

Health workforce regulation

in the Western Pacific Region



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1. INTRODUCTION

Along with fiscal and monetary policy, regulation has a key role in shaping the welfare of economies and society, and is one of the key levers for government influence (1). Governments regulate health services and systems to improve the quality of health services and health outcomes, ensure equity and access, protect the public, promote social cohesion and increase economic efficiency (2).

The core, common elements of many regulatory systems include the standards required to become registered or licensed (i.e. prescribed educational pathways and qualifications); standards set for entry into a profession; standards required to maintain registration (including continuing professional education); and mechanisms for dealing with people who breach the standards (e.g. how fitness to practise is assessed, and complaints and notifications are managed). The arrangements, approaches and processes that are established to implement these systems may vary considerably, according to the legislation (*Annex 1*), the purpose of the regulation itself, and whether regulation is profession- or government-led.

The 37 countries and areas that make up the World Health Organization (WHO) Western Pacific Region (*Annex 2*) are diverse, with respect to culture, socio-political histories, population size and demography, geography, economic prosperity, resources and health status. This diversity is mirrored in the significant variation in equitable access to health care; in the number, type and distribution of workforces that provide health services; and in the development and implementation of legislation that regulates the education and practice of health-care workers (3). Despite these differences, there are also opportunities to draw on the experiences of many of the countries and areas in the Region to better understand how to extend the knowledge of regulation and regulatory processes, and further, what support can be put in place at the country level.

This report provides an overview of the status of the regulation of the health workforce across the Region. It relates only to regulatory regimes, not the overall functionality of each area or whether intended outcomes are being achieved. These are wider issues, beyond the scope of this initial review.

Published information relating to legislation, governance arrangements, registration and renewal processes, accreditation of education providers and programmes, and approaches for setting and monitoring adherence to practice standards was identified through a desk review. This material was augmented with information from a small number of interviews.

For the desk review, an assessment was conducted for each country and area, by profession, using a set of key questions (*Annex 3*).¹

Searches included websites and publications from national and international organizations and agencies; government departments and ministries; country-specific legislation, acts, decrees and regulations; professional associations; research-based organizations and universities; and WHO collaborating centres. A comprehensive list of reference material has been compiled and is available separately.

Where significant information gaps and/or contradictory information emerged, interviews with a few key informants were undertaken to augment and validate material from the desk review.

The review findings identified that regulation of health professionals is well established in some countries and areas, and an evolving feature of health system development in others. This diversity is evident in the various systems for accrediting education programmes and monitoring provider performance, in the range of approaches for regulating health professional practice, and in information gaps on how regulation is being implemented. A number of emerging issues, such as telemedicine, and increased population and practitioner mobility, complicate an already complex landscape.

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