Workshop on improving the generation and use of HRH data in South-East Asia Region: the role of National Health Workforce Accounts
Summary Report
20-22 September 2017, WHO SEARO, New Delhi, India

Background
Universal Health Coverage (UHC) cannot be achieved without health workers. Many SEAR countries have HRH challenges such as shortage and unequal distribution. One of the findings from the first review of the Decade of Strengthening HRH 2015-2024 in 2016 was the lack of data and the need for agreed indicators to monitor the effect of HRH strategies to strengthen the health workforce. The Global HRH Strategy was launched in 2016 and National Health Workforce Accounts (NHWA) has been developed that can help to improve HRH data.

Officials from 9 SEAR countries came together for this workshop to discuss improving the generation and use of HRH data as well as HRH information systems. The role of NHWA in improving HRH data and indicators to monitor the progress was part of this discussion.

Overview of Programme
Day 1: Setting the scene: where are we now?
- What are the challenges on HRH data and HRH information system in countries?
- The potential for NHWA in SEAR: how can they help countries to improve HRH data?
- What has been done so far in SEAR countries to improve HRH data? What are the challenges in the implementation of NHWA?

Day 2: What are we going to monitor and how?
- What HRH indicators to monitor?
- Mapping out HRH data sources
- Reporting and visualization of HRH data: How can the NHWA online platform help countries?
- Ways to support improvement in HRH data in SEAR countries

Day 3: What are the next steps?
- Next steps for improving the generation and use of HRH data in SEAR
- Agreeing next steps for reporting on progress of the Decade of Strengthening HRH in SEAR
- Preliminary analysis of HRH units/governance in SEAR: half day discussion

Challenges in the generation and use of HRH data and HRH information system in SEAR countries
Data availability: data on distribution and composition of health workers is difficult to obtain for some types of health workers. Also reliable data from private sector is scarce in all SEAR countries.

Fragmentation of HRH Information Systems: multiple HRH data sources in countries as well as multiple HRH Information Systems exist within and beyond Ministry of Health in many countries, and those are not always interoperable.

HRH unit/governance: urgent need for an HRH unit/cell as a core function for strategic coordination in determining and implementing HRH policies in most of the SEAR countries.

Utilization of HRH data for decision making: Many countries are struggling to engage decision/policy makers to use HRH data to improve policy planning.

Workshop objectives
1. Review the capacity of current HRH Information Systems to meet current national HRH data needs, in SEAR countries.
2. Orient all SEAR countries on National Health Workforce Accounts (NHWA) and get feedback on associated tools and guidelines, and experience with implementation.
3. Prepare the second round of reporting on the Decade of Strengthening HRH in SEAR, by reviewing priority HRH indicators, and providing inputs into the online reporting tool for use in SEAR.
4. Agree on next steps for strengthening HRH data in SEAR.

Data sources to obtain the best possible data
- Common issues of lack of interoperability between relevant systems, needs intersectoral approach.
- Choice of data source depends on country’s context. Countries to identify best sources from the aspects of availability, timeliness, completeness and quality (methods and coverage).

Ministry of Health information systems: personnel departments typically have a database of the public health workforce, but often it is incomplete or not up to date.

Civil service information systems: Disaggregated data is available in some countries, however, rarely covers data in private sector.

Professional council/association: Can cover both public and private sectors and unemployment. Existence of council/association depends on country and profession.

Household survey/census: Collected using rigorous methods and high coverage in census, however, costly and not always timely available.
National Health Workforce Accounts (NHWA) is an approach that can help SEAR countries to improve generation and use of HRH data. 

**Principles:** NHWA can be used to progressively improve the quality, availability and use of health workforce data and evidence to support achievement of UHC, SDGs and other health goals.

**Scope:** NHWA consists of 10 modules or “thematic areas” covering all aspects of the health workforce labour market dynamics (education, demand and supply of HRH). There are 78 indicators which can be used as a reference by SEAR countries. A subset of these have been identified for monitoring the Global Health Workforce Strategy.

**Guidelines and reporting platform:** Handbook provides standardized methods to produce quality and comparable data. A set of indicators helps to answer the policy questions and supports evidence-based decision making. An online platform enables countries to visualise their own data both at one time point and in longitudinal trends.

**Agreed indicators to monitor progress on the Decade of HRH in SEAR**

<table>
<thead>
<tr>
<th>No.</th>
<th>NHWA Indicator</th>
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<tbody>
<tr>
<td>1</td>
<td>Health worker density and distribution</td>
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<td>2</td>
<td>Health worker density</td>
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<td>3</td>
<td>Health worker density at subnational level</td>
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<td>4</td>
<td>Health worker distribution by age group</td>
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<td>5</td>
<td>Female health workforce</td>
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<td>6</td>
<td>Health professional education</td>
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<td>7</td>
<td>Graduation rate from education and training programmes</td>
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<td>8</td>
<td>Accreditation mechanisms for education and training institutions and their programmes</td>
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<td>9</td>
<td>Continuing professional development</td>
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<tr>
<td>10</td>
<td>Retention of health workers</td>
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<td>11</td>
<td>Vacancy rate</td>
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<tr>
<td>12</td>
<td>Share of foreign-born health workers</td>
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<tr>
<td>13</td>
<td>Share of foreign-trained health workers</td>
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<tr>
<td>14</td>
<td>HRH information system</td>
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<tr>
<td>15</td>
<td>Mechanisms to coordinate and intersectoral health workforce agenda</td>
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<td>16</td>
<td>Central health workforce unit</td>
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<td>17</td>
<td>Health workforce planning processes</td>
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<td>18</td>
<td>HRHIS for reporting on outputs from education and training institutions</td>
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<td>19</td>
<td>HRHIS for tracking the number of entrants to the labour market</td>
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<td>20</td>
<td>HRHIS for tracking the number of active stock on the labour market</td>
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<tr>
<td>21</td>
<td>HRHIS for tracking the number of exits from the labour market</td>
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<tr>
<td>22</td>
<td>HRHIS for producing the geocoded location of health facilities</td>
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* refers to NHWA handbook

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<tr>
<th>Additional indicators identified for monitoring Decade of Strengthening HRH in SEAR</th>
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**Conclusions**
- The need for maintaining political momentum behind strengthening HRH was emphasized. New tools and guidelines are available.
- A key driver of better data is better understanding and use of data by decision makers. The key HRH policy questions should be used to guide data improvement.
- Each country should build on their existing HRH Information Systems. NHWA can be used to provide a set of principles, guidelines, indicators and tools to support countries for improving HRH data.
- A set of 14 indicators and data sources for each indicator to be used in monitoring progress on the Decade of Strengthening HRH were agreed.
- The purpose and need for HRH units was recognized. Analysis of the current situation will be completed in the next 3-4 months.

**Immediate next steps**
Each country identified 2-3 practical steps, in all cases briefing all relevant stakeholders on the outcomes of this workshop.

**Medium term next steps**

**January-March 2018** Survey on the Decade of Strengthening HRH for the 2nd review: Countries to report the set of 14 indicators.

**April 2018** Regional Technical Consultation on the 2nd review of progress on the Decade of Strengthening HRH
- The depth review of progress on the Decade of Strengthening HRH including transformative education and rural retention.
- Findings from the analysis of the rapid survey of HRH units/HRH governance mechanisms in SEAR.

**April-June 2018** Finalization of progress report on the Decade of Strengthening HRH

**September 2018** 71st session of the Regional Committee for South-East Asia
- Ministers review progress on the Decade of Strengthening HRH
- SEARO publication on progress on the Decade of Strengthening HRH

**October 2018** WHO Executive Board at WHO headquarters: Progress report on Global HRH Strategy

**May 2018** Seventy-second World Health Assembly at WHO headquarters: Progress report on Global HRH Strategy