

Topic Overview

Planning for the Future Health Workforce of Ontario

Stakeholder Dialogue
28 September 2016

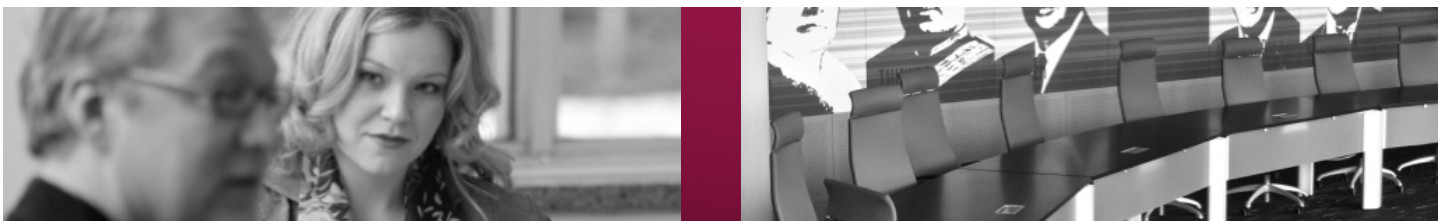
The McMaster Health Forum convened a stakeholder dialogue on the subject of Planning for the future health workforce of Ontario. With the support of the Government of Ontario and the Registered Nurses' Association of Ontario, the dialogue brought together 23 participants – drawn from government, regional and provider organizations, professional associations and regulatory bodies, patient groups, and research centres – from across Ontario to examine the challenges in workforce oversight, elements of a potentially comprehensive approach for modernizing it, and key implementation considerations.

Deliberation about the problem

Dialogue participants focused on six dimensions of the problem: 1) health workforce planning is not routinely or systematically undertaken; 2) health workforce regulation complicates planning efforts; 3) the needs of patients are not incorporated into planning efforts; 4) the definition of health adopted by policymakers and stakeholders is too narrow to make meaningful progress in health workforce planning; 5) demographic changes and shifts in health-system arrangements create uncertainties when planning for the future health workforce; and 6) political constraints have hindered progress in health workforce planning.



The views expressed in the evidence brief and dialogue summary are the views of the authors and should not be taken to represent the views of the funders.





Participants drawn from government and from health, professional and research organizations gather during a McMaster Health Forum event on 28 September 2016

Deliberation about an approach

Participants generally supported element 1 (determine health needs and describe functions required to meet those needs) and element 2 (establish models of care and determine health workforce requirements) and they rejected the idea that element 2 could be used as the ‘hit the ground running’ approach without first pursuing the ‘build from the ground up’ approach outlined in element 1. Participants also called for a more expansive view of element 3 (select appropriate policy levers to meet health workforce planning objectives). For all three elements they identified a number of requirements for the elements to be as helpful as they could be. Participants also identified several cross-cutting themes that should be front and centre in discussions about health workforce planning: 1) consider how to best invest in the software that will allow for the dynamic modelling of the workforce and simulations of the impacts of changing models of care on the workforce; 2) recognize that the political and change-management costs will be high; and 3) commit to striking the right balance between local and provincial planning and between system-wide planning and market forces.

Dialogue deliverables

To learn more about this topic, consult the [evidence brief](#) that was presented to participants before the dialogue, the [summary](#) of the dialogue, and view the [interviews](#) with dialogue participants.

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Deliberation about next steps

During the deliberation about next steps, most dialogue participants agreed that there are a number of commitments that could be considered by all stakeholders interested in improving health workforce planning: 1) establishing an inclusive group to achieve consensus around health workforce-planning priorities, including the creation of a comprehensive process for health workforce planning to ensure progress is made; 2) committing to a true ‘patients first’ approach to care, whereby health workforce needs are matched to the diverse needs of communities across the province; 3) taking advantage of the opportunities that government initiatives present for initiating system transformation and disruptive innovation (e.g., the *Patients First Act* and ‘health accord’ renewal); 4) pursuing the many short-term wins that present themselves, evaluate what works, and commit to scaling up effective approaches; 5) recognizing the need to balance macro-level system needs with micro-level needs of local communities; and 6) working collectively and inclusively to avoid the turf wars that have plagued past efforts.