

Joint Action Health Workforce Planning and Forecasting

Conference on Planning & Educating Health Workforce without borders

Varna, 18th-19th February 2016



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Conclusions of the

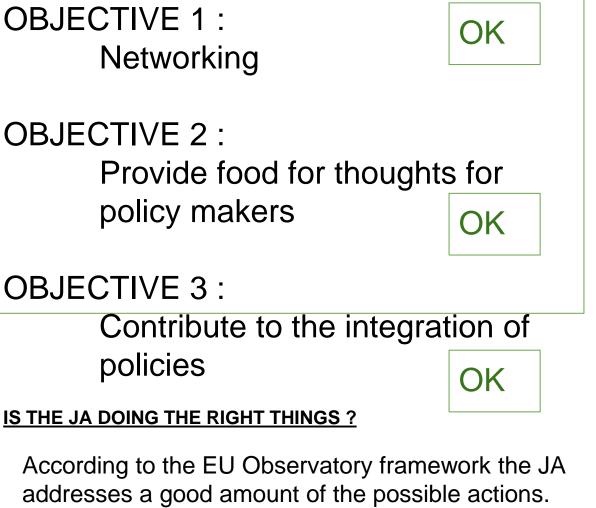
Conference on Planning & Educating Health Workforce without borders







CONFERENCE OBJECTIVES



All conference speakers are demanding more / better management of Health Care



The challenge of mobility for health professionals

1. Mobility data session: Could we move easily and swiftly towards a European monitoring of health workforce mobility?

- Higher availability of international data
- Using Migration module of the JQ yearly at international level allows identification of flows and further policy actions
- Using JA defined indicators and threshold level to include mobility information in policy decision making
- National systems to collect information and use them all types of collection are useful
- The changes are rapid
 - \rightarrow requiring continuous monitoring through a consistent system





The challenge of mobility for health professionals

2. Health workforce education abroad session: Is this a business, an opportunity, a need, a real brain drain... or all this together?

- Education abroad is feasible within well structured and profitable collaboration
- ERASMUS and Education abroad with cross-cultural integration is an enrichment. The Gap level of qualification is small and there is no issue to catch up.
- The challenge of students' mobility is raising also the quality of training in country abroad.
- National Selection and Quota create stress & inadequate for study atmosphere
- Find balance between Students / Money / Quality





The challenge of mobility for health professionals

- 3. European mobility session: Is an action on European level possible or would bilateral cooperation first be applicable?
- We have a good knowledge of the drivers of migration and of the framework of instrument on mobility. We have many tools available. We need to apply them.
- Governments should have a strategy, and Recruitment & Retention, Reform of the system, Quality and Education are among the top focus.
- Short, Medium & Long term are equally important
- From students' perspective, students migration should be in a real framework of Education strategy
- Megatrends like working conditions and technology also drives mobility, and needs global monitoring
- Attention to pay to the ethical consequence of mobility on HWF and students





The effect of a changing demography on health workforce needs

1.A. What are the main ageing consequences on health workforce and on the growing imbalances?

- Ageing is a fact
- Ageing is a positive society development
- We need health care age-centered and Integrated care
- Some specific needs in health care professions like increasing dentist ratio to population
- Technology can help but will not replace health workers
- Management (planning) is needed for sustainable systems, but we don't always need more planning but better planning





The effect of a changing demography on health workforce needs

1.B. Can we further finance our health systems without changing their organization and the roles of health workers?

- Finance is important, but is not everything. Some financial incentives fail.
- Equal resource distribution is the best guarantee for equal HWF distribution. Lack of management & planning might (and certainly will) increase these imbalances
- There is large room for innovation to sustain health systems with same money and even to do better
- Small countries cannot be self sustainable and need cooperation
- Retention & recruitment is strategic There are many good practices available but reorganisation remains a must do
- Wealthy countries with oversupply have also maldistribution





The effect of a changing demography on health workforce needs

1.C. New skills in changing context - population perspective: Do we have other options than producing more health professionals?

- Finance is also important from the patient perspective, driving mobility
- We need to keep the focus on Quality
- We have to recognise that poor study effort is paid beyond the 5 main professions
- We know insufficiently about skill mixes while there are very useful practice
- At planning level, multi professional projections to be performed to inform policy makers while complex scenarios on workforce should also use system modelling.
- Producing better professionals by increasing the level of qualification but also selecting the right students from the start
- Alternative to more is well qualified, recognised, diverse and effective Health professionals





The education of health professionals for the future

2.A. What are the lessons learned from the shortage on skills mixes?

- Crisis and major shortages stimulate innovation the evolution of our system might be too steady to face the huge challenges
- New roles upcoming and already in place:
 - Pharmacist will provide more health services and must be trained (patient centered) accordingly
 - Primary Care practices with nurses only
 - Reshaping the landscape like creating auxiliary professions for dentists
- Skill mix could answer short term issue but must be seen long term
- Skill mix is mainly an upgrade for certain profession must be recognized
- Upgrading creates a boosting effect
- Health & educational determinants are both important to model the education needs
- Pay attention to lower qualified personal that shouldn't be left behind





The education of health professionals for the future

2.B. How should health workforce and education policies be coordinated to provide the future health professionals we need?

- Education has a several technical framework available
- Education needs to be fed with future of HWF research
- Practice in hospitals and primary care, evolution of the relation with patients, show the need for adapting the skills and for providing continuous training and redefining curricula
- Students request changes:
 - Needs for transformative education
 - •Needs for improvement of quality
 - •NEW CURRICULUM Community base, Quality based, Patient centered, ... including leadership and management skills
- Coordination should be boosted
- e-Learning provides fantastic opportunities
- We need a process to monitor competency





The education of health professionals for the future

2.C. Can health workforce be converted to new skills during their career?

- Midwifes/Nursing It is a <u>long procedure</u> to achieve changes and definition of new competencies needed, and turn into regulation
- Modern training techniques offer huge possibilities but education and certification culture must change accordingly
- Skill mix is a continuous adaptation
- Skill mixes projects must be managed





Next steps

- Conference evaluation survey check out our website
- 16/03/2016 Sustainability Workshop Brussels
- ✤ 03-04/05/2016 Closure event Belgium









