

Joint Action Health Workforce Planning and Forecasting





# The coordination between policies and education - The Bulgarian experience

Anelia Klisarova Emanuela Mutafova Maria Rohova



Medical University of Varna, Bulgaria



## Health Workforce – milestone to achieve the objectives of WHO

- Achieving better health for the population
- Ensuring medical services that meet the population's needs
- Ensuring equity in payment for health services





#### The "epidemic "in the EU

- Professions in the health sector are among the "most problematic" professions in Europe
- Insufficient number of trained nurses
- Aging nurses and midwives
- Large differences in remunerations

Source: Report of the Commission on unfilled jobs in Europe





### An example

More than 40% of HWF in Bulgaria and Baltic countries are between 50 and 64 years, which is significantly above the EU average.





### **Symptoms**

Lack of relationship between supply and demand

- No assessment of the demand
- An unjustified supply





### **Laboratory results**

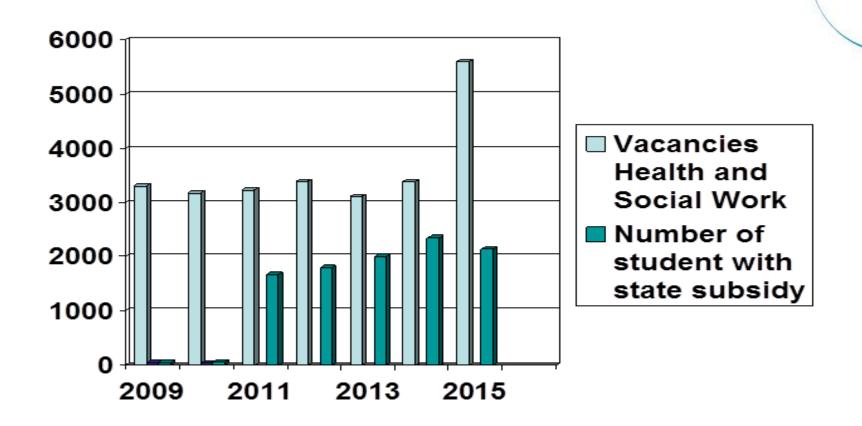
- Were not created conditions for better matching of supply and demand in the labor market.
- Missing links between particular management solutions for education and business needs.
- Missing a reliable information base, which allows HWF forecasting and planning.

Source: AUDIT REPORT of the Court of Auditors № 0300002212. A performance audit of the implementation of the graduates in the labor market for the period from 01.01.2009 to 31.12.2012





### An example







### **Laboratory results**

- There is no legal obligation to respect and to increase capacity on the basis a recognized need in the labor market
- Post-accreditation control capacity of universities is ineffective

Source: AUDIT REPORT of the Court of Auditors № 0300002212. A performance audit of the implementation of the graduates in the labor market for the period from 01.01.2009 to 31.12.2012





### **Laboratory results**

- The financial model to reduce the amount of subsidy to state universities at exceeded capacity is inadequate and harms the state budget.
- There are no active actions of the Ministry of Education to promote cooperation between universities and business.

Source: AUDIT REPORT of the Court of Auditors № 0300002212. A performance audit of the implementation of the graduates in the labor market for the period from 01.01.2009 to 31.12.2012





#### In conclusion

• It is not legally regulated procedures for the use of information for the realization of graduates in the labor market to improve policies in higher education.

 There is no single state policy for realization of graduates to achieve real commitment to training with the national needs of the labor market.





### Yesterday







### **Diagnosis**

Low vision

Reduced communication

Management weakness







### Today







## The labor market in Bulgaria - 2015

Unemployment rate - 10.7% - 12.2%

Growth of vacancies - 16%

Growth of unfilled vacancies - 6%





### From the side of Health system

 Employed in the health (public) and social sectors decline.

• 35% reduction of employees under labor contract in health care and social sphere for 15 years.





### From the side of Health system

- The assurance with doctors in Bulgaria is characterized by regional disparities and profile.
- 9-10% drop in GPs and 2.5 times increase in specialists in medical institutions.
- Huge shortage of nurses about 44% lower than the EU average.
- The ratio of doctors nurses in recent years in our country is 1:1.2 at 1:2.3 in the EU.





### From the side of Health system

 The salaries in the private in comparison to public sector are 20 to 50 percent higher than in the public sector

 The medical specialization has been slow and difficult process over a long period of time.





# From the Health - Education system's border

- According to Eurostat Medicine, in Bulgaria graduate 15.7 percent against 6.6 percent in the EU of all graduates.
- In a steady trend of state admission in higher educational institutions total (124% to below 80% over 6 years), taking in the areas of health and sport supports it levels of 101 102%.





# From the side of Education system

- Bulgaria occupies on public expenditure for education last position in the EU (3.5-4.5% of GDP)
- Bulgaria is above the EU average in private expenditures for education (15-24% of GDP)

  Source: Report of the Bulgarian Industrial Association
- Lifelong learning in Bulgaria is near 10 levels lower than the EU (1.7 and 10.5)

Source: Eurostat





### In the near future?

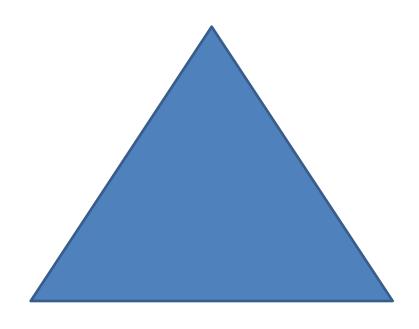






### Links between the education and business at national, local and institutional level

National, regional and institutional policies



**Business** 

Education





## The Bulgarian experience - Institutional level

- Faculty's regional offices for nurses and midwives
- Center for professional education
- Program councils involving employers
- Bases for practical training
- Meetings with employers
- Scholarships





## The Bulgarian experience - Local level

 Regional policy for nurses and midwives' education

Grants

Buildings and equipment







































## Bulgarian experience National level – Ministry of Health

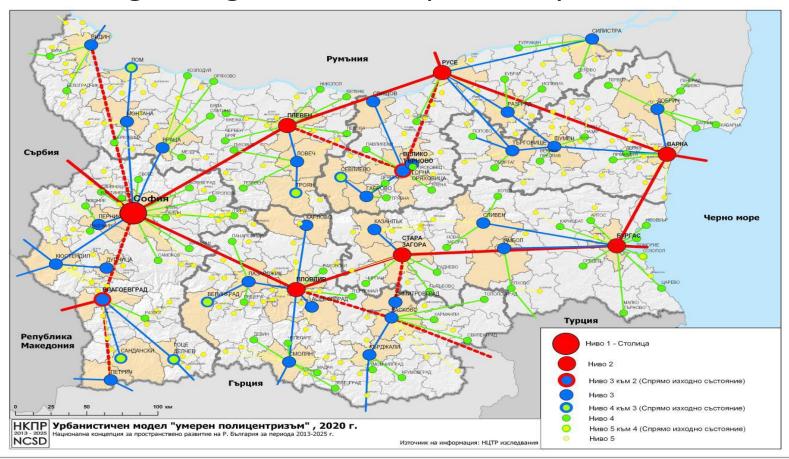
- New model of specialization in the healthcare system Decree № 1 of January 22, 2015
- A concept "Goals for Health 2020" February 2015
- National Health Map in February 2016 a potential tool for planning of health professionals





#### **National Health Map**

is based on the model of medium polycentrism according to regional development by 2020







# National Health Map registers HWF shortages

- GP 437;
- Specialists in outpatient care 400;
- Pediatricians 113;
- Nurses 5 601;
- Midwives 900





# The concept "Goals for Health 2020" about HWF provides

- Planning based on needs assessment of medical care;
- Implementation of new staff categories of the health care system - medical assistants, paramedics;
- Guidance of medical education to changing needs.





# The concept "Goals for Health 2020" about HWF provides

- Development the system of continuing health education and easing conditions for specialization;
- Development of new skills and encourage integrated care;
- Introducing a new model for the payment of HWF, linked to educational qualification and achievements.





## Bulgarian experience National level – Ministry of Education

- Inviting business to assess the situation at labor market;
- Development a strategy to subsidize universities to the needs of the labor market;
- Introducing a rating system for universities;
- Project "Students practice".





#### The business recommendations

- Monitoring qualification and age structure of the HWF;
- Monitoring match between skills and labor market's needs;
- Monitoring of migration by age and qualification structure;
- Forecasting the demand for skills and qualifications at the labor market;
- Evaluation of the policies.





#### **Conclusions**

- EU member states need experts with knowledge, skills and capacity to implement and improve HWF planning systems.
- In order to develop policy interventions and inform investment decisions in education, training and recruitment to better match demand and supply of health professionals, while offering long-term job prospects for healthcare workers, in addition to many other factors, the health workforce planning and forecasting should take into account the skills and competence mix.





Planning with the aim of matching population healthcare needs with the right health workforce is both

an ethical and economic goal.





#### In the future, may be?

