



Joint Action Health Workforce
Planning and Forecasting

Horizon Scanning: future skills and competences of the health workforce in Europe

(draft findings)

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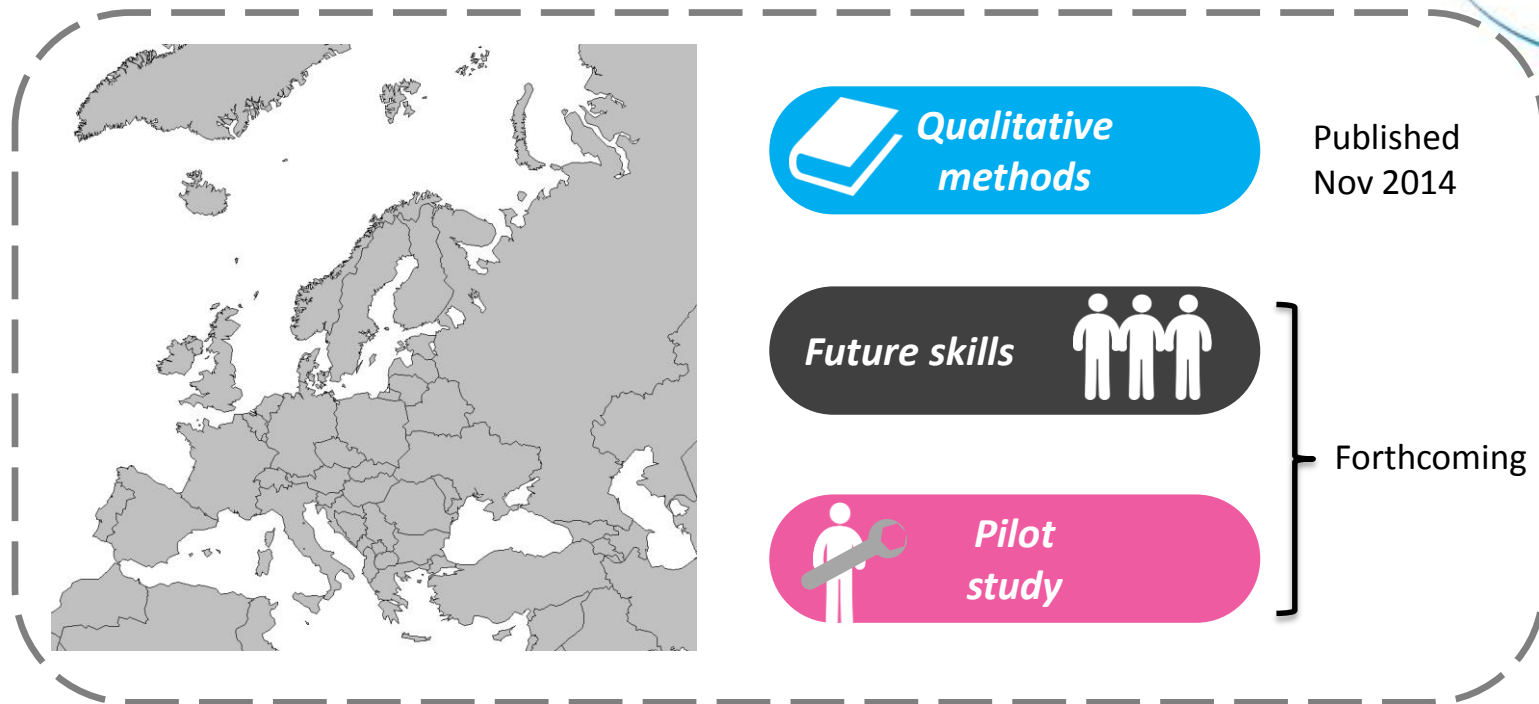


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WP6 Horizon Scanning



Horizon scanning
and qualitative



Objective of report on future skills and competences

“The report will give an estimation of the future needs of skills and competences and their distribution. It will contain a series of papers either covering off a key professional group (e.g. nurses) or a large trend (e.g. ageing population).”

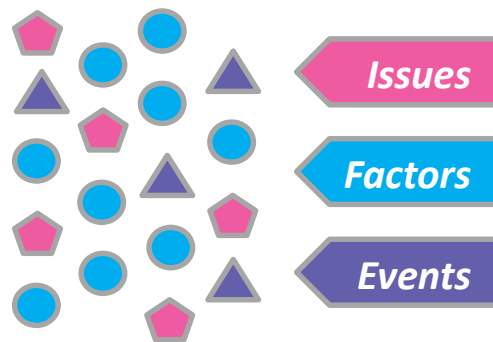


Horizon scanning

Horizon scanning in health workforce planning and forecasting is used to explore and describe the factors and forces, and their inter-relationships, in workforce systems.

The use of horizon scanning and the produced report and briefs aim to increase our collective knowledge of the factors and forces which may drive changes in the skills and competences required from health workforces over the next 20 years.

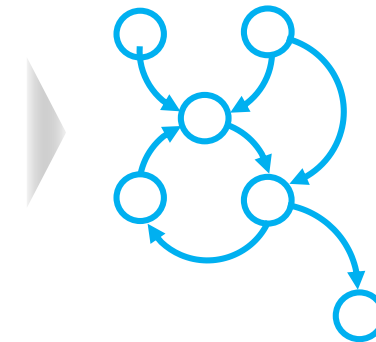
Context



Ideas bank



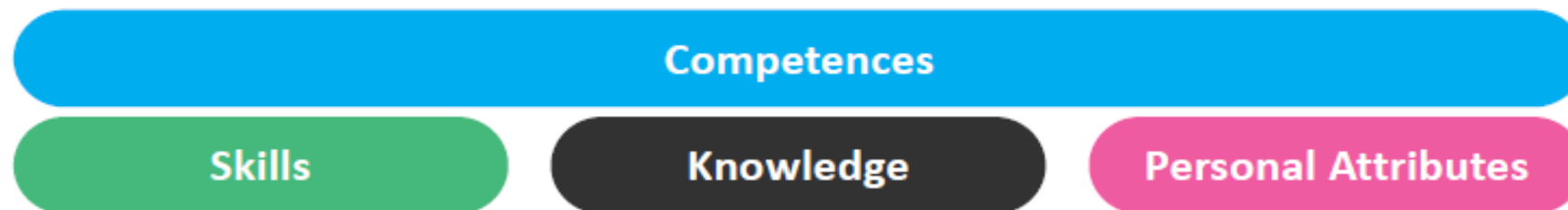
System mapping



Skills and competences

The language of skills and competences is useful when considering multiple health workforces, and their potential activity in the future, because it allows a consideration of what will need to be done rather than trying to work forward from the existing division of roles and responsibilities.

To develop this approach, skills and competences are conceptualised in a generic framework (consistent with approaches in, for example, Cowan et al, 2005 and UEMS, 2011) where competences are a complex (and interacting) combination of skills, knowledge and personal attributes.

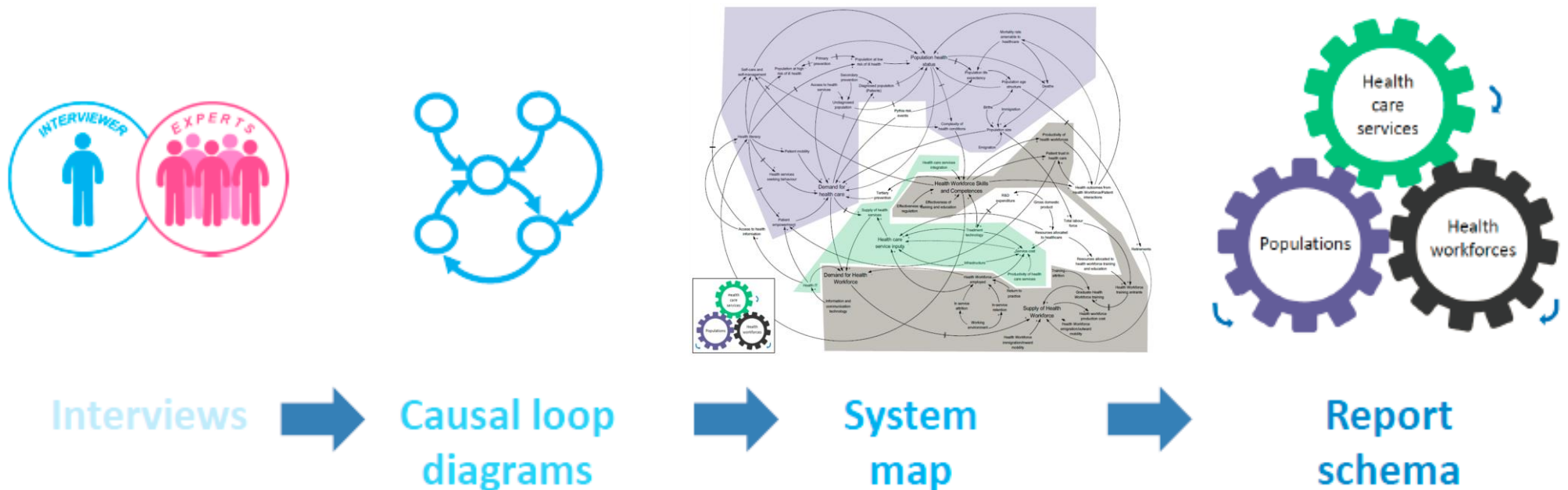


Skills and competences framework (CfWI, 2014)

Methodology

Horizon scanning has been conducted by a network consisting of WP6 partners led by the CfWI, in collaboration with the UK Department of Health.

Focal question: ‘Thinking up to the year 2035, what are the key driving forces that will influence the skills and competences required in the health workforce?’



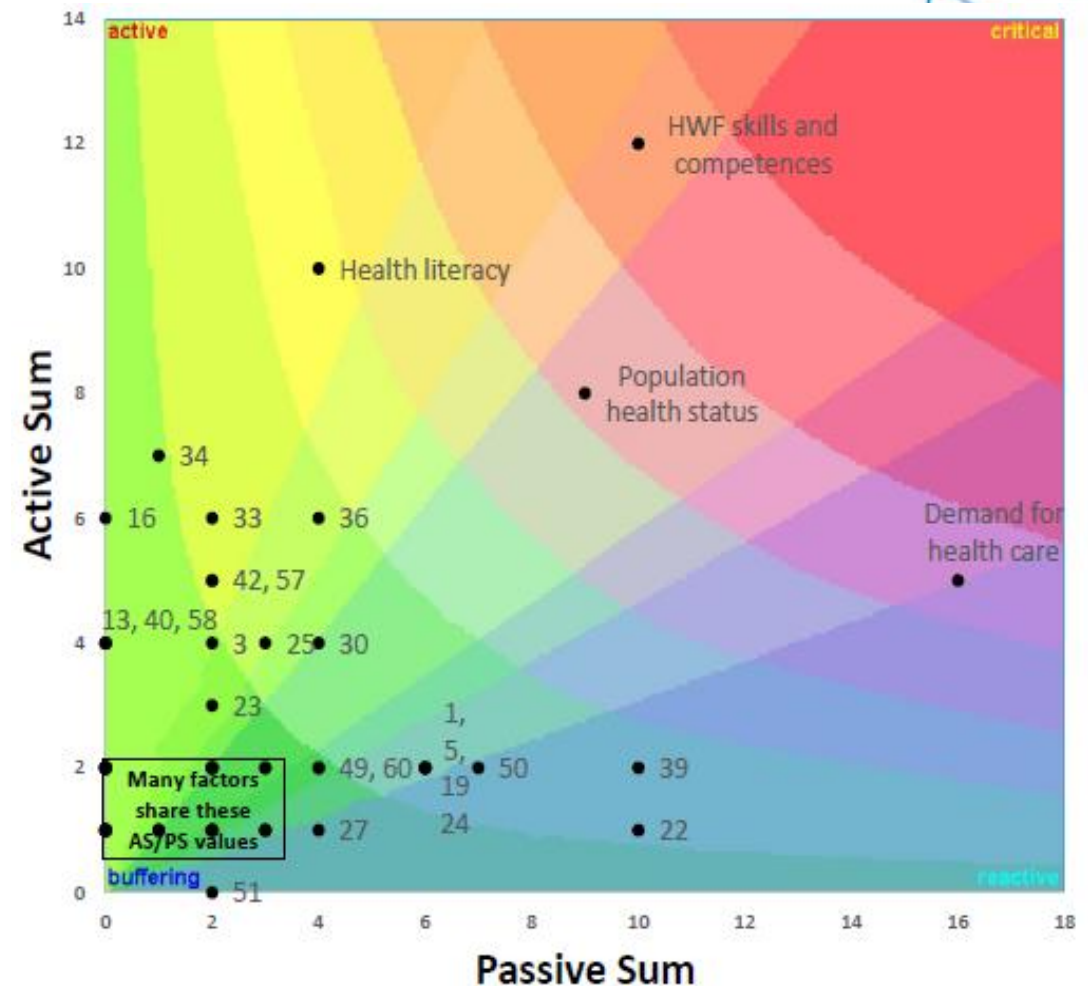
56 interviews, 264 drivers, over 6000 data items coded, visualised and processed as part of the work.

Methodology

The system map may be further analysed to build an understanding of the system's characteristics.

The variables identified in the system map can be allocated in relation to one of four key roles – active, reactive, buffering and critical (Vester, 2012).

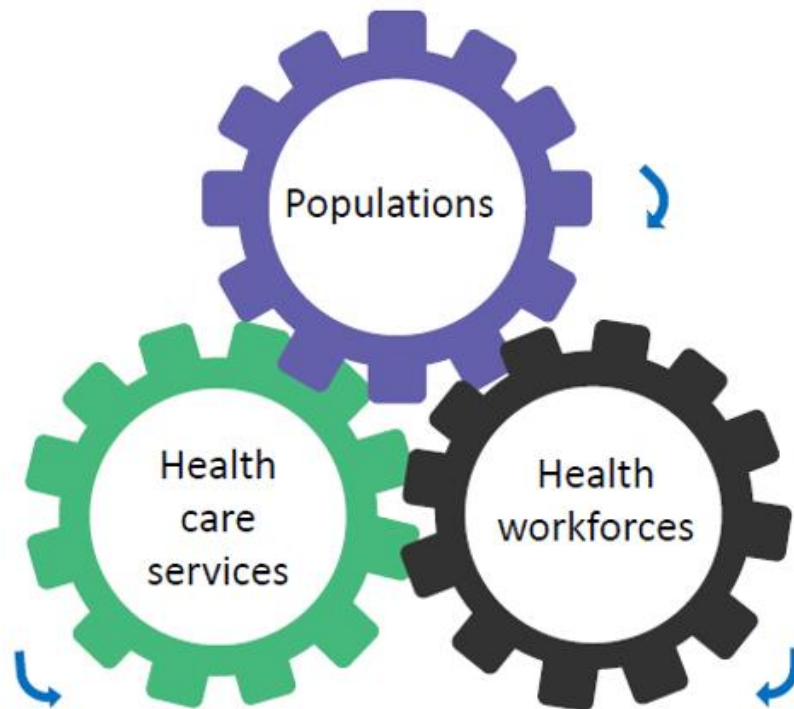
The matrix displays the variable by influence and therefore their role in the system, showing that factors outside of current conceptions of workforce planning, such as 'health literacy', have important active effects.



Future skills and competences - report and briefs

JA HWF DELIVERABLE 062

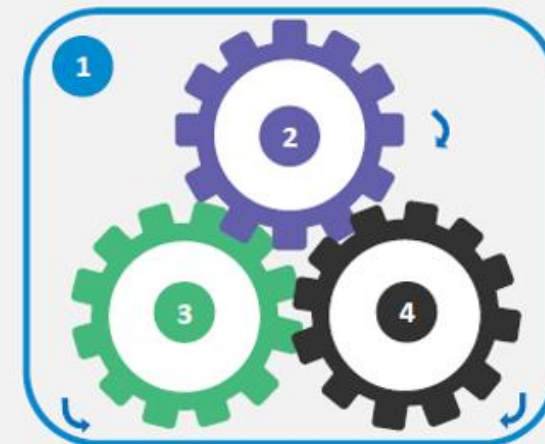
To simplify the complex system described in the report, drivers of change are considered in terms of one of three inter-related areas (as below), where change in one area causes changes in the others.



JA HWF HORIZON SCANNING BRIEFINGS

These briefings summarise the information contained in the longer report for a wider audience.

- 1 **Horizon scanning and workforce planning**
- 2 **Populations**
- 3 **Health care services**
- 4 **Health workforces**



High-level drivers of change identified out to 2035

Populations	Health care services	Health workforces
<ul style="list-style-type: none">▶ Population structure▶ Long term care and availability of unpaid carers▶ Types and distribution of health conditions▶ Multimorbidity▶ Health inequalities▶ Health literacy▶ Patient mobility	<ul style="list-style-type: none">▶ Health care expenditures▶ Health IT and health services▶ Genomics and precision medicine▶ Location of care by setting▶ Roles and decision rights▶ Regulation	<ul style="list-style-type: none">▶ Ageing health workforce▶ Multi-professional education and adaptation of competences▶ Health IT and health workforces▶ Skill mix▶ Health workforce mobility

...which have implications to skills and competences

Populations

Skills and competence implications

- ▶ **Prevention** – ‘the ability to reduce the instance or incidence of ill health and social health’ (CfWI, 2014).
- ▶ **Coaching and health promotion** – ‘engaging and empowering individuals and communities to engage in healthy behaviours, and make changes that reduce the risk of developing chronic diseases and other morbidities’ (WHO, 2015).
- ▶ **Multi-disciplinary team working** that includes a range of ‘different professional groups, deliver[ing] higher quality patient care and implement[ing] more innovations in patient care’ (Borrill et al, 2013).

Examples of possible impacts to the workforce as shared by respondents

- ▶ **Nurses** as well as health and care professions are likely to require an increased breadth of clinical and caring competence for increasingly prevalent diseases such as Alzheimer’s and other long term conditions in the population.
- ▶ **Dentists** may require top-up education and continuing professional development in geriatric dentistry or gerodontology in order to better provide for the needs of an increasingly older population as well as wider health promotion and preventative skillsets for the young and middle age bands.

Health care services

Skills and competence implications

- ▶ **Information interpretation skills** resulting from developments in eHealth may increasingly have wide ranging impacts on patients, the workforce and health systems (EFN, 2014).
- ▶ An awareness of, and detailed **genetic assessment and treatment skills**, will be an important for the workforces involved in assessment, diagnosis and treatment. The scope of workforces may also expand to new genetic advisory and therapy health professionals as part of multi-disciplinary teams.

Examples of possible impacts to the workforce as shared by respondents

- ▶ **All workforces** may see telehealth enhance roles, especially community-based assistant practitioners, GPs and pharmacists who may work together with patients in hub and spoke models respectively.
- ▶ **All health professionals** will have to possess flexible healthcare skills (or new roles may be needed) to allow them to enter and exit multiple teams as required.

Health care workforce

Skills and competence implications

- ▶ **Resilience** – The health workforce faces many changes ahead driving increases in resilience and coping skills. Changes in health systems, populations, patient expectations, technologies and innovations over the next 20 years will drive increases
- ▶ **Regulatory awareness and revalidation skills** – Health care professionals working in the EU face differing regulatory and re-certification changes as revalidation becomes more prevalent in Europe's health systems
- ▶ **Systems thinking and workforce planning skills and competence** will be areas of increased demand for the future. The interconnectedness of how health systems operate, their complexity and how they interact have implications for the achievement of equitable health outcomes (Adam, 2012).

Examples of possible impacts to the workforce as shared by respondents

- ▶ For **all workforces** there is a risk of fewer professionals in the future due to poor working conditions, pressures and restrictions on working time that can impact the time professionals have to gain experience to gain and keep their competence.
- ▶ **Midwives** are affected in some member states by societal trends towards individual responsibilities in insurance and finances. High insurance premiums for midwives significantly reduce income and will reduce the amount of service they choose to provide.

Summary of messages

- ▶ The work shares the methods used to conduct horizon scanning and provides tools – such as a system map to understand the dynamic nature of future change – which can be adapted to conduct and improve workforce planning in national-specific contexts.
- ▶ The report describes the variables and the relationships involved in workforce systems, highlighting the drivers of change to populations, health care services and health workforces. This qualitative understanding is best combined with quantitative modelling in national-specific contexts to project the relative size and uncertainty of workforce supply and demand pressures.
- ▶ The future of workforce planning must include multi-professional projections which effectively inform decision making by linking to appropriate policy decisions and combining qualitative and quantitative approaches.

Report and briefs

DELIVERABLE D62 – Version 5
 FUTURE SKILLS AND COMPETENCES OF THE HEALTH WORKFORCE
 WP6. Centre for Workforce Intelligence, United Kingdom

WP6
 Future skills and competences of the health workforce
 D062

Joint Action Health Workforce Planning and Forecasting

Version/Status	Last updated	Owners
Version 01	07.09.2015	Centre for Workforce Intelligence (to WP6 partners)
Version 02	18.05.2015	Centre for Workforce Intelligence (to WP6 partners)
Version 03	11.06.2015	Centre for Workforce Intelligence (to EC and PGH)
Version 04	27.09.2015	Centre for Workforce Intelligence (to WP6 partners)
Version 05	06.11.2015	Centre for Workforce Intelligence (to JA Executive Board)
Version 06		

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Page 1

HORIZON SCANNING BRIEF 1 - HORIZON SCANNING AND FUTURE WORKFORCE PLANNING IN EUROPE

HORIZON SCANNING BRIEFING 1

Horizon scanning and future workforce planning in Europe

Horizon scanning for the Joint Action on Health Workforce Planning and Forecasting has carried out qualitative research into the driving forces and inter-relationships of factors influencing the future skills and competences of the health workforce in the European Union.

This series of briefings are aimed at workforce planners and policy makers across Europe to share the results of the project, their potential effects and to advocate for an increased use of such approaches to consider multiple features as part of health workforce planning.

Key issues at a glance

- Health care workforces are involved in a wide range of essential activities, such as preventing ill-health, treating and caring for populations. These activities take place within a broader system of health care workforce skills and competences, where the responsibilities to deliver health care is associated with different professional groups.
- To better understand the future skills required from health workforces, workforce planning needs to take into account the driving forces causing change and understand their potential effects across individual and multiple health workforces.
- It is prudent to increase the focus on workforce planning at multiple levels (national-specific and supra-national) to better understand the current system and its dynamics through techniques such as horizon scanning and simulation methods. This would enable further anticipation of future developments and the identification of appropriate interventions.
- Factors may act over different timescales and combine to have large effects on the health workforce. Longer-term effects such as the demand for professional, long-term care or the skills required to address long-term conditions may combine with effects which may impact over shorter time-scales such as workforce mobility or changes in health information technology. At national and supra-national levels we must aim to be better informed, and therefore better prepared, about how factors can combine to create risks or opportunities within our health systems in the future.
- These briefings and the associated report aim to increase our collective knowledge of the factors and forces which will drive changes to the skills and competences required from health workforces over the next 20 years. This qualitative investigation should be combined with quantitative approaches in future to benefit from both an in-depth understanding of the workforce system and numerical comparisons of size and uncertainty. This type of approach will require the involvement of experts from multiple disciplines.

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HORIZON SCANNING BRIEF 2 - HORIZON SCANNING BRIEFING 2

HORIZON SCANNING BRIEFING 2

Drivers of change to the skills and competences of the future health workforce in Europe Populations

Horizon scanning for the Joint Action on Health Workforce Planning and Forecasting has carried out qualitative research into the driving forces and inter-relationships influencing the future skills and competences of the health workforce in the European Union.

This briefing summarises the key drivers acting on populations and their potential skills and competence implications.

The key drivers at the EU-28 level include an ageing population with an increased life expectancy, increasing obesity, morbidity, increasing multimorbidity, increasing health inequalities and shifts in the distribution of health conditions across Europe (Barnes et al., 2012; van Goozen et al., 2012; WHO, 2013 & 2014).

Driving forces

Population size and age structure: Projecting the population for the European Union (EU) 28 countries to 2035 shows a change in the age-structure that is increasingly weighted towards the older age bands for each gender (Figure 1). The overall growth of the total population from 2015 to 2035 is projected as 2.3%, with those aged 65 and over comprising 19% of the population in 2015 and 25% in 2035 (CEW analysis of Eurostat, 2015).

These projections are important indicators of future health workforce demand (recognising impacts will vary by country and region) – paying particular reference to the types of health conditions that are currently prevalent in these higher age bands, and therefore the type of demand for health services which may be reasonably anticipated.

Figure 1: EU-28 Population structure 2015 and 2035 (Eurostat, 2015)

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HORIZON SCANNING BRIEF 3 - HORIZON SCANNING BRIEFING 3

HORIZON SCANNING BRIEFING 3

Drivers of change to the skills and competences of the future health workforce in Europe Health care services

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This briefing summarises the key drivers acting on health care services and their potential skills and competence implications.

Building on our understanding of the driving forces acting on populations and their skills and competence implications, this brief considers the drivers acting on health services.

The future of health services is important to consider from a health workforce planning perspective because it contributes to the context within which future health workforces will work.

Driving forces

Patient empowerment
 When populations interact with health care services there is a recognised trend of people engaging more information about their treatment, higher standards of care, more involvement in decisions and access to the latest treatments (Economist Intelligence Unit, 2009).

Developments in patient empowerment, where people gain control over the decisions affecting their health (WHO, 1998) may continue to have effects at all levels of a health system. As the macro level empowered patients may increasingly determine the goals, standards and structures of health care (Aggarwal and Berman, 2007) whilst at the micro level, empowered patients may increasingly act as self-determining agents with control over their own health care to achieve optimal well-being (Bogazzi, 2014).

Health care expenditures
 This is important to consider as a factor related to the current and future activity of health care services.

The historic trend in health care expenditure has been for it to increase in absolute terms and also relative to gross national product in high- and middle-income countries (Inouye et al., 2012) – although the effects of the economic crisis may have altered that relationship, at least in the short term, for some European Union member states.

Importantly, new health care technologies – defined as the drugs (pharmaceuticals and vaccines), medical equipment, health care procedures, supportive systems, and the administrative systems that tie all these disparate elements together (Dubzák and Fzová, 2010) – are considered to be the main components of health

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HORIZON SCANNING BRIEF 4 - HORIZON SCANNING BRIEFING 4

HORIZON SCANNING BRIEFING 4

Drivers of change to the skills and competences of the future health workforce in Europe Health workforces

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This briefing summarises the key drivers acting on health workforces and their potential skills and competence implications.

Building on our understanding of the driving forces acting on health care services and their skills and competence implications, this brief considers the drivers acting on health workforces.

The main drivers acting on this part of the system include an ageing health workforce, potential changes to education and training, health IT, skill mix and workforce mobility.

Driving forces

Ageing workforce
 The health workforce in the EU shares the characteristics of the population from which it is drawn. As a change in population structure towards the older age bands in the overall population also presents the challenge of an ageing health workforce.

Considering that a large proportion of the workforce of 2035 are already within the system, also highlights the requirement to invest in and update the skills and competences of the existing workforce.

Multi-professional education
 Central to considerations of the future for both healthcare services and health workforces is the extent to which disruptive technologies (European Commission, 2015), demand pressures or other factors cause substantial changes in the organisation of services and workforces and therefore the ways that they can be approached.

Large or even paradigm shifts may be plausible in health care within a twenty year timeframe which would alter the way that supply and demand pressures could be met and the types of policy levers which would be available to workforce planners to consider supply and demand issues.

A workforce example of the type of large shift which would result in changes to workforce planning analysis and projections are proposals towards multi-professional post-secondary education and the adaptation of competences to specific contexts as proposed by the Lancet's Global Independent Commission on Education of Health Professionals for the 21st Century (2012).

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Will be available at www.healthworkforce.eu in 2016



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Questions welcomed.

