

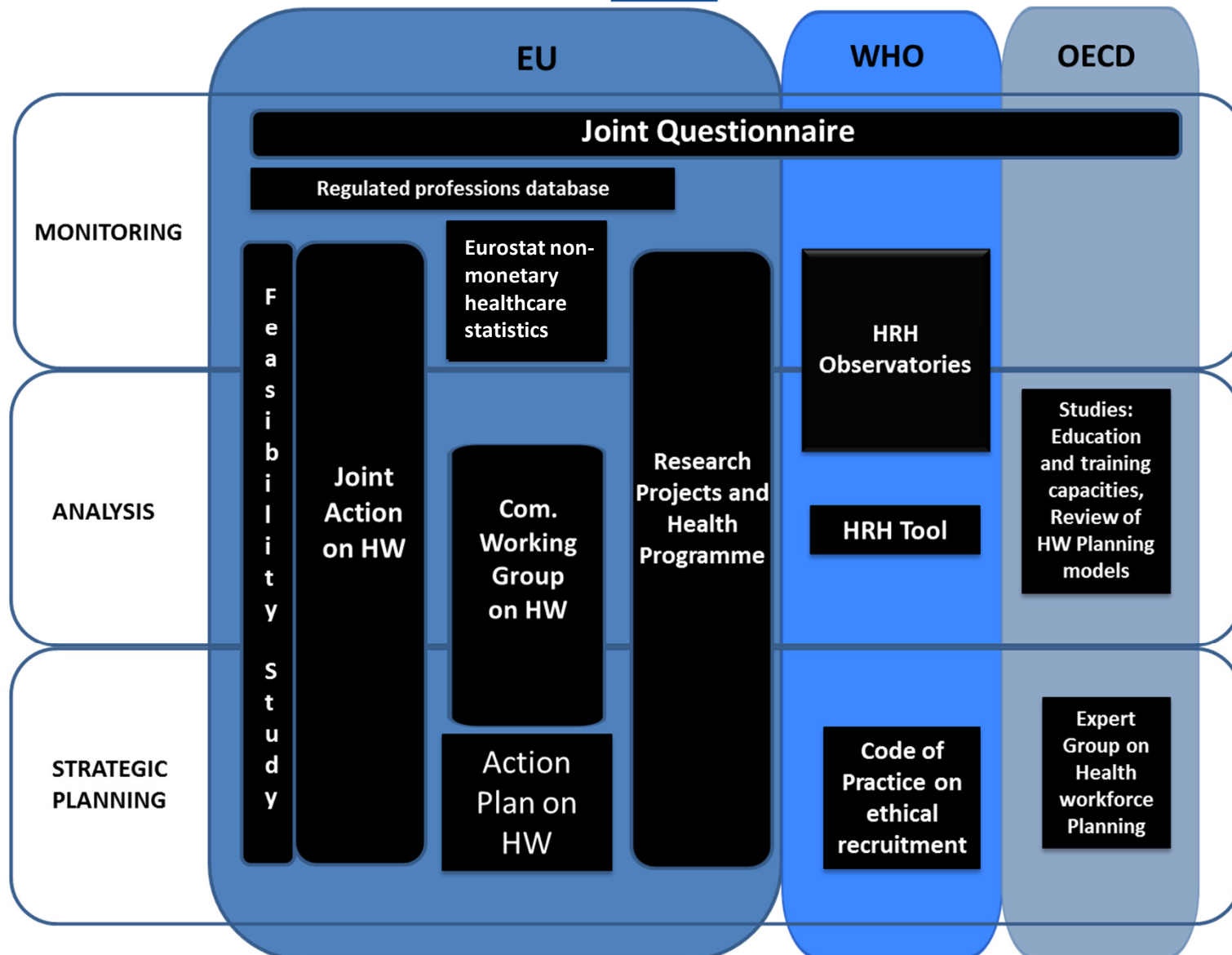


# Data of Health Workforce @ EU-level

How the Joint Action helps improving health  
workforce data?

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# Other activities on Health Workforce data at EU and international level





## **From Grant Agreement of Joint Action:**

### D041 Report on terminology mapping

*The report will contain the results of the questionnaire on terminology and the discussion that followed at the workshop (Utrecht). The report will identify problems and gaps and formulate suggestions and recommendations.*

*D042 – mobility data*

*D043 – HWF data gap analysis*

## **Scope:**

WP4 aims to improve quality and comparability of HWF data collected and supplied to international data collectors (Joint Questionnaire) by:

- Identifying gaps between the current HWF data terminology and terminology needed for HWF planning
- Providing recommendations on how to close this gap

## **Limitations:**

WP 4 will not:

- Provide the absolute truth on which terminology to use (focusses on process)
- Collect HWF data as the Joint Questionnaire already does this.

### Three challenges:

- 1) How to get the most of the health workforce data we have?
- 2) How to improve our data collection in Member States?
- 3) How to improve the comparability of international data collection?

### Tools of Joint Action – WP4 is based on:

- 1) Literature review (65 studies)
- 2) Questionnaire of Joint Action Partners (14 partners)
- 3) Input from international data collectors (OECD and Eurostat)



Joint Action Health Workforce  
Planning and Forecasting

## Joint Action – WP4 instruments

- Since data collection is an important instrument for the monitoring and planning of healthcare systems, especially in the health workforce planning context, **strategic directions for improving national data collections** need to be developed with the involvement of national stakeholder organisations.
- Achieving **better HWF data flow at the national level** by developing the cooperation of national HWF data collectors and owners (such as ministries of health, professional chambers, health workforce planners and data providers) is key to improve the current JQ data collection.

- support health workforce planning by **demonstrating the usefulness of international HWF data collection** in serving national interests.
- **Improving the JQ data collection in the activity status data categories of health workforce** (“Licensed to Practice”, “Practicing” and “Professionally Active”) in both headcount and full-time equivalent (FTE) to allow for a better streamlining in international comparability and serve a better HWF monitoring and planning at national level.
- **Strategic changes needed in data categorisation for the nursing, midwifery and caring professions**

## I. Strategic directions for developing national data collections in the future in order to support effective HWF planning

**Recommendation I.1.** The Joint Action draws attention to the special importance of HWF data in the national health workforce monitoring and planning processes. The implementation of the Joint Action results by Member States at the national level, and especially **the implementation of data collection** in Member States **based on the Minimum Planning Data Requirements** offers a starting point for enhancing current national HWF data collection practices. On the long run, these changes in data collection at national level would make it more feasible to add internationally comparable HWF planning data variables to the Joint Questionnaire.

**Recommendation I.2.** As HWF data collection at national level requires a careful cost effectiveness and feasibility assessment, national stakeholders of HWF planning should define clear HWF planning objectives and the necessary data requirements. Such **purpose driven data collection** will most likely increase the quality of data collected.

**Recommendation I.3.** As data collected on an individual basis is the most reliable of its kind, **data owner organisations in Member States should cooperate with national competent authorities to make individual registration/licensing data available online** - within the necessary data protection framework. This would, as a strategic goal, allow for the electronic sharing and cross comparison of HWF data among countries. These developments would also facilitate the monitoring of the international mobility of health professionals.

**Recommendation I.4.** The strategic development of data collection systems should reflect the key importance of mobility data for health workforce planning in countries with high outgoing or incoming migration of health professionals. These developments should consider the findings of the upcoming Work Package 4 Report on Mobility Data as well as the considerations of the Work Package 4 Report on the applicability of the WHO Global Code of Practice on the International Recruitment of Health Personnel within a European context.

**Recommendation I.5.** As some healthcare services overlap with the services of other sectors (e.g. social care), a move towards a **multi-sectoral and multi-professional approach** for national health workforce planning should be initiated. This would require data of health professionals working in other sectors (especially in the social care sector). Furthermore, data of other than health professionals (e.g. social care workers) working in healthcare should be also collected and integrated into health workforce planning. Good practices of some Member States offer a good background to such developments in HWF planning.