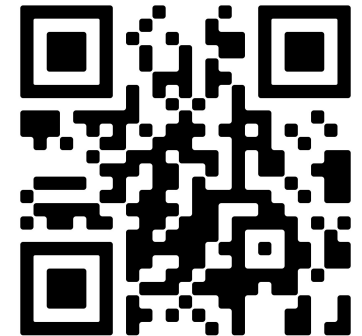


WHO Europe Regional report “Health and care workforce in Europe: time to act” Risultati principali



Il Rapporto

- Si tratta del primo rapporto che descrive la situazione del capitale umano nel comparto sanitario nella regione europea
- Focus su identificazione delle migliori policy e sulle risposte alle sfide correnti in termini di pianificazione delle risorse
- Fornisce **10 azioni pratiche per gli Stati Membri**
- Focus su sei professioni sanitarie per le quali possediamo molti dati: medici, infermieri, dentisti, ostetrici, farmacisti e fisioterapisti.



Le risorse umane nei sistemi sanitari nazionali: i dati



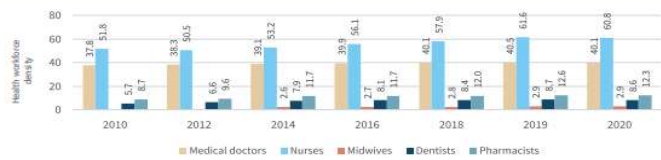
Italy

Human resources for health profile

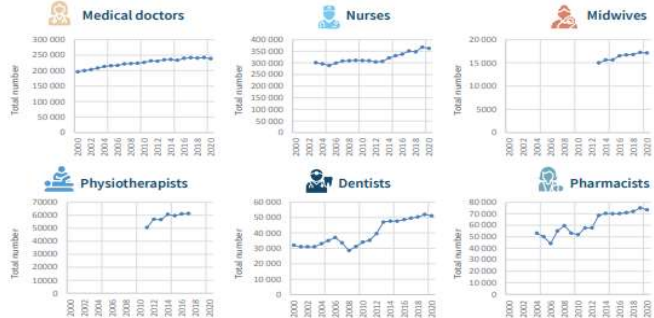
See pages 82–83 for data sources and technical notes



Health workforce density per 10 000 population



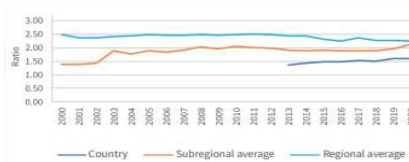
Health workforce trends (total number)



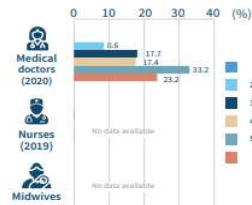
Composition by six professional categories covered in the report, percentage (latest year)



Ratio of nurses and midwives to medical doctors



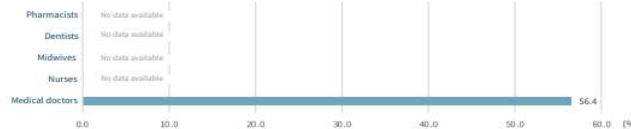
Health workforce distribution by age group, percentage



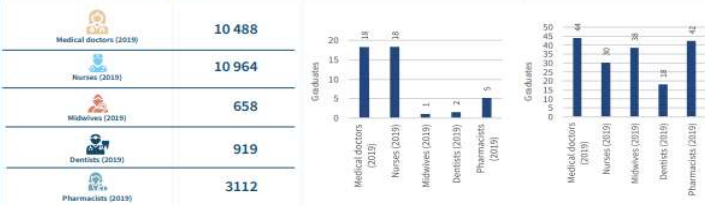
Health workforce distribution by sex, percentage



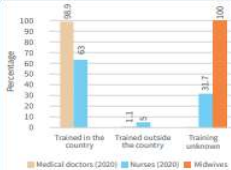
Percentage of workforce aged >55



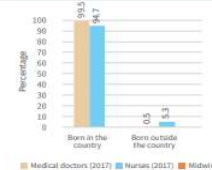
Professions, Annual graduates (total number), Graduates per year per 100 000 population, Graduates per year per 1000 practitioners



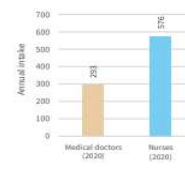
Country of training, percentage



Country of birth, percentage



Annual intake from other countries



Le sfide delle risorse umane nel comparto sanitario



I paesi europei devono affrontare diverse sfide, indipendentemente dalle loro caratteristiche socio-economiche:



- Carenza di personale
- Reclutamento insufficiente in servizi come PHC, LTC, Rehab e MH
- Difficoltà nell'attrarre gli operatori sanitari a lavorare in aree geografiche scarsamente servite
- Aumentare la mobilità interna e internazionale
- Affrontare il disallineamento delle competenze
- Mancanza di dati e informazioni per pianificare in modo efficace
- Investimenti insufficienti
- Organizzazione inefficiente del lavoro, sottoutilizzo degli strumenti sanitari digitali e limitata integrazione dei servizi
- Occupazione poco attrattiva, cattive condizioni di lavoro, mancata tutela della salute fisica e mentale degli operatori sanitari
- Mancanza di politiche attente al genere
- Governance e gestione inadeguate del HCWF



Buone pratiche nazionali

- 15 spunti di buone pratiche
- Mix di paesi:
 - regioni (Ireland- Kyrgyzstan)
 - Sviluppo sócio-economico (Belgium- North-Macedonia)
 - Dimensioni della popolazione (Malta-England)
 - Paesi messi in maggiore difficoltà dalla pandemia

Temi: istruzione e formazione, organizzazione del lavoro e delle prestazioni, creazione di un ambiente di lavoro atrattivo e sano, governance, pianificazione



Vignette 11.

Iceland: establishing a national council of staffing and education in health services

Iceland is an island country with a small population and its own language. Some parts are rural and hard to access during winter, which influences the challenges in ensuring adequate numbers and education for the HCWF.

Iceland's policy is to provide access to quality health services to all citizens in remote, rural and urban areas. To enable this, working groups for three health-care professions (general nurses, practice nurses and medical doctors) submitted reports to the Minister of Health in 2019 that presented proposals on how to improve staffing.

In May 2021, the Minister established a national council to tackle challenges in staffing and education in the health-care system. The council acts as a consultation forum to provide advice on HCWF education and employment priorities, including cross-government and stakeholder involvement.

The council comprises representatives from the ministries of education and children, and higher education, science and innovation, national health-care institutions, PHC, universities, the Icelandic Association of Local Authorities and the Directorate of Health. Among its key aims is improving connections between the education and training of HCWs and the identified priorities of employment and skills required.

Main tasks include:

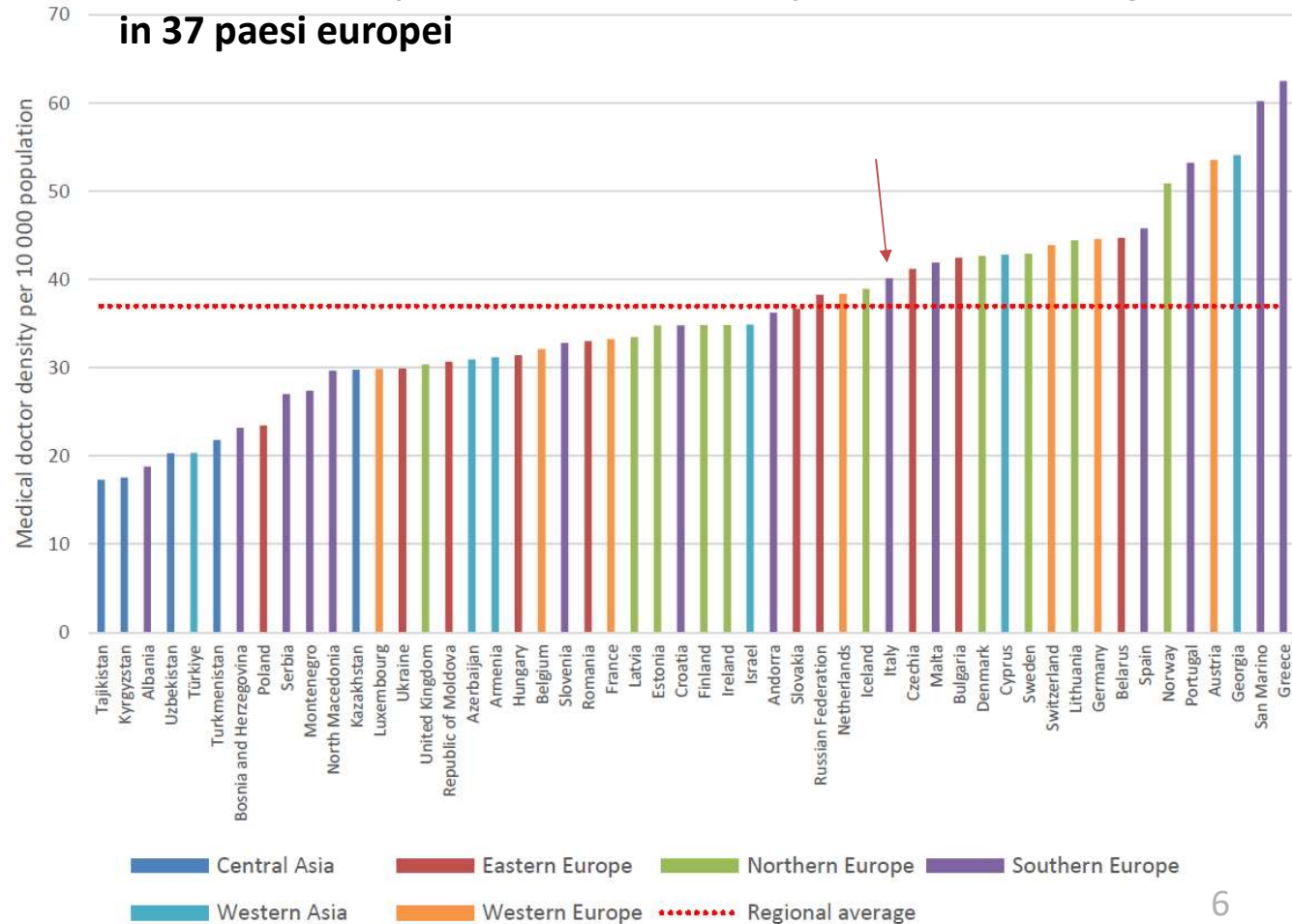
- building a stronger education system for HCWs, especially for specialist education and postgraduate training programmes;
- improving task-sharing or task-shifting between health professions to build stronger cooperation;
- placing greater emphasis on the self-sufficiency of the system;
- providing sufficient staffing in rural areas; and
- performing analytical work to profile the workforce and assess future needs.

The council meets twice monthly (one face-to-face and one virtual meeting). Other stakeholders are invited to participate when appropriate.

Disuguaglianze significative sono ancora presenti fra i paesi europei



Densità di medici per 10 mila abitanti rispetto alla media regionale in 37 paesi europei



La disponibilità di medici varia molto fra paesi: da 17.3 per 10 mila abitanti a 88.7 medici per 10 mila abitanti

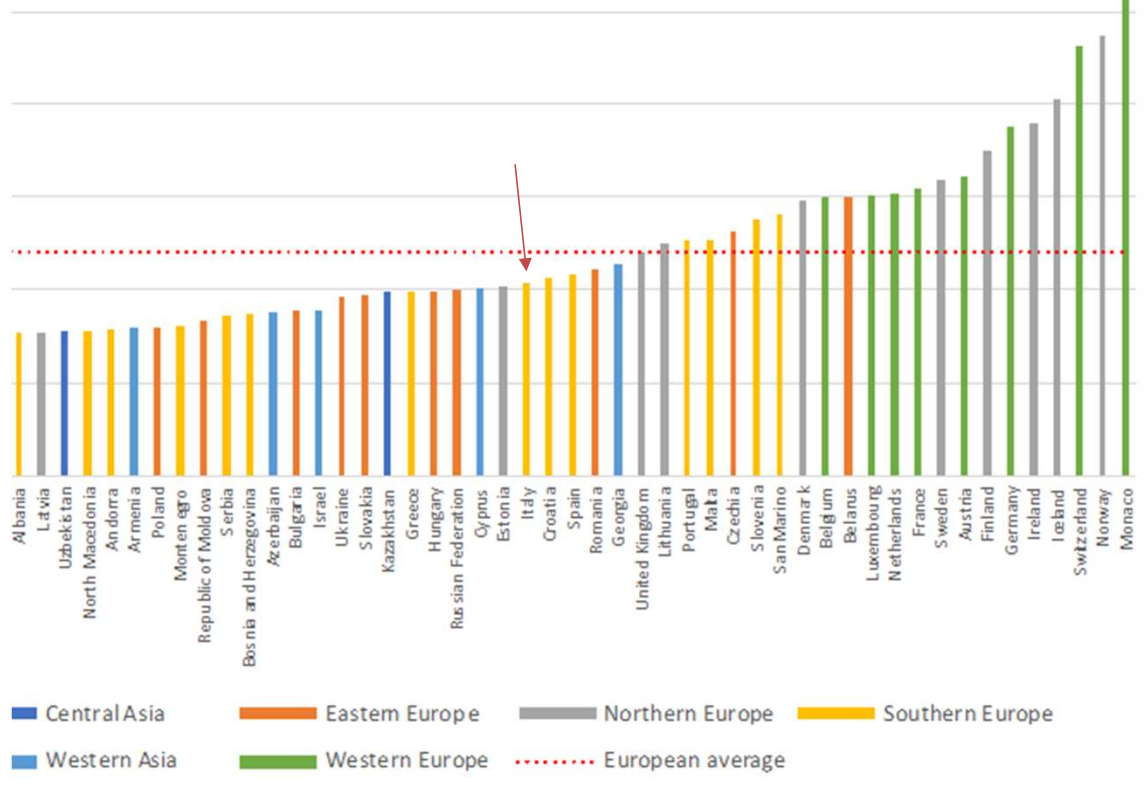
Disuguaglianze significative sono ancora presenti fra i paesi europei

Infermieri per 10 mila abitanti

(media europea: 80 infermieri ogni 10 000 abitanti)

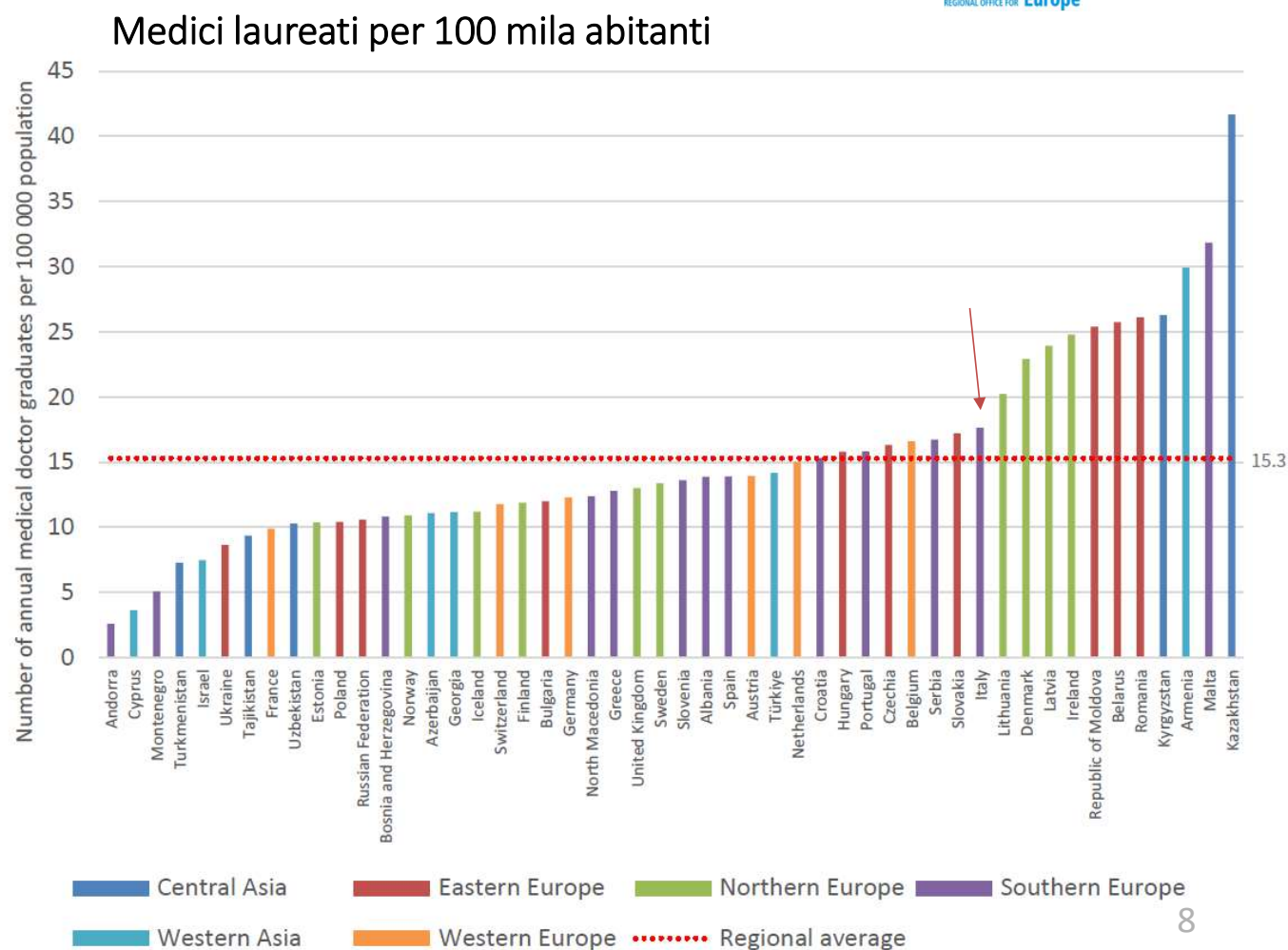
Il gap di personale è particolarmente evidente per gli Infermieri:

Da 27 professionisti per 10 mila a 202 ogni 10 mila abitanti



Molti più laureati, MA con enormi gap fra paesi

- Aumento di laureati in medicina negli ultimi anni: +37%
- Molta variabilità fra paesi

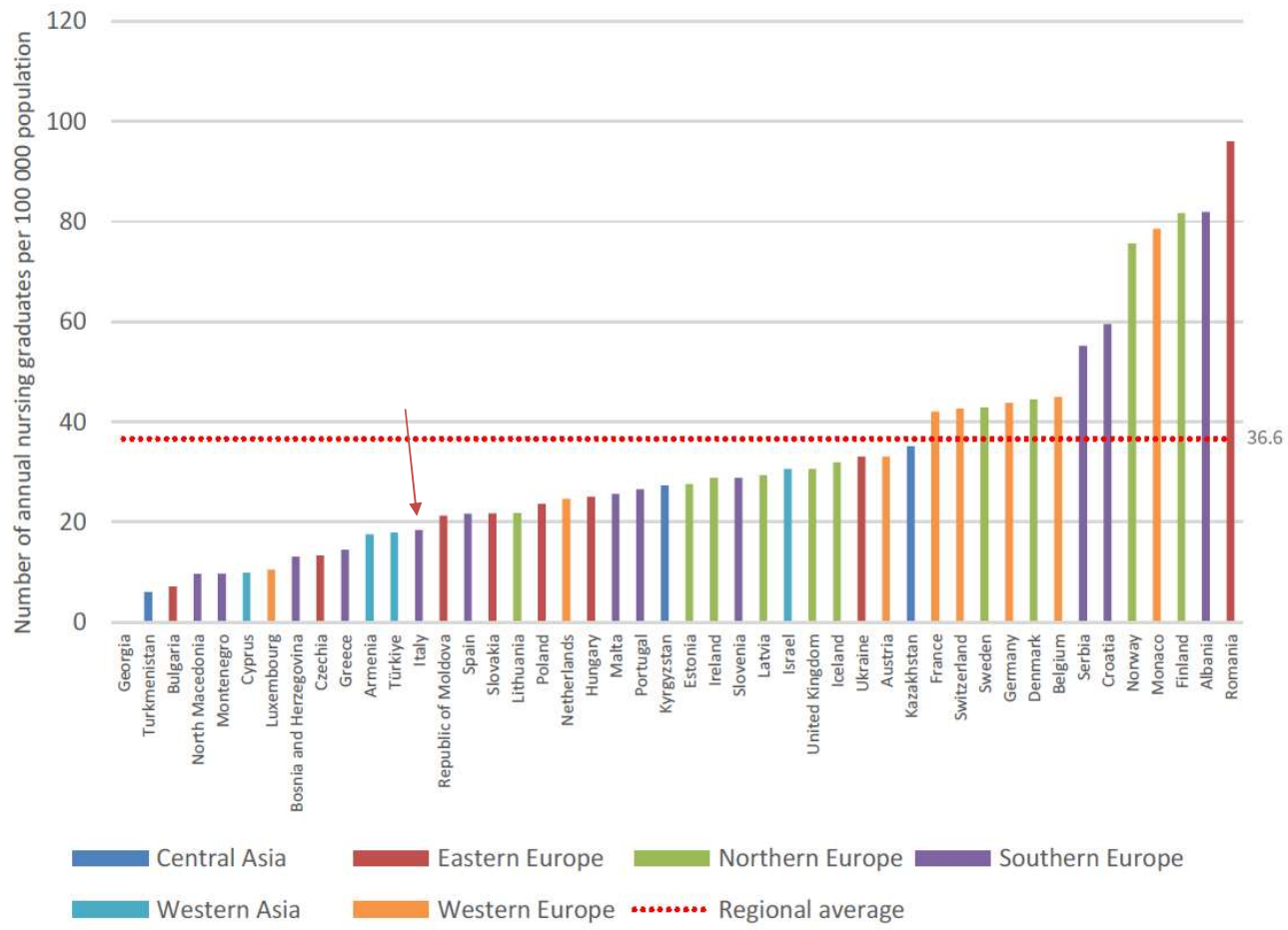


Molti più laureati, MA con enormi gap fra paesi



Infermieri laureati per 100 mila abitanti

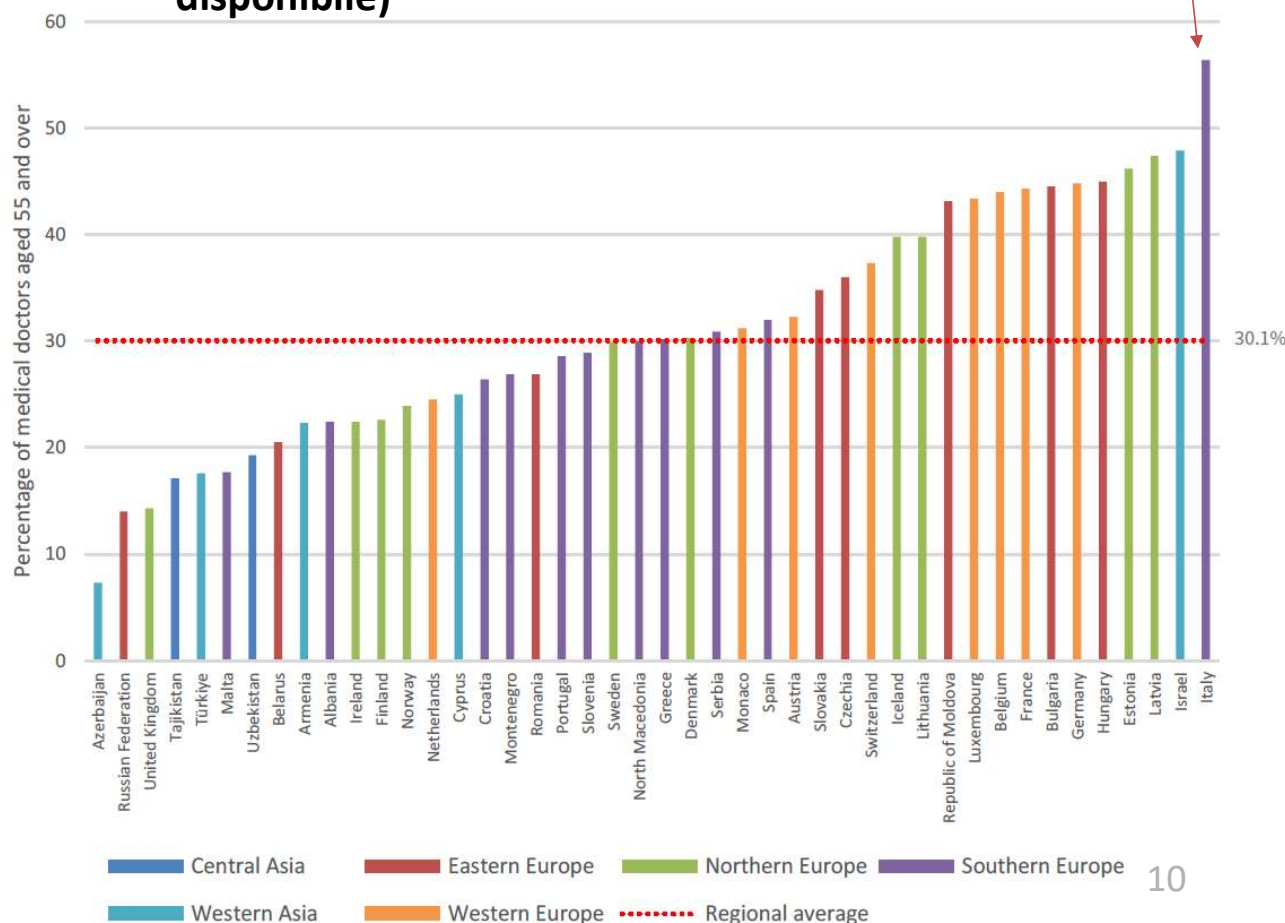
- Incremento del numero di infermieri del 26% negli ultimi anni



Personale sanitario che invecchia: un problema da affrontare

In un terzo dei paesi
oltre il 40% dei medici
ha più di 55 anni.

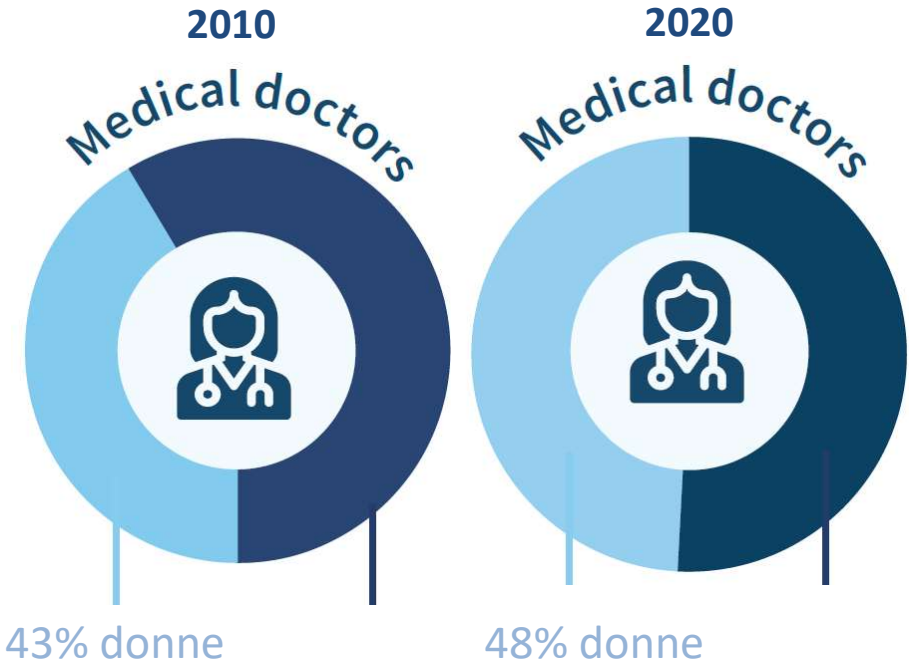
Percentuale di medici con più di 55 anni (2020 o ultimo anno disponibile)



Aumenta la proporzione di donne che lavorano in sanità

La percentuale di donne medico nella Regione è aumentata: dal 43% circa del 2010 al 48% del 2020

L'89% degli infermieri e il 98% degli ostetrici nella Regione Europea sono donne



TEN ACTIONS

to strengthen the health and care workforce



Action 1.

Align education with population needs and health service requirements

Action 2.

Strengthen Continuing Professional Development to equip the workforce with new knowledge and competencies



Action 3.

Expand the use of digital tools that support the workforce

Action 4.

Develop strategies that attract and retain health workers in rural and remote areas



Action 5.

Create working conditions that promote a healthy work-life balance



Action 7.

Build leadership capacity for workforce governance and planning

Action 8.

Strengthen health information systems for better data collection and analysis



Action 9.

Increase public investment in workforce education, development and protection




Action 10.


Optimize the use of funds through innovative workforce policies



Dichiarazione di Bucarest (2023)




 **MINISTRY OF HEALTH**

 **World Health Organization**
European Region

Bucharest Declaration on the health and care workforce

High-level Regional Meeting on Health and Care Workforce in Europe: time to act
22–23 March 2023, Bucharest, Romania



Prossime azioni (1)

New Framework for Action on Health and Care Workforce 2023 – 2030

Si basa sul quadro del 2017 riflettendo al tempo stesso le nuove realtà emerse nel post pandemia

È un piano per promuovere le principali priorità regionali del personale sanitario e assistenziale, come delineato nei dieci punti di azione del rapporto regionale

Focus sui contesti nazionali

Obiettivi

Supportare i ministri della sanità nella salvaguardia del personale sanitario a livello nazionale e internazionale;

Aggiornare le prove tecniche e le raccomandazioni per accogliere le sfide poste dal contesto attuale;

Specificare come l'Ufficio Europeo dell'OMS può sostenere gli Stati membri nel portare avanti questo lavoro.



European Region

Thirtieth Standing Committee of the Regional Committee for Europe
Fourth session

Copenhagen, Denmark, 7–8 June 2023

EUR/SC30(4)/9

5 June 2023 | 230406

ORIGINAL: ENGLISH

Framework for action on the health and care workforce in the WHO European Region 2023–2030

Draft

The WHO Regional Office for Europe report *Health and care workforce in Europe: time to act*, which was launched at the 72nd session of the WHO Regional Committee for Europe, highlighted the challenges faced by the European health and care workforce. Many of these challenges are long-standing, but they were exacerbated by the COVID-19 pandemic. Urgent action is required to retain health and care workers, especially in rural and underserved areas; to protect their mental and physical health and well-being; to enhance their recruitment; to optimize their performance; and to ensure a supply of health and care workers to meet future needs.

The proposed framework for action on the health and care workforce in the WHO European Region 2023–2030 builds on the 2017 action framework and addresses new realities as well as long-standing challenges. Proposed actions support the advancement of the European Programme of Work, 2020–2025, including its flagship initiatives, and items that will be discussed by the Regional Committee at its 73rd session, such as primary health care, emergency preparedness, and refugee and migrant health.

This working document will be submitted to the Regional Committee for consideration at its 73rd session, along with a draft decision.

Prossime azioni (2)

Resolution on Health and Care Workforce

- Framework sviluppato e guidato dagli Stati membri
- Proposta di adozione del documento alla 73ma WHO Regional Assembly
- Impegno politico ad alto livello per rafforzare l'HCWF



World Health
Organization

European Region

Regional Committee for Europe
73rd session
September 2023

EUR/RC73/CONF./xxx
Provisional agenda item x
XX September 2023 |
ORIGINAL: ENGLISH

**Framework for action on the health and care workforce
in the WHO European Region 2023–2030**

Draft resolution

The Regional Committee,

(PP0) Recognize the fundamental role of health and care workers in building maintaining and ensuring strong and resilient health systems that contribute to national resilience, and their dedication and sacrifice to address the needs of the population on a day-to-day basis, advancing universal health coverage, [as well as during times of emergency (del UKR)], including during [health RUS] [emergency situations of an epidemic, afternatural, human-induced and military nature UKR] [pandemics (del UKR; RUS)], [while while improving their working conditions, guarantying decent levels of salary, providing psychological support and avoiding a shortage of HWFs and the consequent overburdening of the current active health workforce EU].

Grazie!

