



14th International Health Workforce Collaborative Conference

Quebec City, Canada, May 7-9, 2013

SESSION OVERVIEW

1. Update on Health Workforce Agencies

Lead Country: United States

- Discuss progress since 2011 IHWC and identify potential issues that can inform/impact 2013 IHWC discussions.
- Explore opportunities for collaboration, further research, etc.

2. Assuring Adequate Specialists, Generalists and a Health Workforce Where it's Needed: How Do We Balance Demands to Improve Quality, Expand Access and Contain Health Care Costs?

Lead Country: United States

- How can generalism and practice flexibility be supported and encouraged through education, policy, regulation and compensation? Are there models in the different countries that could provide insights for the others?
- What patterns, policies and initiatives are being experienced by each country to promote higher quality and specialized care while balancing the need to meet the range of services required by their populations when and where they need them (without increasing costs)?
- Why and where is greater specialization of the health workforce needed? What factors impede needed specialization?
- What are the incentives to produce health care providers that deliver a wide range of services and/or provide services across multiple settings?

3. Provider Autonomy and Public Policy Imperatives: Which Should Prevail?

Lead Country: Canada

- Learn about differing perspectives about professional autonomy, including pros and cons for quality of health care and public/planners.
- Discuss these perspectives and areas of consensus and disagreement.

4. Making Workforce Innovation Real

Lead Country: Australia

- What were the key drivers for the project /work (i.e. what was the identified need(s) that led to the project's inception?)
- How did the project develop and gain the necessary traction for implementation?
- What elements of the project contributed to its success? This could include:
 - Provision of funding
 - Regulation
 - Fiscal imperative or need to improve quality of services
 - Stakeholder engagement
 - Other

5. Foreign Qualifications Recognition

Lead Country: Canada

- What are the reforms/developments in each IHWC country policy that have helped meet health needs and/or promote skills development?
- Are there any critical success factors, levers, such as bilateral agreements, immigration policies that have enabled recognition?
- Do States integrate FQR within broader HRH planning and if so, how?

6. Key Take Aways

Lead Country: Canada

- Country leads or their delegates summarize key take aways.
- Objective: to share understanding between different IHWC countries about lessons learned from participation in various sessions to date in order to help optimize individual and delegation experience.

7. From Learning to Application: Ideas and Challenges from Decision Makers

Lead Country: United Kingdom

- Learn about varying perspectives on select themes/topics presented at 2013 IHWC in regards to feasibility, challenges, opportunities, etc.
- Discuss how to translate knowledge into practice.
- Share ideas and opinions with experts and colleagues.
- Potentially identify areas of joint action or collaboration.

8. Overview of current health workforce priorities in OECD countries, and policies to improve the geographic distribution of doctors.

- Will serve as opportunity to learn of innovative work done outside the collaborative (IHWC), and to stimulate afternoon discussions about future of the IHWC and potential collaborations.