The use and misuse of data for formulating HRH policies

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The use and misuse of HRH data

- Types of data / what is its purpose?
- What is effective HRH policy and planning?
- [Ab] using the data / evidence
- Data, evidence and politics
- Inaccurate HRH data is a fact of life
- The way forward

Types of HRH Information Needs

- Workforce forecasting/budget
  - Staffing gaps against norms
  - Estimation of workforce needs
  - Estimation of financial needs
  - Timely standardized reports
- Distribution of workforce by cadre, facility, and targets
  - Private sector / cadre types
  - Facility type / geographic location
- Performance management
  - Document employee performance
  - Document data quality/indicators

- Workforce training
  - Pre-service training and production
  - In-service training and continuing professional development
- Workforce recruitment/retention
  - Manage staff vacancies
  - Planning and forecasting needs
  - Manage promotion, retention, pension
  - Workforce credential management

What is the data for ?

- Forecasting
- Budgeting
- "Planning"- commissioning, allocating, distributing
- "Managing"- recruitment, performance, attendance, training and development
- Policy formulation/ analysis/evaluation
- =HR information system (HRIS) and minimum data set (MDS)

Examples of use of HRH data

- Inform and cost health sector strategies and HRH plans

- Maintain up-to-date health workforce registries

- Find and eliminate "ghost" workers

- Address recruitment bottlenecks

- Support improved service delivery

Key to success will be implementation and use of a health workforce registry with adherence to the use of unique IDs for all workforce in all systems

What is effective HRH policy/ planning?: OECD review

- Most models are uni-disciplinary: focus on demographic trends to assess future supply/demand

- Few models link health expenditure projections with health workforce projections

- Models should take into account changing economic and health service delivery contexts

- Models should assess policy options by use of assumptions and scenarios

- HRH planning "is not an exact science"

"Effective" HRH policy and planning

- The choice of HRH policy and planning approach and model (s) is value-based but should be driven by service objectives, informed by evidence, and shaped by cost estimates

- Assessing future HRH needs is about much more than projections of numbers (e.g. $$$, skill-mix, working conditions, productivity and quality, regulation, rewards/incentives)

- But numbers are the common currency for policy, planning and politics

(Ab)using the data and evidence

- Data is only "neutral" until it is used……then, at best it shapes the evidence that informs debate and decision making

- Evidence can be ignored…..

[Ab]using the evidence

- "What politicians want is policy based evidence, not evidence based policy"
- Evidence shopping
- Fixing the evidence
- Mishandling the evidence
- Imaginary evidence
- Clairvoyant evidence
- Secret evidence   (Henderson, 2012)

Data, "Evidence" and politics

Inaccurate HRH data is a fact of life

- Inaccurate data will limit the full development of effective HRH policy and planning..BUT

- No system has perfect data; data inaccuracy is not a reason for inaction, and accurate data would not guarantee perfect policy

- Identifying all data sources, and working with data limitations is part of the planning process...needs multi-stakeholder involvement

HRHIS Strengthening: The way forward

- **Invest:** Ensure HRHIS investments incorporated into HRH strategies and plans. Seek technical assistance as needed
- **Review:** Map all existing sources of HR information and identify data gaps and needs
- **Standardize:** Develop pathway towards compliance with minimum data set for health workforce registry
- **Integrate:** Link HRHIS into national HIS architecture
- **Develop:** Consider implementing NHWA for policy, planning, management of the health workforce

References

- Henderson M (2012) The Geek Manifesto: Why Science Matters to Government
- **OECD Health Working Papers: Health Workforce Planning in OECD Countries: A Review of 26 Projection Models from 18 Countries.**DOI:10.1787/5k44t787zcwb-en
- WHO MDS: http://www.who.int/hrh/statistics/minimun_data_set.pdf?ua=1