



2025-2035 HEALTH WORKFORCE STRATEGY FOR BERMUDA

Action Plan Framework

Contact us

If you would like any further information about the Bermuda Health Council, or if you would like to bring a health system matter to our attention, we look forward to hearing from you.

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Purpose of Profession Workforce Plans

The Bermuda Health Workforce Strategy (2025–2035) establishes the national direction for strengthening and sustaining Bermuda’s health workforce. This framework is intended for statutory boards responsible for regulated health professions and provides the structure through which profession-specific workforce plans should be developed.

Profession workforce plans translate this national strategy into discipline-specific actions that address workforce supply, service demand, and evolving models of care within each profession. These plans will be developed by statutory boards and professional groups responsible for regulating and supporting their respective professions.

Profession workforce plans serve three key purposes:

- 01 Assess the current workforce landscape** within each profession, including workforce size, demographics, and service demand.
- 02 Identify future workforce needs,** including potential shortages, retirement risks, and training pipeline requirements.
- 03 Define concrete actions** that align with the national workforce strategy and support the long-term sustainability of Bermuda’s health system.



Together, these profession workforce plans will form the operational foundation for implementing the Bermuda Health Workforce Strategy.

Workforce Planning Model

Profession workforce plans should follow a structured planning process that links population health needs to workforce requirements.

Workforce planning should consider the following elements:



This approach ensures that workforce planning is based on evidence and service demand, rather than historical staffing patterns.

Structure of Profession Workforce Plans

Each profession workforce plan should follow the structure outlined below to ensure consistency and allow comparison across professions. This structure enables the Bermuda Health Council to assess workforce risks across the health system and support coordinated workforce planning.

Achieving Workforce Sustainability

01

Profession Overview

Describe the profession's role and contribution to healthcare.

02

Regulatory Framework

Explain the laws and regulations governing the profession.

03

Current Workforce Profile

Analyze the current workforce size, demographics, and distribution.

04

Service Demand

Assess the current and future demand for the profession's services.

05

Workforce Gap Analysis

Identify potential shortages and areas for improvement.

06

Strategic Actions

Outline steps to address workforce gaps and enhance sustainability.

07

Technology and Innovation

Explore how technology can improve efficiency and access.

08

Monitoring Indicators

Establish metrics to track progress and ensure alignment.

09

Implementation and Governance

Describe how the plan will be executed and overseen.

10

Approval and Review

Ensure plans are reviewed, endorsed, and updated as needed.

Section 1: Profession Overview



This section provides a concise description of the profession and its role within Bermuda’s health system. It establishes the context for understanding how the profession contributes to healthcare delivery and population health outcomes. The overview should explain the services provided by the profession and how those services support the health system in addressing Bermuda’s major health priorities.

Profession workforce plans should include the following information:

Role in the Health System

Describe the role of the profession within the healthcare system and the types of services provided.

This may include:

- ✓ clinical services delivered by the profession
- ✓ settings in which professionals typically practice (e.g., hospital, primary care, community, long-term care)
- ✓ interaction with other professions as part of multidisciplinary care teams

Contribution to Population Health

Explain how the profession contributes to improving health outcomes and supporting key health priorities.

Where relevant, this may include:

- ✓ prevention and early detection of disease
- ✓ chronic disease management
- ✓ rehabilitation and recovery
- ✓ long-term care and support services

Relevance to Bermuda’s Health Priorities

Describe how the profession contributes to addressing key health challenges facing Bermuda.

This includes:

- ✓ the ageing population
- ✓ the growing burden of non-communicable diseases
- ✓ increasing demand for community-based care
- ✓ the need for multidisciplinary models of care

Scope of Services

Outline the major services provided by the profession, including specialised areas of practice where applicable.



Where relevant, describe:

- ✓ typical patient populations served
- ✓ common procedures or services delivered
- ✓ the role of the profession in care pathways

Example:

For example, in the podiatry workforce plan, the profession overview highlights the role of podiatrists in:

- ✓ limb preservation and diabetes management
- ✓ prevention and early detection of foot complications
- ✓ maintaining mobility and independence in ageing populations
- ✓ conservative management of musculoskeletal conditions affecting the lower limb

These examples illustrate how the profession contributes to population health outcomes and supports the broader health system.

Expected Length

This section should generally be one to two pages and provide sufficient context to understand the importance of the profession without duplicating detailed workforce analysis presented in later sections.

Section 2: Legislative and Regulatory Framework

This section describes the legislative and regulatory framework governing the profession in Bermuda. It should explain how the profession is regulated, the standards required for entry to practice, and any regulatory factors that may influence workforce development.

Understanding the regulatory environment is essential for workforce planning because legislation, professional standards, and scope-of-practice rules can significantly affect how professionals are trained, deployed, and integrated into the health system.

Governing Legislation

Identify the legislation under which the profession is regulated. This may include Acts of Parliament and associated regulations that define professional practice requirements, licensing procedures, and regulatory oversight.



This includes:

- ✓ governing legislation
- ✓ statutory board oversight
- ✓ professional registration requirements
- ✓ educational standards

Example:

Topic	Description
Legislation	Allied Health Professions Act
Regulatory body	Statutory Board responsible for the profession
Regulatory scope	Registration, professional standards, and disciplinary oversight

Regulatory Authority

Describe the statutory board or regulatory authority responsible for overseeing the profession.

Include:

- ✓ the role of the regulatory body
- ✓ responsibilities for registration and licensing
- ✓ continuing professional education requirements
- ✓ disciplinary and professional conduct processes

Where relevant, explain how the regulatory body interacts with the Ministry of Health, the Bermuda Health Council, and other professional organisations.

Registration and Entry-to-Practice Requirements

Describe the qualifications and requirements necessary to practise the profession in Bermuda.

This may include:

- ✓ academic qualifications required for registration
- ✓ professional examinations or licensing requirements
- ✓ supervised practice or internship requirements
- ✓ continuing professional development obligations

Where appropriate, plans should identify whether training programmes are available locally or whether professionals must be trained overseas.

Scope of Practice

Describe the scope of practice for the profession and any regulatory limitations that affect how professionals may work.

This may include:

- ✓ activities the profession is authorised to perform
- ✓ supervision requirements
- ✓ prescribing authority or other advanced practice roles
- ✓ restrictions that may limit workforce flexibility

Where relevant, plans should identify opportunities to modernise scopes of practice to better align with evolving models of care.

Regulatory Considerations for Workforce Planning

Profession workforce plans should identify any regulatory issues that may affect workforce development.

Examples include:

- ✓ restrictions on scope of practice
- ✓ licensing barriers for internationally trained professionals
- ✓ training or credential recognition requirements
- ✓ regulatory changes needed to support new roles or models of care



Identifying these factors helps ensure that workforce planning aligns with the regulatory environment and highlights potential areas for policy or legislative reform.

Expected Length

This section should typically be one page and provide enough detail to understand the regulatory context without duplicating information already available in legislation or regulatory guidance documents.



Section 3:

Current Workforce Profile

This section provides a comprehensive overview of the current workforce within the profession. It establishes the baseline from which workforce planning decisions will be made. A clear understanding of workforce size, demographics, and distribution is essential for identifying workforce risks, assessing future needs, and planning effective interventions.



Profession workforce plans should present workforce information using consistent indicators wherever possible to enable comparison across professions.

Workforce Size

Describe the total number of professionals registered in the profession and the number currently practising in Bermuda.

Where possible, distinguish between:

- ✓ registered professionals
- ✓ actively practising professionals
- ✓ full-time equivalent (FTE) workforce

Include:

Workforce Indicator	Description
Registered professionals	Total number registered with the regulatory authority
Active professionals	Number currently practicing in Bermuda
Full-time equivalents	Estimated workforce capacity

Workforce Demographics

Provide demographic information about the workforce to identify potential trends and risks.

Relevant indicators may include:

- ✓ age distribution
- ✓ gender distribution
- ✓ proportion of professionals approaching retirement age



Example:

Indicator	Description
Age distribution	Proportion of professionals in each age group
Gender distribution	Male/female workforce composition
Retirement risk	Proportion of workforce aged 60 years or older

Where available, charts illustrating age distribution can be useful for identifying retirement risks.



Nationality and Workforce Origin

Describe the proportion of the workforce that is Bermudian versus internationally recruited. This is particularly important in Bermuda’s context, where several professions rely heavily on international recruitment.

Relevant indicators may include:

Indicator	Description
Bermudian professionals	Number or percentage of Bermudian workers
Work permit holders	Number or percentage of internationally recruited professionals
Recruitment trends	Changes in workforce origin over time

Understanding this distribution helps identify potential workforce vulnerabilities related to immigration policy or global labour market trends.

Workforce Distribution

Describe how the workforce is distributed across the health system. This may include distribution by:

This may include distribution by:

- ✓ healthcare setting (hospital, primary care, community services)
- ✓ employer type (public sector, private sector, non-profit organisations)
- ✓ geographic location where relevant

Understanding workforce distribution helps identify areas where access to services may be uneven.

Workforce Trends Over Time

Where historical data are available, provide information on how the workforce has changed over time.



This may include:

- ✓ workforce growth or decline over the past decade
- ✓ changes in workforce composition
- ✓ emerging trends in workforce supply

Charts showing workforce numbers over time can help illustrate whether workforce capacity has kept pace with changes in healthcare demand.

Workforce Risks

Based on the information presented above, briefly identify any workforce risks that may affect the profession.

Examples may include:

- ✓ high reliance on internationally recruited professionals
- ✓ limited training pipeline
- ✓ ageing workforce and potential retirement pressures
- ✓ uneven workforce distribution

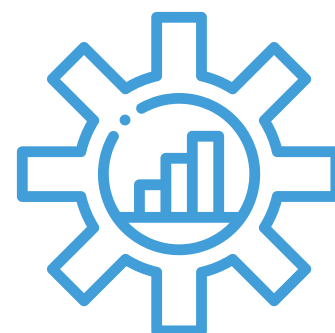
These risks will be examined further in the workforce gap analysis section.

Expected Length

This section should typically be **one to two pages**, supported by tables or charts where appropriate. Detailed workforce data tables may be included in appendices if necessary.

Section 4:

Service Demand and Activity



This section analyses the demand for services delivered by the profession. Understanding service demand is essential for determining whether the current workforce is sufficient to meet population health needs. Workforce planning should consider both current service utilisation and the factors that are likely to influence future demand. These may include demographic changes, disease prevalence, and evolving models of care.

Profession workforce plans should include the following elements:

Current Service Activity

Describe the volume and types of services currently delivered by the profession.

Where available, this may include:

- ✓ number of consultations or procedures performed
- ✓ hospital admissions or referrals associated with the profession
- ✓ claims data from health insurers
- ✓ community-based service activity

Example indicators:

Indicator	Description
Patient encounters	Number of patient visits or consultations
Referral patterns	Sources and frequency of referrals
Service volume	Number of services delivered annually

This information helps illustrate how the profession contributes to the overall healthcare system.

Drivers of Service Demand

Identify the key factors that influence demand for the profession's services.

These may include:

- ✓ population ageing
- ✓ prevalence of chronic diseases
- ✓ injury or rehabilitation needs
- ✓ technological advances in healthcare delivery
- ✓ changing models of care

For example, professions involved in chronic disease management may see increasing demand due to the rising prevalence of conditions such as diabetes or cardiovascular disease.

Future Demand Trends

Where possible, describe how demand for services is expected to change in the coming years.

Consider factors such as:

- ✓ projected population growth or decline
- ✓ changes in the age distribution of the population
- ✓ anticipated shifts in healthcare delivery models
- ✓ emerging health priorities

Plans should indicate whether service demand is expected to increase, remain stable, or decrease over time.

Access and Service Distribution

Identify any barriers that may affect access to services provided by the profession.

This may include:

- ✓ geographic concentration of services
- ✓ limited service availability in certain settings
- ✓ affordability barriers
- ✓ workforce shortages affecting access to care

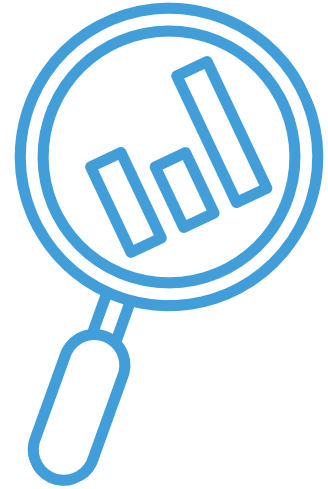
Understanding these factors helps determine whether workforce distribution should change.

Data Limitations

In some professions, reliable service data may be limited. Where this occurs, plans should clearly identify the data gaps and suggest ways to improve data collection in the future.

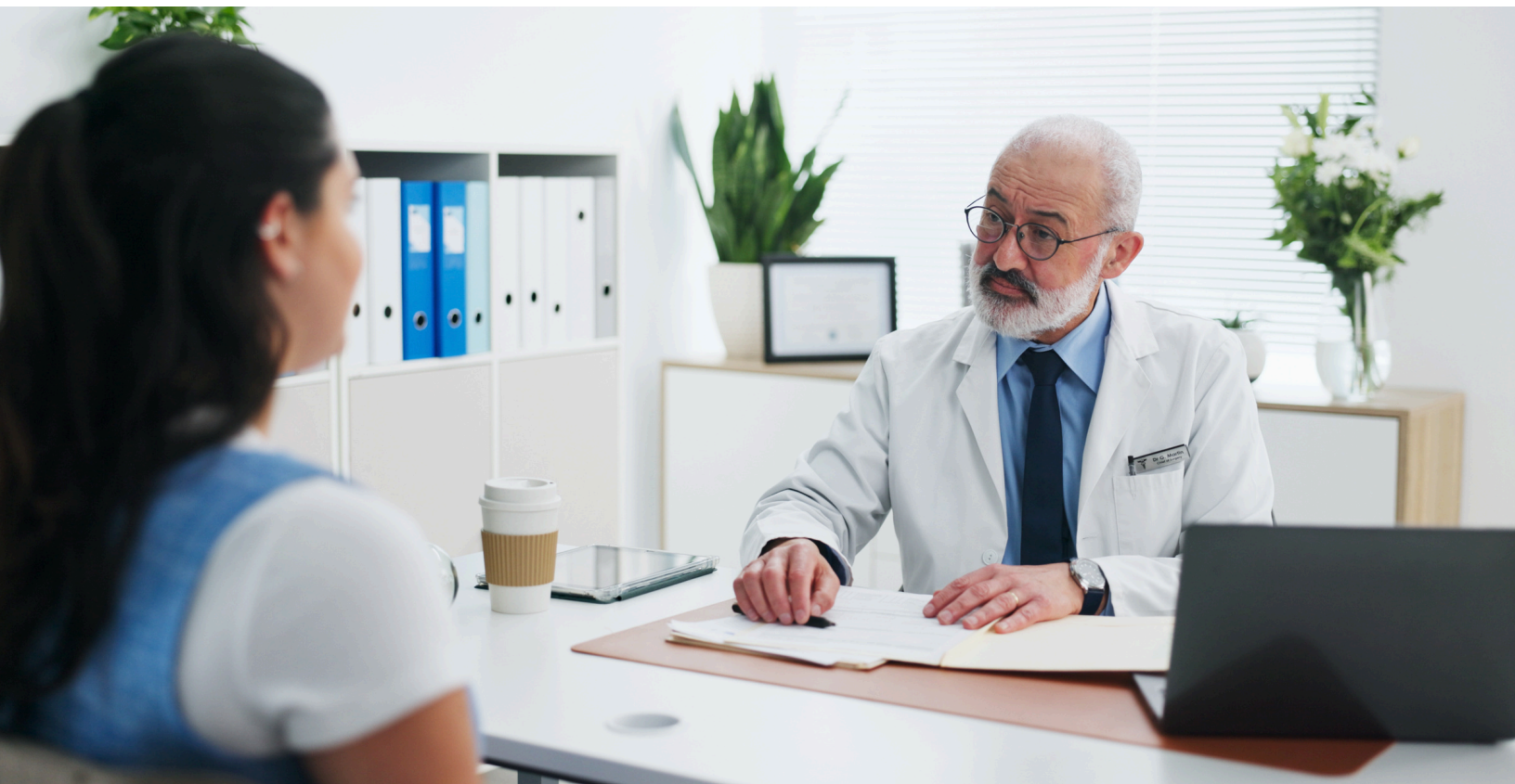
Examples may include:

- ✓ improved reporting from providers
- ✓ use of insurance claims data
- ✓ collaboration with regulatory bodies to collect workforce activity information



Expected Length

This section should typically be one page, supported by tables or charts where data are available. The purpose of this section is not to present extensive statistical analysis but to provide sufficient information to support the workforce gap analysis presented in the next section.



Section 5: Workforce Gap Analysis

This section assesses whether the current workforce within the profession is sufficient to meet current and projected service demand. Workforce gap analysis compares workforce supply (Section 3) with service demand (Section 4) to identify potential shortages, distribution issues, or areas where workforce roles may need to evolve. The purpose of this section is to identify risks to workforce sustainability and determine whether workforce expansion, role redesign, or productivity improvements may be required.

Profession workforce plans should include the following components:

Current Workforce Capacity

Summarise the current capacity of the workforce using the data presented in the workforce profile.

Relevant indicators may include:

- ✓ number of active professionals
- ✓ full-time equivalent workforce capacity
- ✓ workforce distribution across service settings
- ✓ availability of specialised skills within the profession

This provides a baseline for assessing whether the workforce can meet service demand.

Projected Workforce Needs

Estimate how workforce needs may change in the coming years.

This assessment should consider:

- ✓ projected changes in service demand
- ✓ demographic trends affecting healthcare utilisation
- ✓ changes in healthcare delivery models
- ✓ anticipated retirement or attrition within the workforce

Where possible, plans should provide an estimate of workforce requirements over the strategy timeframe.

Example:

Year	Workforce Needed	Workforce Available	Gap
2025	11	11	0
2030	14	12	-2

Where precise projections are not possible, plans should provide a qualitative assessment of whether workforce capacity is likely to increase, remain stable, or decline relative to demand.

Workforce Pipeline

Assess the pipeline of professionals entering the workforce.

This may include:

- ✓ local education and training programmes
- ✓ professionals currently studying overseas
- ✓ internationally recruited professionals
- ✓ time required to train new professionals

Understanding the pipeline helps determine whether future workforce needs can realistically be met.

Workforce Productivity and Role Optimisation

Workforce planning should consider not only workforce numbers but also how effectively existing professionals are utilised.

Plans should assess whether:

- ✓ professionals are working to the full scope of their training
- ✓ some tasks could be delegated to intermediate-level staff
- ✓ technology could improve workforce productivity

Examples may include:

- ✓ expanded roles for nurses or allied health professionals
- ✓ use of telehealth services
- ✓ adoption of digital tools to support clinical decision-making

These factors may reduce the need for additional workforce growth while maintaining service quality.

Workforce Risks

Identify any significant risks that may affect the sustainability of the workforce.

Examples may include:

- ✓ heavy reliance on internationally recruited professionals
- ✓ high retirement rates within the profession
- ✓ limited local training pathways
- ✓ workforce concentration in a small number of providers



These risks should be considered when developing the strategic actions described in the next section.

Expected Length

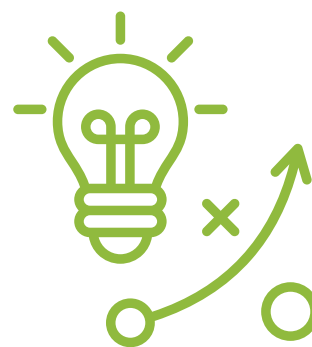
This section should typically be **one to two** pages. Where available, workforce projections and scenario analysis may be supported by tables or charts. The goal of this section is to clearly explain whether a workforce gap exists and what factors contribute to that gap. The findings from this section should inform the strategic actions proposed in Section 6.



Section 6: Strategic Actions

This section outlines the actions required to address the workforce gaps identified in the previous sections. These actions should focus on strengthening workforce capacity, improving workforce sustainability, and supporting evolving models of care.

Strategic actions should align with the five strategic anchors of the Bermuda Health Workforce Strategy (2025–2035).



Example:

Anchor	Example Actions
Monitoring How We Work	Strengthening workforce data and monitoring systems
Growing the Workforce	Expanding education pathways, recruitment, and retention
Changing How We Work	Modernising workforce roles and models of care
Leveraging Technology and Innovation	Improving productivity through digital tools and new technologies
Aligning Policy and Education	Ensuring regulatory and policy alignment with workforce needs

Profession workforce plans should propose actions that support one or more of these strategic priorities.



Action Design

Each action should be clearly defined.

They must include:

Element	Description
Action	Description of the proposed intervention
Accountable Lead	Organisation responsible for initiating and coordinating the action
Supporting Partners	Organisations contributing to implementation
Timeline	Expected timeframe for implementation
Resources	Workforce, financial, or technological resources required
Risks or Dependencies	Factors that may affect successful implementation

Example:

Action	Accountable Lead	Supporting Partners	Timeline	Resources	Risks
Expand local training pathways	Statutory Board	Bermuda College, Ministry of Health	2026–2028	Faculty capacity	Limited training placements

Types of Strategic Actions

Strategic actions may include interventions such as:

Workforce Supply

- ✓ expanding education and training pathways
- ✓ strengthening recruitment strategies
- ✓ improving retention through workplace initiatives

Workforce Role Optimisation

- ✓ expanding scopes of practice
- ✓ introducing intermediate-level roles
- ✓ strengthening multidisciplinary care models

Technology and Innovation

- ✓ implementing telehealth services
- ✓ introducing digital clinical tools
- ✓ supporting workforce training in digital health technologies

Policy and Regulatory Alignment

- ✓ reviewing legislation affecting workforce roles
- ✓ strengthening regulatory frameworks
- ✓ aligning workforce policies with education and immigration systems

Prioritisation of Actions

Where multiple actions are proposed, professions should identify which actions are the highest priority and explain why.

Prioritisation may consider factors such as:

- ✓ urgency of workforce shortages
- ✓ feasibility of implementation
- ✓ impact on patient access to care
- ✓ resource requirements

Prioritised actions should be clearly identified in the workforce plan.

Expected Length

This section will vary depending on the profession but should typically include three to six key actions supported by clear implementation details. The purpose of this section is to translate workforce analysis into practical interventions that strengthen workforce sustainability.

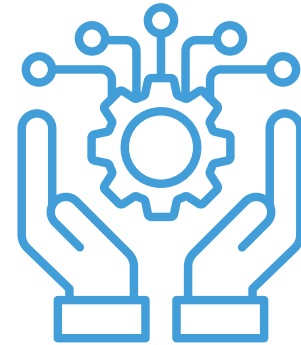
Link to Implementation and Monitoring

The actions proposed in this section will inform the implementation and monitoring processes described in the following sections of the workforce plan. Actions should therefore be designed in a way that allows progress to be tracked through measurable indicators. Each workforce plan should identify three to six priority actions that are expected to have the greatest impact on workforce sustainability.



Section 7:

Technology and Innovation



This section examines how emerging technologies and innovations may influence workforce needs within the profession. Technological developments are increasingly reshaping healthcare delivery. Digital tools, telehealth services, artificial intelligence, and automation have the potential to improve efficiency, expand access to care, and reduce pressure on limited workforce capacity.

Profession workforce plans should consider how technology may affect both service delivery and workforce demand.

Opportunities for Technology Adoption

Identify technologies that may improve the delivery of services within the profession.

Examples may include:

- ✓ telehealth consultations
- ✓ remote patient monitoring systems
- ✓ digital clinical documentation tools
- ✓ diagnostic technologies
- ✓ artificial intelligence tools that support clinical decision-making

Plans should briefly describe how these technologies could support the profession's role within the health system.

Impact on Workforce Productivity

Technology may increase workforce productivity by enabling professionals to manage larger patient populations, improve efficiency, or reduce administrative burden.

Plans should assess:

- ✓ reduce the time required for certain tasks
- ✓ allow professionals to focus on higher-value clinical activities
- ✓ expand access to services in remote or underserved settings

Where appropriate, plans should consider how technology may influence future workforce requirements.

Training and Workforce Skills

The adoption of new technologies often requires additional training or changes in workforce skills.

Profession workforce plans should identify:

- ✓ training requirements for new technologies
- ✓ opportunities for digital upskilling
- ✓ professional development programmes needed to support technology adoption

Innovation Opportunities

Plans should identify opportunities for innovative models of care that could strengthen workforce sustainability.

Examples may include:

- ✓ new roles within multidisciplinary teams
- ✓ digital learning platforms
- ✓ remote supervision models
- ✓ use of data analytics to improve workforce planning

These innovations may complement workforce expansion and help ensure that the workforce is used as efficiently as possible.

Expected Length

This section should typically be half to one page and provide a high-level overview of technology and innovation opportunities relevant to the profession. Where appropriate, detailed examples of workforce innovation may be referenced from the Workforce Innovation Scenarios appendix.

Link to Strategic Actions

Where relevant, technology-related initiatives should be incorporated into the strategic actions described in Section 6.

Section 8:

Monitoring Indicators

This section identifies the indicators that will be used to monitor progress in implementing the workforce plan. Monitoring indicators allow statutory boards, the Bermuda Health Council, and the Ministry of Health to assess whether workforce actions are improving workforce sustainability and service delivery.



Indicators should be measurable where possible and should be reviewed periodically to support evidence-based workforce planning.

Workforce Indicators

Workforce indicators measure changes in workforce capacity and workforce demographics.

Examples include:

Indicator	Purpose
Number of practising professionals	Measures workforce capacity
Workforce age distribution	Identifies retirement risk
Proportion of Bermudian professionals	Monitors workforce localisation
Vacancy rates	Indicates workforce shortages



Workforce Development Indicators

Workforce development indicators measure progress in strengthening workforce pipelines and professional development.

Examples may include:

Indicator	Purpose
Number of students entering training programmes	Tracks workforce pipeline
Participation in continuing professional development	Monitors professional development
Recruitment rates for key roles	Measures workforce expansion

Reporting Frequency

Indicators should be monitored periodically to ensure that workforce plans remain aligned with evolving workforce needs. Where possible, indicators should be reviewed annually and reported to the Bermuda Health Council as part of system-level workforce monitoring.

Expected Length

This section should typically be half to one page and focus on a small number of indicators that are most relevant to the profession. The purpose of this section is to demonstrate how progress will be tracked rather than to provide extensive data analysis.

Section 9:

Implementation and Governance

This section outlines how the workforce plan will be implemented and governed. Successful workforce planning requires coordination across multiple organisations, including regulatory bodies, healthcare providers, education institutions, and government agencies. Clear governance structures are necessary to ensure that proposed actions are implemented effectively and that progress is monitored over time.

Profession workforce plans should identify the organisations responsible for implementing the actions proposed in Section 6 and describe how implementation will be coordinated.

Accountable Lead Organisations

Each strategic action should identify an accountable lead organisation responsible for initiating and coordinating implementation.

The accountable lead organisation is responsible for:

- ✓ initiating the action
- ✓ monitoring progress
- ✓ coordinating with supporting partners
- ✓ reporting outcomes to the Bermuda Health Council

Supporting organisations may contribute expertise or operational capacity but do not replace the responsibility of the accountable lead.

Examples include:

Action	Accountable Lead	Supporting Partners
Expand education pathways	Statutory Board	Bermuda College, Ministry of Health
Implement telehealth services	Healthcare Providers	Ministry of Health, Health Council

Stakeholder Collaboration

Implementation of workforce plans often requires collaboration between multiple stakeholders. Profession workforce plans should identify key partners that may contribute to implementation.



Such as:

- ✓ healthcare providers
- ✓ statutory boards
- ✓ the Bermuda Health Council
- ✓ the Ministry of Health
- ✓ education institutions
- ✓ professional associations

Plans should briefly describe how these stakeholders will collaborate to implement proposed actions.

Implementation Timeline

Profession workforce plans should provide an approximate timeline for implementing the proposed actions.

Actions may be categorised as:

Timeline	Description
Short-term	Actions expected within 1–2 years
Medium-term	Actions expected within 3–5 years
Long-term	Actions expected over the full strategy timeframe

Providing timelines helps ensure that workforce planning actions are realistic and achievable.

Reporting and Oversight

Progress on workforce plans should be reported periodically to ensure that actions remain aligned with the Bermuda Health Workforce Strategy. Statutory boards should provide updates to the Bermuda Health Council on the progress of workforce plans, including any challenges or emerging workforce risks. This reporting will support system-level workforce monitoring and help ensure coordination across professions.

Expected Length

This section should typically be half to one page and provide a clear overview of implementation responsibilities without repeating detailed action descriptions.



Section 10: Approval and Review

Each profession workforce plan should be reviewed and endorsed through the following process:

Process should include:

Stage	Organisation
Plan development	Statutory Board
Technical review	Bermuda Health Council
Policy alignment review	Ministry of Health (where applicable)



Workforce plans should be reviewed periodically to ensure alignment with the Bermuda Health Workforce Strategy and evolving health system priorities. Plans may be updated as workforce conditions change or as new data become available.





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Achieving a quality, equitable and sustainable health system.