



## SIMULATING FUTURE SUPPLY OF AND REQUIREMENTS FOR HHR IN HIGH-INCOME OECD COUNTRIES

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A separate study determined that most analyses of HHR labour markets in high-income OECD countries failed to consider the degree to which their respective HHR supplies are currently, or will in the future be, optimal to meet their health care system objectives. This presentation will describe a methodology for overcoming this failure and demonstrates its application using examples from Canada.

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### PURPOSE/OBJECTIVES

The purpose of this paper is to demonstrate the application of that methodology, using data publicly available online, to simulate the supply of and requirements for midwives, nurses, and physicians in the 31 high-income member countries of the Organisation for Economic Co-operation and Development (OECD) up to 2030.

### FINDINGS/IMPACT/OUTCOMES

Relevant recent measures for each model parameter were found for at least one of the included countries. In total, 35% of the desired current data elements were found; assumed values were used for the other current data elements. Multiple scenarios were used to demonstrate the sensitivity of the simulations to different assumed future values of model parameters. Depending on the assumed future values of each model parameter, the simulated HHR gaps across the included countries could range from shortfalls of 74,000 midwives, 3.2 million nurses, and 1.2 million physicians to surpluses of 67,000 midwives, 2.9 million nurses, and 1.0 million physicians by 2030.

### CONCLUSIONS

Despite important gaps in the data publicly available online and the short time available to implement it, this paper demonstrates the basic feasibility of a more comprehensive, population needs-based approach to estimating HHR supply and requirements than most of those currently being used. HHR planners in individual countries, working with their respective stakeholder groups, would have more direct access to data on the relevant planning parameters, and would thus be in an even better position to implement such an approach, contributing to the optimization of their respective health workforces.