

**OECD
HUMAN RESOURCES FOR HEALTH CARE PROJECT**

Human resources for health care are an essential factor in the provision of health care, directly influencing the performance of health-care systems. Today, OECD member countries face different policy challenges with respect to human resources for health care. Concerns have been voiced that the current and future health workforce may not be able to deliver the medical services that patients need. Such concerns originate from projections of increasing demand, due to ageing populations and technological advances, and falling supply, reflecting an ageing health workforce and a societal trend towards reduced number of hours worked. The project identifies, compares and evaluates policy levers that decision makers can use to produce an adequate number of human resources for health care, with the right qualifications and in the right place who can deliver the quantity and quality of medical services that patients need. Although a variety of categories of workers are engaged in the health care system, this project focuses specifically on two skilled categories: physicians and nurses.

In order to match supply of with demand for medical services, decision makers can attempt to change the stock of physicians and nurses or their productivity. In any given year, the stock of physicians and nurses is influenced by the flows into the health workforce. Newly-graduated and immigrating physicians and nurses determine the flow into the workforce, while flows out of the workforce arise from emigration, career change and retirement. Unemployed and inactive physicians and nurses, and those working in another capacity in industry or other sectors of the economy also affect net flows. Instead of focusing on the stock of physicians and nurses, decision makers can design financial incentives and working conditions to improve the productivity of the health workforce. Therefore, the impact of payment methods, remuneration levels and working conditions on health worker behaviour and, thus, on the costs, quantity and quality of medical services delivered by physicians and nurses is also examined.

The project relies on a detailed policy analysis of best practices in 22 OECD member countries and has drawn on a survey of national correspondents collecting quantitative and qualitative data on human resources for health care. Additionally, secondary analysis of international data sources has been performed.

Preliminary results show that increasing demand, ageing of the health workforce and changing work patterns create significant challenges to health care systems, beyond the needs commonly assessed by national planners. In spite of a plethora of planning tools, policies seem to have consistently underestimated needs over time and across countries. The effectiveness of incentive mechanisms designed to increase the attractiveness of and retention in the health profession, reduce inactivity in the workforce, and attract health professionals to under-staffed areas has not yet been uniformly demonstrated. Better international evidence in this field is needed to assist countries in creating a balanced health workforce and meeting the future needs of their populations.