Achieving HRH Commitments

Lessons Learned and Resources from CapacityPlus

CapacityPlus and USAID

Third Global Forum on HRH | November 9, 2013
USAID global project dedicated to human resources for health (HRH)


Led by IntraHealth International with Abt Associates, IMA World Health, Liverpool Associates in Tropical Health (LATH), Training Resources Group (TRG)

Leader in innovations and cost savings

Catalyze systems-wide change

www.capacityplus.org
Where We Work: 23 Countries

Angola
Botswana
DR Congo
Dominican Republic
Ethiopia
Ghana
Haiti
India
Kenya
Laos
Liberia
Malawi

Mali
Mozambique
Namibia
Nigeria
Peru
Rwanda
Senegal
South Africa
Tanzania
Uganda
Zimbabwe
Overview of Lightning Round
Policy
New National HRH Policy: Ghana

- Guiding HRH leadership & stakeholder engagement
- Developing hands-on skills: HRH policy, planning & analysis
- Strengthening country ownership and integration of HRH
Expanding Access in Rural Areas

Laos recruitment & retention policy

Compulsory 3-year rural service and incentive package for graduates of health professions

400 new health workers posted in one-third of country’s rural districts
Uganda: Using Data for Policymaking

Uganda increases health workforce budget by $20 million, invests in hiring 8,000 new health workers and doubling doctor salaries

Evidence-based planning using data from iHRIS, rapid retention survey, and special studies

Multi-stakeholder engagement

Advocacy
Leadership
Strengthening Stakeholder Leadership Groups

Evidence-based guidance and technical assistance supports effective coordinating mechanisms for diverse stakeholders

- Produces better HR data-sharing, informs policy choices, and ensures buy-in to plans and implementation
Uganda: Leadership and Management

Uganda is improving work climate to attract, retain, & motivate health workers through development of district leaders and managers.

Budget to implement local HRH plans

Financial incentives & improved infrastructure

Systematic supportive supervision
Gender Equality

In many countries women comprise > 75% of health workforce yet under-represented in leadership & management.

Women can face unequal opportunities for education and fair wages.

Resources

eLearning courses on gender in the workforce
Report on gender and preservice education
Online advocacy tools
Global Movement for Social Service Workforce

Landmark Cape Town conference

Social service workforce strengthening framework

Multi-country knowledge-sharing platform

Launch of Global Social Service Workforce Alliance

Country-level workforce mapping
World’s Largest Online HRH Library

Improving the quality of HRH knowledge

62,000 people from 172 countries
4,000 quality controlled resources
E-learning platform with 2,000 users
Human Resources Management
HR Management Assessment Approach

Guidance and resources for strengthening HR management systems and improving management of the health workforce.
iHRIS Open Source Health Workforce Information Systems

- **iHRIS Manage**: helps deploy and manage health workers
- **iHRIS Qualify**: registration and licensure
- **iHRIS Plan**: workforce planning and modeling
- **iHRIS Retain**: helps plan and cost retention interventions
- **iHRIS Train**: tracks preservice and in-service training

16 countries on 3 continents use iHRIS to support 675,000 health worker records for HRH decision-making
FBO HRH Policies Improve Work Environment

No advertising, no JD
“Eternal” probation
No contracts
Uncertain salary payments
Interrupted vacation
No appraisals
Unclear promotions
Demotivation, exodus

A change in FBO culture
HRH managers empowered
Fairer HRH actions
Fewer litigations
Improved safety
More HW, better distribution
More satisfied, less attrition
Better performance

NEW HRH POLICY
with tools and templates
Health Workforce Productivity Analysis and Improvement Toolkit

Measures how well inputs (health workers) are transformed into outputs (health services) to increase efficiency of service delivery.

Stage 1: Calculate & compare health worker productivity

Stage 2: Assess underlying causes of productivity problems

Stage 3: Identify potential productivity improvements

Stage 4: Monitor progress
We would like to hear from you.

What questions or comments do you have?
Education
Medical and Nursing Education Partnership Initiatives (MEPI & NEPI)

PEPFAR initiative

Targeted expertise for MEPI
Alumni tracking
eLearning
Community-based education

Needs assessments for NEPI
Capacity and costing assessments
Identifying best investments
Nigeria: Preservice Education Program

Scholarships
1,354 midwifery students
711 community health extension workers

Tutor training
60 tutors in LSS/IMCI from 19 institutions

Textbooks & equipment

Leadership network
Mali: Learning for Performance

A Guide & Toolkit for Health Worker Training and Education Programs

Approach used at Gao Nursing School with 350 students:

- National nursing exam success rate increased from 78% to 98%, compared to Bamako 30-40%
- 99% recruited by MOH and working in the North
- MOH adopted strategy at national level
mLearning: Spaced Education

Methodology
Spacing and testing effects
Proven to increase knowledge retention and change practice behavior

Pilot study in Ethiopia
Increased knowledge
High acceptability

Interactive voice response in Senegal
FP/RH refresher on simple mobile phones
Convenient, feasible, acceptable
Significant gains in knowledge of family planning side effects and misconceptions
Finance
Dominican Republic: Eliminating Ghost Workers

The Ministry of Health uncovers 10,000 “ghost workers” through payroll cleanup, saves US$7.7 million per year.
Open Source Saves Resources

Supporting 675,000 health worker records in iHRIS saves countries over $120 million in software licenses alone.

Open source community of 130 participants supports the software and local innovation.
Guiding Investments in Preservice Education

PEPFAR Initiative

Estimating unit cost to produce a graduate

Unit cost to institution and clinical practice sites

Cost constraints to scale up number/quality

New unit cost after applying actions to increase number/quality

Pilot in South Africa

Bachelor of Medicine and Surgery Program at Walter Sisulu University

Findings informed school’s response to government’s request to scale up production of graduates

Cost per category

- Faculty/Educators and Administrators: 90%
- Students: 4%
- Infrastructure: 4%
- Materials and equipment: 2%
Namibia: Health Workforce Planning & Transition

- Capacity-building
- Workforce assessment & absorption of health workers
- Workforce planning
- WISN (Workload Indicators of Staffing Need)
Partnership
Regional Partnership with PPD for HRH Advocacy

Network of African Parliamentarians on Committees of Health (NEAPACOH)

56 countries with 1.03 billion people

2013-2015 commitment to increase funding for HRH
Supply Chain Workforce

Each year billions of US dollars are spent procuring health commodities, yet one-third of the world’s population still lacks regular access to essential medicines.

People that Deliver

- Build global and national capacity to develop sustainable excellence in human resources for supply chain management

Situational Analysis in Dominican Republic and El Salvador

**Actions taken:** job descriptions, supervision manual, diploma course at NIPA, salary structures, supportive supervision training, motivation workshop, leadership training

Process and results used for **advocacy** to raise awareness of decision-makers
Moderated Q&A: Part 2

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The CapacityPlus Partnership

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Training Resources Group, Inc. (TRG)