National Health Workforce Accounts (NHWA): Concepts and Mechanisms for Implementation

Dr Khassoum Diallo
Coordinator,
Data, Evidence and Knowledge Management
Health Workforce Department
World Health Organization

Outline

- Definition and purpose
- Justification
- Indicators and handbook
- Tools and Guidelines
- Governance mechanisms
- Capacity building and technical support

NHWA: Definition

A system by which countries progressively improve the quality, availability and use of health workforce data and evidence through progressive monitoring of a set of indicators to support achievement of Universal Health Coverage, SDGs and other health goals.

Purpose: National, Regional & Global

General purpose: to facilitate standardization of a health workforce information system for interoperability, and support tracking HRH policy performance towards universal health coverage.

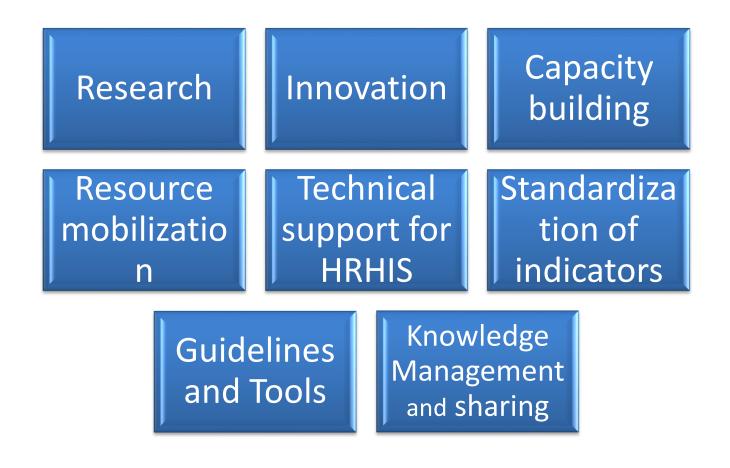
The NHWA is built up of a set of indicators and data characteristics that can be progressively measured in order:

- to generate reliable HRH information and evidence;
- to enable the planning, implementation and monitoring of workforce policies towards UHC;
- to improve the comparability of the health workforce landscape nationally and globally; and
- to enable research to be performed about future trends regarding health workforce, systems and resilience planning.

Current challenges of the HRH Information systems in many countries

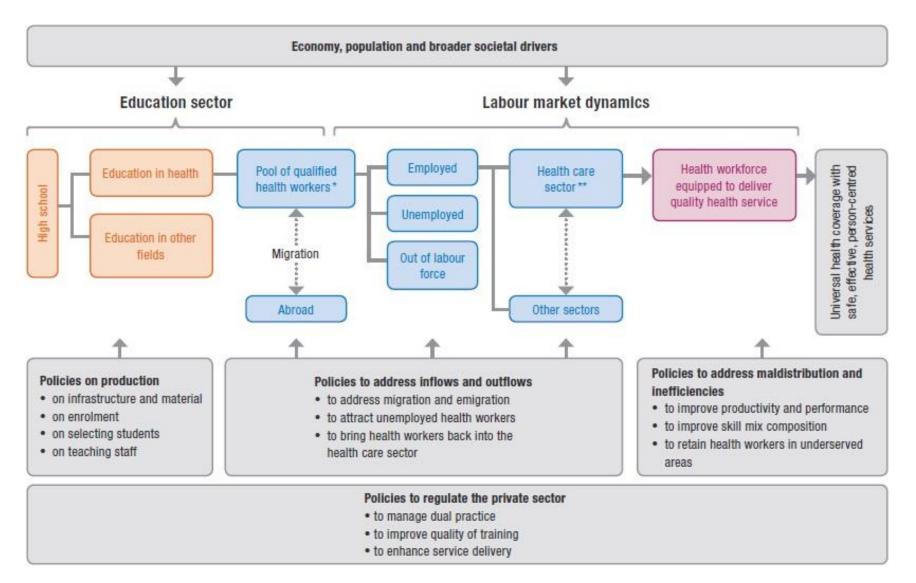
- Fragmented sub-systems not always inter-operable
- Inward looking approach (health alone) in many countries
- Challenges in providing disaggregated data (sub-national levels, private sectors)
- Relevant governance and labour market indicators not documented
- Change of data culture:
 - Production for use, not only for reporting
 - Limited Analysis, dissemaination and use
- Lack of standardization of tools, definitions accross countries
- Un-coordinated data collection efforts

Strategic approach for implementing the NHWA

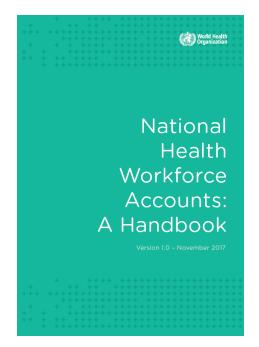


Standardization of Indicators

Health Labour Market Framework for UHC



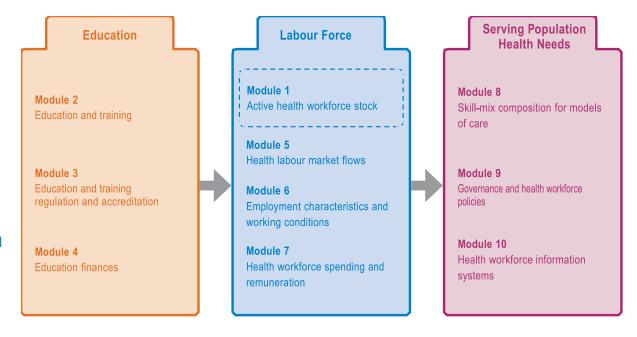
National Health Workforce Accounts Handbook



Use of the Health Labour Market Framework.

Indicators covering 10 modules to obtain comprehensive data on all aspects of health workforce

- A handbook
- An implementation guide
- A web platform for data reporting, monitoring and visualisation



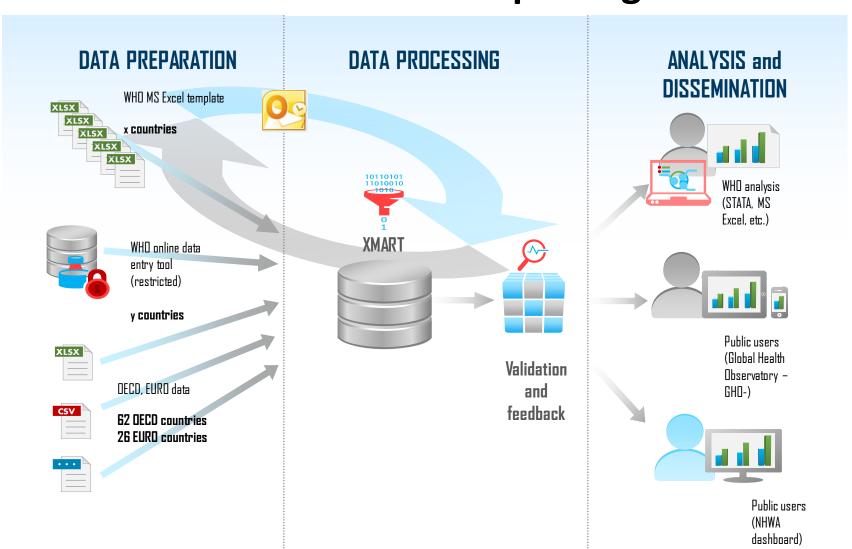
National Health Workforce Accounts: Modular overview

labour market

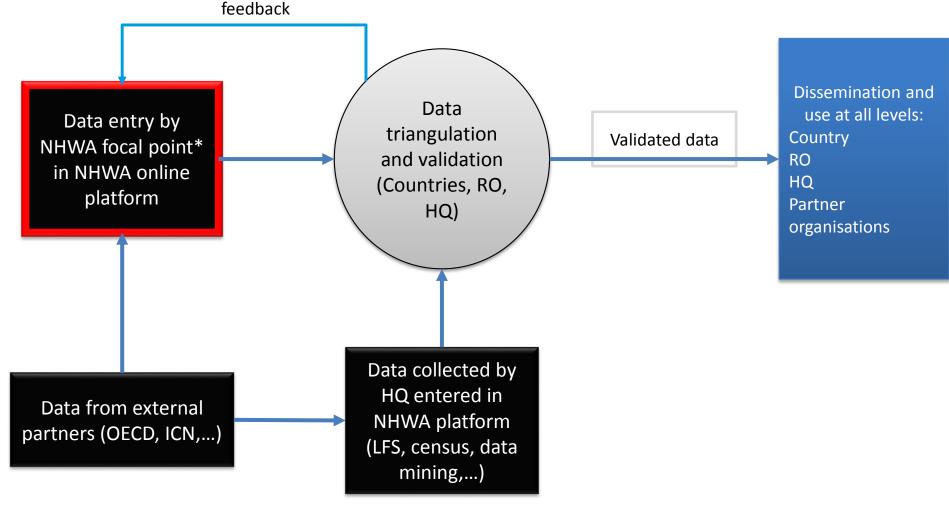
Active health workforce stock **Employment characteristics and working conditions** Distribution Stock Migration Working time Labour market characteristics Working conditions · Health worker density Nealth worker distribution by age group-. Share of foreign-born health workers · Health worker status in employment . Measures to prevent attacks on Standard working hours . Health worker density at subnational level Female health workforce . Share of foreign-trained health workers · Health workers with a part-time contract · Regulation on dual practice health workers · Nealth worker distribution by facility Distribution Decent work Regulation on compulsery service. . Attacks on health-care system . Share of workers across health and ownership type · Regulation on working hours and conditions . Health worker distribution by facility type Abbreviated name **Education and training** Health worker distribution by age group **Applications** . Ratio of admissions to available places . Master list of accredited health workforce education and training institutions . Ratio of students to qualified educators for **Dimension: Distribution** Duration of education and training education and training Applications for education and training Exit / drop out Exit / drop-out rate from education and Indicator name Percentage of active health workers in different age groups training programmes Numerator Number of active health workers in a specific age group Education and training regulation and accreditation Denominator Total number of active health workers, defined in headcounts Disaggregation By occupation Regulation Accreditation . Standards for the duration and content Accreditation mechanisms for education Definition Percentage of active health workers in the given age groups, by occupation. of education and training and training institutions and their programmes Age groups considered are the following: $> 25, 25-34, 35-44, 45-54, 55-64, \le 65$. Standards for social accountability · Active health worker Standards for social accountability Glossary effectively implemented Age group Occupation **Education finances** Data reporting frequency Annual Potential data sources Health workforce registry or database Financing of higher education · Total expenditure on higher education Adequate budgetary resources for Aggregate data from health facilities (routine administrative records, Health Management Information · Total expenditure on health workforce investments in transformative education System, District Health Information System census and/or survey) education **Education expenditure** · Professional council/chamber/association registers Average tuition fee per student Expenditure per graduate on health workforce education Labour force surveys · Population census data Further information (WHO 2015c, OECD et al. 2016, WHO et al. 2009) **Health labour market flows** and related links Entry into labour market Exit from labour market (International Labour Organization 2013, USAID and CapacityPlus 2015) Additional references · Graduates starting practice within one year · Voluntary exit rate from health . Replenishment rate from domestic efforts labour market . Entry rate of foreign health workers · Involuntary exit rate from health

Tools and guidance

NHWA Global Reporting



NHWA data process: country at the center of data collection/validation



^{*} in charge of country reporting and validation of data entered in the platform.

NHWA data platform

NATIONAL HEALTH WORKFORCE ACCOUNTS ONLINE DATA PLATFORM

Welcome Teena Kunjumen

User Guide

Logout

NHWA maturity assessment



NHWA maturity assessment enables countries to assess their national information system and its capacity to address the NHWA indicators.

Validate existing baseline data



The validation exercise enables countries to view existing data and undertake necessary action of data correction/update as required.

NHWA data entry

Data entry into the system can be done (i)directly through the system interface or (ii) as batch upload through excel sheets



Data entry through the system interface



Batch upload through excel sheets

Visualise data

Access programmed data infographics or create customised data visualisation with the existing data



Enables users to create pivot tables, using available data



Data Visualizer

Enables users to easily create dynamic data analysis and visualizations through charts and data tables.



Enables users to visualize data in Geographical location system.





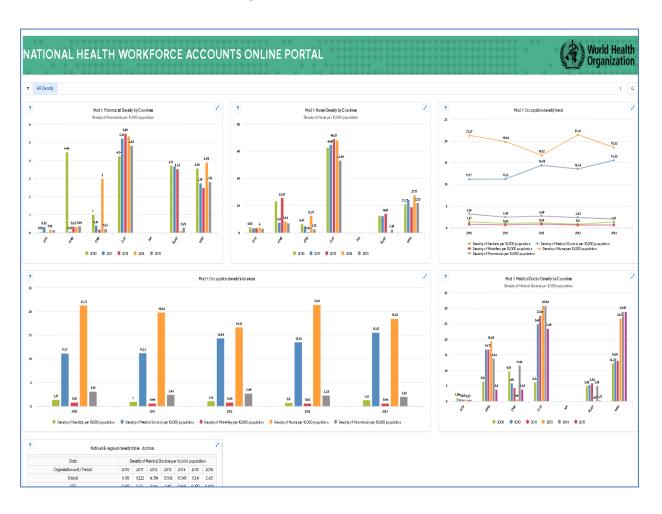
Access to an interactive dashboard



lashboard Access to the NHVVA Regional profile

Access pre populated data infographics based on

NHWA web portal (soon to be published)



What is NHWA implementation guide?

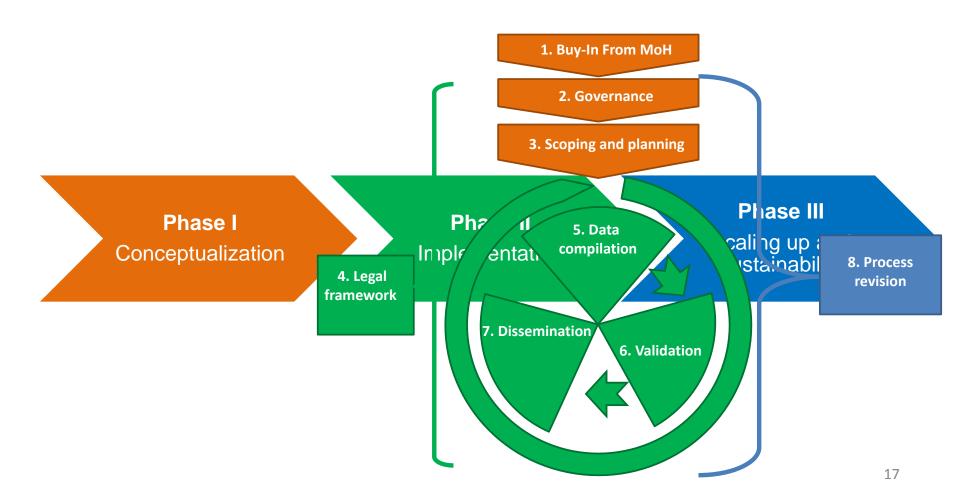
- Proposals and recommendations to countries on how to implement NHWA
- For policy makers and programme managers

Some guiding principles:

- Countries are in the driving seat, these resources are there to facilitate and harmonise
- "A la carte": pick elements in the guide that are relevant to your country, adapt, shake, blend, ..., it is your cookbook
- Do not harm: should not have any detrimental effect on current health status and other initiatives improving global health
- Not reinventing the wheel: NHWA is being implemented in most countries using existing resources and working scheme already in place. Limited adaptation on existing system is required.

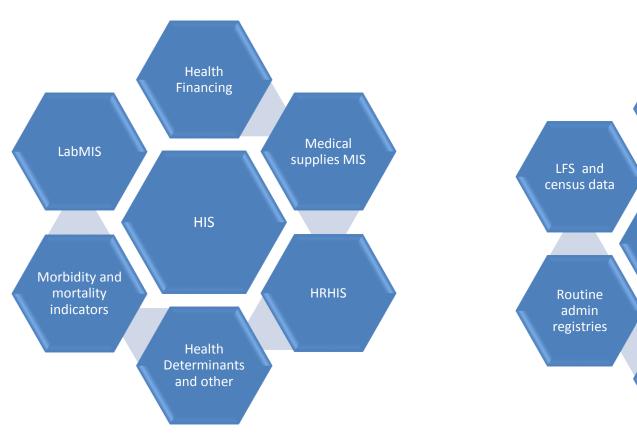
Implementation of the NHWA

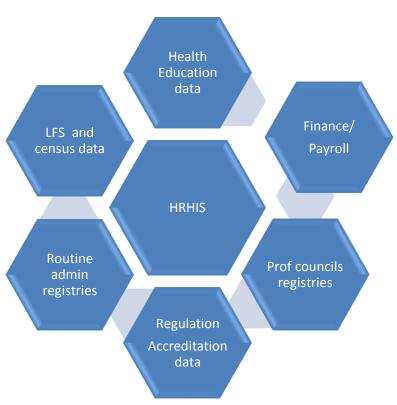
- WHO is developing an Implementation guide to help countries run NHWA in a sustainable manner.
- For policy makers and programme managers



Capacity Building and Technical Support for NHWA Implementation for strengthening HRH information systems using the NHWA approach

Network of systems: A system strengthening approach





NHWA a system

Education: Production of health workers

Training: On-the-job training – quality improvement

Management: Planning, Recruitment, deployment, skill-mix

Finance: Wages, incentives, sustainable funding

Governance: Public/private, non-health actors, roles and resp.

Information System: Data, monitoring, evaluation, research

Planning: Integrated and supportive long-term plans

Partnerships: Coordinated, collaborative, sustainable plans

Leadership: Vision, political, technical & admin support

Philippines - HRH Data Flow -

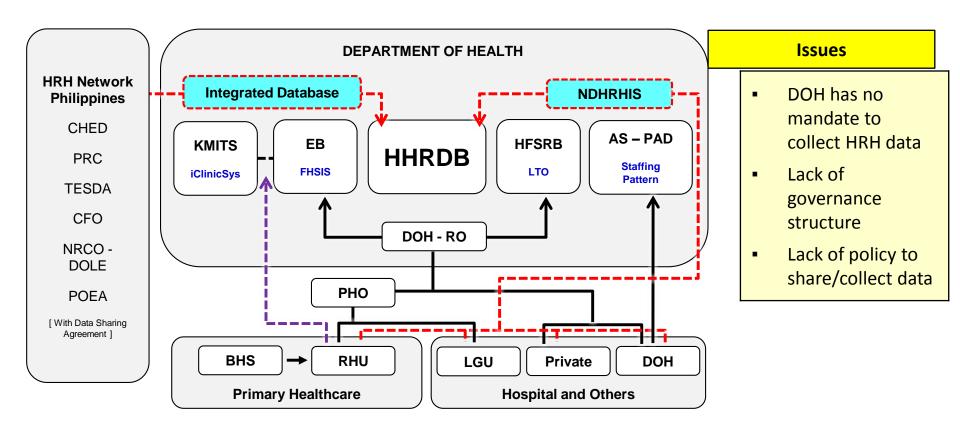


Fig Current HRH Data Flow in the Philippines

[Draft] NHWA Roadmap - Philippines

	Conceptualization				Operationalization					Process Revision and Sustainability		
	Policy priorities identified		NHWA roadmap drafted		Data dictionary updated	sta	a sharing indards efined	Data sharii agreemen updated	ts tools		Implementation for successes and challenges reviewed	
stru	Governance structure		Stakeholders NIiidentified and med		Minimum data set for HWR defined						Governance and	
_	ned with ORs	engaged		conducted	Data quality improved and information systems strengthened						institutionalization reviewed	
NHWA indicators identified and prioritized		nd	Data sources mapped and gaps identified		Data submitted by stakeholders to the NHWA focal point		Data quality checked and consolidated		Standards, guidelines and SOPs updated			
Monitoring and evaluation standards developed				Data analysis and validation								
Partial				Use of NHWA da HRH Country Pr		Use of NHWA data for HRH planning						
Done				Continuous identification of policy directions								

DISSEMINATION AND USE & Networking and Partnerships

Uses of NHWA for decision making

- Support evidence based decision making by providing quality and timely evidence for:
 - Answering policy questions
 - Informing development of national and sub-national health plans, investment cases and strategies
 - Informing advocacy and resource mobilization efforts
 - Standardizing tools an methodologies accros various stakeholders

DISSEMINATION

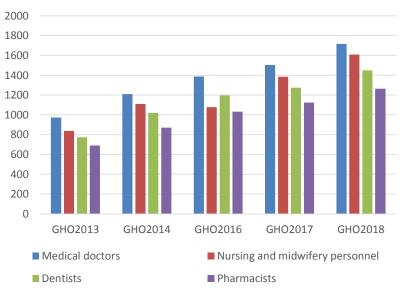
- THE Global Health Observatory
- SDG and WB reporting
- HRH investment cases
- Planned strategic dissemination
 - The GPW13 impact Framework
 - The State of the World Nursing Report 2020
 - The State of the World Midwifery Report 2020

But primarily for country use (tables, graphs, maps, profiles, dashboards)

Increase in availability of data Comparison through GHO

Occupation data increase





Occupation	GHO2013	GHO2014	GHO2016	GHO2017	GHO2018
Medical doctors	972	1210	1387	1502	1715
Nursing and midwifery personnel	837	1110	1077	1383	1608
Dentists	773	1019	1195	1274	1448
Pharmacists	691	870	1031	1123	1263

- !! Availability of occupations other than the top 5 have increased
- !! More disaggregation also available

The Health Data Collaborative (HDC) Network

























Government of Canada

Gouvernement du Canada











































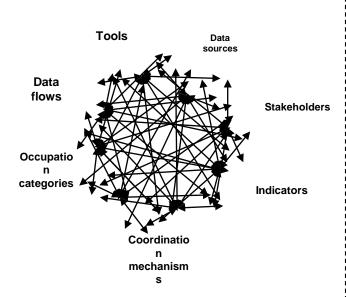


National Health Workforce Accounts: Scope

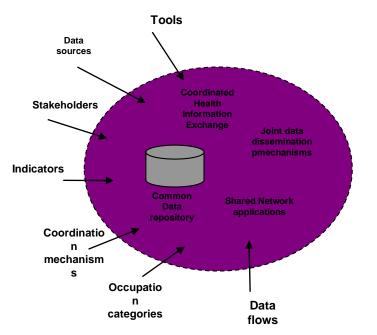
- Beyond a list of indicators
 - Inclusive multi-sectoral governance
 - Diversification of data sources
 - System's strengthening approach
 - Key principle: Countries needs and interest first
 - Partnership for HRH data, country support and capacity building
 - Analytical work and key tools and products for country use
 - Data use for decision making, raising awareness on HRH and resource mobilization

NHWA: From past/current to Future

From a fragmented system that creates redundancies and inefficiencies



NHWA: A system will consolidate information and provide a foundation for unifying efforts



THANK YOU VERY MUCH

Contact us at hrhstatistics@who.int