

MEDICAL AND NURSING EDUCATION AND TRAINING CAPACITIES: WHAT'S HAPPENING WITH NUMERUS CLAUSUS POLICIES?

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Meeting of the Expert Group on European Health Workforce





- 1 Context and aims of the project
- 2 Scope and methodology
- 3 Preliminary findings on education trends

Medicine

Nursing

4 Preliminary findings on post-graduate training trends

Generalists versus Specialists

Nurse practitioners

5 Conclusions and recommendations



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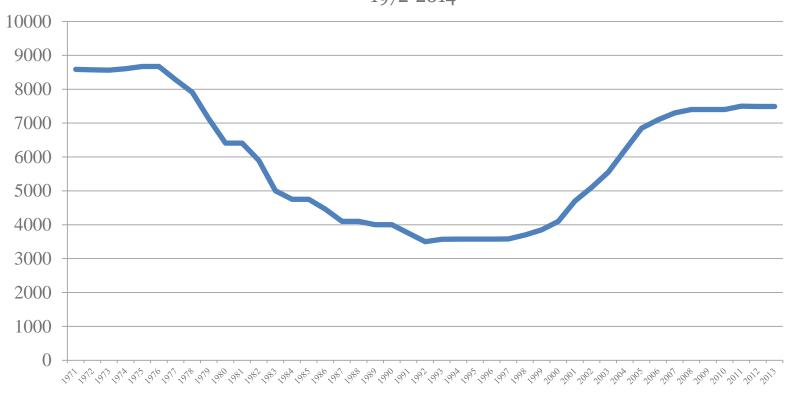
Context and aims of the project

- Concerns about current or future shortages of doctors and nurses.
- Adjustments to domestic medical and nursing education and training capacities is one of the main policy tools to address shortages, although the effect takes time.
- Research questions:
 - Has there been recent changes in *numerus clausus* policies related to admissions in medical and nursing education programmes?
 - Has there been recent changes in post-graduate training places in medicine (general medicine versus specialisation) and nursing (e.g. development of master's degree programmes for nurse practitioners)?



History of *numerus clausus* policies Example of France

Evolution of the *numerus clausus* for medical education in France, 1972-2014



Source: ONDPS 2015



- **Scope and methodology**



Scope and methodology

Scope

EU and other OECD member countries.

Timeline covering 2000 to 2013 (or nearest years).

Methodology

Collection of quantitative data through web research and approaching ministry representatives.

Collection of policy information through the 2012 OECD Health System Characteristics Survey, literature review and contact with ministry representatives.



- **Preliminary findings on education trends**

Medicine

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• Results from 2012 OECD Health Characteristics Survey.

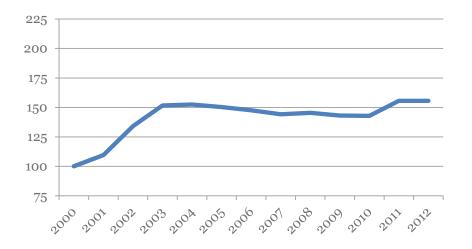
Number of OECD countries for which admissions to medical education	Increased	Remained Constant	Decreased
	21	10	O

Note: Refers to the period 2007 to 2012. Covers OECD countries in Europe and outside Europe.

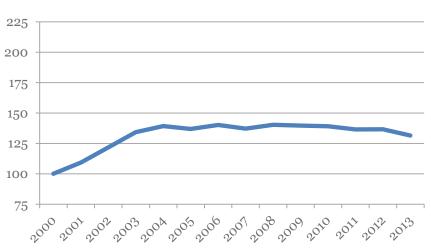


• Significant rise in admissions to medical education in the early 2000s, followed by stabilisation since then.

Admissions to medical education, Netherlands, 2000 - 2012



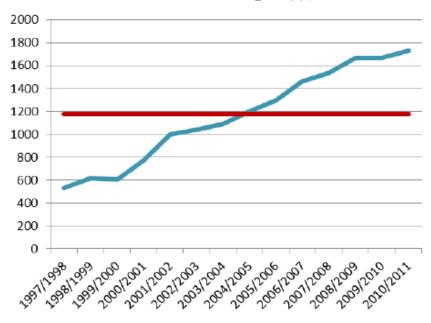
Admissions to medical education, United Kingdom, 2000-2013





• In some cases, the number of students have continued to rise up until very recently.

Actual admissions to medical education compared with the 2001 recommendations for *numerus clausus*, Portugal, 1997 to 2010

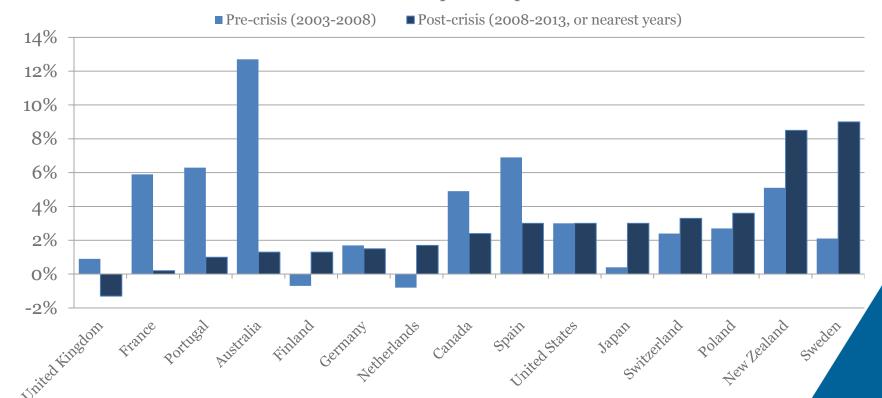


Source: National Medical Students Association (2011)



• Has the economic crisis had any effect on intakes in medical education?

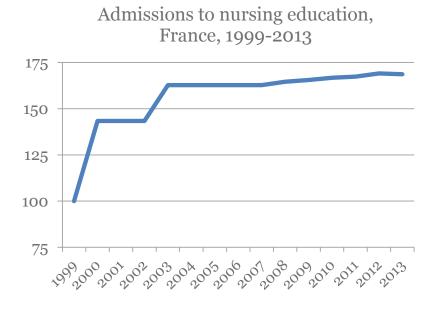
Average annual growth rates in admissions to medical education, Selected countries, pre- and post-crisis

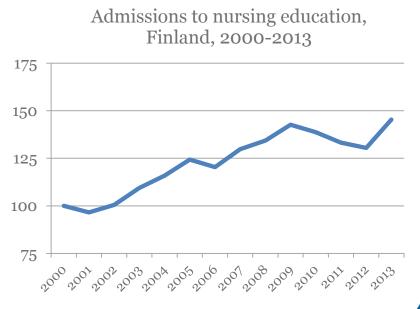




Preliminary findings: nursing

• In many European countries, admissions to nursing education has been rising.



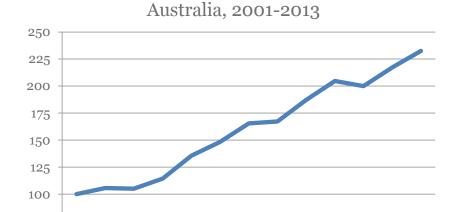




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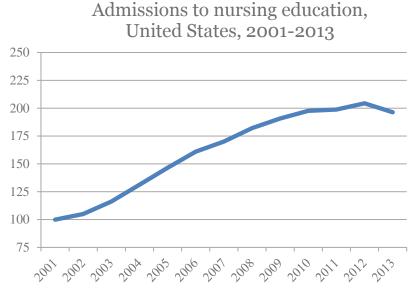
Preliminary findings: nursing

• In some non-European countries, the growth has been steady and quicker.



2001 2002 2003 2004 2005 2006 2001 2008 2008 2010 2011 2012 2013

Admissions to nursing education,





Preliminary findings: nursing

• The case in the United States: from *projected shortages* to *projected surpluses* of nurses.

In 2004: US Department of Health and Human Services **projected a shortage** of almost one million registered nurses by 2020.

In 2014: US Department of Health and Human Services **projected a surplus** of 340 000 registered nurses, since annual training rates have doubled and retention rates have increased.

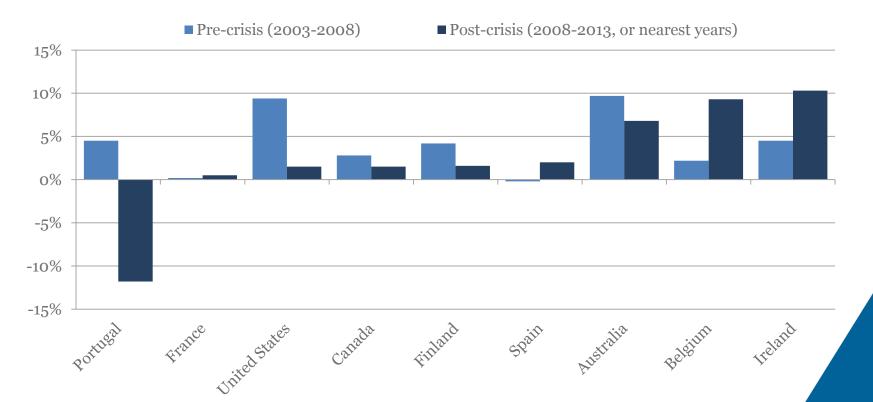
Source: US Department of Health and Human Services (2014), The Future of the Nursing Workforce, National and State Level Projections 2012 -2025



Preliminary findings: nursing

• Has the economic crisis had any effect on intakes in nursing education?

Average annual growth rates in admissions to nursing education, Selected countries, pre- and post-crisis





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 - **Nurse practitioners**
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Preliminary findings: generalists vs specialists

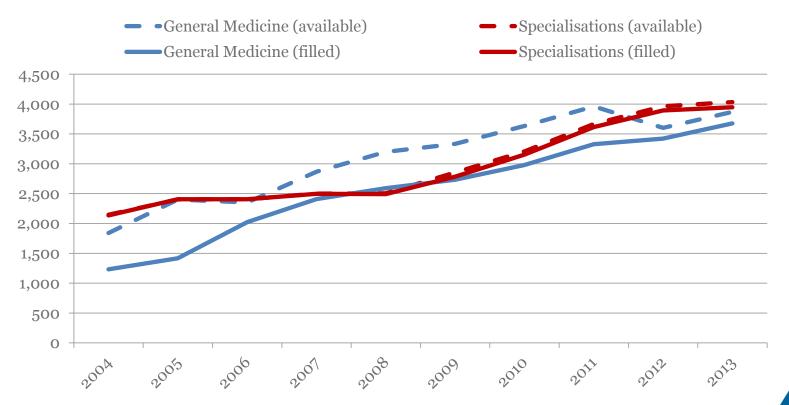
- Many EU countries are trying to adjust the mix of post-graduate training places.
- Some factors influencing the choice of post-graduate training specialisation:
 - Number of places available
 - Length of training period
 - Employment and remuneration prospects



Preliminary findings: generalists vs specialists

• Some countries have made efforts to increase their training places in general medicine.



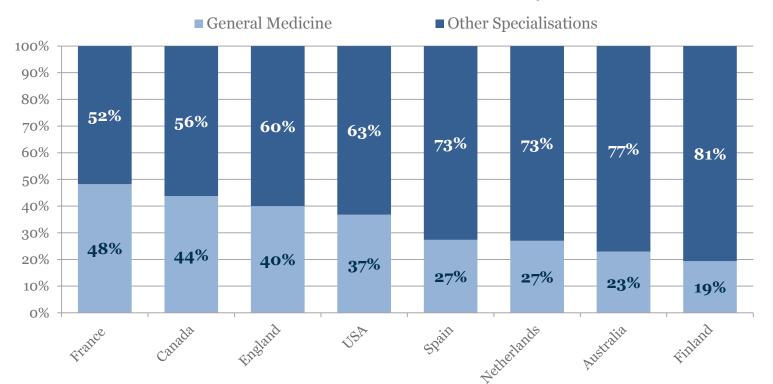




Preliminary findings: generalists vs specialists

• Countries show a different balance in the mix between students in general medicine and other medical specialisations.

Share of students admitted in general medicine and other specialisations, selected countries, 2013 (or nearest year)





Preliminary findings: nurse practitioners

- Many countries are seeking to expand the role of nurses to respond to a growing demand for health care while containing cost.
- This study focus on the introduction or expansion of education and training programmes for nurse practitioners (NPs).

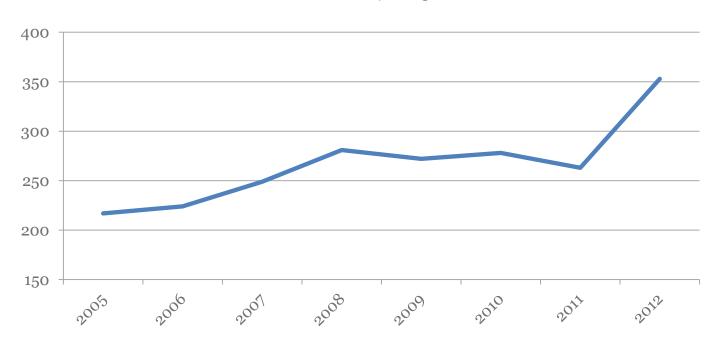
- NPs were first introduced in the US in the mid 1960s to respond to growing demand for care in areas underserved.
- NP programmes have expanded since then in several European countries.



Preliminary findings: nurse practitioners

• The number of students admitted to NP programmes in the Netherlands has been rising.

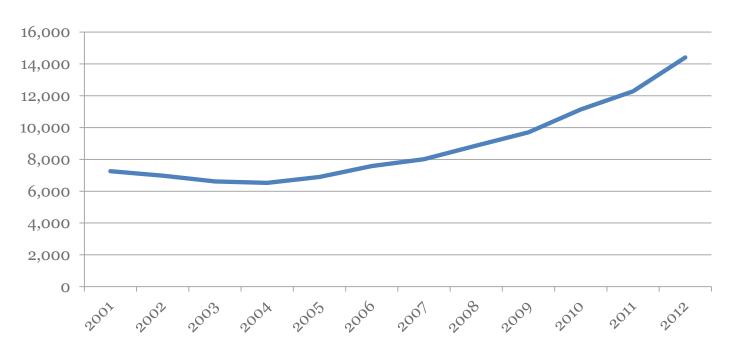
Number of students admitted to NP programmes, Netherlands, 2005-2012



Preliminary findings: nurse practitioners

Similar trend in the United States.

Number of students graduating from NP programmes, United States, 2001 – 2012





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Conclusions and recommendations

There is a need to **strengthen governance and decision-making** on *numerus clausus* policies.

- Numerus clausus policies need to be based on **better health** workforce data and planning models.
- Health workforce planning is **not an exact science** and needs regular updating.
- Health workforce projections should **help avoid a "yo-yo" approach** to student intakes and entry into medical and nursing occupations.
- Supply-side assessments need to focus more on changing **retention** and **retirement patterns**.



Expected outcomes from the project

Synthesis report

• Summarizing trends in medical and nursing education and postgraduate training programmes, for a set of EU and other OECD countries for which data is available.

Country notes

• 3-5 page individual country notes describing in further detail medical and nursing education and post-graduate training programmes, for all countries with sufficient information.

To be released in the fall 2015



For more information

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