



HEALTH WORKFORCE SKILLS ASSESSMENT:

Supporting health workers achieve person-centred care

Health Division
Directorate for Employment, Labour and Social Affairs
OECD



Feasibility Study on Health Workforce Skills Assessment*

- **Why** do we need new skills assessment instruments?
- **How** are the changes in care delivery model (person-centred care) affecting skill requirements?
- **What** are the implications for health workforce planning?



Case for transforming health workforce skills – what is the evidence?

National objectives

Prepare a health workforce organised and capable of responding to the diverse and changing needs and demand for integrated, person-centred care

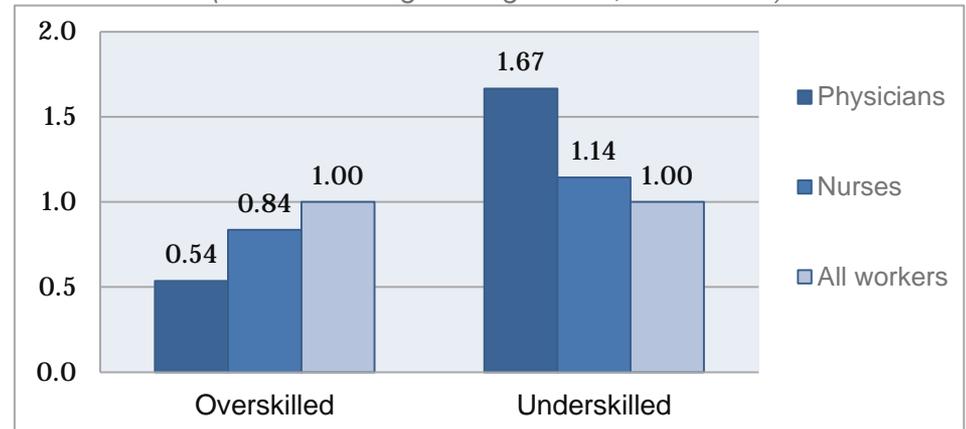
Key challenge

Growing evidence of skills mismatch in the health services sector

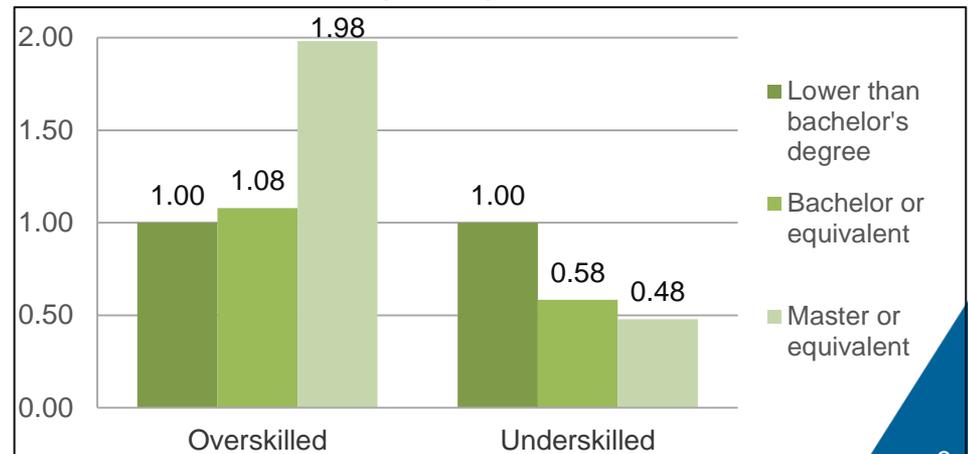
What do countries require?

- Better evidence and data for policy analysis
- Improved health workforce skills assessment tools

Skills mismatch of physicians, nurses and all workers
(Multinomial logistic regression, odds ratios)



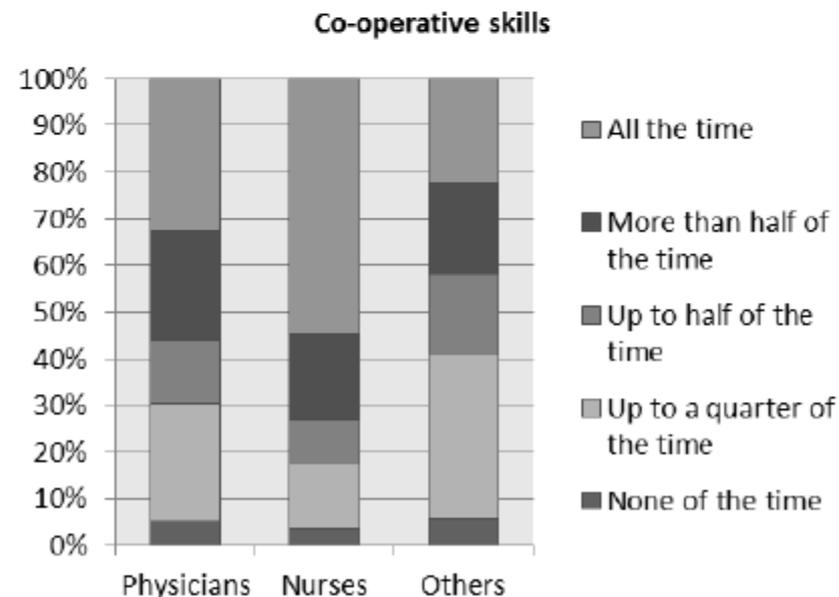
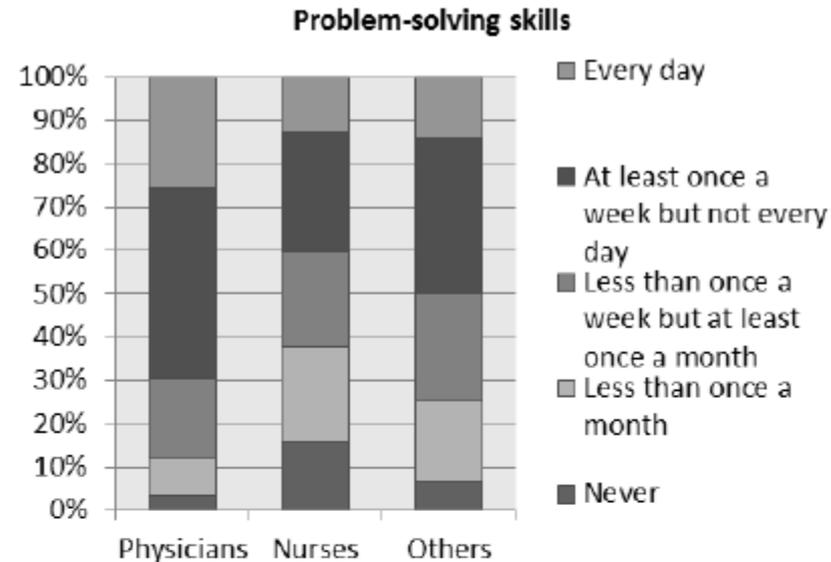
Skills mismatch among nurses by level of education
(Multinomial logistic regression, odds ratios)



Reported skills use by physicians, nurses and other occupations (PIAAC 2011/12)

Physicians and nurses show different distribution of skills use

- Physicians use problem-solving skills more frequently
- Nurses use co-operative skills more frequently





Potential performance losses due to skills gap, skills mismatch and/or poor use of skills

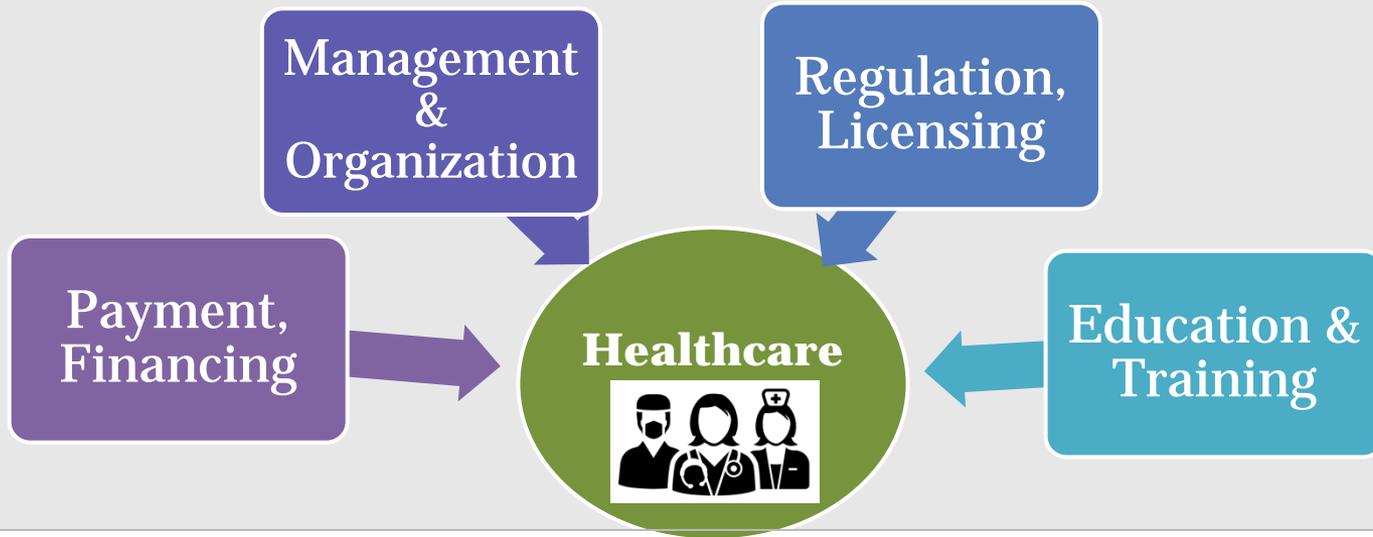


Emerging evidence of how skill mismatch leads to performance issues: low quality of care, poor patient outcomes and low productivity

- **Poor communication with patients**
- **Ineffective teamwork**
- **Ineffective use of technology**
- **Using high wage workers for routine work**
- **Poor management of risks**



Understanding the context of health workforce skills



- **What is the cause of skills mismatch?**

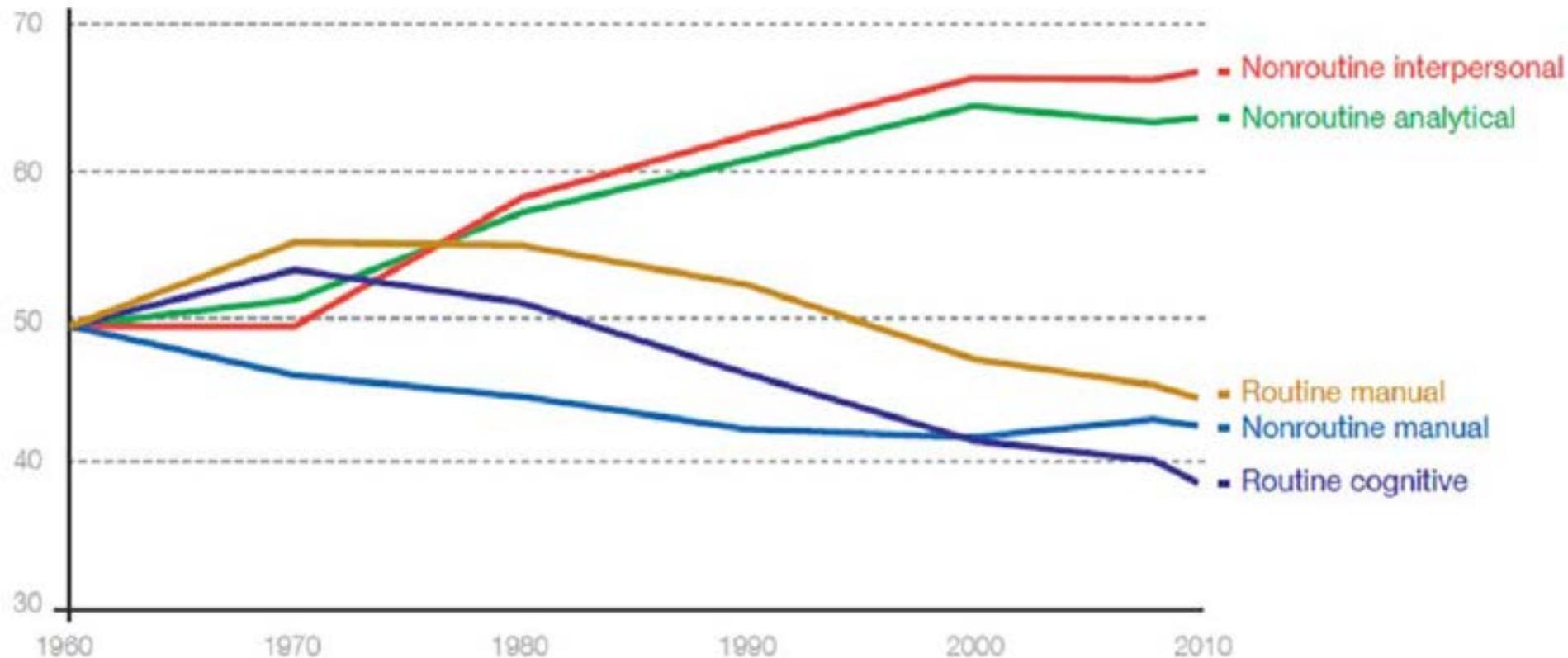
- Inadequate education and training?
- Ineffective organization?
- Inappropriate incentives?
- Restrictions due to regulations?

Key questions in making the link to planning



Changing Nature of Work – Example of U.S. Economy 1960-2009

Tasks by percentile for the US economy, 1960-2009



Healthcare services are also becoming more complex in multiple dimensions: technological, social, ethical and organisational.



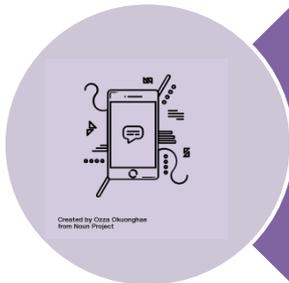
Telehealth solutions help the Danish healthcare system's meet the needs of citizens with chronic disorders



Patients can be closely monitored while at home; feel more secure; and do not have to commute to and from outpatient departments.



Telehealth solutions benefit the patients by avoiding unnecessary transportation, and are also cost-efficient for the society as a whole.



VC/home monitoring of patients, online tools for rehabilitation and online dialogue-based tools provide caregivers the ability to tailor rehabilitation programs for patients.



How to address diversity of health systems and health worker roles?



Existing skills assessment tools are highly specific to professions and local systems



Country variations exist in the scope of practice of health professionals



New functions and categories of workers are emerging

However, there is a growing convergence among the professional groups on common areas of competencies.

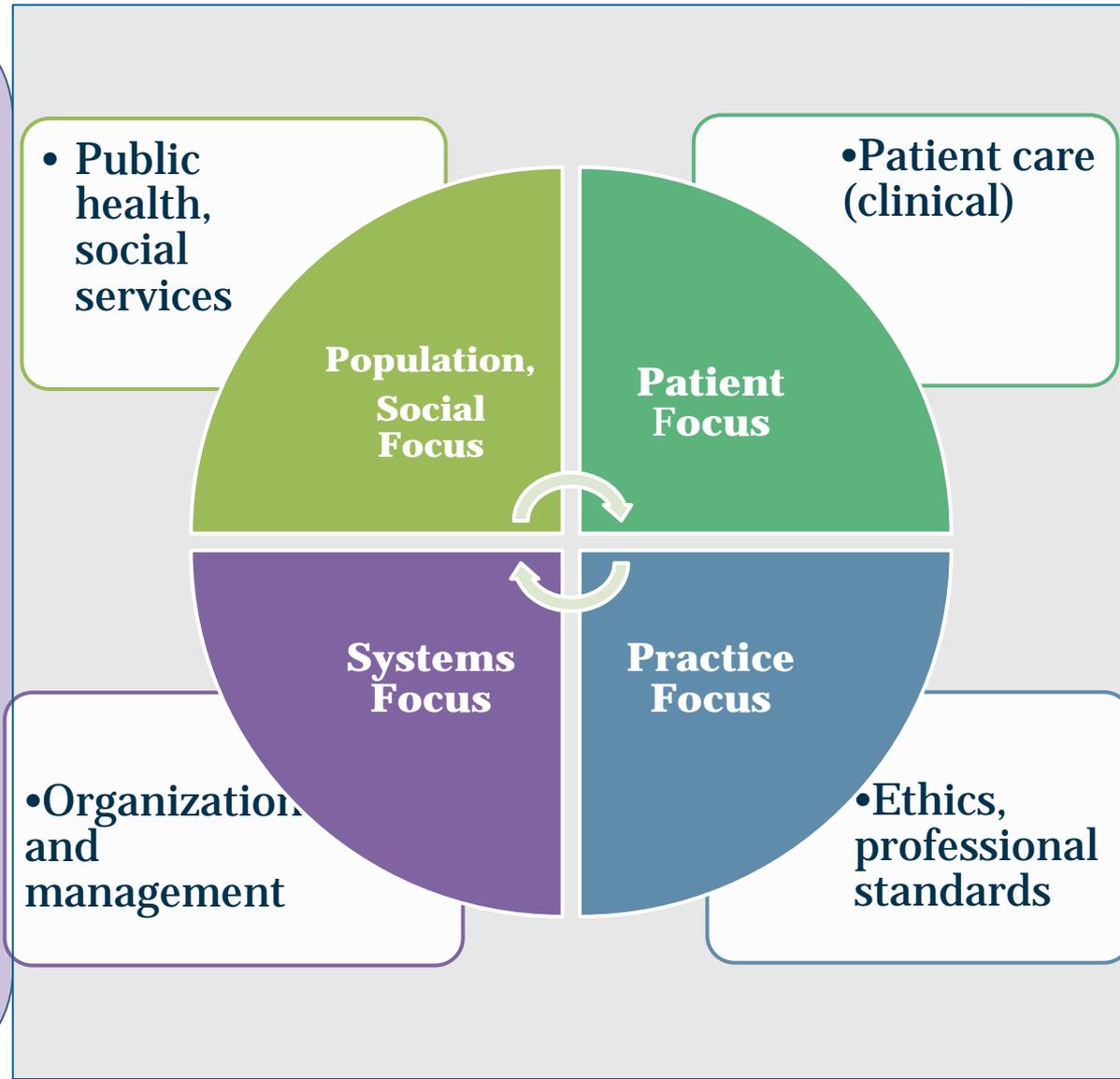


Competency Framework for person-centred care

Competency areas are converging:

- ✓ Transcending existing professional categories
- ✓ Motivated by person-centred care
- ✓ Reflecting demand for inter-professional teams
- ✓ Capable of addressing complex social & ethical issues

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TRANSVERSAL SKILLS for the Future Health Workforce

1. Working in technically complex environment

Skills for handling complex tasks



2. Developing team support and resilience

Skills for personalised care



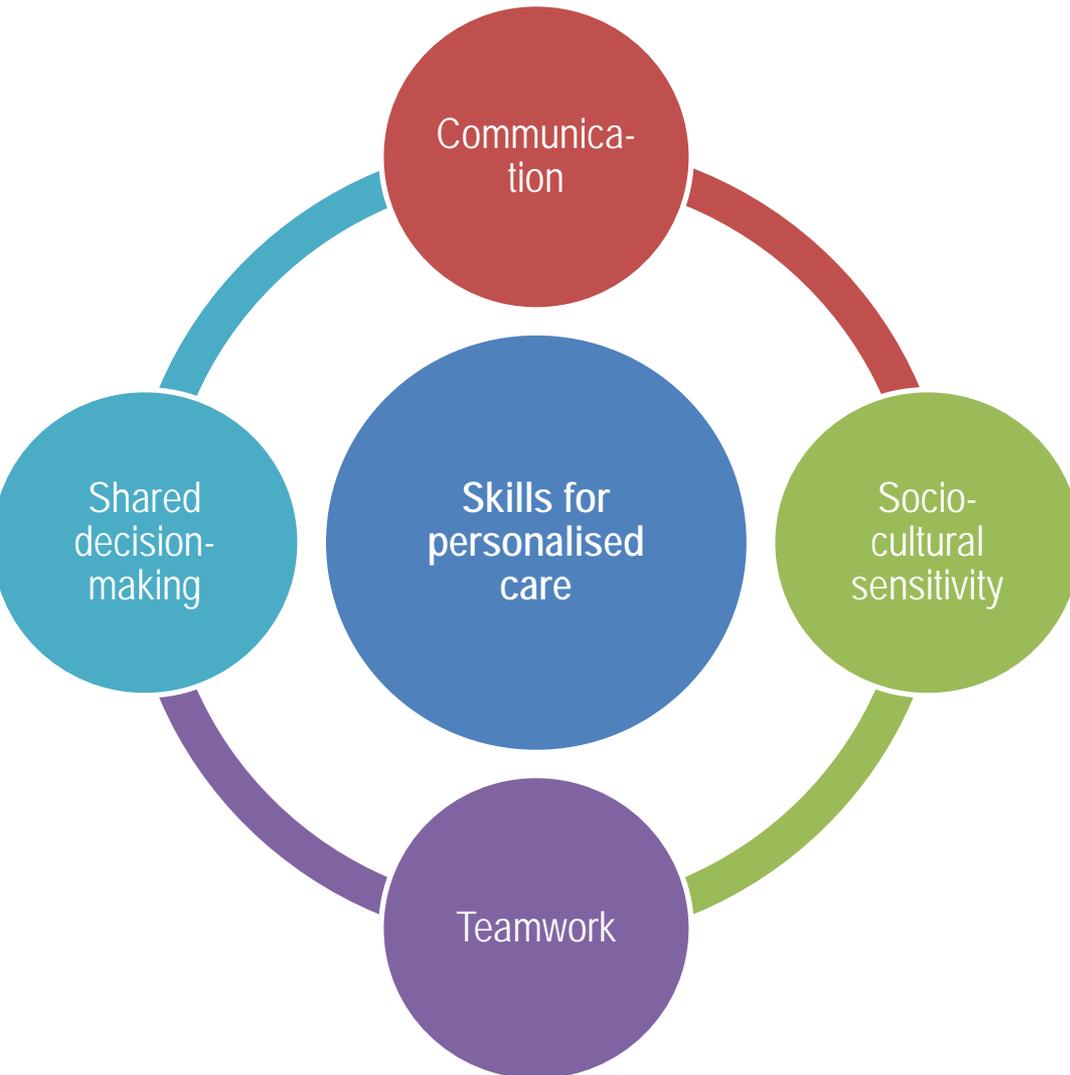
3. Managing complex personal relations

Skills supporting positive work culture





Communication & other skills for providing personalised care

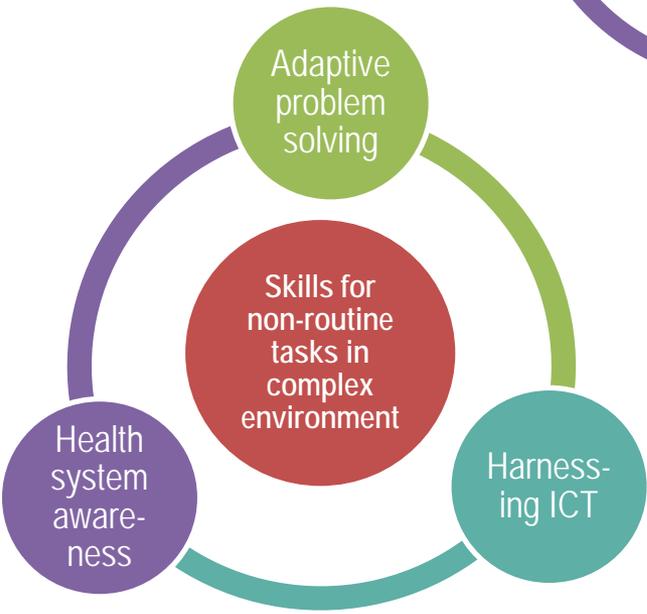


- **Communications, teamwork, shared decision-making and socio-cultural sensitivity go hand-in-hand**
- **But these skill sets must also be combined with the other skills, such as complex problem-solving and developing a supportive team environment**



Healthcare teams require workers with a balanced complement of skills to manage a complex and stressful work environment

• Increasing use of ICT is correlated with higher use of communication and information sharing skills – thus the two sets of skills are complementary and mutually reinforcing





Skills Assessment - Methodology

- *What to measure?*

Ability to perform the task



Attitude towards the task



Skills =
performance in
a given task

Perceived organisational barriers





Building on the existing instruments

– how to measure

Additional assessments at team and organisational levels

Team
Assessment
Module

Manager
Module

Hospital/
Primary Care
Survey

Patient
Survey

Individual health worker

Direct Assessment

Adaptive
Problem
Solving

ICT skills

Self-Reporting

Skills
Assessment

Skills Use

Attitude



CONCLUSIONS



- Broaden the policy relevance of skills assessment tools - beyond qualification & regulation – to include health workforce planning
- Build on convergence of skills requirements across professions and health systems to identify common areas of skills needs
- Develop an interprofessional and multi-stakeholder (person-centred) approach to joint skills assessment and planning, including education and training, interprofessional team assessment and performance evaluation



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