

## WORKSHOP 1 – SUMMARY REPORT 'PLANNING FOR HEALTH PROFESSIONS: HOW TO ACT ON SKILLS NEEDS'

6-7 February 2018
Thon Hotel Brussels City Centre, Avenue du Boulevard 17/
Bolwerklaan 17, 1210 Brussels



This workshop is organised by the KU Leuven and the Standing Committee of European Doctors (CPME) and is part of a series of workshops foreseen in the frame of EU Health Programme 2014-2020 under a service contract (no. 20167301) with the Consumers, Health, Agriculture and Food Executive Agency (Chafea) acting under the mandate from the European Commission. The information and views set out in the workshop are those of the author(s) and do not necessarily reflect the official opinion of the Commission / Executive Agency. The Commission / Executive Agency do not guarantee the accuracy of the data included in the workshop. Neither the Commission / Executive Agency nor any person acting on the Commission's / Executive Agency's behalf may be held responsible for the use which may be made of the information contained therein.

The contract is signed with the joint tender led by Semmelweis University (SU), and further partners are KU Leuven (KUL), the Italian National Agency for Regional Health Services (AGENAS), the Italian Ministry of Health (MDS) and the Standing Committee of European Doctors (CPME).

## **INTRODUCTION**

On 6 and 7 February 2018, experts came together in Brussels for a workshop on 'Planning for health professions: how to act on skills needs.' The workshop took place in the context of the joint tender 'Support for the health workforce planning and forecasting expert network' (SEPEN) as the first of a series of five. The multidisciplinary group of participants comprising workforce planners, workforce strategists, health professions' representatives, experts in education policy, national policy-makers, chronic disease patients' organisations, and representatives of the OECD and European Commission, were invited to identify tools and approaches which integrate the skills dimension with health workforce planning processes. As a supporting case, the improvement of the skills of health professionals in communicating with chronic disease patients was selected.

## **SUMMARY OF DISCUSSIONS**

Keynote presentations (please click <a href="here">here</a> to watch the full presentations) provided insight into the process from different perspectives. <a href="Dr Akiko Maeda">Dr Akiko Maeda</a> illustrated the state of research on skills needs. The <a href="OECD Feasibility Study">OECD Feasibility Study on Health Workforce Skills Assessment</a> which she led is the most recent analysis of competency frameworks and examines ways to better assess the match between existing skills and future needs. To share the experience of integrating skills needs with health workforce planning at national level, <a href="Mr Matt Edwards">Mr Matt Edwards</a> presented the process followed for a major study in England, its impact and related policy developments.

To provide the patients' view on skills needs for chronic disease care, Mr Yves Brand, presented the MS Nurse PROfessional training programme. This programme is based on a skills needs assessment developed on the basis of a survey among nurses caring for patients with multiple sclerosis (MS). To respond to the need for further training identified thus, an online programme was developed to cover a range of competencies including both clinical elements and skills such as providing emotional support.

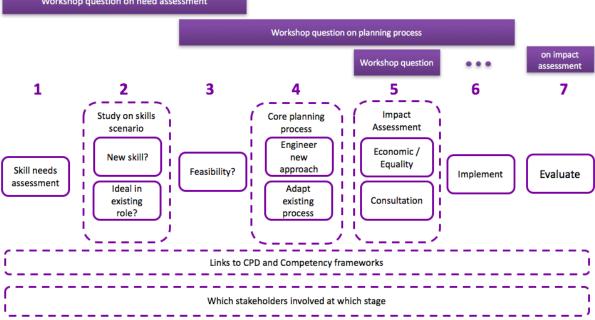
Participants used the experiences shared in the keynotes to address the discussion questions, resulting in the following **key messages**:

- As a starting point, it was agreed that the changes in healthcare systems, in particular the needs of chronic disease patients, are pressuring a transformation of healthcare and retooling of health professionals. The process of skills needs assessment should therefore be needs driven.
- In terms of problems identified, the differences in Member States' needs were highlighted, as were the fragmented skills needs assessments currently available, which fail to make a comprehensive assessment. It was then considered who must be involved in solving these problems and in creating robust skills needs assessments.
- A first assessment and a cost benefit analysis appear to be necessary before any investment is made, in order to assess affordability and added value of reforms or interventions.
- The **crucial role of patients** was highlighted, to better understand which skills are seen as valuable by patients. This may also lead to greater awareness for the impact of social determinants of health.
- The importance of the regulatory framework for professionals' activities necessitates the involvement of competent authorities. These complement the profession-based input, both in terms of self-reporting on skills and peer review and education.
- To move to the final step of acting on skills needs assessments, it was concluded that it is crucial that professionals can rely on a supportive learning environment, which allows sufficient time to learn and offers incentives.
- An assessment of what skills needs there are contrasted against the current skills profiles, is therefore the starting point of the planning process. It was suggested to critically evaluate the effect such changes may have on professions, e.g. on its attractiveness.

- Against this background it should be checked if the assessments' outcomes can be addressed by the existing framework of professions or if changes, e.g. to the legal framework or the calculation of full time equivalents are necessary.
- This in turn should be assessed as to the **feasibility of the solution** proposed if it is for example too expensive or not achievable within an appropriate timeframe.
- The degree of change of the modelled data to existing exercises was also seen as an impact on the type of variables used during the planning process and hence the decision tree. A new approach will require a more extensive process than one which can be achieved by adapting the existing process.
- An impact assessment should be carried out to estimate the effect on economic objectives and policy objectives such as equality. Stakeholder consultation is of particular importance for a true assessment.
- In general, the session agreed that to facilitate implementation, there is a need to aim for the simplest approach possible, to avoid complicating an already complex model. Once a model is constructed and filled with data, scenarios can be generated. In terms of motivating factors for implementation, experiences of different triggers were reported, for example cases of grave failings in quality of care which have generated new recruitment practices.
- The question was raised how to evaluate scenarios and correct possible errors of planning outcomes. Continuing Professional Development (CPD) was mentioned as one of the tools to implement but also to correct skills planning. Overall a close alignment with CPD policies was seen to be helpful.
- A further dimension of evaluation can be factored in, if the link between action on skills needs assessments and better health outcomes or efficiency improvements is explored.

The following decision tree highlights the different steps and considerations of the process:

Workshop question on need assessment



To conclude, participants agreed that the creation of the expert network would add a new layer of expertise to European cooperation and has the potential to accelerate the knowledge transfer of good practices. It can also provide an opportunity for evaluation of planning practices and thereby improve the identification of good practice. However, the discussion clearly showed that good practices must be adapted to national contexts to be effective. At the same time, it was suggested that the scenarios of future healthcare should not be limited by our current conceptual frameworks on how to organise and finance care, or select and educate health professionals.

It was highlighted that the involvement of stakeholders and especially patients would help generate continued political support for health workforce planning policy. This includes the contribution provided by international institutions, such as OECD, WHO and not least the European Commission, which is why DG SANTE should be supported to continue its work. To test the approaches discussed in the workshop, it was suggested to trial their efficacy in a real-life process with real data.

## PROPOSED FOLLOW-UP ACTION

A video summary of the workshop is available <u>here</u>. Questions noted for further discussion will be taken into consideration for the planning of activities of the expert network. All workshop participants are invited to join the network and continue to follow the