

Can We Learn from Other Countries? Can Other Countries Learn from Us?

re Health Workforce Issues

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Why focus on the health workforce?

It is one of the pillars of all health systems



WHO (2009) Systems Thinking Interconnectedness
(p. 31)



Why focus on the health workforce?



A well-performing health workforce is the backbone of an effective health system. Without adequate numbers of well-trained and motivated health workers, deployed equitably, people cannot access the health services they need. The

effectiveness of health systems and the quality of health services depend significantly on the knowledge, skills and motivation of health workers. (WHO 2012 p. 2)

Why focus on the health workforce?

Most major health care system policy issues implicate the health workforce.

- The bulk of health sector expenditures involve the direct costs for the health workforce including salaries, wages, fees and contracts, and
- the indirect costs for the training, planning, regulation and management of the health workforce as well as workplace environment issues.



Why focus on the health workforce?

The health workforce is like the elephant in the room at tables where earnest discussions of health care reform are occurring



Health Workforce Issues in Canada

- The cyclical nature of health workforce issues (e.g., surpluses and shortages) * and the endemic challenges in terms of distributional issues speak to **the importance of having a sustained infrastructure with the continuity to meet the knowledge and evidence needs** to adapt the health workforce to changing population health needs.



Health Workforce Issues in Canada

- The **2015** Naylor report on health innovations makes it clear that *there is a need to create effective, collaborative linkages amongst health workforce stakeholders*
 - It called for “the development of a **pan-Canadian mechanism** to assess the value of healthcare services in terms of cost, **provider role**, and **patient outcomes**.”



Health Workforce Issues in Canada

- One of the key recommendations from the **2010 Parliamentary Standing Committee on Health** addressing innovation in the health workforce called for the establishment of a pan-Canadian health workforce agency to support the dissemination and uptake of knowledge and evidence.



Health Workforce Issues in Canada

- Previously, the predecessor to the **FPT Advisory Committee on the Health Workforce** made a case in **2005** that a more collaborative, pan-Canadian approach to health workforce planning and research would have immediate benefits
- Let us not forget the **2006-2016** was the ***Decade of Human Resource in Health***



International Health Workforce Context: National Observatories/Agencies

- Most countries have created health workforce agencies or observatories as a strategy to improve the performance of their health systems.

(2011 WHO Background Paper *Human Resources for Health
Observatories: An Overview*, p. 2)



International Health Workforce Context: National Observatories/Agencies

- These observatories, according to a 2011 review by the WHO,
- ***“collect, analyze and disseminate data and information on the health workforce and the labor market, conduct applied research and produce knowledge, contribute to policy development, contribute to building capacity and understanding of HRH issues and advocate/facilitate the dialogue between stakeholders. ...***

(2011 WHO Background Paper *Human Resources for Health Observatories: An Overview*, p. 2)



International Health Workforce Context: National Observatories/Agencies

- *... To accomplish their objectives, observatories use a range of strategies and tools, such as **dedicated websites, HRH databases, technical publications, discussion fora, technical meetings and policy dialogues.***” (p.2).

(2011 WHO Background Paper *Human Resources for Health Observatories: An Overview*, p. 2)



International Health Workforce Context: National Observatories/Agencies

- **United Kingdom (England)**
 - *Centre for Health Workforce Intelligence (CfWI)*
- **New Zealand**
 - *Health Workforce New Zealand (HWNZ)*
- **Australia**
 - *Health Workforce Australia (HWA)*
- **United States**
 - *National Center for Health Workforce Analysis*

International Health Workforce Context: Centre for Health Workforce Intelligence

- In 2008 the Department of Health published a review, called *A High Quality Workforce*, looking at the future of the NHS workforce in England.
 - *The review highlighted the need for better workforce planning across the health and social care system.* [\[1\]](#)
- The Government White Paper *Equity and Excellence: Liberating the NHS* published in July 2010 then suggested a role for a Centre for Workforce Intelligence which would "act as a consistent source of information and analysis, informing and informed by all levels of the system". [\[2\]](#)



International Health Workforce Context: Centre for Health Workforce Intelligence

- The **Centre for Workforce Intelligence (2010)** - an arm's length national organization contracted to deliver advice on health workforce planning across England
 - *A Non Departmental Public Body – which drew expertise from the Dept. of Health*
- It supports long-term and strategic scenario planning for the whole health and social care workforce, based on research, evidence and analysis, in order to build strong leadership and capability in workforce planning.



International Health Workforce Context: Centre for Health Workforce Intelligence

The steps Horizon 2035 is taking

Understanding the context

We set up this 20-year view by telling the story of the last 20 years through workforce numbers, policy, the external environment, and events (CfWI, 2014c).

Mapping the present system

We have, with experts, considered the factors at play in the health, public health and social care workforce system, how they interact, and their size and shape.

Considering plausible futures

We prioritised and combined the factors at play in the system to generate scenarios 20 years in the future.

Quantifying these futures

We are applying system dynamics modelling to consider tangible effects of the scenarios on the workforce system.

Assessing the workforce implications

We are now drawing all activity together to identify the workforce planning areas of the highest concern for the Department of Health in the future.

International Health Workforce Context: Centre for Health Workforce Intelligence

Horizon 2035 - Future demand for skills

- ...demand for health and care skills could grow more than twice as fast as overall population growth by 2035.
- Much of this growth is driven by increasing healthcare and support demands associated with long term conditions.
- The initial results also suggest that the future profile of demand may be profoundly different to the picture of demand today. For example, **growth in demand for lower 'levels' of skill are projected to substantially outstrip growth in demand for higher skill levels** associated with medical and dental professionals.



International Health Workforce Context: Health Workforce New Zealand

- Health Workforce New Zealand (HWNZ) was set up in 2009 to provide national leadership on the development of the country's health and disability workforce.
 - *It is a business unit of the National Health Board and its work is overseen by an independent board with members from business and across the health sector.*
- It collaborates with educational bodies and employers to ensure that workforce planning and postgraduate training aligns with the needs of current and future service delivery.



International Health Workforce Context: Health Workforce New Zealand

- It developed an approach to healthcare and workforce planning that better accommodates **uncertainty**.
- Its approach starts with the premise that healthcare planning is most reliable when it is **based on service aggregates**, such as aged care and mental health, rather than on singular professions.
 - *This approach encourages stakeholders to identify the various ways healthcare can be provided in the future.*
- It also found that the “**credibility of the scenarios is enhanced if clinical subject matter experts and opinion leaders generate them.**”
- The end result is a suite of possible models of care and service configurations which are then ‘tested’ by asking to what extent current plans could accommodate the various scenarios.

International Health Workforce Context: Health Workforce Australia

- In 2010, Australia adopted and launched a national health workforce agency, Health Workforce Australia,
 - *“to help guide nationally coordinated action towards strategic long-term healthcare reform and innovation, in order to address the challenges of providing a skilled, flexible, and innovative health workforce that meets the healthcare needs of all Australians”*
- HWA released **Health Workforce 2025** to provide national projections of the health workforce numbers, as well as models to determine the effects of different policy scenarios for a range of health professions.
 - *Australia’s first major, long-term, national projections for doctors, nurses, and midwives*

International Health Workforce Context: Australia Health Practitioner Regulation Agency

- In 2010, Australia also moved to a national system of registration with the creation of the Australian Health Practitioner Regulation Agency (AHPRA). AHPRA is the single separate body that administers regulatory governance for first nine and now 14 National Boards
- The impetus for the creation of AHPRA was a Productivity Commission report in 2006 which examined issues impacting on the health workforce and proposed a number of solutions to ensure the continued delivery of quality healthcare.



International Health Workforce Context: National Center for Health Workforce Analysis

- Operates out of the US Dept. of Health and Human Services, Health Resources and Services Administration (HRSA) Health Workforce Division
- The National Center for Health Workforce Analysis helps to build a body of knowledge by **estimating the supply and demand** for health workers in the U.S. and **developing tools and resources to inform decision-making** on health care workforce investments.



International Health Workforce Context: National Center for Health Workforce Analysis

- The Health Workforce Research Center grant program provides funds to workforce research centers at six universities:
- [University of California at San Francisco](#): focus on long-term care
- [George Washington University, Washington, DC](#): focus on flexible use of workers to improve health care delivery and efficiency
- [University of North Carolina at Chapel Hill](#): focus on flexible use of workers to improve health care delivery and efficiency
- [State University of New York at Albany, Center for Health Workforce Studies](#): focus on technical assistance and oral health
- [University of Washington](#): focus on Allied Health.
- [University of Michigan](#): focus on Behavioral Health



International Health Workforce Context: National Observatories/Agencies

- United Kingdom (England)

The functions carried out by the CfWI, including Horizon Scanning, are now being delivered by the Department of Health and Health Education England.

- New Zealand

– *Health Workforce New Zealand (HWNZ)*

- Australia

Similarly, the functions carried out by HWA were also reintegrated back the Department of Health and Aging

- United States

– *National Center for Health Workforce Analysis*

The Canadian Health Workforce Context

- The health workforce landscape in Canada presently includes a number and range of organizations and stakeholder groups undertaking some of the activities of a health workforce agency but they are often working in either ***professional or jurisdictional isolation***.
- ***There is a need to coordinate and create effective collaborative linkages amongst these groups.***



The Canadian Health Workforce Context

- Moreover, none of these organizations have as their explicit mandate to act as an ***independent, arms-length knowledge broker*** linking HHR researchers and other knowledge producers and a range of knowledge users and clinical and system decision-makers and managers involved in HHR policy and planning.
- There has also been no ready coordinative mechanism ***to translate international ideas and innovations to the Canadian context***



CHHRN: The Little Engine(s) that Could

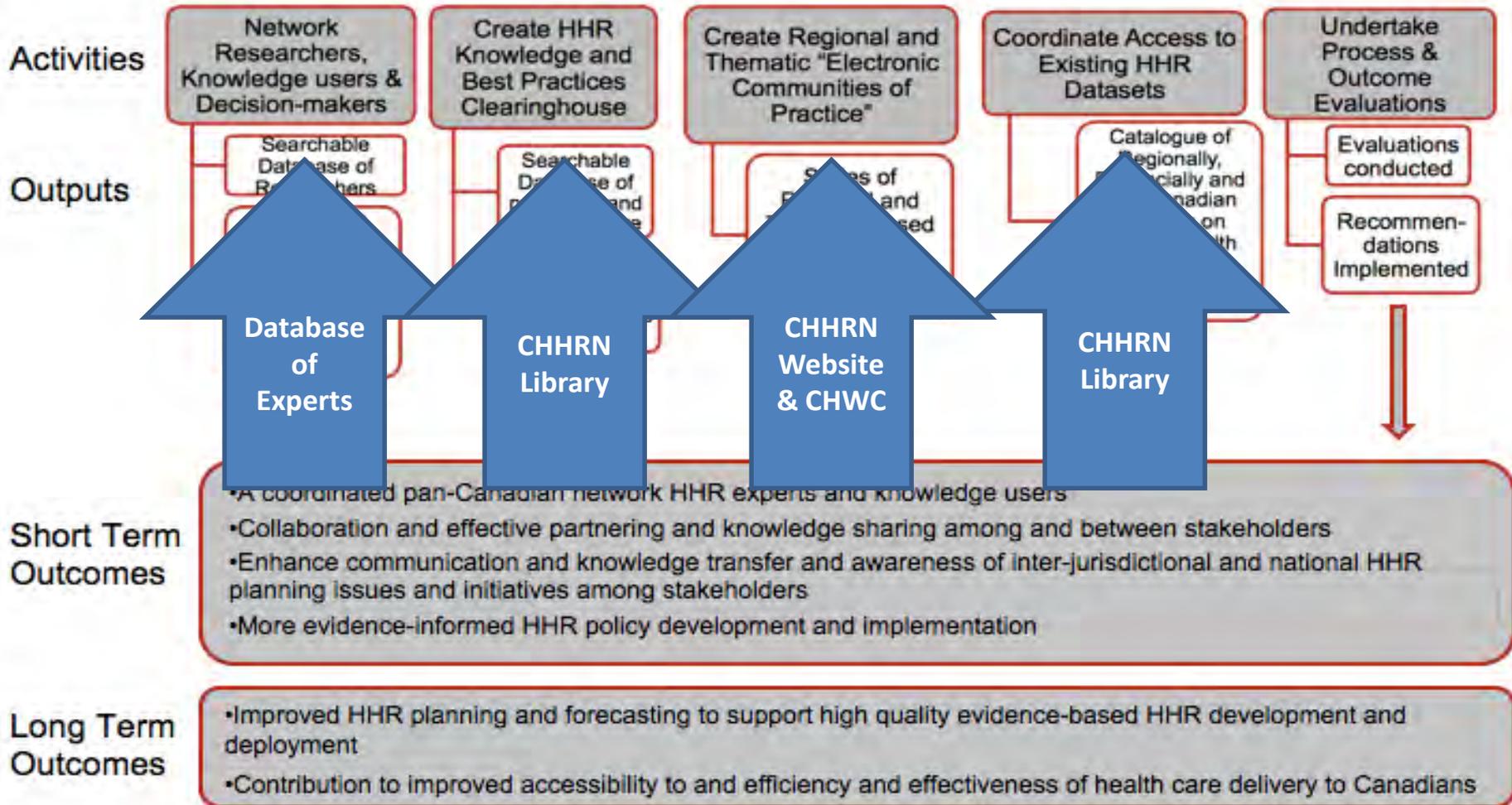


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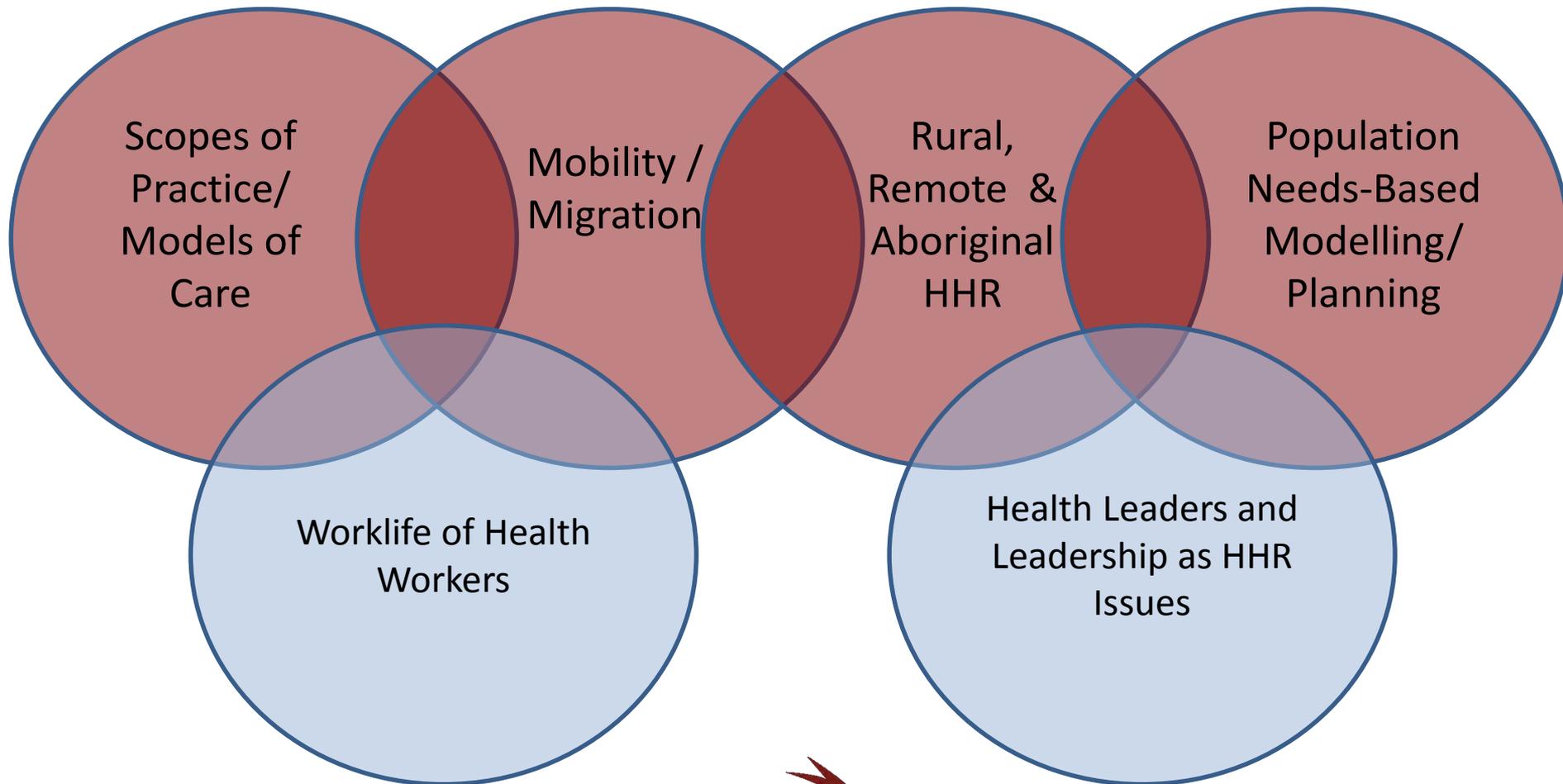


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CHHRN Objectives:



Thematic Communities of Practice



A Window of Opportunity ...



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... and a breath of fresh air



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[#CloseTheGap](#) "Health systems are like the furnaces of our house" says [@janephilpott](#), indeed, and [#healthworkers](#) are the fuel [@CHHRN](#)