FACT SHEET
ARTICLE 7: Health and care workforce

BACKGROUND

The COVID-19 pandemic had a severe impact on the availability, distribution, and quality of health workforce (HWF) and exacerbated health inequities (between and within countries, between levels of care, and between the public and private sectors), with low retention of personnel in rural and underserved areas and high rates of mobility and migration. In addition, there is a high degree of instability in decent working conditions, low productivity, and poor-quality performance as well challenges in the training of groups of professionals.

The health workforce has been key to the response to the COVID-19 pandemic and remains critical to the ongoing social and economic recovery and is essential to building resilient health systems of the future. This health crisis has once again highlighted the chronic shortfall and poor distribution of HWF in the Region and the lack of policies, strategic planning processes, and sufficient investment in the production, training, and professional development of a fit-for-purpose HWF, including measures to protect the well-being of health workers. The pandemic has also exposed the limitations of many information systems in terms of data on the availability and distribution of HWF at different levels of care, disaggregation by professional categories, and the composition and characteristics of interprofessional health teams.

The COVID-19 pandemic has exposed underinvestment in the training, retention, and employment of health personnel. The PAHO Virtual Public Health Campus supported the strengthening of capacities of health personnel and caregivers by providing updated training in coordination with OpenWHO.org from WHO Health Emergencies Program.

The deployment of national Emergency Medical Teams (EMT) and set up of Alternative Medical Care Sites (AMCS) are a critical component to establish comprehensive medical surge capacity response to support national health services networks. The role of EMTs and AMCs was key to expand the capacity to meet the needs created by the exponential increase of patients due to COVID-19 pandemic as well as providing clinical care in border and remote areas and supporting mass vaccinations campaigns or responding other major concurrent emergencies during the pandemic. As of October 30th, 30 countries of the Americas have designated national EMT focal points, 9 regional teams received the WHO Global Classification, and 16 countries are developing their national EMTs with regional deployment capacity.

Over the past 20 years, the Global Outbreak Alert and Response Network (GOARN) (https://goarn.who.int) has provided international public health resources to respond and control outbreaks and public health emergencies worldwide. This support has included deployments of personnel from the over 250 GOARN institutional members — professionals with highly specialized skills including in epidemiology, laboratory services, clinical management, infection prevention and control, immunization, and community engagement and risk communication. GOARN also offers a three-tiered training program in outbreak response.

RELEVANT GLOBAL AND REGIONAL MANDATES

IMPLICATIONS FOR THE REGION

Article 7 calls the Region to take the necessary steps to safeguard, protect, invest in, and sustain a skilled, trained, competent and committed health and care workforce, with the aim of increasing and sustaining capacities for pandemic prevention, preparedness, and response, while maintaining quality essential health services and essential public health functions as appropriate to their context and their domestic priorities. In addition to enhancing initiatives already in place, it is imperative to:

- Develop and implement national policies at high-level, with intersectoral agreements and aimed at transforming systems towards universal health coverage and resilient systems, with a primary health care approach.
- Increase public investment with financial efficiency in HWF, with employment opportunities and decent working conditions, ensuring priority access to pandemic-related products and services.
- Enhance strategic planning capacity in human resources for health, through the development of national human resources information systems, to deploy trained health workers effectively and efficiently during pandemics.
- Establish permanent coordination mechanisms and high-level agreements between the education and health sectors to align the education and practice of HWF with the current and future needs of the resilient health systems.
- Implement regulations for education and professional practice based on specific competencies frameworks for health professionals involved in emergencies response, and include appropriate coordination and supervision mechanisms, to improve coverage and quality of care.
- Address the safety of the health and care workforce, developing and integrating effective measures to prevent and address violence and threats, particularly in health emergencies.
- Implement continuous professional development and capacity building strategies for health and care workforce, incorporating new information and communications technologies, telehealth, virtual education, and learning networks, to improve the problem-solving capacity and quality performance of integrated health services networks, particularly in health emergencies.
- Promote the Virtual Campus for Public Health as PAHO educational platform to provide training and support capacity building initiatives. (www.campusvirtualsp.org)
- Promote the development of trained and self-sufficient national EMTs and strengthen effective coordination mechanisms to deliver safe, timely, appropriate, and effective health care are critical to saving lives, reducing suffering and aiding recovery of people and communities impacted by health emergencies.