due to lack of parental supervision; and student involvement in drug trafficking in the schools.

All referred students were assessed to identify the appropriate level of intervention required, based on presenting problems. Some students were seen at the schools; others attended outpatient offices. Treatment was offered through prevention/education, early treatment and psycho-educational groups, as well as individual counselling.

During the school year, staff was also able to present students with factual information on alcohol and drugs and their effects on the individual and the family during assemblies, life-skills classes, tutorial sessions, etc. Presentations were also made to some PTAs.

Unfortunately, due to staffing shortages, in-school services were suspended in September 2002. There are plans to develop a programme for delivery by school counsellors in consultation with DSAS, until these services can be restored. Additionally, schools are still able to refer students directly to the Outpatient Services office for assessment and treatment. Ultimately the goal is to advocate for at least one full time youth counsellor post to allow for the provision of consistent services to the schools.

Public Education
This takes many forms including regular public service announcements in the media, speaking engagements, radio interviews, and newspaper articles. Materials and videos are also made available to the public.

Community Development
This is a process involving working with members of the general public and/or professional community to identify gaps in service and plan for addressing them. Counsellors from both the Outpatient Services and the Residential Centre are members of boards and committees that are developed to address emerging social issues in the community. Counselling staff are required to play many different roles, including educator, facilitator, researcher, change catalyst, and leader.

During 2002, DSAS had representation on several of these entities including the Research and Development Team for the creation of a National Gender Policy; the committee assigned to review and recommend changes to the draft legislation for Drug Courts; the National Committee Against Domestic Abuse; and the Board of Director’s and several sub-committees for the country’s first shelter for female victims of domestic violence and their children.

DSAS staff also formed part of the contingent representing the Cayman Islands at the Drug Prevention Conference for Overseas Territories held in the British Virgin Islands, supporting the need to strengthen relationships with other regional professionals in the field, as well as maximizing resources at both regional and international levels. As one of the leading stakeholders in the national drug abuse prevention and rehabilitation plan, the DSAS also participates annually in the National Drug Control Strategy review meeting to address any changes required to effectively reduce substance abuse and misuse in the Cayman Islands.

National Drugs Council (NDC)
While much is still to be accomplished, the National Drug Council had another successful year in 2002; over the past five years, the NDC has continually initiated activities and programmes that have a positive impact on the lives of many of Cayman’s people.

Public Information Campaigns and Special Projects
The NDC is actively engaged in initiating and promoting several campaigns aimed at informing the public how to prevent or reduce the harm associated with substance misuse and abuse.
- Easter Purple Ribbon Bus Campaign: The Easter campaign was an extension of NDC’s New Year’s service. The overall goal of the Easter Purple Ribbon Bus campaign was achieved by making the public aware of the dangers associated with the misuse/ abuse of substances. Free bus service was provided to encourage people not to drink and drive over the holiday period.
New Year’s Purple Ribbon Bus Campaign/Designated Driver Campaign: The NDC aims to heighten awareness of the dangers associated with the misuse/abuse of substances during the holiday season by running a two-part campaign: the Designated Driver Campaign and the New Year’s Eve Purple Ribbon Bus Service.

The concept of the Designated Driver Campaign is that restaurants during the holiday season provide a group’s designated driver with free soft drinks. The programme—with RCIPS support—creates awareness and prompts people to select a driver for the night.

The other part of the campaign is the New Year’s Eve Purple Ribbon Bus Service. Buses run a regular route from West Bay to Bodden Town, with occasional buses running to East End and North Side on New Year’s Eve between 9:00 pm and 4:00 am. This free bus service encourages people to not drink and drive, making the roads safer over the holiday period.

Drug Awareness Month: The focus is on youth as the NDC is aware of the challenges that face young people, and the necessity of providing them with the resources and tools to make positive choices.

October’s Drug Awareness Month was filled with activities in 2002. These included an ecumenical church service, two motivational speakers and a Caymanian Compass supplement. Age-appropriate educational materials and videos were also distributed to all schools. The NDC hosted the National Garage Sale and booths at district Heritage Days. In addition, Solutions II aired on CITN, providing an overview of the activities and initiatives that took place.

Inhalants Abuse Campaign: This comprehensive campaign was aimed at enhancing awareness of the issues surrounding inhalant abuse. It was important in this particular campaign to involve parents, merchants, persons working with youth, and students, in recognizing the signs, symptoms and dangers of inhalant abuse.

All schools received age-appropriate educational materials for distribution to students and parents. Businesses were visited to determine whether inhalant products were accessible to youth and where appropriate, changes were suggested. The National Drugs Co-coordinator spoke at the Chamber of Commerce and the Rotary Club of Grand Cayman Central; information packets were given and abused products were on show to raise awareness.

A free workshop was hosted by the Chamber of Commerce and facilitated by three members of the NDC staff. They gave training on symptom recognition and the precautions to take when displaying goods that may be abused as inhalants. A series of one-day workshops was also hosted by the NDC in conjunction with National Inhalants Prevention Coalition. As a part of the Inhalant Awareness Campaign, the NDC in conjunction with the Community Development Unit in Cayman Brac hosted a Walk-A-Thon followed by a Family Fun Day at the beach. The NDC hosted an informational booth at the Bodden Town Primary School prize giving, where the crowd received information on the inhalant abuse problem in Cayman, as well as information on the signs, symptoms and dangers of inhaling toxic products.

I Guana Be a Millionaire: The NDC was involved in several community events in 2002 and through an interactive computer game, provided drug education to children and adults. Together with the interactive activities, information packets were distributed at each event on the dangers and extent locally of substance abuse and the availability of local resources.

Drug Education Seminars – Football Association: Responding to a request from the National Team Coach, Project Officer Simon Miller conducted drug awareness and education seminars for all national teams. Held monthly, they cover a broad range of topics based on findings from a student drug use survey. Particular emphasis is placed on dangers associated with mixing drugs and alcohol.

Scranton Project: The Scranton Youth Programme remains successful in providing after-school activities to young children. The programme is free of cost and is operated by members of the Lions Club and interested community persons. Assistance with homework, art classes, computer and Internet access, sports and recreational activities are available. The programme relies heavily on donations from the community; utility expenses are funded by the NDC.

World No Tobacco Day 2002: Observed each 31 May, World No Tobacco Day encourages governments, communities, groups, and individuals to sponsor community activities in concert with over 191 countries across the globe. In 2002, the NDC educated on the dangers of tobacco use and promoted healthy lifestyles using the theme, “Sports Not Drugs.”

The NDC co-ordinated several events for this occasion; it enhanced the anti-tobacco curriculum in the schools by proving educational material to all school...
children; NDC and Cayman Islands Cancer Society staff appeared on CITN’s Daybreak and PSA’s aired on radio stations. Cayman’s Boy Scouts could earn a “Badge of Honour” by cleaning up tobacco litter from the George Town port area. The Department of Youth and Sports confirmed its commitment to drug free sports and healthy lifestyles with a signed pledge published in the Caymanian Compass. Corporate sign up for persons wishing to join the tobacco cessation programmes was encouraged through the Cayman Islands Cancer Society while gyms and health clubs allowed persons to utilize their facilities cost-free when throwing out tobacco products. The DARE students also participated in an essay competition.

Newsletters: The NDC launched two new publications this year, a monthly magazine and a quarterly magazine. Both publications are distributed electronically. The endncms is published monthly and is a vehicle for sharing news items from local, regional and international sources on drug control issues. It is distributed to NDC board members, Members of the Legislative Assembly and government ministries. The ezine is a quarterly publication by the NDC. Each edition provides information on current issues in the field of substance abuse.

New Policy Development
During the fiscal year, the NDC formulated a number of policies intended to prevent or reduce drug abuse. The mandate is to encourage government and non-governmental organizations to implement these policies, particularly the Drug Free Workplace Policy. The pilot study for the Cayman Islands Drug Free Workplace Survey (CIDFWS) was conducted at Caribbean Utilities Company, based on a random sample of 30 employees and 17 senior managers. The pilot study revealed some problems with the instruments and necessary changes have been made. Fifteen interviewers will be trained and the fieldwork will commence. The survey sample size is 1,250 from a pool of 15,798 registered employees.

Treatment and Rehabilitation
While the NDC does not operate treatment centres in the Cayman Islands, it does play a significant role in promoting and encouraging the development of new initiatives in this area. The lead agency is the Department of Substance Abuse Services (DOSAS). The NDC plays a supporting role to ensure that treatment and rehabilitation services are readily available and that they meet the diverse needs of those suffering from chemical dependency.

Drug Treatment Court
The NDC continues interest in, and support for, the establishment of a Cayman Islands Drug Treatment Court. The Chief Justice, who chairs a judicial advisory committee on alternative sentencing options, prepared drafting instructions for the introduction of new legislation to provide the legal framework for the drug treatment court in early 2002. He requested NDC assistance in planning publicity to gain public acceptance of the Drug Court initiative. The NDC has teamed with GIS for this purpose and is in the process of facilitating focus groups as a part of the research needed to develop strategies for the campaign.

Supply Reduction and Control
Research and Statistics: The research priorities for the NDC in 2002 were to conduct a household survey on alcohol and drug use and to administer the second cycle of the student drug use survey. The former provides baseline data on prevalence among the adult population and the latter allows, for the first time, the study of comparative data on drug use among the student population.

School Survey, Cayman Islands Student Drug Use Survey (CISDUS)
The Prevalence Rates and Highlights Report based on the findings of the CISDUS were released to the public at an NDC press conference. Dr the Hon. Frank McField made the opening remarks and the NDC Coordinator discussed the findings contained in the reports. Approximately 200 copies were distributed locally and overseas to regional and international agencies.

Local Statistics: The NDC continues to collect data on an annual and quarterly basis from local sources on the frequency of incidents/cases which result from a drug and/or alcohol abuse problem. This information is maintained on a database, giving the NDC the ability to monitor and identify trends in drug and alcohol abuse incidents.

Conferences, Seminars, Workshops and Special Meetings
During 2002, the NDC initiated or participated in a number of conferences, seminars, workshops and special meetings on drug related issues. It is imperative that the NDC participate in the information network locally, regionally and internationally as it tries to keep up-to-date on current practices and new initiatives in the field of drug abuse.

Drug Prevention Campaign: A five-member delegation attended a conference in Tortola, BVI, in January. The conference was attended by NDC counter-parts from all the UK Caribbean Overseas Territories. A complete report of all the speeches, presentations and recommendations is available from the NDC Resource Centre. Both CD-Rom and hard copies are also available.

Annual Update: In a two-day planning session the Strategic Alliance called for an increased role for the National Drug Council (NDC) in dealing with the drug abuse problem in the Cayman Islands. The meeting, which formed the latest update for the National Strategic Plan for Drug Abuse Prevention and Rehabilitation, was sponsored by the Ministry of Health and organized by the NDC. The Strategic Alliance comprises representatives from all stakeholders in the substance abuse problem, combined with representatives from private business. This ensures representation and viewpoints from a wide cross section of society. Sessions provide a chance to measure progress to date and to check whether strategies are still effective and relevant to the changing nature and extent of the problem in Cayman.
Participants from regional immigration, police, and customs departments attended the UK Caribbean Law Enforcement Conference held on Grand Cayman, 23-25 April. Governor Peter J. Smith, CBE, said in his address that the area’s law enforcement agencies should expand their already established intelligence network, the Overseas Territories Regional Criminal Intelligence System (OTRCIS), because “preventing crime and promoting peace is not the work of a few.”

One of Cayman’s newest residents gets special attention from the professionals at the Cayman Islands Hospital.

These National Drug Council members received awards for outstanding service at the Council’s fifth anniversary celebration at Government House.