Capacity Utilization and Retention for Sustainable Development of Health Services in Myanmar

Dr. Nilar Tin Director (Planning)
Department of Health
Presentation on

1. HWF production
2. Utilization of HWF
3. Capacity Strengthening of HWF
4. Retention of HWF for sustainability
Six major factors influencing entry, sustainability & exit of HWF

- Partnership
- HWF Education & Training
- Leadership
- HWF Management
- HWF Financing
- HWF Policy

HWF including Public, Private & Volunteers
Health Manpower Process

Production
- Producing HWF from:
  - (14) Medical and allied universities
  - (46) Nursing and Midwifery and related training schools
  - (1) Traditional Medicine University

Deployment
- Public Sector HWF in:
  - (943) Hospitals
  - (1565) Rural HC
  - (348) MCH center
  - (10) School Health
  - (17) Urban HC
  - (14) TM Hospitals
  - (37) TM clinics
- Private sector (FP&NP)
  - Private hospital-130
  - Private specialist clinics -502

Management
- HR data base
- HWF Strategic Plan
- Development of Academia
- Capacity building in service training
- Further Studies
### UNDERGRADUATE

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### POSTGRADUATE

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## Health Manpower Utilization as of December 2011

### Public Sector

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<td>Dental Surgeon</td>
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<td>3</td>
<td>Nurses</td>
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<td>4</td>
<td>Health Assistants</td>
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<td>5</td>
<td>Lady Health Visitors</td>
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<td>6</td>
<td>Midwives</td>
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<td>7</td>
<td>PHS (1)</td>
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### Others including Private Sector

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Management- Organizational and Management problems

1. Shortage, inappropriate balance and mix of skills, inequitable distribution of health workforce

Measures that have been/ have to be taken care of:

- Strengthen co-ordination between health services and training institutions for planning HWF
- Need to develop HRH database including private sector
- Identify Push and Pull factors

Task force has been formed including multi-stakeholder involvement since 2006 for the development of HRH Strategic Plan

- Series of HRH workshops conducted, surveys conducted WHO SEAR
- HRH strategic plan has been put up as one agenda in NHP 2011-2016 (will start in 2012)
- HRH Strategic Plan will include for both public and private sector
Organizational and Management problems

2. Gaps between Training and staff skills

• Measures that have been / have to be taken care of:
  • DMS holding education seminars/ review and revise of curriculum in collaboration with DOH, DHP (HMIS) and DTM
  • Job descriptions & task analysis have to be updated regularly (DMS, DOH & DMRs)
  • Training needs assessment should be conducted regularly
  • Job description and training needs to be updated regularly
  • Training Information System have been developed for in service training (DOH in collaboration with DMS)
Organizational and Management problems

3. Retention of HWF

Measures that have been/ have to be taken care of:

- Imparting selective management skills to health personnel by training
- Career advancements - tied with CE to maintain & upgrade skills
- Evidence-based Research on Motivation and Retention of HWF- to find out needs/perceptions /expectations of Basic Health Staff -HTR
- Ensure Motivational factors including financial and non financial incentives
  - hardship allowances, supplementary performance based allowances
  - rotation and advancement
  - working conditions and job security
  - recognition and awards- Outstanding Basic Health Staff and Voluntary Health Workers' Tour- to carry on
Organizational and Management problems

3. Retention of HWF

Measures that have been/ have to be taken care of:

• Strengthening the management infrastructure
• Facilities (infrastructure & vehicles)
• Supplies & equipment (medicines, kits)
• Continuing education: a tool for motivating health staff
• Short term flexible contracts allowing retired workers to re-enter HWF especially at hard to reach areas
• Strengthen the existing Voluntary Health workers (CHW & AMW)
  - train/recruit more
  - retain more (supplies & equipment)
  - improve skill (refresher training, information)
  - recognition and awards (Outstanding VHW tour)
International Collaboration concerning HRH

- Regional Consultation on Strategic Plan for HWF (2006)
  - Assessed current HWF situation of SEAR countries
  - Non-availability of updated information
  - Non uniformity in classification of health workforce
  - Lack of comprehensive data especially from the private sector
  - Lack of data on community health workers

- Development of Regional guidelines for HWF Strategic Planning (2008)
  - HWF survey of Myanmar (2008)
  - Finalize HWF Categories-Regional Definitions

- Tracking survey for Human Resources for Health (2010)
International Collaboration concerning HRH

• AAAAH (Asia Pacific Action Alliance on Human Resources for Health) - Myanmar included in 16 member countries

• GHWA (Global Health Workforce Alliance) – following Kampala Declaration and AGA

• Outstanding Health Worker Award – MW from Myanmar awarded in 2011 at the 2nd GHW Forum & Prince Mahidol Award Conference

• WHO Code of Practice for international recruitment of Health Personnel WHA 63.16 (2010)

• WHO Country Health Profile development (2011)
Needs to support UHC

• The right number of personnel
• In the right places
• In the right combination
• At the right time
• With the right attitude
• Providing the right services
• In the right quality
• And at an affordable cost
Thank You