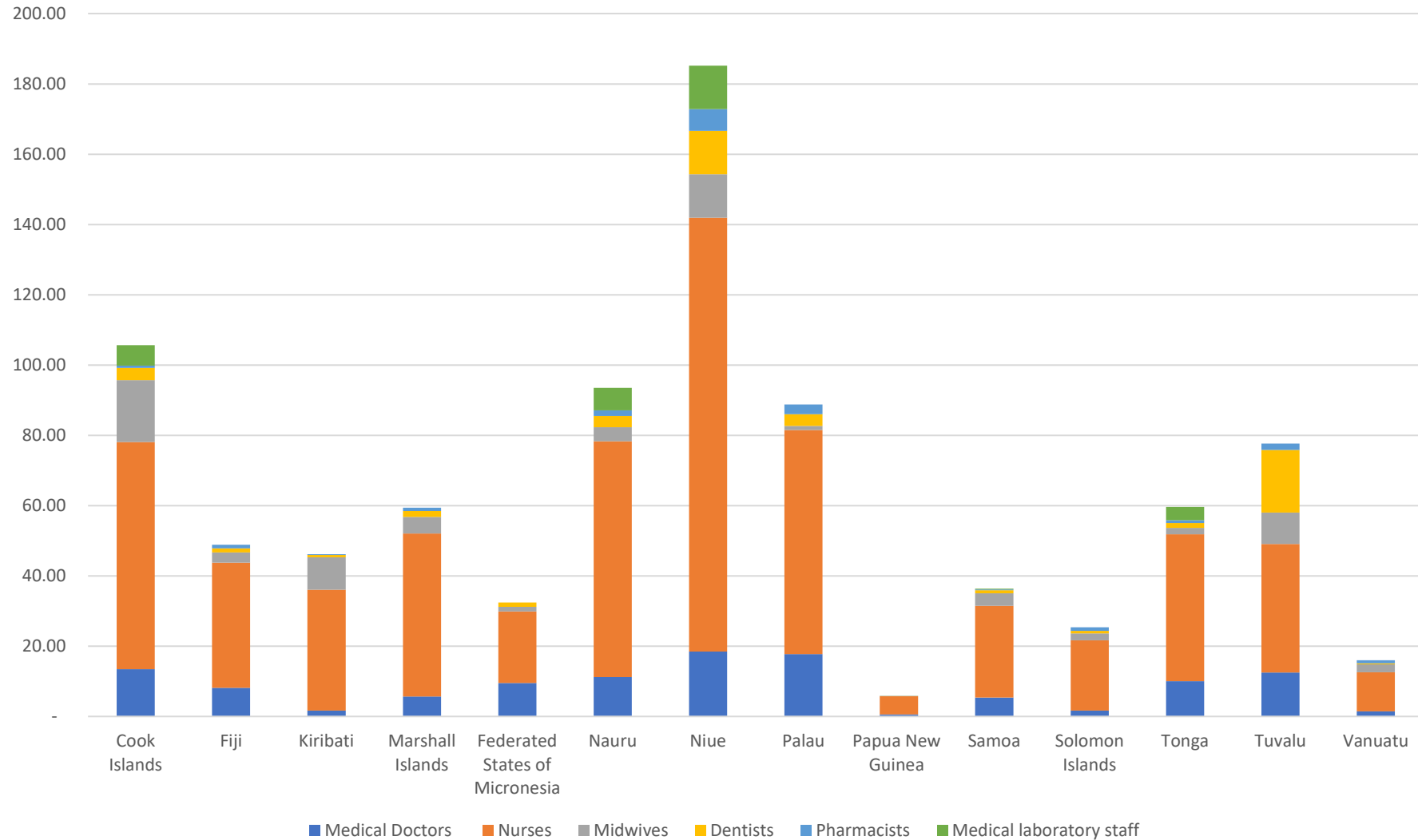# Rethinking human resources for health

Presented by: Name
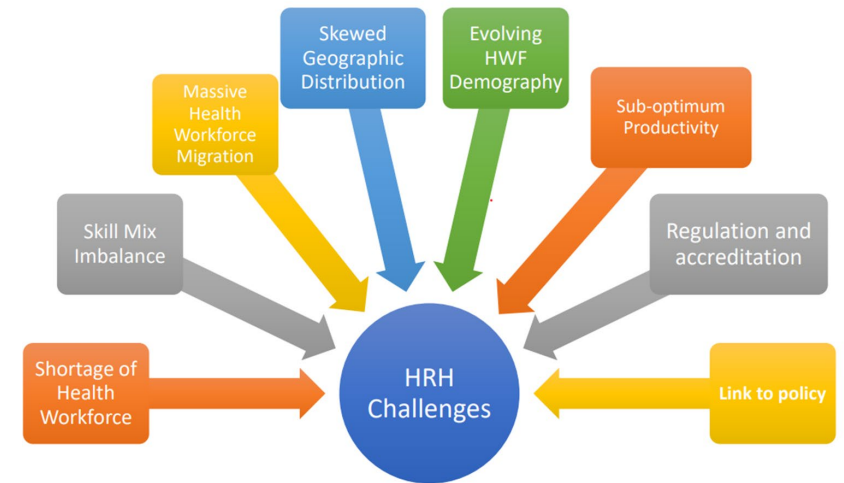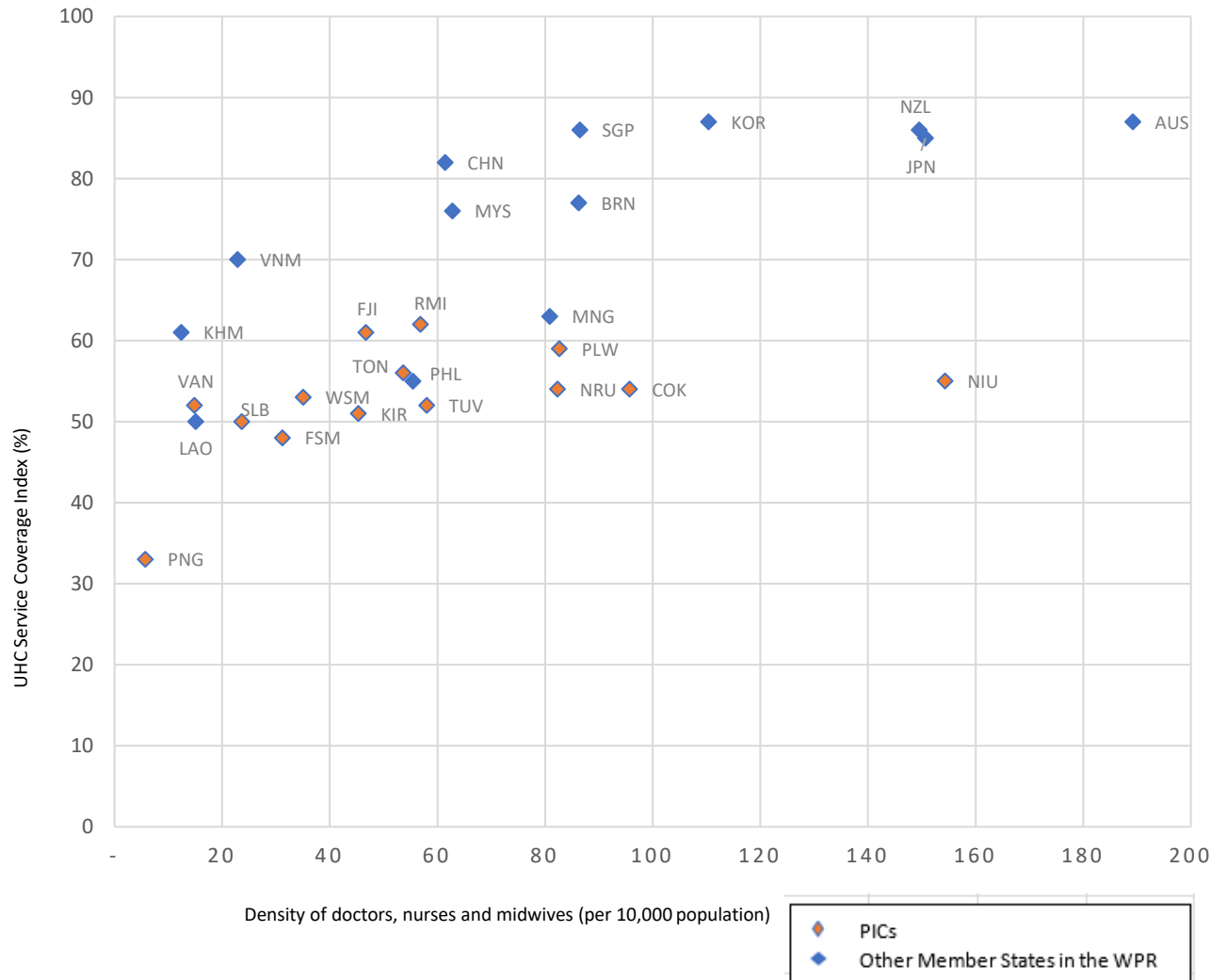
On behalf of Pacific island countries and areas

Current situation

Density of health workers per 10,000 population

Current situation

Density of doctors, nurses, and midwives per 10,000 population and UHC SCI in the Western Pacific Region

Current situation

APIA OUTCOME
TENTH PACIFIC HEALTH
MINISTERS MEETING
2–4 JULY 2013

Twelfth Pacific Health Ministers Meeting
Outcome of the Twelfth Pacific Health Ministers Meeting
Rarotonga, Cook Islands
28–30 August 2017

Thirteenth Pacific Health Ministers Meeting
Outcome of the Thirteenth Pacific Health Ministers Meeting
Tahiti, French Polynesia
6–8 August 2019

Heads of Health Meeting
Réunion des directeurs de la santé
REPORT OF THE
12th PACIFIC HEADS OF HEALTH MEETING
(Virtual meeting, 6–7 October 2021)

Directors of Clinical Services Meeting
Réunion des directeurs des services cliniques
THIRTEENTH DIRECTORS OF CLINICAL SERVICES (DCS) MEETING

Pacific Heads of Nursing
Réunion des directeurs des soins infirmiers

Why hasn't this resulted in greater progress?

Outlined key policy, management, education, financing, leadership and partnership functions required to build an effective and sustainable workforce

Committed to identify the workforce indicators needed for decision-making

Actions identified to develop/strengthen national HRH strategic plans and policies in line with national health strategic plans and packages of essential health services/role delineation policies

PACIFIC HEADS OF HEALTH | *Réunion des directeurs de la santé du Pacifique*

The future we want to see

The vision for the health workforce in the PICs over the next decade is **'people and communities have <u>equitable access</u> to a <u>competent, performing and motivated</u> health workforce, providing essential as well as specialized healthcare services at all levels of health service delivery'** contributing to the achievement of the healthy island vision and ultimately, UHC
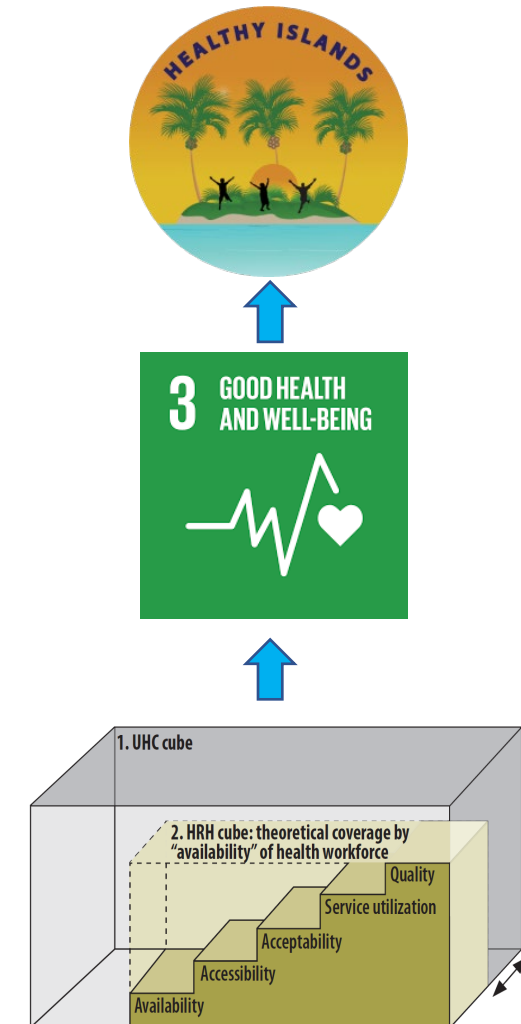
Country best practice examples

HRH Leadership and Governance

National HRH Strategic Plan

- **Tonga**: expanded the size and functions of the HR&WF Division and enhanced the ToRs of the HRD Committee - for health workforce planning and policy development
- **PNG**: reinforced the role of the HWFS&A Branch in collaboration with the HR Branch and revived the HRH TWG and Inter-departmental Steering Committee for HRH to guide the implementation of the National HRH Strategic Plan 2021-2030
- **Ongoing initiatives**: a short course on Strategic HRH Planning and Management for the HRH focal points in the PICs has been developed by WHO with training to be rolled out in 2023

- **Cook Islands**: Health Workforce Plan 2016-2025
- **Papua New Guinea**: National HRH Strategic Plan 2021-2030
- **Samoa**: Health Workforce Development Plan 2020-2026.
- **Kiribati:** Drafted the Health Workforce Strategic Plan 2019–2028, awaiting final endorsement.
- **Tonga:** completed the HRH Country Profile 2021 - situational analysis informing development of their next National HRH Strategic Plan as the previous one ended in 2020.
- **Marshall Islands, Niue and Palau**: HRH strategic plans ended in 2020 and the next iterations of these plans are due for development.

Country best practice examples

Health workforce education and regulation

➢ **Cook Islands**: revised the curriculum for national nursing training program.
➢ **Kiribati:** developed a new Diploma of Nursing curriculum
➢ **Papua New Guinea:** reviewing the curricula for the diploma in nursing and community health workers training programmes.
➢ **Vanuatu:** reviewing the nursing training program.
➢ Solomon Islands: reviewing nursing legislation.
➢ **Papua New Guinea:** initiated work on the Health Practitioners Bill.
➢ **Ongoing initiatives**: Subregional Quality Improvement Programme – led by SPCNMOA

Optimizing the role of health workers

➢ **PNG**:
   o developed health workforce standards and a monitoring system using WHO's workload indicator of staffing need (WISN) methodology to guide staff distribution and deployment.
   o Reviewed the role of village health volunteers and developed a 'Village Health Assistant and Village Health Volunteer Policy' to strengthen promotive and preventive integrated service delivery at the community and household level.
➢ **Tonga:** initiated the implementation of WISN methodology to review the current staffing level to guide staff distribution and deployment and also determine the required health workforce.
➢ **Vanuatu:** Reviewed the roles and required competencies for village health workers within a broader initiative focused on improving the quality PHC services reaching unreached populations, especially in remote islands.

- Expanded size and functions of the Human Resources and Workforce Division
- Enhanced ToRs of the Human Resources Development Committee
- Completed the HRH Country Profile 2021 informing development of next National HRH Strategic Plan (previous ended 2020)
- Initiated implementation of WHO's workload indicator of staffing need (WISN) methodology to review the current staffing level and determine the required health workforce

Country example: PNG optimizes the existing workforce

- Developed health workforce standards and a monitoring system using WHO's WISN tool to guide staff distribution and deployment
- Reviewed the role of village health volunteers and developed a 'Village Health Assistant and Village Health Volunteer Policy'
- Currently reviewing the curricula for the diploma in nursing and community health worker training programmes
- Initiated work on Health Practitioners Bill
- Progress driven by strong governance guiding implementation of the National HRH Strategic Plan 2021-2030:
  - a reinforced Health Workforce Standards and Accreditation Branch in collaboration with HR Branch
  - a HRH Technical Working Group and Inter-departmental Steering Committee for HRH

Why urgent action is needed now

- COVID-19 unmasked the fragility of health systems and existing inequities, revealing critical areas that require significant improvement, including the health workforce

- Increasing outmigration of health workers, especially nurses due to global shortage and aggressive international recruitment

- Weak/non-existent systems for continuing professional development (CPD), education pathways and accreditation, mentoring and succession planning

- Opportunities to strengthen and scale-up regional mechanisms to standardize and ensure the quality of training through regulating training institutions and curricula

- Marked acceleration in digital health, including telemedicine, remote monitoring for chronic conditions, enhanced contact tracing applications and the optimization of service delivery were beneficial outcomes from the pandemic response

Proposed recommendations for heads of health

1. Ensure that **the right building blocks are in place for systematic management of human resources** for health including:

    - A dedicated human resources unit within the ministry of health responsible for health workforce planning and policy development.

    - Relevant governance mechanisms for health workforce planning, policy development and implementation, including collaboration between health ministries, health professional training institutions and health professional regulatory bodies.

    - National human resources for health strategic plans and policies developed in line with national health strategic plans and packages of essential health services/role delineation policies. These should consider health labour market dynamics and future population health needs.

    - Health workforce databases or systems to inform planning and policy decisions, guided by global platforms such as National Health Workforce Accounts.

2. Ensure that **available health workers are fit-for-purpose** and adaptive to current as well as future population health needs by:

   - Warranting that health professional training institutions are providing accredited pre-service training programs.

   - Institutionalizing mandatory continuous professional development for reskilling and upskilling, including on the transformative new models of digital and tele-health

   - Considering a regional regulation platform to enable reciprocity, workforce expert pools and standards across the region.

   - Accelerating implementation of the 'road map' developed in 2020 for the subregional Quality Improvement Programme for Nursing, with a focus on education and regulation.

3. Increase **internal funding** and align investment for the implementation of priority health workforce policies and strategies, including:

    - Developing and implementing policies to retain health workers by introducing feasible incentives and better working conditions.

    - Optimizing skills mix and composition of integrated health care teams by:

        o Mapping public health functions and the relevant health workforce.

        o Reviewing and updating comprehensive scope of practice and clear job descriptions.

        o Strengthening the cadre of mid-level trained health workers, such has nurse practitioners and nursing specializations.

        o Exploring task shifting and task sharing among health workforce teams, including the role of community-based health workers, such as village health workers.

    - Exploring the use of digital health and tele-health initiatives in expanding healthcare services.

4. Explore opportunities and measures to address the evolving exponential increase in both internal and international **migration of health workers** by:

   - Analyzing the current situation and underlying causes;

   - Training greater numbers of health workers and adopting measures to attract and retain them, including decent working conditions and fair remuneration; and

   - Promoting sustainable and ethical mobility using global instruments such as the WHO Code of practice on the International Recruitment of Health Personnel or bilateral agreements.

Proposed recommendations for health ministers

1. Ensure the existence of **national human resources for health strategic plans and policies**. The development of these plans and policies should be led by **a dedicated HR unit** in collaboration with key stakeholders and informed by up-to-date health workforce data analysis, current labour market dynamics and population health needs.

2. Ensure the **accreditation of pre-service training programs** and implementation of **continuous professional development**. Consider the use of a regional regulation platform to enable reciprocity, workforce expert pools and standards.

3. Increase **internal funding** and align investment for the implementation of priority health workforce policies and strategies, focusing on **attracting and retaining talent** and optimizing skills mix, complemented with the use of digital health and tele-health initiatives.

4. Explore opportunities to address the increase in both internal and international **migration of health workers** by promoting sustainable and ethical mobility such as via the WHO Code of practice on the International Recruitment of Health Personnel or bilateral agreements.

Proposed recommendations for development partners

1. Align health workforce support, including scholarship opportunities, with **government priorities**.

2. Facilitate **cross-country sharing of best practices** in strengthening health workforce planning and management.

3. Support **regional internet infrastructure** for health workforce institutes and regional hospitals to enable the use of digital health and tele-health initiatives, regional accreditation, regulation and continuing development initiatives

Thank you!