Theme: Workload Indicators for Staffing Need (WISN) methodology for health workforce planning and estimation

Rational

One of the health targets of the Sustainable Development Goals aims to substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States. The WHO vision talks of healthier populations where everyone lives healthy, productive lives, regardless of who they are or where they live. Health workforce is a crucial component of health services and health systems necessary to achieve Primary Health Care (PHC) and Universal Health Coverage (UHC). The Global Strategy on Human Resources for Health\(^1\): 2030 aims to reduce the inequities in health workforce distribution and improve employment. WHO strives to build country capacity to plan for the health workforce, which is essential to deliver the required health services. The health crisis situations due to natural disasters, Ebola and the ongoing COVID-19 all call for the importance of evidence-based health workforce planning.

Many countries continue to plan health workforce based on population ratios and outdated staffing norms. Health policy planners need to be equipped to make decisions on the recruitment and deployment of health workers at the primary, secondary and tertiary level health facilities, considering the evolving health delivery models and population demands. Effective and efficient planning can only be achieved with supportive data and evidence. The WHO Workload Indicators of Staffing Need (WISN)\(^2\) tool serves this very purpose to equip health managers with the data and evidence needed to plan and deploy the required health workforce with required skill mix in the required facilities. WISN methodology follows the principle of assessing the workloads of the health workers respective to population demands.

In 2010, WHO took the initiative to develop a computer application based on its original excel version developed in 1998. Since the launch of the automated WISN tool, and the multilingual version that followed, WISN has been applied and implemented in several countries across the globe.

Now a decade later, many countries across the world, have been using the WISN tool to serve in varying scopes. The WISN tool has been able to cater to varying needs and generate the evidence required to make policy decisions regarding adequate staffing, policies for task shifting, revising national staffing norms etc. The WISN implementation is complementary to the implementation of the National Health Workforce Accounts (NHWA) at national level.

In October 2019, WHO convened a first ever global level meeting of WISN experts including MoH HRH experts, regional and global consultants, colleagues from the 3 levels of WHO, partner agencies and academia. The country examples, deliberations of the WISN experts and the group discussions together generated a comprehensive and detailed account of the various success stories, best practices and challenges faced along with recommendations to address them. The group established a Thematic Working Group on WISN under the GHWN Data Hub\(^3\), to support WHO to carry forward the agenda. The group recognized the

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1. https://www.who.int/hrh/resources/globstrathrh-2030/en/
knowledge acquired and lessons learnt in implementing WISN in countries need to be share with the wider community.

Areas of interest
This theme will seek to expand the evidence base on implementation experiences of the WISN studies carried out in varying settings and the use of the WISN results to aid health workforce planning. Its findings will contribute to the ongoing efforts coordinated by the World Health Organization and its partners to build in-country WISN capacity and advocate for the need for evidence-based health workforce planning. The supplement invites paper on a range of topics related to application of the WHO Workload Indicators of Staffing Need (WISN) tool including but not limited to the following:

1. WISN for health workforce planning at national level
2. WISN for health workforce management at facility level
3. WISN results used for equitable distribution of health workforce
4. Using WISN to estimate the health workforce needs for specific health services, health epidemics etc
5. Lessons learnt and challenges faced in WISN implementation
6. Establishing and revising staffing norms using the WISN methodology
7. Health workforce information systems systematized to address WISN data elements
8. Institutionalizing WISN in health workforce policy and planning

Criteria for papers
The papers should discuss the findings from implementing the WHO Workload Indicators for Staffing Need (WISN) tool

Types of paper: original research

Length of the paper: not more than 4000 words

The editors invite papers from different countries across the world and varying experiences to broaden the knowledge base. Papers identifying concrete country experiences and lessons learned, with actionable recommendations of broader relevance, are particularly encouraged. Please refer to the Instructions for Authors, for details.

Full manuscripts should be submitted by 1 December 2020.

All papers will be subject to peer review. The editors hope to publish 15-20 papers in this supplement. The editors will screen and shortlist submitted manuscripts for consideration for the special supplement based on the quality of the submission, correspondence to the theme of the supplement, and areas of interest. The editors may also consider factors such as breadth of coverage of topics, approaches, and geography in shortlisting papers for the supplement.

For instructions on submission refer to the Submission Guide for Authors. Please ensure that you select “Workload Indicators for Staffing Need (WISN) methodology for health workforce planning and estimation” when asked to indicate the relevant section or category during the submission process. Please read Instructions for Authors carefully before submission.

For any queries, please contact Teena Kunjumen at kunjument@who.int

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4 https://www.who.int/hrh/resources/wisn_user_manual/en/