

Health Workforce Impact Assessment Report Decade of Healthy Ageing (2020-2030) 146th Executive Board, February 2020

Purpose of the assessment:

Resolution WHA69.19 on the Global Strategy on Human Resources for Health: Workforce 2030, adopted by the 69th World Health Assembly in May 2016, requested the Director General to include an assessment of the health workforce implications of technical resolutions brought before WHO governing bodies (World Health Assembly and Regional Committees). This report presents the assessment results of the <u>Decade of Healthy Ageing (2020-2030)</u> (hereafter referred to as the Decade) which presents four action areas to improve the lives of older people, their families and communities.

Process of assessment:

Healthy Ageing has clear implications for the health and social workforce. A detailed examination was carried out with assessment results listed below:

Key points highlighted by the assessment:

- People-centred and integrated primary health care is the means for providing comprehensive, continuous and close to client care for older people. (See also the health workforce impact assessment of the Operational Framework: Primary health care: transforming vision into action).
- The successful implementation of older people-centred care relies on having sufficient competent health workers to deliver a range of interventions across the continuum of care (promotion, prevention, treatment, palliative and rehabilitative care) with the aim of improving the health and wellbeing of older adults and maintaining functional ability as long as possible.
- Integration between health and long-term care is essential to comprehensively meet the needs of older people, including support to activities of daily living.
- Health worker education and training would need to align to population health needs, addressing competencies to deliver quality people-centred integrated care for older people. Health workers will need to understand ageing and its implications; how to provide integrated older person-centred care; the roles of long term care and the importance of care coordination.

- Delivery of the full scope of services may require optimizing health workers' skill-mix. In some instances, this implies expanding scope of practice. It may also require the creation of new jobs such as care coordinators.
- Attitudes of health workers to older adults have been found to be more negative than the
 general population. A Global campaign to combat ageism will support both broader social
 change as well as work in line with the Global Strategy on Human Resources for Health:
 Workforce 2030 to better educate health workers about age and ageing. Confidence and
 trust in health workers is key if health needs are to be met.
- Formal and informal care givers provide care and support when older adults experience declines in capacity. The Decade calls for providing them the needed support, including training and incentives.
- Informal care givers are predominantly women, increasingly other older adults and migrants. The Decade calls for increasing the profile of care, support the development of a care economy and improve job opportunities and more stable employment status.
- International mobility and migration of health workers is accelerating in significant part due to demographic changes. The WHO Global Code of Practice on the International Recruitment of Health Personnel serves as the universal ethical standard for the international recruitment of health workers with focus on ensuring the rights of both health workers and the health systems from where they come.

Assessment statement: (A)¹ - A full assessment of possible impacts on health workforce was conducted, and it did not reveal any issue requiring consideration; the Decade of Healthy Ageing (2020-2030) can proceed as per normal governing bodies processes.

Access to further support on health workforce is available from the Working4Health Programme: http://working4health.org/

¹ (A) - No specific issue requiring consideration.

⁽B) - Some specific modifications to the strategy/resolution are required to adequately factor in health workforce implications and requirements.

⁽C) - The strategy/resolution has major workforce implications or requirements, which need to be factored in as part of the official process of consideration by Member States.