Human Resource for Health: Toward healthier and more empowered health workforce: challenges faced and lessons learned from Ghana's COVID-19 Response

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Outline of the Presentation.

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- Healthier Workforce

- Empowered Workforce

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Introduction

- WHO defines human resource for health as:

- " all people engaged in actions whose primary intent is to enhance health"

- A healthier workforce supports and encourages healthy behaviour at the workplace

- Healthy workforce is where both employers and employees work to support and promote good health

Modelling a Healthier Workforce from the Current HR Policy

- The Policy has 6 key objectives:
  - To Train and Develop requisite members and mix of health workforce
  - To ensure fairness and transparency in recruitment processes as well as the equitable distribution of health professionals
  - To develop and institute mechanisms to ensure the retention of the health workforce serving in the deprived/ underserved locations and facilities
  - To ensure the optimal performance of the health workforce in a bid to ensure productivity
  - To operate an effective systems across the spectrum of the health sector
  - To engender and sustain effective collaboration with the Private Sector and other relevant stakeholders

Empowered Health Workforce

- Health Workforce empowerment is the process of providing workforce with the requisite resources, authority and opportunity to render quality health care as well as holding them accountable for their actions

- Empowered Health Workforce is the way in which the health sector provides its employees with a certain degree of autonomy and control in their day-to day activities

Benefits of Healthier Workforce

- Record fewer sick days

- Increased productivity

- Improved morale/more corporation

- Reduce Workplace accident
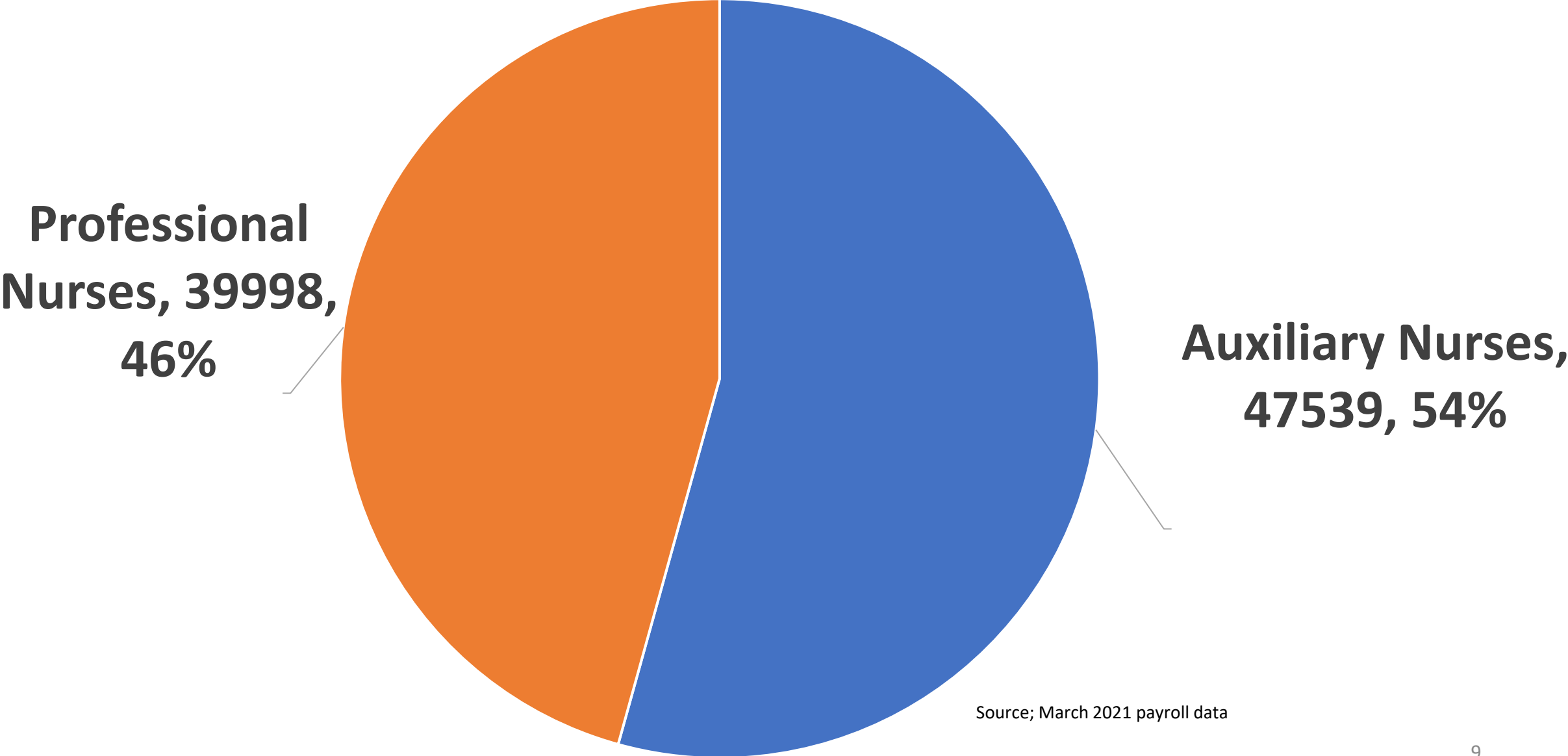
- Improved corporate image

Key Human Resource Challenges

- Healthcare workers are at a higher risk to contracting COVID-19

- Inadequate numbers of critical and emergency health personnel

- Increased absenteeism due to fear of being infected, quarantined or isolated

- Fear of potential infection and unknowingly spreading the virus to others including family members

- Increased work overload

- Morbidity and Mortality associated with COVID-19

Key Human Resource Challenges

- Loss of colleagues through COVID-19

- Long and short-term effect on the mental health of health personnel

- Inadequate psycho-therapeutic and emotional support for staff

- Skewed Distribution of personnel

- Poor Collaboration with actors in the private sector

- Weak Leadership and Management capacity

Distribution of Nurses: Professional vs Auxiliary

Professional Nurses, 39998, 46%

Auxiliary Nurses, 47539, 54%

Source; March 2021 payroll data

Empowering Health Workforce for Quality Health Care

- Investing in training and capacity building

- Enhance human resource capacity for all emergencies services (Public Health and medical)

- Institutionalise a robust psycho-therapeutic system to manage post-traumatic effect

- Assess skills-mix and develop strategies to improve staff strength in areas where critical staff are lacking

Empowering Health Workforce for Quality Health Care

- Fair and equitable distribution of staff

- Committed and motivated staff

- Regular skills gap analysis to identify human resource needs of the health sector

Lessons From COVID-19

- Tax waiver for all health workers, 50% Basic Salaries as Bonuses for Frontline Health Workforce (FWH) and Insurance for FHW infected in the line of duty boosted the morale of staff

- Inadequate numbers of critical and emergency health professional leading task-shifting

- Increased workload leading to stress and burnout

- Some staff took undue advantage of the flexible working hours

Lessons From COVID-19

- Inadequate psycho-social support for staff and their family

- Mental health is very critical when it comes emergencies such as COVID-19

- Collaboration with the private sector is key

- The need to re-look at the workload to revise the existing Staffing Norms

Resolving the Challenges

HR Objectives	Challenges	Recommendations
Train and develop requisite number and mix of health workforce	Inadequate numbers of critical and emergency health personnel	Trainings (pre-service, post-basic & postgraduate trainings should be based on needs
		Develop and adhere to Training Policies & Guidelines
Ensure optimal performance of the HW in a bid to achieving productivity	COVID-19 infection amongst HWs	Ensure safety of health workers
	Fear of being quarantined or isolated	
	Morbidity & Mortality	Full medical cover for staff and immediate family
	Inadequate psycho-therapeutic and emotional support for staff	harmonise Policies & Guidelines on OHS and ensure its operationalisation
	Increased absenteeism due to fear of being infected	Clearly define and set indicators for measuring productivity
		Establish a system to provide psycho-social support to staff
To ensure fairness and transparency in recruitment processes and equitable distribution of health professionals	Increased work overload and burnout	Develop a system to reduce human intervention whilst using the MoH Recruitment Portal
		Revise the existing staffing norms

Resolving the Challenges

HR Objectives	Challenges	Recommendations
To operate an effective governance across the spectrum of the health sector	Inadequate numbers of critical and emergency health personnel	Trainings (pre-service, post-basic & postgraduate trainings should be based on needs
		Develop and adhere to Training Policies & Guidelines
To engender and sustain effective collaboration with the private sector and other relevant stakeholders	COVID-19 infection amongst HWs	Ensure safety of health workers
	Fear of being quarantined or isolated	
	Inadequate psycho-therapeutic and emotional support for staff	harmonise Policies & Guidelines on OHS and ensure its operationalisation
	Increased absenteeism due to fear of being infected	Clearly define and set indicators for measuring productivity
		Formalise and intensify psycho-support to staff
To develop and institute mechanisms to ensure the retention of the health workforce serving in deprived and underserved locations/ facilities	Skewed distribution of staff	Adherence the Staffing Norms
		Develop incentive package to attract staff to underserved facilities

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Conclusion

- The Human Resource Policy was developed to, in sum to provide quality health care at all levels. However, the COVID-19 pandemic has indicated that we need to empower health workforce to provide the quality of care that we so desired

- Nonetheless, we are confronted with existing challenges which have been compounded by the negative effect of COVID-19

- Therefore, if we are to improve on the quality of care, then we must address these challenges which would invariably put in place systems and structures to adequately empower health workforce.

- Thank you