

ROBUST WORKFORCE PLANNING

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Overview:

System dynamics modelling was used in a major project for the Department of Health to inform a review of whether current levels of medical and dental school intakes were in line with predicted workforce need. It takes many years to train these professionals (over 15 years for a hospital consultant), so an under or over-supply cannot be corrected quickly or easily. The decisions are highly important since too few or too many will impact the health and well-being of the population. The project was carried out in 2012.

A new approach to workforce planning was developed by the CfWI for this project, which we call Robust Workforce Planning. This is a method for identifying potential future issues that need to be addressed by workforce planners. It allows them to assess the impact of workforce policy options and minimise risk. This approach is new for health and social care workforce planning in England. We first think about what health and social care may look like in the future, including the workforce needed to provide it. We then focus on policies to deliver the required workforce, and test them across a range of futures defined by a set of scenarios. This allows robust decisions to be made that recognise the uncertainty of the future. Central to the approach are the high degree of stakeholder participation and the use of system dynamics models that calculate workforce supply and demand. Stakeholders are involved in exploring future drivers and trends, scenario workshops, and a Delphi process to quantify the key uncertainties for modelling. The use of system dynamics meant that robust, evidence-based supply and demand models could be created to test potential policies and their impact. It also meant that the model was 'transparent' and enabled expertise of several hundred stakeholders from the health care system to be synthesised.

Significant decisions were made as a result of this work, including:

A 2% reduction in medical school intakes to be introduced with the 2013 intake, with a further review in 2014

No immediate change to dental school intakes because of issues over data quality highlighted by the modelling, with another review in 2013

A rolling cycle of reviews of medical and dental student intakes should be established; to be undertaken every three years.

The actions taken demonstrate the value of this approach in understanding the impact of potential policy decisions across a range of challenging but still plausible futures. The method is not limited to healthcare, and we are currently exploring its use in other workforce areas, and to help in wider strategic decision making.