

Joint Action Health Workforce
Planning and Forecasting



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WP5: how we built and how we will use the MDS

GIOVANNI LEONARDI
WP5 Leader
ITALIAN MINISTRY OF HEALTH

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WP5 ACTION 3.1

Minimum data set (MDS)



OBJECTIVE

D051: MINIMUM PLANNING DATA REQUIREMENTS

The requirements will give a view on two data sets: one for "supply based" planning and one for "demand based" planning.

(JA Grant agreement – Annex 1b)

D051: methods, process and involvement

METHOD (construction):

1. Literature review
2. Planning methodologies survey
3. Workshop with Experts, WP1,2,4,6 Leaders, Associated & Collaborating Partners.

PROCESS (consensus):

1. First draft sent 31st October
2. Second draft sent 8th November
3. Collecting feedbacks 9th to 18th November
4. Analysis of the notes & comments 19th to 29th. November
5. Third draft sent 30th November
6. Third draft approved by EB with major revisions on 13th December
7. Fourth draft sent 23rd January
8. Presentation of MDS (Bratislava)

INVOLVEMENT: 40 PARTNERS

WP Leaders + PM	8
EACH Repres.	1
Associated	18
Collaborating	13

What is a MDS for HWFP

*A Health Workforce Planning System consists of a core set of **key indicators** which are used, generally, at a national level, for the collection and reporting on key aspects of health system delivery, including current workforce/staffing resources and future Health workforce needs.*

[...]The data are for planning as well as to promote coordination and collaboration between stakeholders at the national and European level.

[Feasibility Study, Matrix 2012]



The set of data used in the key planning indicators (KPI), which is necessary for the Minimum Purpose of Planning, is the MDS.

Why a MDS for HWFP

A significant problem driver in this respect is the lack of a sense of cohesive purpose behind data collection.

Data on human resources for health are collected for various purposes; but only in a very limited number of countries data are collected for health workforce planning. Hence, certain indicators, which are crucial to forecast and carry out an effective planning of resources, are not covered by data collection.

As a consequence, many of the data available at national level are also not integrated and used in health workforce planning.

[Feasibility Study, Matrix 2012]

Scopes of the MDS for HWFP

1. To recognize the major imbalances of HWF in a static system
2. To analyse these imbalances for policy makers



CURRENT VERSION (D051) OF MDS

3. To support the planning guidelines
4. To support the pilot projects



UPGRADED VERSION OF MDS IN
D052 & D054

5. To identify possible implementation tracks
6. To identify next upgrades with input of WP4 & WP6



FUTURE VERSION OF MDS (WP7)

KPI of the MDS for HWFP (1)

To recognize the major imbalances of HWF

1. **Coverage of future demand** (comprehensive) =
$$\frac{\text{FUTURE SUPPLY}}{\text{FUTURE DEMAND}}$$
stratified by profession

To analyze those imbalances

2. **Affordability** =
$$\frac{\text{FUTURE HEALTH CONSUMPTION}}{\text{CURRENT HEALTH CONSUMPTION}}$$
3. **Coverage of future demand (detailed)** =
$$\frac{\text{FUTURE SUPPLY DOMESTIC} + \text{FUTURE POTENTIAL SUPPLY FROM ABROAD}}{\text{FUTURE DEMAND}}$$
4. **Coverage of needs by foreign professionals today and in the future** =
$$\frac{\text{N}^\circ \text{ of professionals with foreign first qualification}}{\text{Total n}^\circ \text{ of professionals}}$$

KPI of the MDS for HWFP (2)

To analyze imbalances

5. **N° of professionals per inhabitant today and in the future =**

$$\frac{\text{N° OF PROFESSIONALS}}{\text{POPULATION}}$$

6. **N° of professionals per weighted inhabitant today and in the future =**

$$\frac{\text{N° OF PROFESSIONALS}}{\text{population weighted by the consumption per age group}}$$

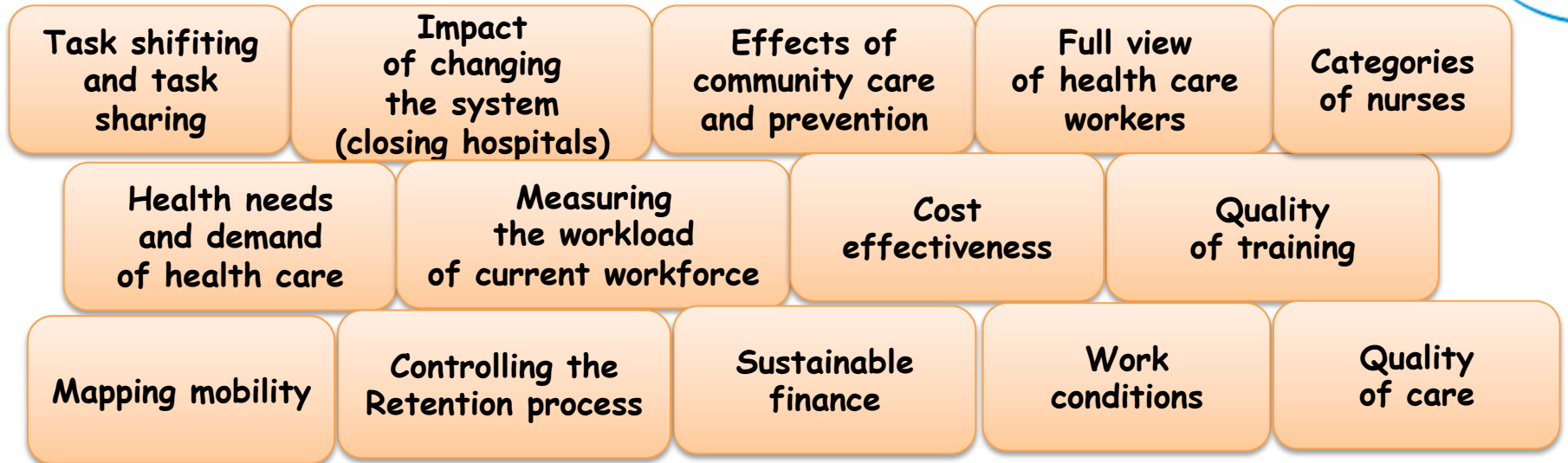
(basic index: average of EU countries)

Content of the MDS for HWFP

SUPPLY SIDE	DEMAND SIDE
<p>Object:</p> <ul style="list-style-type: none">• Labour force• Training• Retirement• Migration – outflow• Migration: inflow <p>Measure:</p> <ul style="list-style-type: none">• <i>profession</i>• <i>age</i>• <i>head count</i>• <i>FTE</i>• <i>geographical area</i>• <i>specialisation</i>• <i>country of first qualification</i>• <i>gender</i>	<p>Object:</p> <ul style="list-style-type: none">• Population• Health Consumption <p>Measure:</p> <ul style="list-style-type: none">• <i>age</i>• <i>head count</i>• <i>geographical area</i>• <i>gender</i>

Health Workforce and MDS for HWFP

We are aware there are many and very important issues which influences Health Workforce Policy and Market by now and in the future.



Current MDS developed by WP5 takes into account part of them as principles or targets considering a “minimum planning purposes” perspective.

A more comprehensive sight will be taken into account in next JA activities, by WP5, WP4 and WP7.

MDS: next steps

1

1. Gap analysis occurring between MDS and WHO/OECD Tools.
2. The use of the MDS in the “good practices” of planning methodologies.

D052: HANDBOOK ON PLANNING
METHODOLOGIES

Milestone 5.2

Experts group conference on HWF planning methodologies FLORENCE, 8th and 9th May 2014

Open to WP5's partners, WP Leaders
and methodologies experts



MDS: next steps

2

1. How MDS can be use in the planning pilot project.
2. The MDS update on the light of the pilot project results.

D054: REPORT ON PILOT STUDY
EXPERIENCE

MDS: next steps

3

1. How MDS should be developed to enable countries to forecast and plan and assess impacts with full perspective.
2. Recommendations to countries about the collection of MDS.

D073 – D074: WP7 DELIVERABLES

Exploratory WP Leaders workshop 12/2/2014



Thank you for your attention.