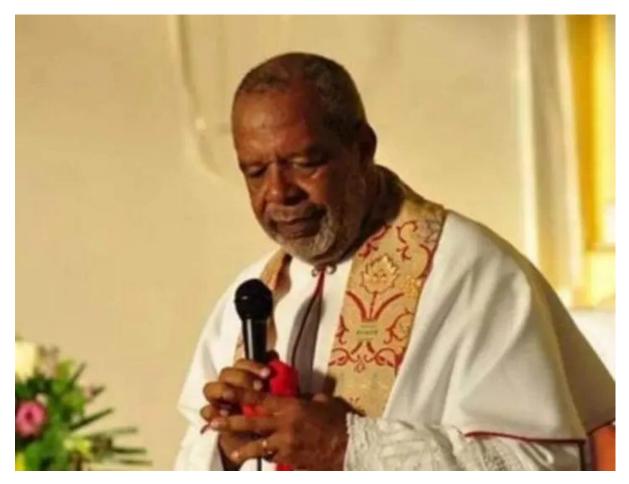
National Health Insurance Strategic Plan



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IN MEMORY OF



In memory of Canon Norman Leroy Flowers, we give God thanks for his many years of ministry to the Anglican Diocese and nation of Belize.

Canon Flowers served as a thoughtful, compassionate, unselfish pastor with a steadfast commitment to his church. He served not only the people of St. Mary's but also assisted and led countless programs that benefitted many throughout the community, districts and country. He will forever be remembered for his willingness to counsel any and all regardless of religious denomination, and his tireless visitations with the sick and shut-in no matter the distance or inconvenience or even his own health. Canon embodied the true essence of a servant leader, tirelessly guiding and nurturing his flock and helping to fulfill their need for spiritual nourishment. As a senior member of clergy, he chaired various diocesan organizations and represented the Anglican Diocese on various committees – most noteworthy is the Belize Council of Churches. Up to the time of his passing, he served on the highest governing bodies in the Diocese as a member of the Synod, Standing Committee and Chair of the Commission on Ministry, and member of the Diocesan Pension Trust.

To give an insight into the work and service of Canon Flowers, we proudly share a list of community organizations which he willingly and ably served for a period

spanning almost fifty years. These include: Placencia Cooperation Board, Board of Governors - Belmopan Schools, Executive Director - Help for Progress, Belmopan Ecumenical Committee, Princess Royal Hostel Board, Y. E. S. Board, Lions – San Ignacio, AIDS Task Force, National AIDS Committee, National Council of Education, National Committee of Families and Children, C. Y. D. P., Integrity Commission, Belize Council of Churches, Social Security Reform Commission, Chairman of the SSB non-contributory pension selection committee, Sadie Vernon High School, and the Inter-Ministerial – UN Committee. Canon Flowers was also an active member of the National Health Insurance Committee, the policy board for the National Health Insurance. He was a vocal advocate for making health care accessible to the population, a role he played from its inception in the early 2000's till one week before he passed away. The National Health Insurance Policy Committee, the Social Security Board, and in particular, the NHI Department, will forever be grateful for his valuable insight, support, and active participation in moving this scheme forward for the benefit of the Belizean population.

This NHI Strategic Plan 2024-2028 is dedicated to his memory and long-lasting contribution to Belize!

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Message from the Executive Chairman

The introduction of the national health insurance in 2001 changed the standard of primary health care in Belize. This healthcare model aims to be an enabler of quality healthcare for all and be the towards universal gateway health coverage for the population.

This approach intends to address the needs of the people, families, and the communities through a comprehensive, integrated quality health care. It aligns with recommendations by the Pan-American Health Organization that call for the transformation of health systems based on primary health care by 2030.

Since the model is founded on the principles of transparency, value for money, quality of healthcare, and equitable access, it has gone through a process of development that has included the provider mix model, quality assurance, and payment for performance mechanisms.



Dr. Marco Tulio Mendez **Executive Chairman**

The evidence is overwhelming in support of the new model as a means of extending coverage and access to quality health care. For the scheme to be functional and successful, we need to overcome the greatest challenge, "financial sustainability." The present strategic plan emphasizes this objective, illustrating the fiscal space study published by the Pan American Health Organization in October 2022 and identifying potential contribution sources. Governance and strengthening of the system, along with updating of the legislative framework on the financial regulation to govern the NHI scheme, is critical. Also, it is imperative to mention that the efficiency and efficacy of the scheme will need the separation of functions where the Ministry of Health is the regulator, the National health insurance is the purchaser, and the mixed model formed by the public, private, and NGOs be the provider.

COVID-19 was an eye-opener. A resilient health system needs a strong primary healthcare base. Presently the NHI covers a third of the population. The present government has expressed its full commitment to roll out the national health insurance to the entire country.

I am certain that with the support and guidance of the National Health Insurance Committee form by the different stakeholders comprised of representation from the Chamber of Commerce, Insurance companies, Unions, Belize Medical and Dental Association, Social Security Board, Ministry of Health, Ministry of Finance, Council of Churches, and the member Opposition an efficient delivery of primary healthcare services will be provided for the people of Belize.

Message from the General Manager

This year we celebrate 22 years of having embarked on the journey to implement the National Health Insurance Scheme countrywide. It has been an arduous and difficult journey, but at the same time, a highly informative learning experience in health system management. The model of care has undergone many changes depending on the geographic location of implementation, the availability of service providers (public, private, NGO), and the challenges faced. In 2019 we made the decision that it was high time to take on the development of a Corporate Strategic Plan to guide the implementation over the next four years. The Strategic Plan 2020-2024 developed had the input of the National Health Insurance Committee

(our policy board) and the NHI Staff. However, nothing could have prepared us for the worldwide disruption caused by the COVID



Dr. Ramon Figueroa General Manager

pandemic. This disrupted the course and implementation of the Strategic Plan. Even if the core values and strategic objectives remained pertinent, the timeframe and changing political environment required a re-evaluation of the previous plan.

A significant change occurred with our national election in 2020, which brought in a new Government that had hinged its Blu Health Plan on the rolling out of NHI as a key policy objective. This provided a fertile ground for work to be done in extending the model of care under an NHI Scheme to the rest of the country and addressing the key limiting factor, which was sustainable financing. To this end, the revision and adjustment of the previous Strategic Plan was undertaken with the assistance of a consultant. The present plan, therefore, highlights the key policy objectives that have been fortified with updated information from a Pan American Health Organization Mission report to evaluate the transformation of the Belize Health System and a Fiscal Space Analysis that was updated from a previous version (to adjust for the economic and social disruption of the Covid pandemic).

Even as we develop the blueprint for the rolling out of the National Health Insurance Scheme within a framework of Health system strengthening, the government is moving quickly and making the necessary policy changes to facilitate the financing and sustainability of this model of care. Our overall goal continues to be the achievement of Universal Health Care and Coverage for our Belizean population based on a strong Primary Care component. That is the only way we will be able to make any progress in reducing the burden of Chronic Non-communicable diseases which continues to decimate our population and increase the cost of secondary and tertiary care.

This is the way to go! Let's do it!

Executive Summary

In the 2020-2024 Corporate Strategy document, the General Manager of NHI stated that the "strategic directive, therefore, will map the way forward in attaining Universal Coverage and equity to the rest of our population." The Strategic Objective of the 2023-2027 Corporate Strategy document remains the same, map the way forward toward Universal Coverage.

In the same 2020-2024 document, the Executive Chairman of NHI stated that "the greatest challenge has always been, and continues to be, the establishment of a sustainable financing mechanism that would support the implementation of a new model of care based on equity, quality, access and coverage for the whole population, with a focus on Primary Care." He also notes that "the primary restraint has been the lack of a policy decision on a sustainable financing source to drive the expansion of this new model of care."

The main focuses for the strategic plan are:

- 1. Secure Funding for Financial Sustainability and the NHI Roll Out
- 2. Countrywide Roll Out
- 3. Governance & Strengthening of the Health System
- 4. Stakeholder Relations & Communication
- 5. Global Fund HIV

In summary: To get universal coverage, we need financing and improved governance structuring of the health system, and to get the financing and improved governance, we need policies approved that will make it happen.

The following plan seeks to bring Belize one step closer to Universal Coverage.



Introduction

The National Health Insurance (NHI) Scheme was borne out of a long analysis process within the framework of the health sector reform project, which began in 1996. It was the option selected to finance health care in Belize founded on the principles of:

- Value for money
- Quality healthcare
- Equitable access
- Sustainability

Since its inception, NHI has grown to serve patients in Belize City - South Side, Corozal, Stann Creek, and Toledo Districts. This expansion resulted in 20 years of primary healthcare services contracted via thirteen and multiple satellite clinics.

In 2020, NHI "2020-2024 Corporate Strategy" document was published. The plan was focused on the four main strategic themes below:

- 1. Expanded Coverage & Financial Stability
- 2. Stakeholder Relations & Communications
- 3. Governance
- 4. Operational Excellence

While these themes and goals to accomplish the strategic outcomes were properly thought of and designed, the unfortunate reality is that before any of the major tasks could be completed, the world was thrust into chaos, resulting in a rapid shift in priorities. COVID-19 (SARS-CoV-2) was declared a pandemic by the World Health Organization (WHO) on March 11th, 2020¹. The presence of COVID-19 led clinics to invest in Personal Protective Equipment (PPE), adjust how patients were being seen, and reallocate funds to retrofit clinics to be better equipped to deal with COVID-19.

As everyone focused on COVID-19, the game changed from Expansion of Coverage & Financial Sustainability to survival. There was no playbook for what was happening. As the world waited for some form of guidance from the WHO on a local level, we found out that what works for one clinic in Belize City may not work for a clinic in Punta Gorda. Fear, panic, and uncertainty became the norm. Energy and resources were re-directed toward dealing with COVID-19. The four main strategic pillars for the 2020-2024 Corporate Strategy were no longer priorities.

With the pandemic slowly transitioning into an endemic mode, we now find ourselves returning to how life was pre-pandemic, and NHI is no exception. Now, the plan is to create the 2023-2027 Corporate Strategic Plan that sees the previous four themes brought back into focus, with the goal being Universal Coverage.

¹ https://www.cdc.gov/museum/timeline/covid19.html

National Health Insurance Committee Strategic Meeting

A focused, constructive meeting session with all social partners was held on January 19-20th, 2023 (<u>Annex 1</u>). The following represents the recommendations and discussions for this strategic plan creation.

Mission + Vision + Core Values

MISSION

To purchase quality healthcare services that are available and accessible to all through effective partnerships and sustainable investments in health.

VISION

NHI is an enabler of quality health and wellness for all.

CORE VALUES



TRANSPARENCY

We have no hidden agendas and conditions, accompanied by the availability of full information required for collaboration, cooperation, and collective decision making.

INTEGRITY

We have strict adherence to a moral code, reflected in transparent honesty

RESPECT

We acknowledge the needs and feelings of those involved with the service we provide

EXCELLENCE

We systematically use quality management principles and tools in business management, with the goal of improving performance based on the principles of customer focus, stakeholder value, and process management

EMPATHY

We strive to understanding situations that people are experiencing and provide caring service

ACCOUNTABILITY

We accept responsibility and account for our actions

SWOT Analysis

STRENGTHS

• There is 20+ years of data and experience to draw from

WEAKNESS

• Multiple business models, i.e., private, NGO, public

OPPORTUNITIES

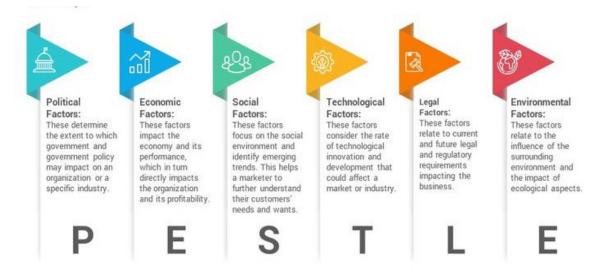
- Provide Universal Coverage
- Significantly impact the health of Belizeans in a positive manner
- Create equitable distribution of health.
- Performance-based model

THREATS

• Project delay due to a delay by policymakers to introduce the policies to fund and create the new Health Structure

- Funding gap
- Political mischief
- Resistance from key stakeholders

PESTLE Analysis



Every organization exists in close contact with and is affected to various degrees by the landscape within which it operates, i.e., its external environment. Therefore, to achieve sustainable development, an organization must form synergies with the actors in its environment and be aware of the factors affecting the organization. These external factors, therefore, require careful and regular assessment, for which the PESTLE Analysis serves as a tool for an organization in assessing its external environment.

The following represents a narrative assessment surrounding the external factors that may affect NHI's work and outputs to differing degrees. Observations under each dimension of external factors are also presented in formulating NHI's 2023 – 2028 strategic direction and its ancillary resources, tools, and actions.

POLITICAL ASSESSMENT



Due to the entwined socio-political landscape within Belize, changes in government may, at times, lead to increased or decreased levels of support, and even priorities may affect levels of government support.

NHI has been given clear direction of the need for a countrywide rollout. NHI must remain impartial, non-partisan, and neutral in their selection of PCPs while ensuring the quality of rollout to the people of Belize as they

have been in previous years. They must commit to transparency and objectivity in clearly communicating and supporting their non-partisan/neutral position through verifiable actions and communications efforts with their PCPs.

ECONOMIC ASSESSMENT



The economy influences the social sector, both in Belize and globally. Therefore, NHI must leverage this time to gain buy-in from key stakeholders. This support is critical as poverty determines the volume of persons needing health care. As poverty gets more severe, especially in the north, due to a lack of employment, families may need to depend more heavily on the NHI system. This will be evidenced in the rollout of Orange Walk as a priority.

SOCIAL ASSESSMENT



Deterioration of the social fabric and increased social tension influence NHI's work. It is important to show that NHI is conscious of the current Covid-19 climate within Belize but more responsive to health needs. Currently, NHI needs to maintain key messaging across social media platforms to enhance NHI's brand as well as ensure the use of the services through registration.

TECHNOLOGICAL ASSESSMENT

Within the current Covid-19 economic landscape in Belize and propagated globally, technology is a potential vehicle of success for NHI. Consideration can be given to telemedicine etc.

E-MEETINGS - Thus far, NHI has engaged in the current technological norm using remote meeting platforms such as Zoom. Technology can be used to monitor and evaluate the implementation of this strategy.



WEBSITE - NHI's website can be utilized along with social media to create greater visibility.

DATA ANALYSIS & SHARING - NHI may use data to ensure the quality-of-service delivery to its stakeholders.

LEGAL ASSESSMENT

Organizations are susceptible to many legal risks, from political blockages to workplace management. Ensuring that the proper legislation is in place is critical at this juncture.



ENVIRONMENTAL/ETHICAL ASSESSMENT



COVID-19

The Covid-19 Pandemic has brought much attention to this external dimension. There are risks associated with simple tasks such as in-thework place interactions, meeting, and servicing clients, and more so at the end of 2022 with the more contagious XXB variant of the SARS-COV-2 virus. Mitigating these risks may involve physical distancing, which may affect the personability of NHI staff or even the willingness

of some persons to visit with NHI staff. This risk also carries a direct financial cost in purchasing Personal Protective Equipment (PPE) and other health and safety equipment and supplies; however, these are minor expenses compared to the risk of infection. New on the horizon is Monkey Pox, which must be monitored for its impact.

INTERNAL

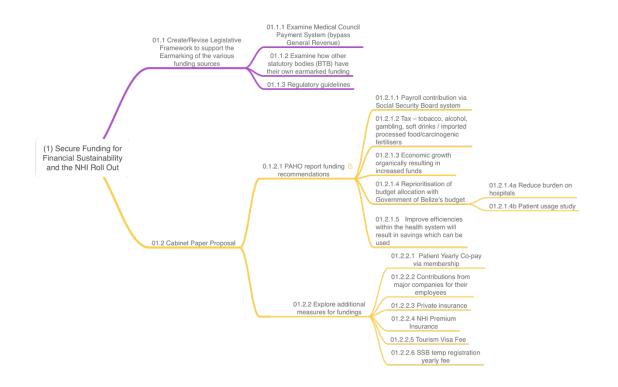
Under this dimension, external environments are most often considered; however, based on the purpose of the PESTLE framework assessment tool, it is meant to serve as an exercise to assess the considerations that may affect the implementation of NHI's activities and the achievement of its goals. As such, the PCP partners, its capacity, the synergies and rapport among its team, the processes, procedures, and bureaucracies must all be considered.

In practice, final decisions, both macro and operational, must be approved, endorsed, or otherwise not objected to by the GOB.

NHI STRATEGIC FOCUS

Strategic Focus #1:

Secure Funding for Financial Sustainability and the NHI Roll Out



On October 1st, 2022, the Pan American Health Organization (PAHO) published a Policy Brief titled "Fiscal Space for Health – Belize" (FS). The FS document provides a high-level overview of the capacity of Belize to incorporate additional budgetary resources for the health system. The FS document estimates that there is the potential to tap into BZ\$ 70 million per year from new sources. PAHO has identified the following sources as potential sources of contribution:

- A. Payroll contribution via Social Security Board system
- B. Tax tobacco, alcohol, gambling, lotteries, soft drinks.
- C. Economic growth organically resulting in increased funds.
- D. Reprioritization of budget allocation with the Government of Belize's budget
- E. Increase debt levels.
- F. Improve efficiencies within the health system will result in savings that can be used.

During the NHIC Strategic meeting, the following Strategic Objectives and Projects/Actions/Measures were agreed upon.

STRATEGIC OBJECTIVE	PROJECT/ACTION/MEASURE				
01.1 Create/Revise Legislative Framework to support the earmarking of the various funding sources	 01.1.1 Examine Medical Council Payment System (bypass General Revenue) 01.1.2 Examine how other statutory bodies (BTB) have their own earmarked funding. 01.1.3 Review Regulatory Guidelines currently listed in Legal Acts and SI's 				
01.2 Cabinet Paper Proposal – 01.2.1 PAHO Report Funding Recommendations	 01.2.1.1 Payroll contribution via Social Security Board system 01.2.1.1 Tax – tobacco, alcohol, gambling, lotteries, soft drinks / imported processed food/carcinogenic fertilizers. 01.2.1.1 Economic growth organically resulting in increased funds. 01.2.1.1 Reprioritization of budget allocation with the Government of Belize's budget 01.2.1.1 Improve efficiencies within the health system will result in savings that can be used. 				
01.2.2 Explore additional measures for funding.	 01.2.2.1 Patient Yearly Co-pay via Membership 01.2.2.2 Contributions from major companies to their employees 01.2.2.3 Private Insurance 01.2.2.4 NHI Premium Insurance 01.2.2.5 Tourism Visa Fee 01.2.2.6 SSB temp registration yearly fee 				

01.1 Create/Revise Legislative Framework to support the earmarking of the various funding sources.

The Project/Actions/Measure for this section aims to ensure that once funds are secured for NHI, it goes directly into an established NHI account rather than the General Revenue Fund. This will allow for greater monitoring of expenditure and greater accountability and may also increase the possibility of greater buy-in from the public and private sectors if they know the funds are going towards NHI.

01.2 Cabinet Paper Proposal

The proposal paper to the cabinet will include all the possible identified funding sources. The goal is to secure sustainable funding to ensure the longevity and success of NHI. The first set of suggestions was made via a PAHO-published paper. The NHIC reviewed their recommendations and accepted all but one "increase debt funding."

01.2.1 PAHO Funding

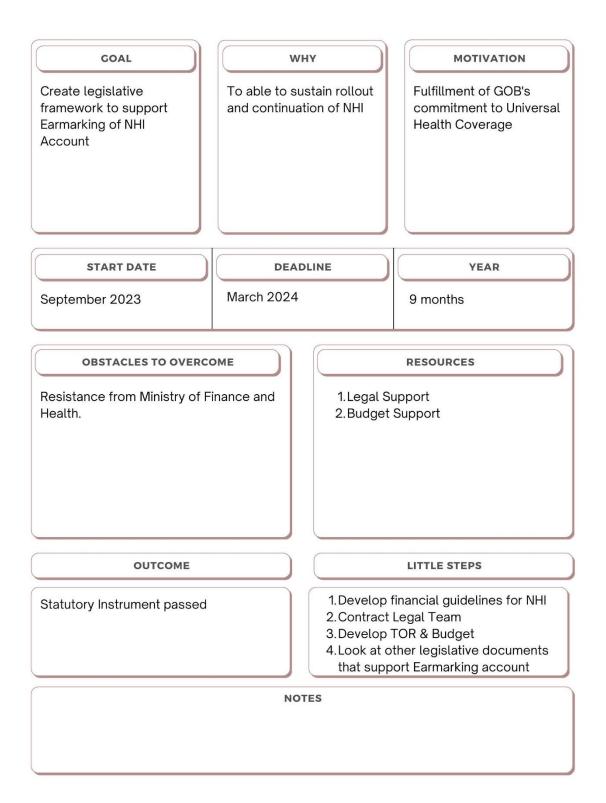
Recommendations	Remarks		
01.2.1.1 Payroll Contributions	Once we get 'buy-in' from the public about the benefits of NHI, the plan is to have them contribute a very small amount via Social Security.		
01.2.1.2 Taxes	Implement a "sin tax" on items damaging to health (soda, alcohol), gambling, lotteries, processed foods, and carcinogenic fertilizers.		
01.2.1.3 Economic Growth	The rationale behind this as a source of funds is that as there economic growth, there is greater input into the Genero Revenue Fund via taxes (GST, etc.). This will translate to mor money being allocated to the health sector.		
01.2.1.4 Budget Reprioritization	The COVID pandemic has highlighted the health sector's crucial role in the economy's overall function. The goal is to have each ministry pledge as little as 0.5% of its budget to health. The Return on Investment that each ministry will experience will be greater than what they pledged.		
	An example of this is in Orange Walk; a significant portion of the population uses the Orange Walk Northern Regional Hospital for their primary care, which consumes resources and capital from the hospital's budget. The proposed NHI clinics in Orange Walk will ease the burden on the hospital, thereby reducing their expenses. The Budget Reprioritization will seek to get a portion of these savings allocated to NHI. (Primary Care Hospital Usage Study need).		
01.2.1.5 Improve Efficiency	Improved efficiencies increase savings which can be put back into the system. Improved efficiencies include increased savings, waste reduction, and improved patient outcomes leading to fewer medications being used for NCD patients.		

01.2.2 Additional Funding Means

Recommendations	Remarks
01.2.2.1 Patient Yearly Co- pay	Once we get 'buy-in' from the public about the benefits of NHI, the plan is to have them contribute a very small amount via Social Security (01.2.1.1 Payroll Contribution). Those not employed can have the option to pay their yearly co-pay at a local SSB branch or a pre-approved location.
01.2.2.2 Company Contributions	Explore the option of having companies contribute towards NHI. They will benefit by having their employees gain better and faster access to healthcare services, resulting in less downtime and increased productivity. This is even more pronounced with NCD (noncommunicable disease) cases. An additional incentive for companies and their employees can be explored to help make this option more attractive for companies.
01.2.2.3 Private Insurance	Work with the private Insurers to create a package allowing primary services to be delivered by NHI and major medical to be delivered by private institutions. This will reduce the cost to acquire private insurance (leading to more policies being sold), reduce the cost to insurance companies, and increase revenue to NHI. Furthermore, the benefits to policyholders are that they pay less for policies. Instead of having to cover a 20% co-pay of cost to private institutions, by going to NHI for primary care, they will have no co-pay as it will be covered by their insurance (the cost to insurance companies will be less than their 80% co- pay so it is cost-effective for the insurance companies).
01.2.2.4 NHI Premium Insurance	If NHI chooses to offer a different tier package of services, i.e., P-2 and P-3, they charge a premium for it. NHI can also explore working with private insurance companies to see what other options can be beneficial to all parties involved (01.2.2.3).
01.2.2.5 Tourism Visa Fee	Upon entry to Belize, every tourist pays a nominal health fee. Their payment is registered as a receipt which they can use at any NHI facility for free primary healthcare. This will cover most acute (non-life threatening) conditions and top-up on NCD medications, i.e., someone forgot their hypertension medication and needed several days' worth of medication. A Risk Pooling assessment needs to be done to determine viability.
01.2.2.6 SSB Temporary Registration Fee	Anyone with an SSB card can register for services at NHI. Those here on temporary work permits can also qualify for NHI use but will have to pay an NHI fee every time they apply for/renew their SSB card.

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OBJECTIVE # 01.1



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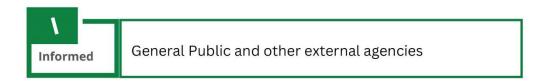
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4 Step Raci Matrix # 01.1

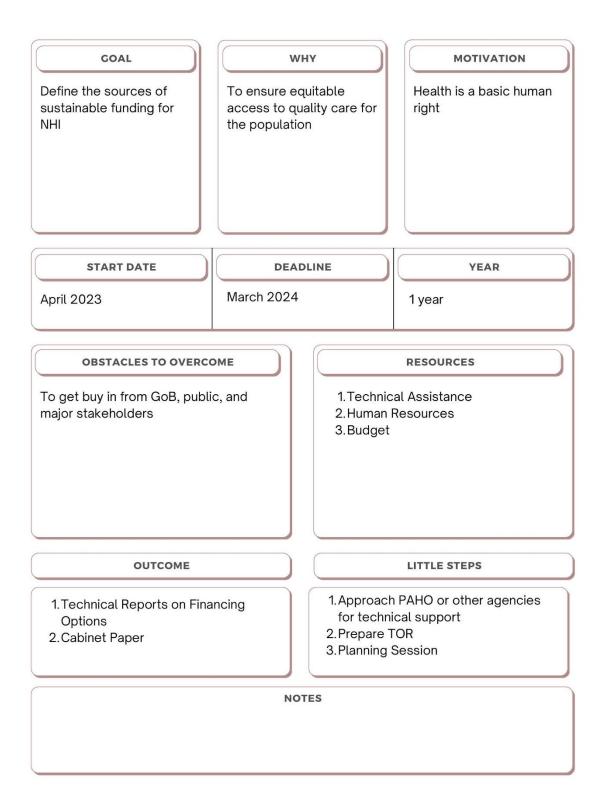




6	
Consulted	NHIC/SSB Board and Cabinet



OBJECTIVE # 01.2



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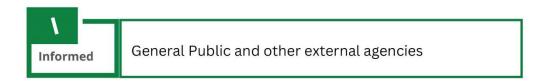
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4 Step Raci Matrix # 01.2

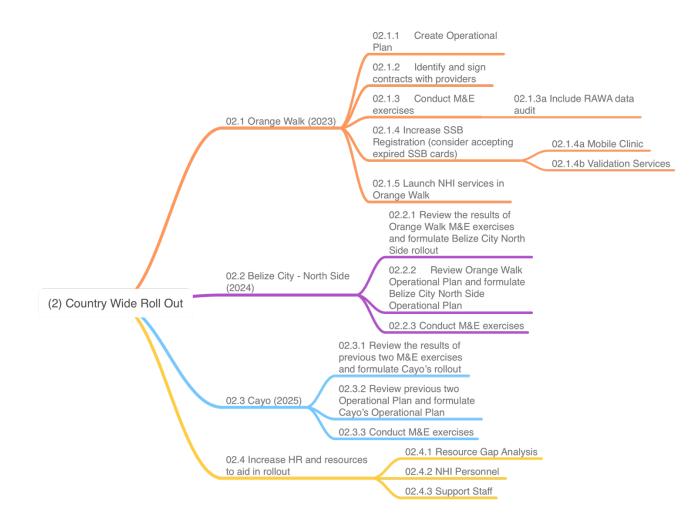




6	
Consulted	NHIC/SSB Board and Cabinet



Strategic Focus #2: Countrywide Roll Out



The overall objective for Strategic Focus #2, "Countrywide Roll Out," is to launch NHI clinics in the following areas:

- 1. Orange Walk
- 2. Belize City North Side (Cabinet approval required to approve Belize City North Side for 2024)
- 3. Cayo

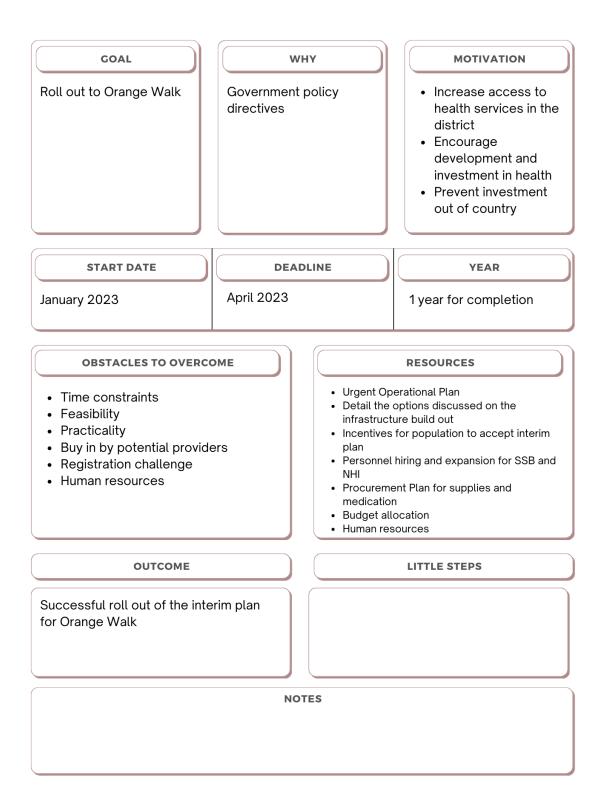
During the NHIC Strategic meeting, the following Strategic Objectives and Projects/Actions/Measures were agreed upon. The current focus is on the rollout of Orange Walk using the new business model. A key part of the roll-out is the M&E to determine and help shape best practices that can be used for the rollout of Belize City North Side (2024) and Cayo (2025). Another factor that must be addressed is the increased staff required to execute the expansion. To improve efficiency (01.2.1.5), a Resource Gap Analysis should be done to ensure enough resources are being acquired and only the essential personnel needed are hired.

STRATEGIC OBJECTIVE	PROJECT/ACTION/MEASURE
02.1 Rollout Orange Walk (2023)	 02.1.1 Create an Operational Plan 02.1.2 Identify and sign contracts with providers. 02.1.3 Conduct M&E exercises. 02.1.4 Increase SSB Registration (consider accepting expired SSB cards) 02.1.5 Launch NHI services in Orange Walk
02.2 Rollout Belize City North Side (2024)	 02.2.1 Review the results of Orange Walk's M&E exercises and formulate Belize City North Side rollout. 02.2.2 Review Orange Walk's Operational Plan and formulate Belize City North Side Operational Plan 02.2.3 Conduct M&E exercises.
02.3 Rollout Cayo (2025)	 02.3.1 Review the results of Orange Walk and Belize City North Side M&E exercises and formulate Cayo rollout. 02.3.2 Review Orange Walk and Belize City North Side Operational Plan and formulate Cayo Plan 02.3.3 Conduct M&E exercises
02.4 Increase HR & Resources to aid in the roll-out.	

Objective	Remarks
02.1 1 Roll Out Orange Walk	02.1.1 Create Operational Plan – Completed and being implemented. It is advised that a checklist and timeline be created.
	02.1.2 Contract Providers – Identify, vet, and sign contracts with providers. This process started with Stakeholder Engagement conducted on January 18 ^{th,} 2023, in Orange Walk.
	02.1.3 Monitoring & Evaluation – An M&E tool needs to be created based on Operational Plan (02.1.1) and conducted to determine best practices. There must be constant engagement with stakeholders to review M&E results for feedback.
	02.1.4. Increase SSB Registration – as we get closer to launching NHI Orange Walk, it is crucial to ensure people have SSB cards to

Objective	Remarks
	register for NHI. Work with SSB to launch Mobile Clinic and consider accepting expired SSB cards. Explore SSB's "Validation Services" to determine if they can be used to register patients.
02.2 Roll Out Belize City North Side	02.2.1 Review Orange Walk M&E – use the data gathered from Orange Walk's M&E (02.1.3) to help guide the Operational Plan for Belize City North Side.
	02.2.2 Review Orange Walk Operational Plan – based on the experiences of Orange Walk's Operational Plan, we created Belize City North Side Operational Plan to reflect best practices. The crucial part will be an adjustment of the timeline to ensure a timely rollout.
	02.2.3 Monitoring & Evaluation – conduct Monitoring & Evaluation to help determine efficiency, effectiveness, and best practices.
02.3 Roll Out Cayo	02.3.1 Review Orange Walk/Belize M&E – use the data gathered from Orange Walk and Belize's M&E to help guide the Operational Plan for Cayo.
	02.3.2 Review Orange Walk and Belize City North Side Operational Plan – based on the experiences of Orange Walk and Belize's Operational Plan, we create Cayo's Operational Plan to reflect best practices. The crucial part will be an adjustment of the timeline to ensure a timely rollout.
	02.3.3 Monitoring & Evaluation – conduct Monitoring & Evaluation to help determine efficiency, effectiveness, and best practices.
02.4 Increase HR & Resources	02.4.1 Resource Gap Analysis – NHI must conduct a resource and HR gap analysis to determine what is needed and what extra HR staff is required to execute the rollout. From mere observation, there isn't sufficient NHI staff to execute the rollout project.
	02.4.2 NHI Personnel – based on Resource Gap Analysis results (02.4.1), the appropriate staff positions need to be filled. This may include creating a "Roll Out Unit" whose function is to implement the roll-out process at the different locations, conduct the M&E, and ensure contractual obligations are being met.
	02.4.3. Support Staff - based on Resource Gap Analysis results (02.4.1), the appropriate support staff will be utilized. This includes short-term support such as consultants, service providers, and other ancillary staff deemed necessary.

OBJECTIVE # 02.1

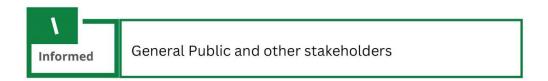


4 Step Raci Matrix # 02.1

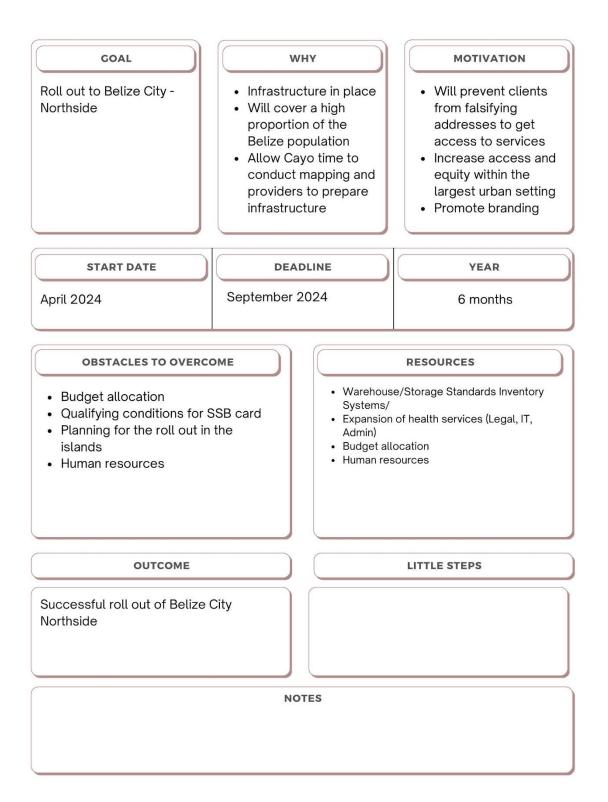




C	
Consulted	NHIC, SSB Board, Providers, Ministry of Finance



OBJECTIVE # 02.2

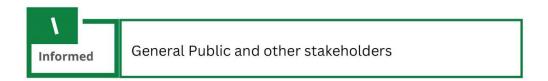


4 Step Raci Matrix # 02.2





C	
Consulted	NHIC, SSB Board, Providers, Ministry of Finance



OBJECTIVE # 02.3

GOAL Roll Out Cayo	w Final destina	ну tion	MOTIVATION Achieve full coverage
START DATE			YEAR
April 2025 September		2025	6 months
OBSTACLES TO OVERCOME Election year Budgeting allocation Large geographic zone Human resources 		Human rProvisionProvider,	ervice gap analysis esources n models (Single GP
OUTCOME			LITTLE STEPS
Successful roll out across Cayo district			
	NO	TES	

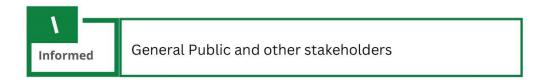
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4 Step Raci Matrix # 02.3



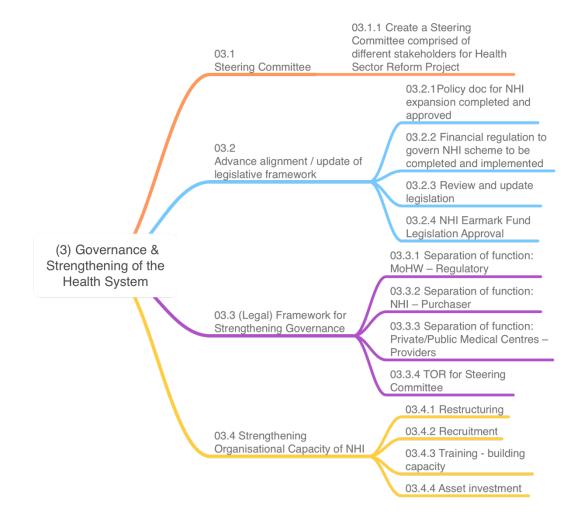


C				
Consulted	NHIC, SSB Board, Providers, Ministry of Finance			



Strategic Focus #3:

Governance & Strengthening of the Health System



The driving force for the Universal Coverage Plan will be well-thought-of and executed policies. One such policy that must be considered and monitored for implementation is the "Mission Report: Re-Organization of the Belize Health System," published by PAHO on June 17th, 2022. The policy is a country-level proposal to guide the development of a health system transformation framework.

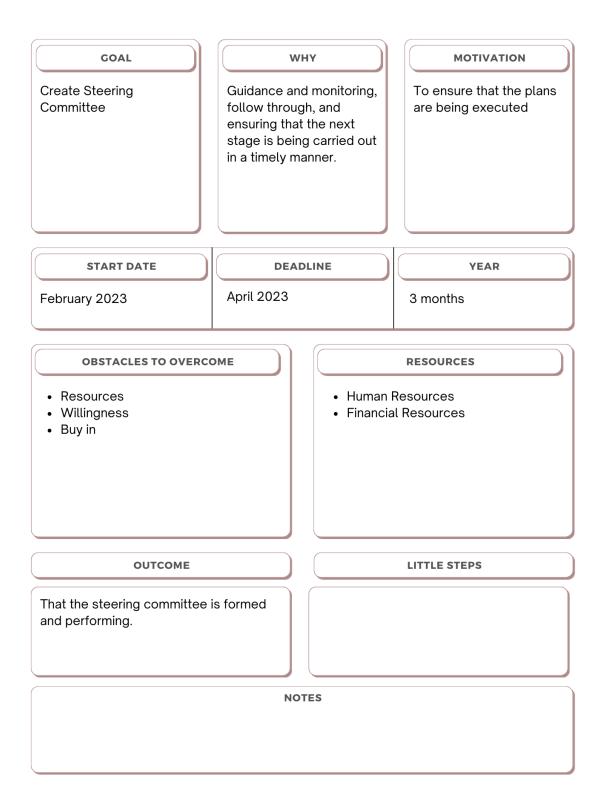
The strengthening process will see the separation of the regulator, provider, and purchaser. This will help reduce costs, improve efficiency, and increase accountability.

STRATEGIC OBJECTIVE		PROJECT/ACTION/MEASURE
03.1	Steering Committee	03.1.1 Create a Steering Committee comprised of different stakeholders for the Health Sector Reform Project03.1.2 TOR for Steering Committee
03.2	Advance alignment/update of the legislative framework	 03.2.1 Policy doc for NHI expansion completed and approved. 03.2.2 Financial regulation to govern NHI scheme completed and implemented. 03.2.3 Review and update legislation 03.2.4 NHI Earmark Fund Legislation Approval
03.3	(Legal) Framework for Strengthening Governance	 03.3.1 Separation of function: MoHW – Regulatory 03.3.2 Separation of function: NHI – Purchaser Separation of function: Private/Public Medical Centers – Provider
03.4	Strengthening Organizational Capacity of NHI	 03.4.1 Restructuring 03.4.2 Recruitment 03.4.3 Training – onboarding and building capacity. 03.4.4 Asset Investment

Objective	Remarks
03.1 Steering Committee	03.1.1 Create Steering Committee – the goal is to establish a steering committee whose goal/purpose is to aid in the Health Sector Reform Project (separation of function).
03.2 Advance alignment/update of the	03.2.1 Policy document for NHI covers the expansion of NHI, including the current rollout project.
legislative framework	03.2.2 Financial Regulation Document – this is to help govern the NHI scheme. The updated document reflects the new business model.
	03.2.3 Review and Update Legislation – with all the changes occurring, the legislation must reflect it to allow for a smooth transition to the new business model.
	03.2.4 NHI Earmark Fund – have legislation approved for NHI to have its fund where funds earmarked for NHI go directly to it (01.1)
03.3 (Legal) Framework for Strengthening Governance	03.3.1-3 For the Separation of function to occur, all key players must help in drafting the legal framework to create the separation of function, which should strengthen governance.
	03.3.4 The TOR for the Steering Committee must be completed for to committee to be formed and execute its role.
03.4 Strengthening Organizational Capacity of NHI	03.4.1-2 Recruit & Restructure – based on the Gap Analysis (02.4.1), additional HR should be hired, and existing staff should be placed in a role more appropriate to their experience.
	03.4.3 Training – The onboarding manual must be created for new hires and NHIC members. Training capacity should be done to develop and strengthen staff skills, instincts, and abilities. This will result in more knowledgeable and efficient staff.

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OBJECTIVE # 03.1

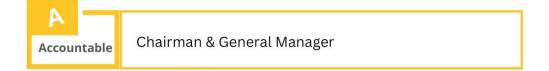


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4 Step Raci Matrix # 03.1





6				
Consulted	Government of Belize, PAHO, Stakeholders			

	Other stakeholders
Informed	

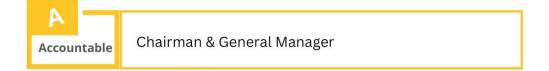
OBJECTIVE # 03.2

COAL Advance alignment / update of legislative framework	WH To provide con		MOTIVATION Effectiveness
START DATE	DEADL	INE	YEAR
Ongoing	December 202	23	1 year
OBSTACLES TO OVERCO	DME		RESOURCES
Bureaucracy		Finance Human F	Resources
OUTCOME			LITTLE STEPS
That the policy is implemented by the Government		1.Draft completed 2.Adaptation	
	ΝΟΤΙ	ËS	

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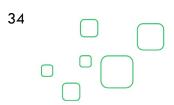
4 Step Raci Matrix # 03.2



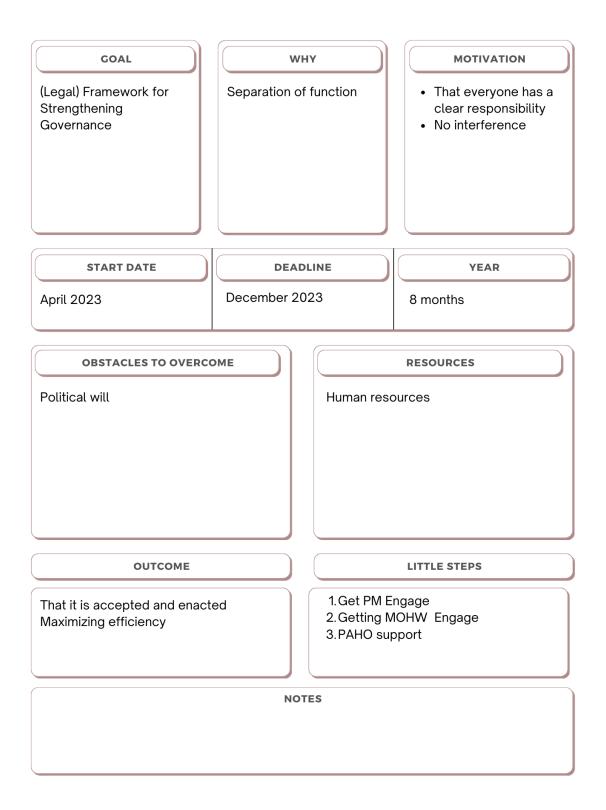


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Consulted	Government of Belize, PAHO, Stakeholders			
Consulted	Government of Belize, PAHO, Stakeholders			

<u> </u>	
Informed	NHIC



OBJECTIVE # 03.3

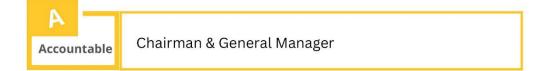


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4 Step Raci Matrix # 03.3





C	
Consulted	NHIC

Informed	Staff & Stakeholders

OBJECTIVE # 03.4

COAL Strengthening Organisational Capacity of NHI	V Build efficie	vнY	MOTIVATION Seeking excellent in the provision of services	
START DATE	DEA	DLINE	YEAR	
April 2023	December 2	2023	9 months	
OBSTACLES TO OVERCOME RESOURCES • Willingness to engage • Human resources • Compliance • Financial resources			resources	
оитсоме			LITTLE STEPS	
To Have a more efficient service And to improve the quality of services Acquire assets that add value to NHI		2.To identif	1. The completion of the gap analysis 2. To identify role and build capacity 3. Implementation of post	
	N	DTES		

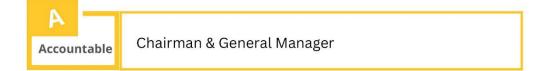
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4 Step Raci Matrix # 03.4



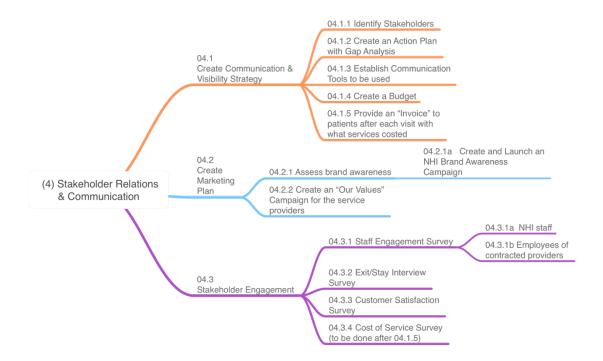


C	
Consulted	NHIC

Informed	Staff & Stakeholders

Strategic Focus #4:

Stakeholder Relations & Communication

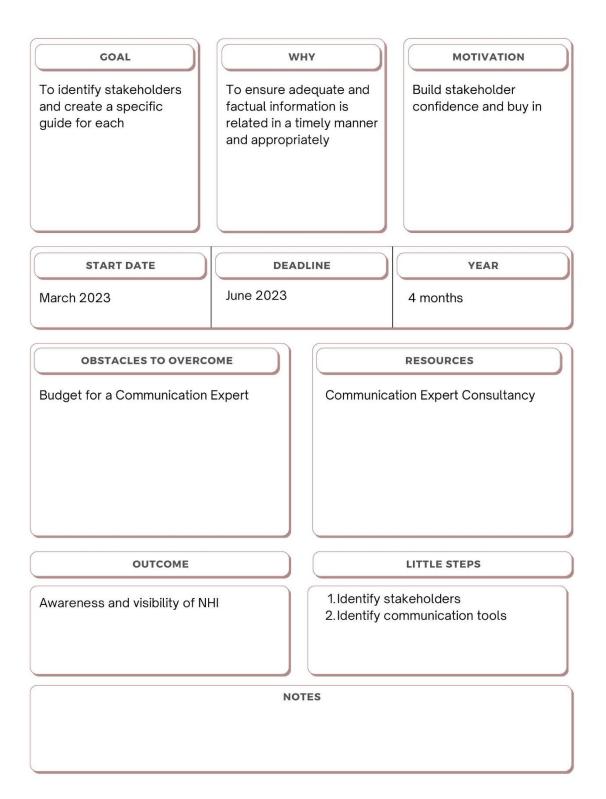


To achieve our goal, we will need the support of our stakeholders. Our goal is to improve relations and communications with stakeholders.

STRA	TEGIC OBJECTIVE	PROJECT	ACTION/MEASURE
04.1	Create a Communication & Visibility Strategy	04.1.1 04.1.2 04.1.3 04.1.4 04.1.5	Identify Stakeholders Create an Action Plan with Gap Analysis Establish Communication Tools to be used. Create a Budget Provide an "Invoice" to patients after each visit with what services cost.
04.2	Create Marketing Plan	04.2.1 04.2.2	Assess Brand Awareness (then launch campaign) Create an "Our Values" Campaign for the service providers.

STRATEGIC OBJECTIVE		PROJECT/ACTION/MEASURE
04.3 Stakeholder Engagement		 04.3.1 Staff Engagement Survey 04.3.2 Exit/Stay Interview Survey 04.3.3 Customer Satisfaction Survey 04.3.4 Cost of Service Survey (to be done after 04.2.3)
Objective	Remarks	
04.1 Create a Communication	04.1.1 ld	entify Stakeholders – determine the key stakeholders that NHI must connect with
& Visibility Strategy	04.1.2	Action Plan with Gap Analysis – using NHI's existing communication strategy, create a gap analysis that will help expand on the steps necessary to reach out to the identified key stakeholders (04.1.1)
	04.1.3 C	ommunication tools must be determined based on the stakeholders you wish to engage.
	04.1.4 C	reate a budget that will be required to execute the communication strategy.
	04.1.5. P	rovide an "Invoice" to patients after each visit so they see the actual cost of the goods and services they received versus what they pay. This will help create an appreciation for the value of NHI and help sell people on the idea of a co-pay to make NHI more financially sustainable (01.2.2.1)
04.2 Create a Marketing Plan	04.2.1	Assess the brand awareness of NHI and, based on the findings, create and launch an NHI Brand Awareness Campaign that builds confidence in the NHI logo.
	04.2.2	Create an "Our Values" campaign for service providers that emphasize the values and standards they must uphold to continue being providers of NHI services.
04.3 Stakeholder Engagement	04.3.1	Staff Engagement Survey conducted on staff directly employed by NHI and those employed by service providers. This should be done at least once a year.
	04.3.2. E	Exit/Stay Interview Surveys to determine why an employee has left or opted to stay.
	04.3.3	Customer Satisfaction Survey was done to determine if customers are happy with the services they are getting or if there is an issue with the services.
	04.3.4	Cost of Service Survey done after 04.1.5 has been done to help determine if customers have gained an understanding and appreciation for the true cost of NHI and their benefits.

OBJECTIVE # 04.1



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4 Step Raci Matrix # 04.1



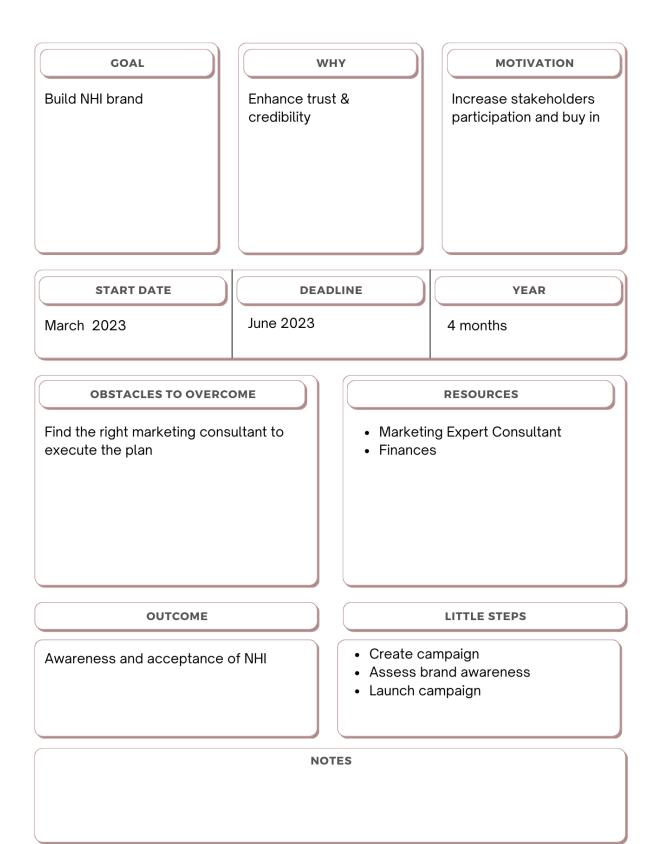
A	
Accountable	NHI Technical Advisor

C	
Consulted	NHIC



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OBJECTIVE # 04.2



4 Step Raci Matrix # 04.2

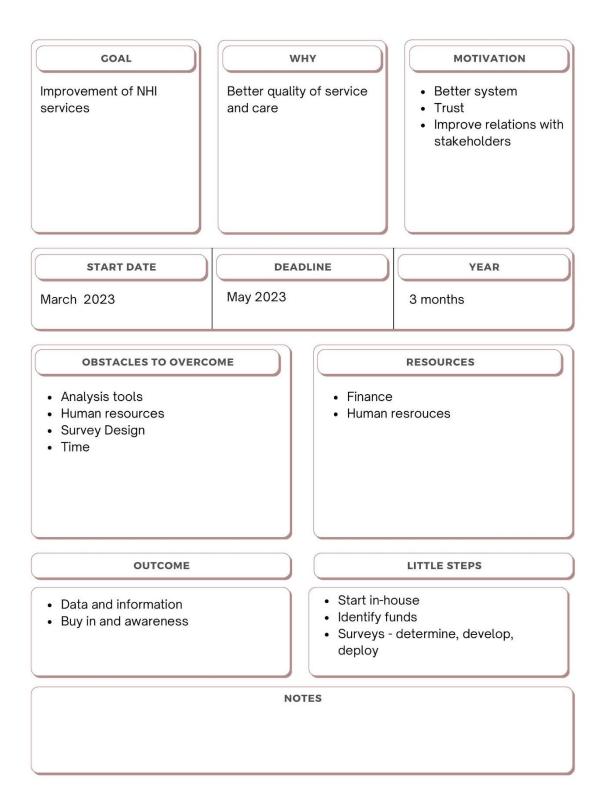




C	
Consulted	NHIC

	1
Informed	Media & General Public

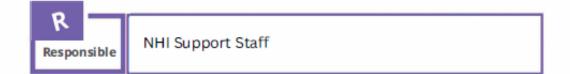
OBJECTIVE # 04.3

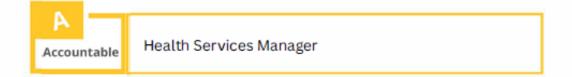


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4 Step Raci Matrix # 04.3



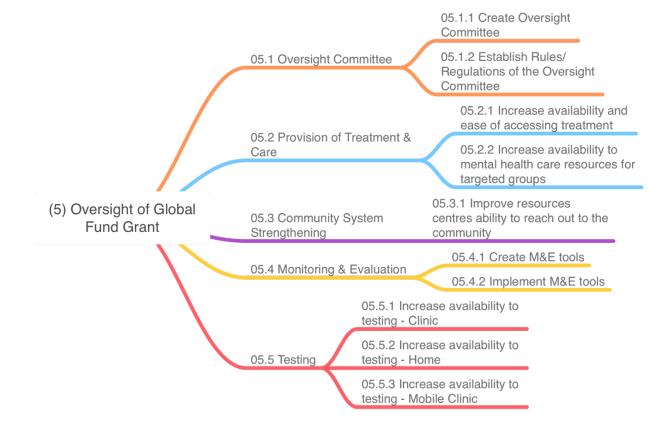


C -	
C I	
Consulted	General Manager

Informed	Media, NHIC, and stakeholders



Strategic Focus #5: Oversight of Belize's Global Fund Grant 2022-2024



In April 2022, the Global Fund approved Belize's funding request (2022-2024) for a total allocation of US\$ 2.99 million to advance the country's response to HIV and AIDS. The funding is aimed at helping achieve the "90-90-90" goal via expanding a differentiated care approach to increase access to HIV testing and prevention services, strengthening linkage to care for people testing positive for HIV, and capacity building for health care providers and community health workers.

As part of the project, NHI was tasked with overseeing the implementation of the following activities:

- Provision of treatment, care, and support
- Community system strengthening
- Monitoring & Evaluation
- Testing & Counseling

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STRATEGIC OBJECTIVE		PROJECT/ACTION/MEASURE				
05.1	Oversight Committee	05.1.1 Create Oversight Committee 05.1.2 Establish Rules/Regulations of the Oversight Committee				
05.2	Provision of Treatment & Care	05.2.1 Increase availability and ease of accessing treatment.05.2.2 Increase availability of mental health care resources for targeted groups				
05.3	Community System Strengthening	05.3.1 Improve the resource center's ability to reach out to the community.				
05.4	Monitoring & Evaluation	05.4.1 Create M&E tools. 05.4.2 Implement M&E tool				
05.5	Testing	05.5.1 Increase availability to testing – Clinic. 05.5.2 Increase availability to testing – Home. 05.5.3 Increase availability to testing – Mobile Outreach				

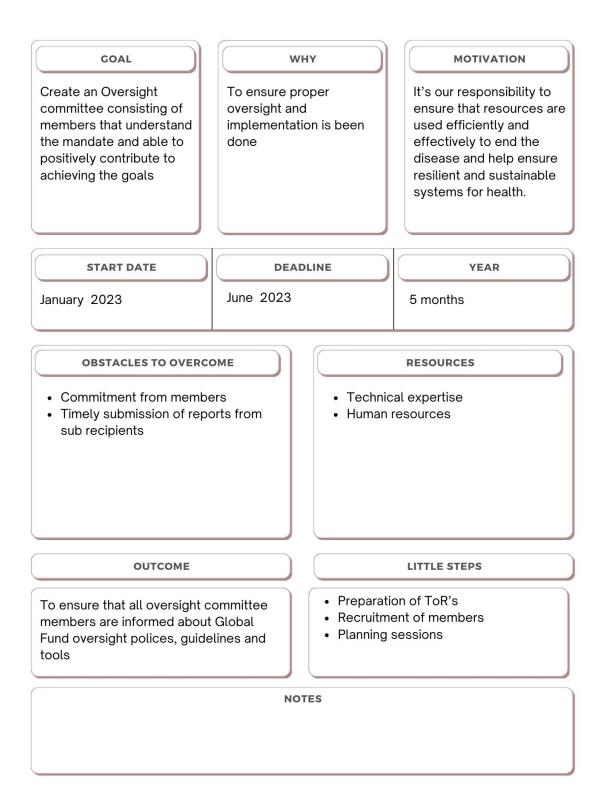
Objective		Remarks			
05.1	Oversight Committee	05.1.1 Create an Oversight Committee consisting of members that understand the mandate and can positively contribute to achieving the goals.			
		05.1.2 Establish Rules/Regulations of the Oversight Committee that will help govern the committee and provide clear directives regarding its goals.			
05.2	Provision of Treatment & Care	 05.2.1 Assess the current hurdles faced in accessing treatment and work on increasing availability and ease of access. 05.2.2 Determine the gap in mental care health resources available and work on increasing mental health care resources available for targeted groups. 			
05.3	Community System Strengthening	05.3.1 To improve a resource canter's outreach to the community, it is important to identify the available resources, determine their benefits, and establish methods to measure their effectiveness.			
05.4	Monitoring & Evaluation	05.4.1 Create M&E tools to help monitor progress and determine if goals are being met.			

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Objective	Remarks
	05.4.2 It is crucial to have trained individuals to implement the M&E tool, as even a great tool can produce complete or correct data with proper implementation.
05.5 Testing	05.5.1 Work with the different clinics to gain a better understanding of what are the obstacles to getting a greater population tested.
	05.5.2 Increase availability to testing by improving awareness of this resource and ease of access or delivery.
	05.5.3 Increase availability to testing via Mobile Outreach. This would require acquiring a mobile health clinic.



OBJECTIVE # 05.1



4 Step Raci Matrix # 05.1

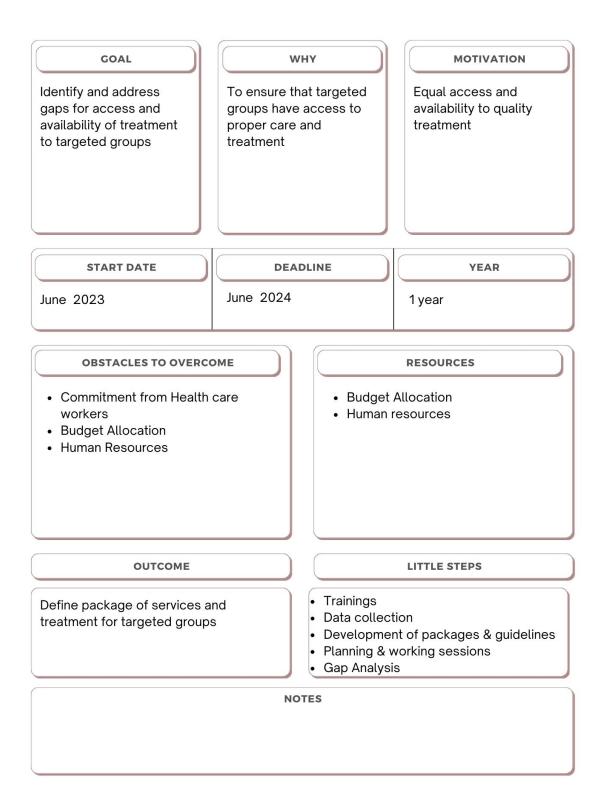








OBJECTIVE # 05.2



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4 Step Raci Matrix # 05.2

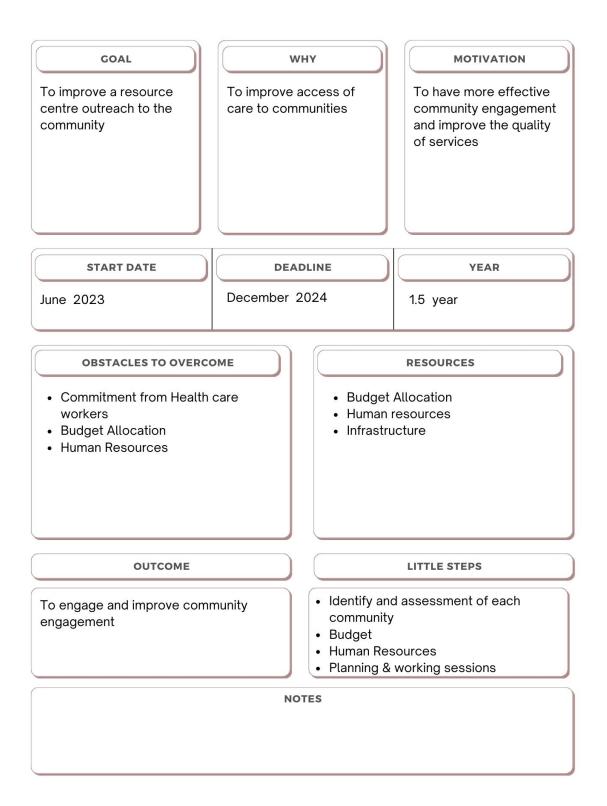




Consulted Health Care Workers	

Informed	Sub recipients & Key Partners

OBJECTIVE # 05.3

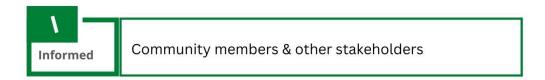


4 Step Raci Matrix # 05.3





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Consulted	NHIC, SSB Board



Timeline:

The basic timeline breaks down the rollout to one new location per year. The Implementation Timeline will be provided via an interactive online app that allows for real-time evaluation of progress and better accountability.

YEAR	GOAL
2023	Roll out Orange Walk
2024	Roll out Belize City North Side
2025	Roll out Cayo
2026-2027	Based on the progress of the roll-out, 2026 and 2027 will be determined as more data becomes available.

Monitoring & Evaluation

Snapshots of online project management tool to execute Implementation Timeline and Monitoring & Evaluation.

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ALL	INFO	TASK NAME	DURATION	PLANNED START	PLANNED FINISH ASSI
1		Roll Out Orange Walk	1 day	03/02/2023	03/02/2023
2		Create Operational	1 day	03/02/2023	03/02/2023
3		Identify and sign co	1 day	03/02/2023	03/02/2023
4		Conduct M&E	1 day	03/02/2023	03/02/2023
5		Increase SSB Regist	1 day	03/02/2023	03/02/2023
6		Launch NHI service	1 day	03/02/2023	03/02/2023
7		🔄 Roll Out Belize City - N	1 day	03/02/2023	03/02/2023
8		Review Orange Wal	1 day	03/02/2023	03/02/2023
9		Review Orange Wal	1 day	03/02/2023	03/02/2023
10		Conduct M&E	1 day	03/02/2023	03/02/2023
11		🖃 Roll Out Cayo	1 day	03/02/2023	03/02/2023
12		Review Belize and O	1 day	03/02/2023	03/02/2023
13		Review Orange Wal	1 day	03/02/2023	03/02/2023
14		Conduct M&E	1 day	03/02/2023	03/02/2023
15		Increase HR & Resourc	1 day	03/02/2023	03/02/2023
16		Resource/HR Gap a	1 day	03/02/2023	03/02/2023
17		Increase NHI Perso	1 day	03/02/2023	03/02/2023
18		Increase Support St	1 day	03/02/2023	03/02/2023

Go	overnanc	e & Strengthening o	of the Healt	h System 🛛 🗛	
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ALL	INFO	TASK NAME	DURATION	PLANNED START	PLANNED FINIS
1		📃 Steering Committee	1 day	03/02/2023	03/02/2023
2		Create steering co	1 day	03/02/2023	03/02/2023
3		Advance alignment/up	1 day	03/02/2023	03/02/2023
4		Policy document for	1 day	03/02/2023	03/02/2023
5		Financial regulation	1 day	03/02/2023	03/02/2023
6		Review and update I	1 day	03/02/2023	03/02/2023
7		NHI Earmark fund le	1 day	03/02/2023	03/02/2023
8		E Legal framework to str	1 day	03/02/2023	03/02/2023
9		Restructuring	1 day	03/02/2023	03/02/2023
10		Recruitment	1 day	03/02/2023	03/02/2023
11		Training	1 day	03/02/2023	03/02/2023
12		Asset Investment	1 day	03/02/2023	03/02/2023
10					

St	akeholde	er Relations & Comr	nunication	AH	
\oplus	2			€ 123 ◇ 3	
ALL	INFO	TASK NAME	DURATION	PLANNED START	PLANNED FINISH
1		🗏 Create Communicatio	1 day	03/02/2023	03/02/2023
2		Identify stakeholders	1 day	03/02/2023	03/02/2023
3		Create an Action Pl	1 day	03/02/2023	03/02/2023
4		Establish Communic	1 day	03/02/2023	03/02/2023
5		Crate a budget	1 day	03/02/2023	03/02/2023
6		"Invoice" patients	1 day	03/02/2023	03/02/2023
7		Create Marketing Plan	1 day	03/02/2023	03/02/2023
8		Assess brand aware	1 day	03/02/2023	03/02/2023
9		Create Our Values C	1 day	03/02/2023	03/02/2023
10		🖃 Stakeholder Engagem	1 day	03/02/2023	03/02/2023
11		Staff engagement s	1 day	03/02/2023	03/02/2023
12		Exit/Stay Interview	1 day	03/02/2023	03/02/2023
13		Customer satisfacti	1 day	03/02/2023	03/02/2023
4		Cost of Service Sur	1 day	03/02/2023	03/02/2023

Se	cure Fu	nding for Financial S	Sustainabi	lity and the NF	ll Roll Out 🛛 🔲
\oplus	2			A 🗞 123 🔷 🖁	K 🗅 🗊 📎 🛛
ALL	INFO	TASK NAME	DURATION	PLANNED START	PLANNED FINISH A
1		Create/Revise Legislat	1 day	03/02/2023	03/02/2023
2		Examine Medical Co	1 day	03/02/2023	03/02/2023
3		Examine how other	1 day	03/02/2023	03/02/2023
4		Review regulatory g	1 day	03/02/2023	03/02/2023
5		E PAHO Funding Recom	1 day	03/02/2023	03/02/2023
6		Payroll contribution	1 day	03/02/2023	03/02/2023
7		Tax - tobacco, alco	1 day	03/02/2023	03/02/2023
8		Economic growth	1 day	03/02/2023	03/02/2023
9		Reprioritization of b	1 day	03/02/2023	03/02/2023
10		Improve efficiencies	1 day	03/02/2023	03/02/2023
11		Explore additional fun	1 day	03/02/2023	03/02/2023
12		Patient yearly co-pay	1 day	03/02/2023	03/02/2023
13		Contributions from	1 day	03/02/2023	03/02/2023
14		Private insurance	1 day	03/02/2023	03/02/2023
15		NHI Premium Insura	1 day	03/02/2023	03/02/2023
16		Tourism Visa Fee	1 day	03/02/2023	03/02/2023
17		SSB Temp registrati	1 day	03/02/2023	03/02/2023

Figure 1: Tasks with Gantt Chart

D		Deline		Dama	
D Do	•••	Doing	•••	Done	
Roll Out Orange Walk > Create Operational Plan	3 Feb	Roll Out Orange Walk	3 Feb	Add a Task	
Roll Out Orange Walk > Identify and sign contracts with providers	3 Feb	Add a Task	+		
Roll Out Orange Walk > Conduct M&E	3 Feb				
Roll Out Orange Walk > Increase SSB Registration	3 Feb				
Roll Out Orange Walk >					
Launch NHI services in Orange Walk	3 Feb				
Roll Out Belize City - North Side	3 Feb				
Roll Out Belize City - North Side >					
Review Orange Walk M&E and formulate BZ North Side Roll Out	3 Feb				
Roll Out Belize City - North Side >					
Review Orange Walk Operational Plan and formulate BZ North Side	3 Feb				

Figure 2: Progress Board helps keep track of tasks.

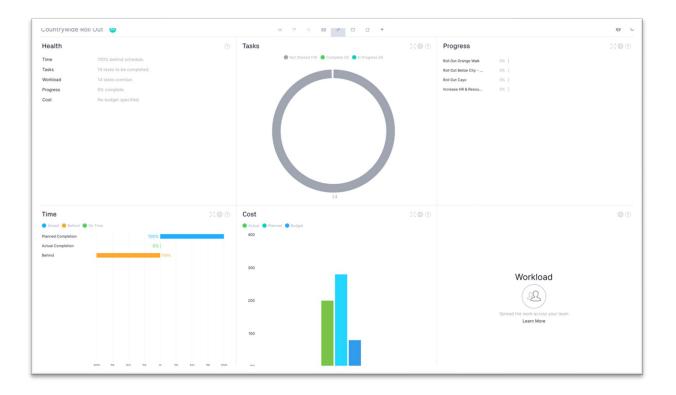


Figure 3: The dashboard gives you an overview of the project, helping you keep track of tasks, costs, and the project's health.



Recommendations

In each section, recommendations have been made for the execution of each strategic objective. The following recommendations serve to help in achieving the global objective.

- A. We recommend the creation of organizational tenets (Vision + Mission) for the PCPs to adhere to, as well as aligning them with the values of the NHI for delivery as part of the franchise regulations. Additions for the care of patients need to be included, such as compassion, etc. (E.g., the use of a slogan such as "Healthcare is a cost, wellness is an investment").
- B. Having a staff member whose primary role is conducting Monitoring & Evaluation. This exercise will help ensure that targets are met and a timeline is maintained. The suggested software to conduct the Monitoring & Evaluation is <u>www.projectmanager.com</u>. The software allows for real-time monitoring of progress, eliminating the need to have reports generated after data is manually collected and entered.
- C. Understanding that this is a dynamic document, it is recommended and encouraged that changes and improvements be made to the plan based on the feedback from the real-time Monitoring & Evaluation.



Annex 1:

List of Attendees of the NHIC Committee at the Strategic Planning Session

Names	Organization	
Dr. Marco T. Mendez	Executive Chairman - NHIC	
Mrs. Deborah Ruiz	CEO – SSB – NHIC member	
Mr. Jerome Palma	ORINCO – NHIC member	
Mr. Marvin Mora	NTUCB – NHIC member	
Mr. Dean Flowers	NTUCB – NHIC member	
Dr. Angel Campos	Opposition Representative – NHIC member	
Ms. Katherine Meighan	Bze Chamber of Commerce & Ind. – NHIC member	
Dr. Ramon Figueroa	GM - NHI	
Dr. Deysi Mendez	Technical Advisor - NHI	
Dr. Natalia Rodriguez	NHI	
Ms. Ruth Jaramillo	NHI	
Mr. Emroy Castillo	NHI	
Ms. Cristina Ake	NHI	
Mrs. Agnes Flowers	NHI	
Ms. Leslie Perera	NHI/GF	
Ms. Sandy Lauture	NHI/GF	
Mr. Jamaan Gordon	NHI	
Mr. Jose Colli	NHI	





