

# The Global Health Agenda and Changing Workforce

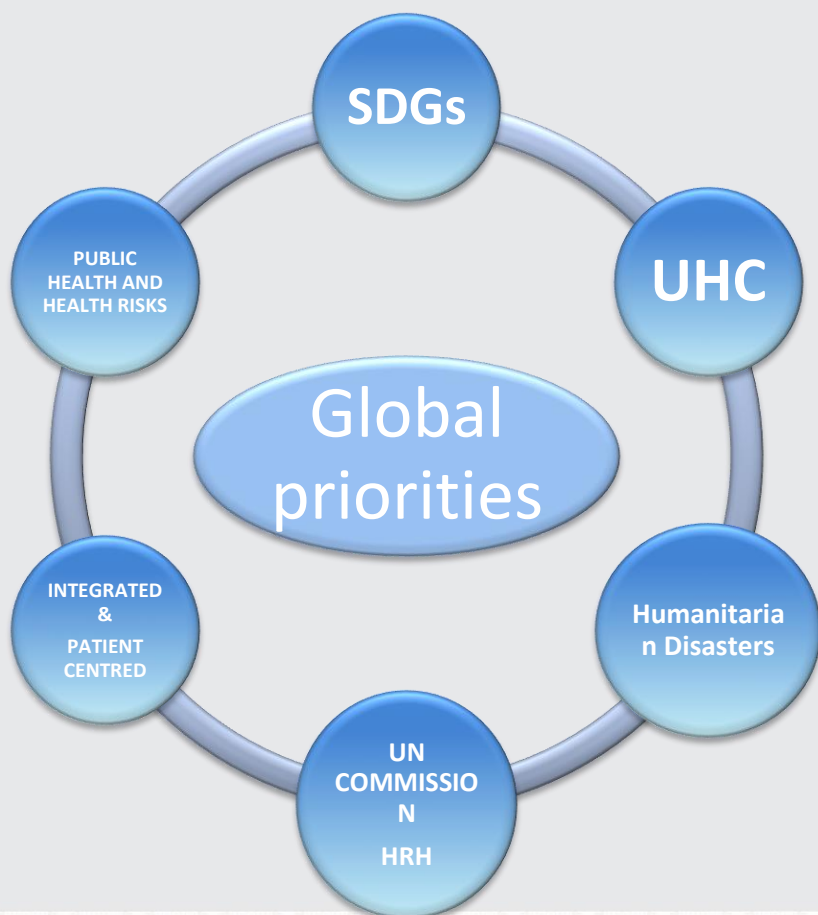
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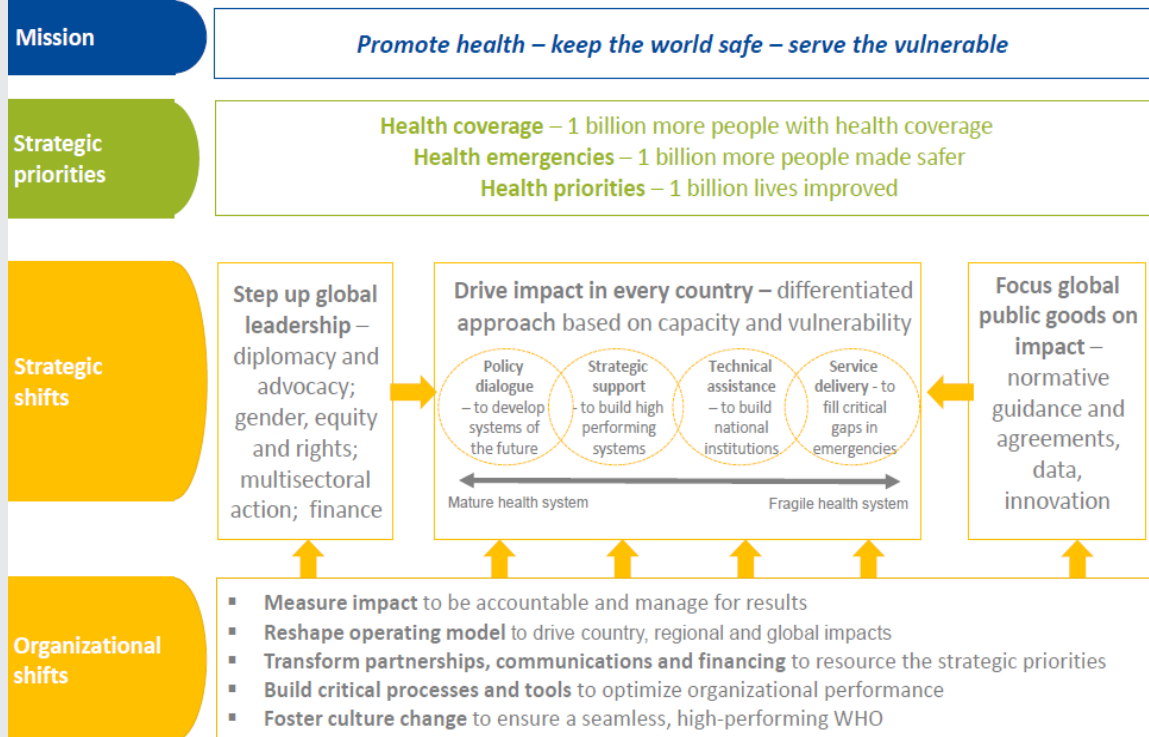
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# Global Health Priorities



## WHO's draft thirteenth general programme of work: 2019–2023







**NURSES**  
A VOICE TO LEAD  
ACHIEVING THE SDGs



**NURSES' ROLE  
IN ACHIEVING THE SUSTAINABLE  
DEVELOPMENT GOALS**

INTERNATIONAL NURSES DAY  
RESOURCES AND EVIDENCE

INTERNATIONAL COUNCIL OF NURSES



*“There is no doubt  
in my mind that  
nurses are the  
lynchpin of  
achieving the  
Sustainable  
Development  
Goals”*

Dr Tedros Adhanom  
Ghebreyesus, Director  
General World Health  
Organization

# SDG – Goal 11: Sustainable cities

**100 million**

People are estimated to be homeless.



**1.6 billion**

People are lack adequate housing.



International Council of Nurses

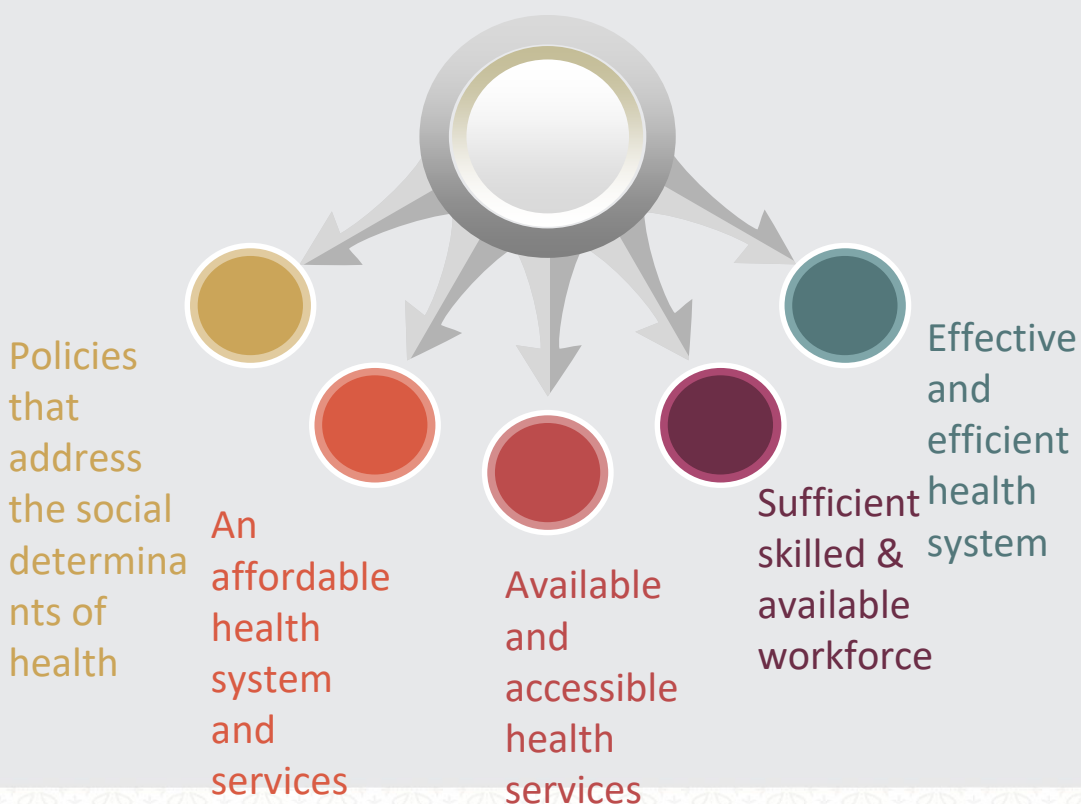
## Case study

### Inclusive Health, Australia

- Nurse led services providing care to people living on the streets.
- The service collaborates with various sectors in order to break the cycle of homelessness.
- The model has led to savings of \$6.5 million per year
- It has improved at least 82 quality adjusted life years.



## Factors required for the successful implementation of Universal Health Coverage





**NURSES**   
A VOICE TO LEAD  
HEALTH IS A HUMAN RIGHT



**HEALTH IS A HUMAN RIGHT  
ACCESS, INVESTMENT AND  
ECONOMIC GROWTH**

INTERNATIONAL NURSES DAY  
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 **OUTCOME HEALTH**



# Methicillin-resistant *Staphylococcus aureus* (MRSA)

Figure 1.16: *Staphylococcus aureus*: proportion of invasive isolates resistant to methicillin (MRSA) in 2009



2009 EARS-net



2016 CAESAR





**“Primary health services should be strengthened by increasing the health workforce, supporting innovative models of prevention and care, and enabling all health workers to embrace the full scope of practice in the prevention and management of NCDs ..... Nurses have especially crucial roles to play in health promotion and health literacy, and in the prevention and management of NCDs”**



# Primary Health Care

## Alma Ata, 1978

The International Conference on Primary Health Care calls for urgent action by all governments, all health and development workers, and the world community to protect and promote the health of all the people of the world by the year 2000.



World Health  
Organization

Осы ғимаратта 1978 жылғы 6-12 қыркүйекте  
Алматы декларациясын  
(Әлемдік денсаулық сақтаудың Ұлы Хартиясы)  
қабылдаған Дүниежүзілік денсаулық сақтау ұйымы мен  
БҰҰ Балалар қорының алғашқы медициналық-санитарлық жәрдем  
жөніндегі тарихи халықаралық конференциясы өтті.

В этом здании 6-12 сентября 1978 года  
прошла историческая международная конференция  
Всемирной организации здравоохранения и Детского фонда ООН  
по первичной медико-санитарной помощи, которая приняла  
Алма-Атинскую Декларацию  
(Великая Хартия мирового здравоохранения).

Here, at the Palace of Republic, on 6-12 September  
1978 the historic International Conference was held  
at the World Health Organization and UN Children's Fund on  
Primary Health Care,  
in which Almaaty Declaration (The World Health  
Great Charter) was adopted.



**Alma Ata 40th Anniversary  
Astana 2018 - A new PHC  
Declaration  
A Vision and Operating  
Framework  
Numerous technical papers  
including the Health Workforce  
ICN and Nursing Now Delegation  
A side event and Exhibit  
Youth representation**

On 25-26 October 2018, the world will come together in Astana, Kazakhstan, at the Global Conference on Primary Health Care to renew a commitment to primary health care to achieve universal health coverage and the Sustainable Development Goals. The Conference will be co-hosted by the Government of Kazakhstan, WHO and UNICEF.



## Health workforce

### High-Level Commission on Health Employment and Economic Growth



WHO/S. Aranda

On 2 March 2016, the United Nations Secretary-General announced the appointment of a Commission on Health Employment and Economic Growth (the Commission), co-chaired by H.E. Mr. François Hollande, President of France, and H.E. Mr. Jacob Zuma, President of South Africa. Dr Margaret Chan, Director-General of the World Health Organization (WHO) serve as the co-vice chair along

## WORKING FOR HEALTH AND GROWTH

*Investing in the health workforce*





# Case for Investment: Health Workforce

## Health a leading economic and labour sector

- Health economy estimated at US\$ 5.8 trillion per year in OECD countries
- 11% of total employment in OECD countries, 2014
  - Health employment grew by 48% between 2000 and 2014
  - Jobs in other key areas (industry, agriculture) declined during the period
- A major employer of women
  - Proportion of women employed in the health and social sector (67%) higher than women's overall employment (41%).

## New evidence and thinking

- **Health employment a multiplier of economic growth (Arcand 2016) as opposed to a drag on the economy (Baumol 1967, Hartwig 2008, 2011).**

### The Health Economy: Germany

From 2005 to 2012, responsible for approximately:

- 11% of gross value added
- 7% of exports
- 20% of final consumption
- 15% of total employment

Each dollar invested in the health sector resulted in an additional US\$ 0.77 contribution to economic growth.

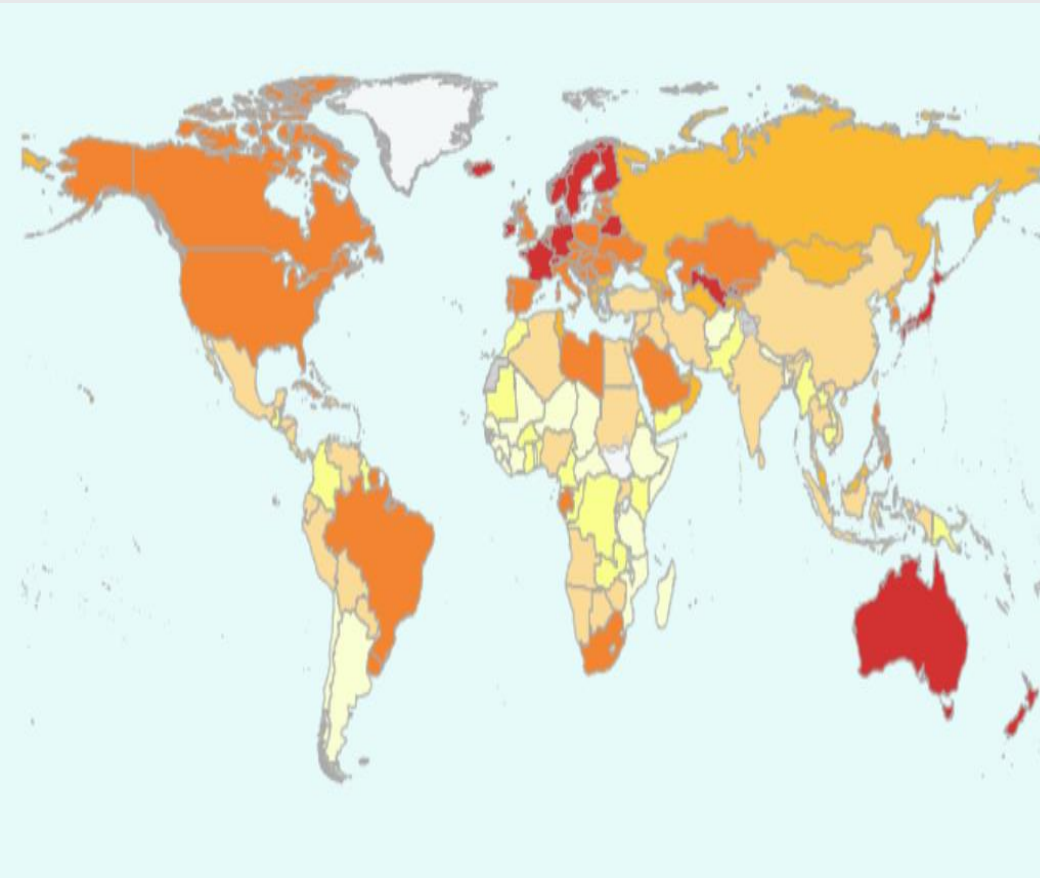
**Table A1.3. Estimates of health worker needs-based shortages (in millions)\* in countries below the SDG index threshold by region, 2013 and 2030**

REGION	2013				2030				% CHANGE
	Physicians	Nurses/ midwives	Other cadres	Total	Physicians	Nurses/ midwives	Other cadres	Total	
Africa	0.9	1.8	1.5	4.2	1.1	2.8	2.2	6.1	45%
Americas	0.0	0.5	0.2	0.8	0.1	0.5	0.1	0.6	-17%
Eastern Mediterranean	0.2	0.9	0.6	1.7	0.2	1.2	0.3	1.7	-1%
Europe	0.0	0.1	0.0	0.1	0.0	0.0	0.0	0.1	-33%
South-East Asia	1.3	3.2	2.5	6.9	1.0	1.9	1.9	4.7	-32%
Western Pacific	0.1	2.6	1.1	3.7	0.0	1.2	0.1	1.4	-64%
<b>Grand Total</b>	<b>2.6</b>	<b>9.0</b>	<b>5.9</b>	<b>17.4</b>	<b>2.3</b>	<b>7.6</b>	<b>4.6</b>	<b>14.5</b>	<b>-17%</b>

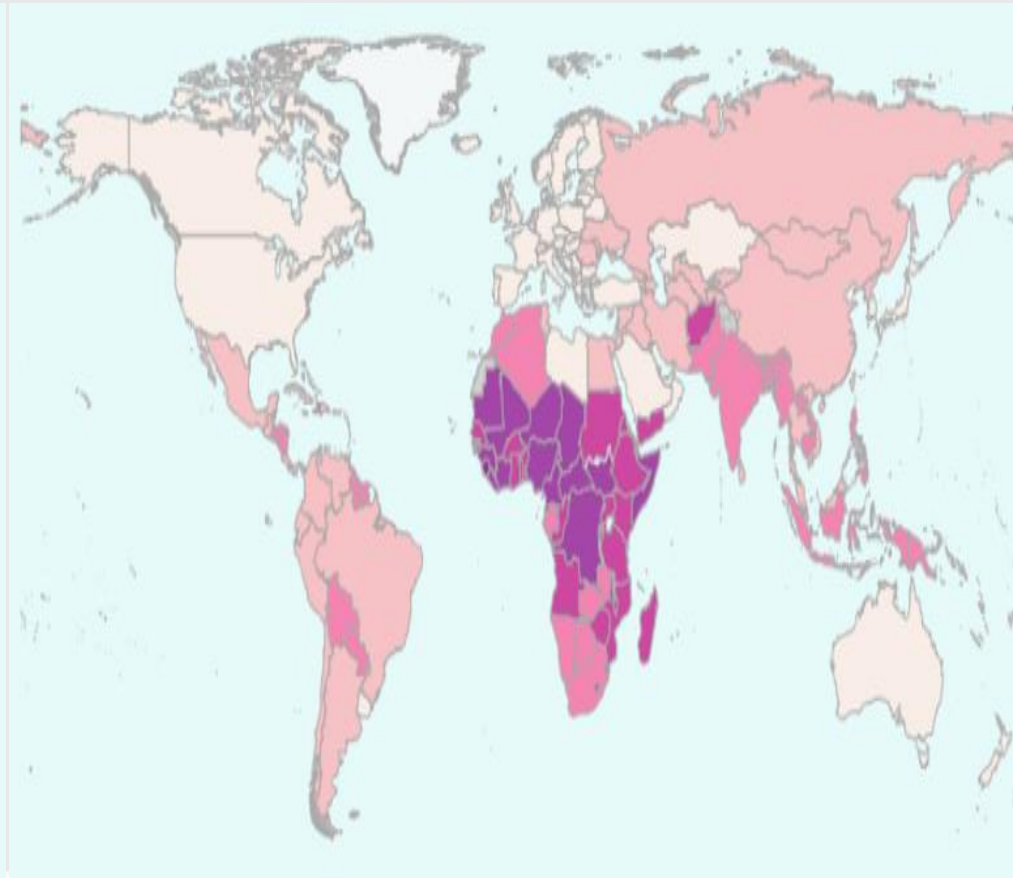
\* Since all values are rounded to the nearest 100 000, totals may not precisely add up.



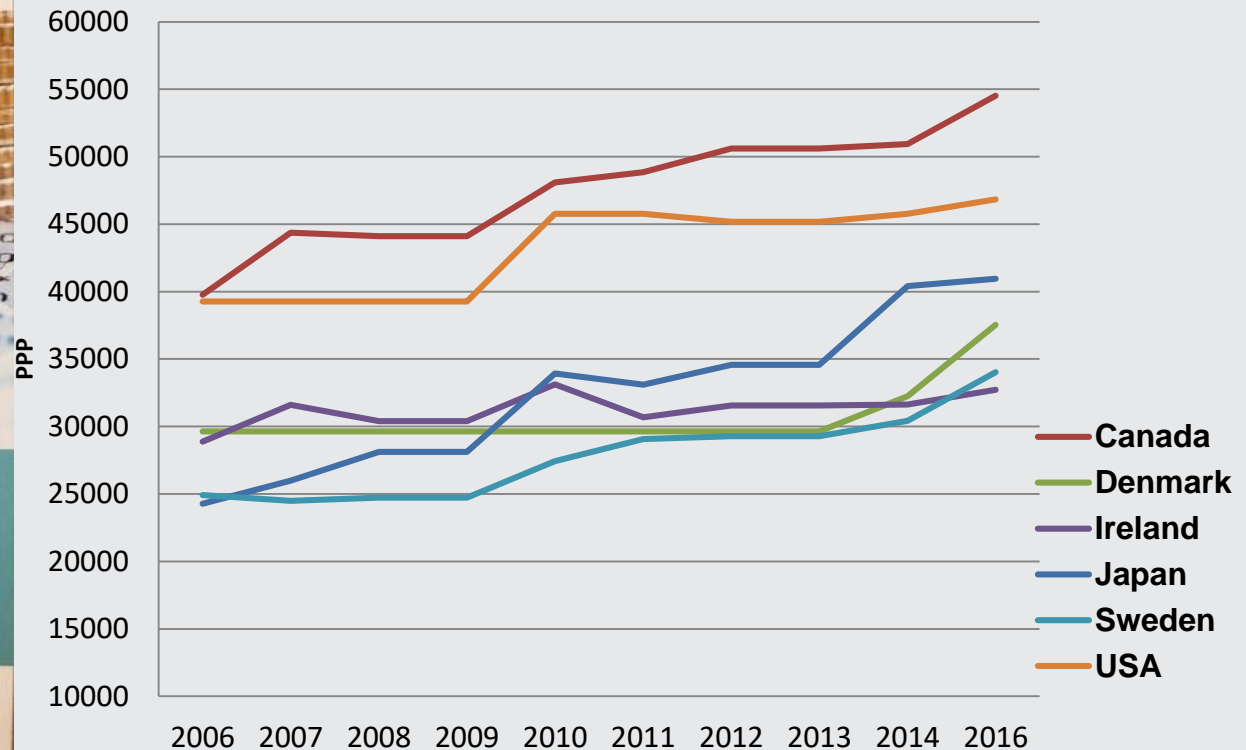
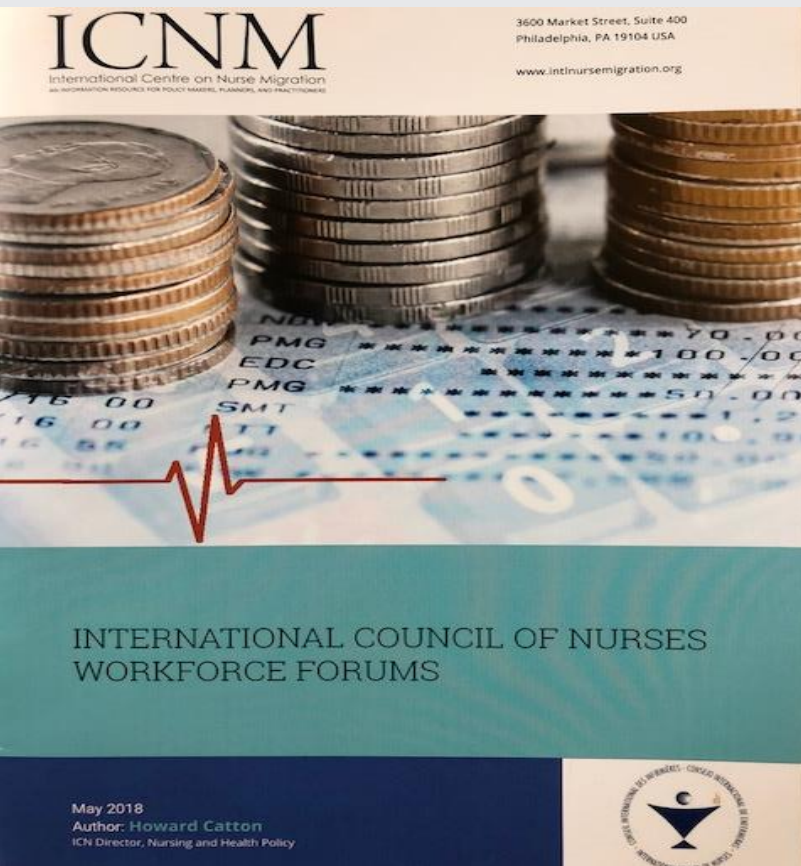
## Density of N&M per 1000 pop



## Maternal and Infant Mortality



# International WFF – Starting salaries for RNs working in Public Sector Hospitals 2006 - 2016





# Why Nurse Staffing Matters

## PATIENT SAFETY

- > Lower mortality rates
- > Lower hospital-acquired infection rates
  - > Fewer falls
- > Lower failure to rescue rates
  - > Fewer medicine errors
- > Better patient experience



## NURSE SAFETY

- > Lower stress levels
- > Lower illness rates
- > Lower absence rates
  - > Better morale
- > Improved retention rates
- > Lower burnout rates

# Position Statement: Evidence-based safe nurse staffing



- Extensive review & revision incl experts
- Staffing is safety critical
- Needs = supply & evidence based
- Tools and professional judgement
- No substitution
- Leadership from Ward to Board



## Evidence-based safe nurse staffing

Nursing is a core service in all healthcare. Safe nurse staffing means that an appropriate number of nurses is available at all times across the continuum of care, with a suitable mix of education, skills and experience to ensure that patient care needs are met and that the working environment and conditions support staff to deliver quality care. Safe nurse staffing is a critical issue for patient safety and the quality of care in hospitals, community and all settings in which care is provided. Inadequate or insufficient nurse staffing levels increase the risk of care being compromised, adverse events for patients, inferior clinical outcomes, in-patient death in hospitals and poorer patient experience of care.<sup>1-7</sup> Having insufficient or inappropriate nursing staff to meet patient needs also results in unsustainable workloads and has a negative impact on the health and wellbeing of staff.<sup>4-6,9</sup> Research suggests that investing in safe, effective and needs based nurse staffing levels can be cost effective, promoting improvement of and preventing deterioration in patients' health thereby reducing the duration and intensity of healthcare interventions.<sup>10,11</sup> Ongoing evidence continues to highlight the importance of safe nurse staffing in relation to patient safety in all health care sectors.

There are a number of elements to achieving evidence based safe nurse staffing:

- real time patient needs assessment
- local assessment of nurse staffing requirements to provide a service
- nursing and interdisciplinary care delivery models that enable nurses to work to their optimal scope of practice
- good human resource practices to recruit and retain nurses
- healthy work environments and occupational health and safety policies and services that support high quality professional practice
- workforce planning systems to ensure that the supply of staff meets patient needs
- tools to support workload measurement and its management
- rostering to ensure scheduling meets anticipated fluctuations in workload
- metrics to assess the impact of nurse staffing on patient care and policies that guide and support best practice across all of these.<sup>10,12,13</sup>

This requires having an appropriate base staffing that includes a range of competencies





- Respiratory & CVD
- Infectious disease
- Malnutrition
- Injuries & death
- Migration
- Mental Health



# Nurses, climate change and health



INTERNATIONAL COUNCIL OF NURSES  
**Position Statement**



## Nurses, climate change and health

Climate change presents the single largest threat to global development with the potential to undermine the past 50 years of public health gains.<sup>1</sup> Nurses can make a powerful contribution to both mitigate climate change and to support people and communities around the world to adapt to its impacts. Leadership from nurses to take immediate action to build climate resilient health systems is necessary. This includes, but is not limited to, developing models of care to reduce unnecessary travel, developing climate-informed health programmes for emerging infectious and

unnecessarily travel, developing climate-informed health programmes for emerging infectious and systems is necessary. This includes, but is not limited to, developing models of care to reduce to its impacts. Leadership from nurses to take immediate action to build climate resilient health to both mitigate climate change and to support people and communities around the world to adapt undermine the past 50 years of public health gains.<sup>1</sup> Nurses can make a powerful contribution Climate change presents the single largest threat to global development with the potential to

Nurses' climate change and health



# Migration and Humanitarian Crisis

- Demography
- Demand
- Disparities
- Digital Revolution
- Disasters
- Desperation





- Anti migrant sentiment and xenophobia
- “Refugee amnesia”
- Human rights violations, violence and discrimination
- Lack of political leadership & courage
- Nurses as Advocates, Health is a Human Right
- Code of Ethics





# Code of Ethics Review



A supranational  
code of ethics  
adopted in 1953 and  
revised in 2012

A platform for reflection  
and is a guide for action  
based on social values  
and needs

Part of a professional  
regulatory strategy

Based on universal  
principles and values  
that aim to demonstrate  
coherent professional  
duties and expectations

## *Relevant areas to be updated*

- Nurses' responsibilities and accountability
- Transcultural work
- Personal responsibility
- Advocacy role of nurses
- Right, as a nurse, to be supported by employers to maintain general and mental health;
- Duty to sustain the natural and working environment
- Nurses' role in social justice issues
- Nurses' role in sustaining the SDG
- Health information through popular websites
- Analysis of issues related to information technology
- Public expectations;
- The increased role of genomics in healthcare



## International Council of Nurses

In May 2016, ICN signed a joint statement calling on the United Nations Security Council to reaffirm international humanitarian law and adopt specific measures to protect healthcare workers





## The effects of violence on health care and all of us ICN active role in protecting health care workers

### 01 ICN joins the Health Care in Danger Initiative

ICN calls on the United Nations to adopt a resolution to protect healthcare workers.

### 02 ICN and WMA condemn continuing violence against health personnel

ICN leads the way in condemning violence against health personnel in Syria and other Nations.

### 03 Founding member of Safeguarding Health in Conflict Coalition

Promotes respect for international humanitarian and human rights law that relates to the safety and security of health facilities, health workers and patients.

### 04 Member on the Steering Committee and Scientific of the International Conference on Violence in the health sector

The largest international conference on conflict and violence in healthcare

### 05 International Nurses Day – Nursing a Voice to Lead: Achieving the Sustainable Development Goals

Raising awareness to nurses, communities, governments and other decision makers about nursing contribution to achieving the SDGs









## ICN, the Global Voice, delivered interventions on:



- WHO's 13th general programme of work, 2019-2023
- Public health preparedness and response
- Health, environment and climate change
- Preparation for the third High-Level Meeting of the General Assembly on the Prevention and Control of Non-Communicable Diseases
- Preparation for the high-level meeting of the General Assembly on ending tuberculosis
- Physical activity for health
- Global Strategy for Women's, Children's and Adolescents' Health (2016-2030): early childhood development:
- Rheumatic fever and rheumatic heart disease
- Global vaccine action plan



## BEYOND HEALTHCARE TO HEALTH

27 June to 1 July 2019

Join us at the  
International Council of Nurses 2019 Congress  
Marina Bay Sands, Singapore



# Nursing now

@ICNurses  
[www.icn.ch](http://www.icn.ch)



## 1820

Florence Nightingale  
was born in Florence,  
Italy on May 12, 1820.  
Florence was named  
after the place of her  
birth.





