Hong Kong Perspective on Nursing Workforce Planning, Development and Education

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Topics to be Covered

- Global health workforce issues
- Health/Nursing workforce planning
- Nursing profession in Hong Kong
- The Hospital Authority way of nursing workforce management
The *World Health Report 2006: Working Together for Health* highlighted a worldwide shortage of almost 4.3 million doctors, midwives, nurses and support workers. Thirty-six of the 57 countries with severe shortages are in Africa.
Density of doctors, nurses and midwives in the 49 priority countries

Uzbekistan: 134
Kyrgyz Republic: 126
Dem People's Rep of Korea: 108
Tajikistan: 104
São Tomé and Príncipe: 94
Nigeria: 82
Solomon Islands: 74
Uganda: 68
Myanmar: 60
Vietnam: 60
Lao People's Dem Rep: 56
Kenya: 48
Pakistan: 48
Ghana: 48
Cambodia: 48
Yemen: 48
Comoros: 48
Zimbabwe: 48
Benin: 48
Mauritania: 48
Burkina Faso: 48
Zambia: 48
Afghanistan: 48
Nepal: 48
Dem Rep of the Congo: 48
Eritrea: 48
Côte d'Ivoire: 48
Gambia: 48
Guinea-Bissau: 48
Papua New Guinea: 48
Bangladesh: 48
Central African Republic: 48
Senegal: 48
Madagascar: 48
Rwanda: 48
Haiti: 48
Mozambique: 48
Togo: 48
Chad: 48
Malawi: 48
Liberia: 48
Mali: 48
Ethiopia: 48
Tanzania: 48
Burundi: 48
Sierra Leone: 48
Niger: 48
Somalia: 48
Guinea: 48

Critical threshold = 23 doctors, nurses and midwives per 10,000 population

Source: WHO Global Atlas of the Health Workforce

August 2010
The Global Health Workforce

Key facts

- There are about 60 million health workers worldwide.

- Many health workers migrate to high-income countries for greater income, job satisfaction, career opportunities and management quality.

- Demand for health workers is increasing in high-income countries, where health systems can depend heavily on doctors, nurses and other health workers who have been trained abroad.

- Migration of health workers may result in financial loss and weakens health systems in the countries of origin.

- WHO has developed a Global Code of Practice on the International Recruitment of Health Personnel to achieve an equitable balance of the interests of health workers, source countries and destination countries.
Workforce Planning? How about this?

A smarty-pants old story says that if you want a "learned economist," all you have to do is get a parrot and train the bird to squawk "supply and demand" in response to every question.

Not fair, but ...

It's true that the "theory of supply and demand" is a central part of economics. It is widely applicable, and also is a model of the way economists try to think most problems through, even when the theory of supply and demand is not applicable.

AND....it is also not as simple as to ask the parrot to squawk “supply and demand” in health workforce planning.
Aim of Workforce Planning

“The availability of the right people with the right skills in the right number in the right place at the right time.”

A myth or reality?
How to estimate Demand and Supply?

A Question of Health Care Planning
Hospital Beds in Hong Kong 2000-2009 (as at 31 Dec)
Hong Kong Population Projection

<table>
<thead>
<tr>
<th>Year</th>
<th>HK Population</th>
<th>Age 65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996</td>
<td>6,466,600</td>
<td>653,703</td>
</tr>
<tr>
<td>2000</td>
<td>6,711,500</td>
<td>729,265</td>
</tr>
<tr>
<td>2005</td>
<td>6,837,817</td>
<td>834,732</td>
</tr>
<tr>
<td>2010</td>
<td>7,102,259</td>
<td>912,168</td>
</tr>
<tr>
<td>2015</td>
<td>7,370,792</td>
<td>1,114,587</td>
</tr>
<tr>
<td>2020</td>
<td>7,732,604</td>
<td>1,393,859</td>
</tr>
<tr>
<td>2025</td>
<td>8,082,861</td>
<td>1,763,489</td>
</tr>
<tr>
<td>2030</td>
<td>8,400,730</td>
<td>2,126,161</td>
</tr>
<tr>
<td>2035</td>
<td>8,689,640</td>
<td>2,351,447</td>
</tr>
<tr>
<td>2039</td>
<td>8,892,750</td>
<td>2,485,672</td>
</tr>
</tbody>
</table>
Working Lifespan Approach to the Dynamics of the Health Workforce

**ENTRY:** Preparing the workforce
- Planning
- Education
- Recruitment

**EXIT:** Managing attrition
- Migration
- Career choice
- Health and safety
- Retirement

**WORKFORCE:** Enhancing worker performance
- Supervision
- Compensation
- Systems supports
- Lifelong learning

**Workforce Performance**
- Availability
- Competence
- Responsiveness
- Productivity
WHO Human Resources for Health (HRH) Road Map

- National
- District
- Community
- Structure
- Services
- Human Resources
- Health Facilities
  - Asset Management
- Basket of Services
- Entry
  - Workforce
  - Exit
WHO HRH ROAD Map

Entry
Preparing the workforce

Planning: Workforce Planning; Policy; Information Systems
Education: Pre-service Education; Basic Training
Recruitment: Policy; Tools

Workforce
Enhancing worker performance

Management & Supervision: Job descriptions; Tools
Compensation: Salary Structure & Level; Payment Mechanisms
Regulation & Legislation: Scopes of Practice; Standards & Competencies; Quality Assurance & Improvement
Lifelong Learning: In-service & on-the-job Training; Continuing Professional Development;

Exit
Managing attrition

Migration: Codes of Practice; Bilateral Arrangements;
Career Choice: Change of Occupation or Activity
Health & Safety: Working environment, Infection control
Retirement: Succession Planning
The Nursing Profession in Hong Kong
Characteristics of the Nursing Workforce

- A female dominant profession
- The backbone of any health system
- The level of nurses (mainly registered and enrolled) varies across jurisdictions
- Regulations exist in most countries (less so in the African continent) to regulate the profession
- The workforce is often in a cyclical state of disequilibrium in supply and demand
Turnover Trend of Nurses in HA

No. of Nurses

Year 2005/06 2006/07 2007/08 2008/09 2009/10 2010/11
No. of Nurses 400 615 844 877 772 1007
Hong Kong Gross Domestic Product

At Current Market Prices (Million)

- 2006: 1,475,357
- 2007: 1,475,357
- 2008: 1,677,011
- 2009: 1,622,516
- 2010: 1,741,658
- 2011 (Preliminary Figures): 1,893,861

(Preliminary Figures)
Are there enough nurse graduates in Hong Kong?

As at 7 May 2012

<table>
<thead>
<tr>
<th>Year</th>
<th>RN Graduates</th>
<th>EN Graduates</th>
<th>Total Nurse Graduates</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012/13</td>
<td>2174</td>
<td>805</td>
<td>2979</td>
</tr>
<tr>
<td>2013/14</td>
<td>2400</td>
<td>970</td>
<td>3370</td>
</tr>
<tr>
<td>2014/15</td>
<td>2366</td>
<td>930</td>
<td>3296</td>
</tr>
<tr>
<td>2015/16</td>
<td>2123</td>
<td>650</td>
<td>2773</td>
</tr>
</tbody>
</table>
Total Birth in HK and Delivery of HA

** Provisional
Questions on Nursing Workforce Planning

- How many nurses do we need for the population?
- How qualified should they be?
- What is the active nursing workforce?
- How many nurses are inactive and can come back with the right incentive? (latent supply)
- How many of the nurses are not working in nursing and willing to come back to nursing? (leakage repair)
Regulations of Nurses/Midwives

- Nursing council of Hong Kong for general and psychiatric nurses registration and enrolment
- Midwives Council of Hong Kong for Midwife registration
- No specialist recognition by both Councils (active work is being done by the Academy of Nursing)
Types and levels of nurses in Hong Kong?

- Two key basic streams *(General and Psychiatriecs)*

- Midwifery is an independent qualification at the post basic level

- Two levels of nurses: registered and enrolled
Where do we educate nurses in Hong Kong

- Basic nursing programs are conducted by universities and hospitals (*private and public*)

- Post-basic specialty training courses are mainly available locally via higher degree at universities and certificate at the Hospital Authority

- Basic nursing programs are required to be approved by the Nursing Council
Where have all the nurses gone?

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurses</td>
<td>26,887</td>
<td>31,123</td>
</tr>
<tr>
<td>Enrolled Nurses</td>
<td>9,557</td>
<td>10,187</td>
</tr>
<tr>
<td>Registered Midwives</td>
<td>4,648</td>
<td>4,655</td>
</tr>
</tbody>
</table>

Source: The Nursing Council of Hong Kong
The Midwives Council of Hong Kong
The Players in Planning

- Government bureaus: Food & Health; Education; Labour and Welfare
- University Grants committee
- Local universities
- Health care provider organizations – public/private
- Nursing Councils
Issues and Challenges

- How should the overall nursing workforce planning be done?
- How can we forecast demand?
- The scope of practice for nurses and other health care professionals
- A linked health services and workforce plan
Nursing Workforce Management in the Hospital Authority
Evolution of Nursing Structure in HA

**Pre HA**
- Chief Nursing Officer (CNO)
- Senior Nursing Officer (SNO)
- Senior Nursing Officer (Education) [SNO(E)]
- Nursing Officer (NO)
- Nursing Officer (Education) NO(E)
- Registered Nurse (RN)
- Enrolled Nurse (EN)

**HA New Positions**
- General Manager (Nursing) [GM(N)]
- Departmental Operations Manager (DOM)
- School Principal (SP)
- Ward Manager (WM)
- Nurse Specialist (NS)
Issues

- Management oriented structure
- No clear clinical career option
- Lack of focused clinical development
- Lack of clear direction for profession and career development
New Nursing Career Structure and Progression Model in HA proposed in 2008

The new clinical structure has 3 functional groups of nurses:

- Registered Nurse (RN)
- Advanced Practice Nurse (APN)
- Nurse Consultant (NC)
Objectives of the New Structure

- to provide better role delineation of nurses;
- to strengthen the clinical focus and accountability of nursing practice; and
- to enable nursing specialization in line with health care developments.
New Career Progression Model

**Career**

- **Tier 3**
  - Nurse Consultant

- **Tier 2**
  - Advanced Practice Nurse

- **Tier 1**
  - Registered Nurse (Beginner)
  - Registered Nurse (Pre-Specialty)
  - Registered Nurse (Specialty Nurse)

**Clinical**

- Nurse Consultant

**Management**

- Department Operations Manager
- Ward/Unit Manager
## Career Progression

### Milestones

<table>
<thead>
<tr>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>4th</th>
<th>5th</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Preceptorship</td>
<td>1) Generic Competency</td>
<td>1) Specialty Qualification</td>
<td>1) Sub-Specialty/Mgt Qualification</td>
<td>1) Clinical Managerial Leadership</td>
</tr>
<tr>
<td>2) Performance</td>
<td>2) Specific Competency</td>
<td>2) Experience</td>
<td>2) Higher Academic Qualification</td>
<td>Expertise</td>
</tr>
<tr>
<td></td>
<td>3) Experience</td>
<td>3) Performance</td>
<td></td>
<td>3) Experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3) Performance</td>
</tr>
</tbody>
</table>

| 18 Years + | 12 Years + | 7 – 10 Years | 4 – 6 Years | 3 Years |
| Nurse Consultant | Advanced Practice Nurse | Specialty Nurse | Registered Nurse (Pre-Specialty) | Registered Nurse (Beginner) |
A Model of Building Specialty Qualification in HA

Post-basic Certificate in Specialty Nursing e.g. Emergency nursing, Intensive care, Paediatrics etc.

Core Clinical Competencies (Web-based)
- Nursing Assessment
- Basic Life Support
- Wound Mgt
- Pain Mgt
- Communication Skills
- Patient Education
- Patient Safety & Infection Control
- Occupational Safety and Health
- Legal and Ethical Issues
- Multi-disciplinary Collaboration

Advanced Specialty Competencies (option)
- Focused Nursing Assessment
- Advanced Cardiac Life Support
- Therapeutic Communication
- Patient Empowerment
- Rehabilitation
- Discharge Planning & Service Coordination
- Evidence Based Practice

Specialty certification
# Specialty Nursing Certificate Courses Provided by HA

<table>
<thead>
<tr>
<th>No.</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Advanced Medical Nursing</td>
</tr>
<tr>
<td>2.</td>
<td>Advanced Surgical Nursing</td>
</tr>
<tr>
<td>3.</td>
<td>Anaesthetic and Recovery Nursing</td>
</tr>
<tr>
<td>4.</td>
<td>Cardiac Care Nursing</td>
</tr>
<tr>
<td>5.</td>
<td>Cardiac Surgical Nursing</td>
</tr>
<tr>
<td>6.</td>
<td>Community Nursing</td>
</tr>
<tr>
<td>7.</td>
<td>Community Psychiatric Nursing</td>
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<tr>
<td>8.</td>
<td>Continence Nursing</td>
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<tr>
<td>9.</td>
<td>Diabetes Nursing</td>
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<tr>
<td>10.</td>
<td>Emergency Nursing</td>
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<tr>
<td>11.</td>
<td>Gerontological Nursing</td>
</tr>
<tr>
<td>12.</td>
<td>Transplant Nursing</td>
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<tr>
<td>13.</td>
<td>Intensive Care Nursing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No.</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>14.</td>
<td>Neonatal Intensive Care Nursing</td>
</tr>
<tr>
<td>15.</td>
<td>Paediatric Intensive Care Nursing</td>
</tr>
<tr>
<td>16.</td>
<td>Peri-operative Nursing</td>
</tr>
<tr>
<td>17.</td>
<td>Primary Health Care Nursing</td>
</tr>
<tr>
<td>18.</td>
<td>Psychiatric Rehabilitation Nursing</td>
</tr>
<tr>
<td>19.</td>
<td>Rehabilitation Nursing</td>
</tr>
<tr>
<td>20.</td>
<td>Renal Nursing</td>
</tr>
<tr>
<td>21.</td>
<td>Respiratory Nursing</td>
</tr>
<tr>
<td>22.</td>
<td>Rheumatology Nursing</td>
</tr>
<tr>
<td>23.</td>
<td>Substance Abuse Nursing</td>
</tr>
<tr>
<td>24.</td>
<td>Breast Care</td>
</tr>
<tr>
<td>25.</td>
<td>Orthopaedics &amp; Traumatology Nursing</td>
</tr>
<tr>
<td>26.</td>
<td>Advanced Paediatric Nursing</td>
</tr>
</tbody>
</table>
Proposed Training Framework for Advanced Practice Nurses (APN)

- People Management
  - Leadership skill
  - Team work
  - Motivation
  - Communication skills
  - Performance Management & SDR
  - Supervisory skills development for first-line leaders

- Service Management
  - Managing difficult complaints
  - Conflict Management
  - Quality and risk management
  - Service development
  - Change management

- Advanced Nursing Practice including ACLS
Nurse Consultant in HA

Scope of NC Practice

Strategic plan

Community care development & networking

Care delivery model/care pathway/guidelines

Consultation service

Direct care and management of complex and high risk cases

Enhance clinical patient care, monitor standard & outcomes of care

Ensure Care Standard
Nurse Consultant Development

Navigating Change
- The Next of Nursing Management
- Corporate essentials in Spearheading Services
- Research: You & I

Enabling Change
- Writing to Readers’ Wants
- Presenting to Audience’s wants

Managing Change
- Bringing change through Project Management
- Influencing for success

1st - 2nd month
3rd - 4th month
5th - 6th month
A Clear Direction for Education, Training and Development

- Coordination between service and education
- Clinical practice
- Learning culture
- Continuing education
Summary and Conclusion

- The quantity and quality of the health workforce are critical issues for the strengthening of a health system.

- An integrated approach to nursing and health workforce planning is needed.

- A clinical career pathway with associated development programs can contribute to nursing workforce management.
Thank You!