Health Worker Information Systems

How can countries gather and use health workforce data to increase access to care?

What does a country need in order to address its shortage of health workers? For one thing, information is key. To make the best use of current resources and plan for the future, a country needs to know how many health workers it has, what their qualifications and skills are, where they are posted, and how many new workers are likely to join them.

Many low-resource countries face daunting obstacles to meeting the health care needs of their people. Without current, accurate data on health workers, countries cannot ensure that the right provider is in the right place with the right skills.

What does this mean?

The absence of accurate and readily available health workforce information is a major impediment to effective planning and decision-making. Without this information, countries:

- May not know if enough health workers are being trained to meet the projected need and how policy changes might affect the workforce
- Cannot determine if students are discontinuing preservice education before entering the workforce, or if health workers have the training necessary for their jobs
- May be unsure if health workers are meeting continuing education requirements for licensure
- Will have difficulty ensuring that health workers are optimally deployed in locations to meet national health priorities, or knowing how many workers need to be recruited to fill vacancies
- Will not know how many health workers are leaving the workforce or what initiatives to retain them will be effective.

What can be done?

- A strong human resources information system (HRIS) helps health sector leaders quickly answer the key policy questions affecting health care service delivery. The strength of an HRIS does not depend on technology but on its ability to generate information that is accurate, timely, and adaptable to address new health workforce issues.
- When quality data and effective reporting are in place, leaders can better understand the current workforce and plan for recruitment, training, and retention.
- HRIS data can be used to inform and cost strategic plans, maintain up-to-date professional registries, remove workers from the payroll when they are no longer employed, address recruitment bottlenecks, support improved service delivery, and more.
Key considerations

- An HRIS should be designed to meet country-specific needs and be adaptable to meet emerging needs after they are identified.
- For an HRIS to be successful and sustainable, country ownership, data use, and capacity-building must be priorities.

- Capacity-building is often needed for developing strong data collection systems, using data for planning and management, and providing technical support for the system and its infrastructure.
- Data frequently exist in small datasets or paper files not necessarily accessible by all stakeholders. Convening HRIS stakeholders in the same room ensures that information is shared and helps them reach consensus for making good use of the data that do exist.
- Stakeholders should address data ownership, data sharing, and policy questions.
- An HRIS is part of a country's larger health information system and must be aligned, and ideally interoperable, with other systems.

CapacityPlus resources

- The iHRIS Suite of software is Open Source, which means that local developers can modify the code to suit their needs. The software can be downloaded for free and customized for local needs:
  - iHRIS Qualify tracks health worker training, certification, and licensure
  - iHRIS Manage maintains personnel deployment, performance, and attrition information
  - iHRIS Plan models long-term health workforce needs
  - iHRIS Retain costs retention strategies to be implemented at the district, regional, or national level.
- The HRIS Strengthening Toolkit, a collection of procedures and tools to facilitate applying the HRIS strengthening process and implementing the iHRIS software
- HRIS Strengthening website

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