

The AAAH Work Plan 2007-2008



The AAAH Secretariat
IHPP-Thailand, Sataranasuk 6 Road, Nonthaburi 11000, Thailand
Tel. +66-2-5902370 • Fax. +66-2-5902385 • Email. secretariat@aaahrh.org

The AAAH Workplan 2007-2008

Background

There is a global crisis in human resources for health (HRH), which is limiting access to effective health services for many, particularly the poor and the most vulnerable, and hindering the progress towards health and development goals and targets. The HRH crisis directly affects the ability of global mechanisms to tackle major health issues and to accomplish their mandates, such as the work of the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) and the Global Alliance for Vaccine Initiative (GAVI). Progress towards global targets, such as the Millennium Development Goals (MDGs) is dependent upon the effectiveness of HRH and the strength of the health system. Globalization, demographic and socio-economic transition and rapid technological development, all add to the challenges of equitable and effective health services provision that should be universally accessible. With global market in human resources for health that fuels the migration of health workers from rural to urban areas, from public to private sector and from resource poor to richer nations, national and regional responses must be aligned with international and global response.

*Human resources for health include all persons who provide health services or who assist persons using health services to do so in appropriate ways*¹. Despite being the biggest item in health budgets, planning and investing in human resource training, development and retention have been neglected for several decades. The consequences of under investment in human resources for health were highlighted by the Rockefeller supported Joint Learning Initiative (JLI) in its HRH Strategy Report² where critical HRH problems including global shortages, skill imbalances, mal-distribution, poor work environments, weak knowledge, and increasing demand were clarified.

The JLI report recommends that actions must be pursued over a “**decade for human resources for health**” (2006–2015) through several mechanisms, including regional action alliances. All agencies, training institutions, professional associations, nongovernmental bodies, and private initiatives should join their efforts in **strengthening sustainable health systems, including the HRH**, in all countries,; mobilizing to **combat health emergencies in crisis countries**, particularly those that are in severe shortage of HRH; and **building the knowledge base for all**.

The Asia Pacific Action Alliance on Human Resources for Health (AAAH) is a regional partnership mechanism established in response to international recognition of the need for global and regional action *to strengthen country capacity for HRH planning and management*. Several key events and meetings have highlighted the issue, in particular the meeting of key global and regional health development experts held in Oslo in February 2005. The Oslo meeting called for Global and Regional Platforms of action to be formed. Hence, at the

¹ Modified from the World Health Report 2000. World Health Organization, Geneva.

² Joint Learning Initiative (JLI) Human Resources for Health: Overcoming the Crisis. Harvard University Press, MA USA 2004

Workshop on Asian Action Learning Network on HRH in August 2005 in Bangkok supported by the Rockefeller Foundation and WHO, participants from 10 countries namely Bangladesh, Cambodia, China, Indonesia, Lao PDR, Philippines, Myanmar, Sri Lanka, Vietnam and Thailand agreed unanimously that a regional mechanism that would address HRH issues in the region is needed. Hence, the AAAH was established with 10 founding members and an interim secretariat hosted at the International Health Policy Program, Thailand. The AAAH memberships further expanded at the 1st AAAH Conference at the Krungsri River hotel, Ayuthaya, Thailand, in October 2006 when 5 additional members from India, Nepal, Fiji, Papua New Guinea, and Samoa joined.

Vision

“Strengthened HRH planning and management capacity toward adequate, equitable, efficient and effective HRH and health systems for health equity and quality improvement in the Asia-Pacific region”

Mission

“To generate and collate necessary evidence for effective human resource planning and management;

to develop the capacity within the region under a broader framework of overall health systems strengthening;

to increase access to effective health services, particularly for the poor, and

to enable accelerated progress towards the Millennium Development Goals.”

Objectives

1. To review regional HRH situation and to advocate actions for HRH priority and health systems related HRH strategic plan and policy at country level, particularly in relation to health related crisis.
2. To coordinate HRH knowledge generation, management and sharing
3. To work as information clearing house for regional HRH monitoring and to support HRH information system strengthening at country level.
4. To coordinate and assist countries on capacity building for HRH management.
5. To coordinate and identify regional HRH expertise and to mobilize resources for HRH technical supports as requested by the countries.

Priority actions

At the 1st AAAH Conference in Ayutthaya, Thailand, the participants prioritized five key actions to be implemented as follows: 1) *Advocacy for HRH at regional and country levels*; 2) *Information monitoring and HRH information system strengthening*; 3) *Knowledge generation, management and sharing*; 4) *Capacity building in member countries*; and 5) *Technical support*. Within these 5 key actions selected priority action items were highlighted by the participants (shown in bold font below). More details about the goals and deliverables of each priority action are shown in annex 1.

Action 1: To **advocate** for HRH at regional and country levels.

- a) **Advocate importance of human resource issues to be on the national health agenda**
- b) **Leverage funding for HRH in the region and its member countries**
- c) Development of guidelines for HRH plan for countries to assess their level of progress in the area
- d) Promote and facilitate the regional HRH strategies developed by WHO SEARO & WPRO
- e) Accommodate sub-group platforms with similar HRH issues e.g. Pacific island group

Action 2: To work as information clearing house for regional HRH **monitoring** and to support HRH information system strengthening at country level

- a) **Support regular HRH assessment and situational analysis in member countries including monitoring of HRH plans**
- b) **Support an improvement of country HRH information system including data collection, analysis, and reporting of relevant indicators**
- c) Advocate for an inclusion of core HRH statistics into routine country's and regional health information systems, including recent initiatives such as the Health Metrics Network
- d) Formulate a common list of meaningful HRH indicators for the region and work with the global platform to help build global monitoring systems

Action 3: To coordinate **knowledge** generation, management and sharing:

- a) **Identify ongoing HRH knowledge management activities at national levels**
- b) **Collect case studies and lessons learned on HRH from member countries**
- c) Create mechanisms for sharing of information such as
- d) Organize workshops on specific HRH issues
- e) Develop and maintain a regional website for active information exchange
- f) Initiate a number of joint research projects on specific HRH issues. The choices may include:
 - Critical review of selection and recruitment policy for HRH in the region with a view to identify which policies yield committed Health workforce
 - HRH for priority health issues and problems,
 - HRH attrition and deployment patterns,
 - HRH analysis and needs assessment,
 - HRH optimum skill mix, and multiskilling of nurses
 - HRH distribution

- HRH Information management,
- Mapping of HRH and health care needs in member countries
- Evaluation of effectiveness of existing HRH plan,
- Methodology of good practice generation

Action 4: To coordinate and assist countries on **capacity building** for HRH management.

- Create leadership development awareness (materials, resource persons)**
- Conduct workshops and trainings on specific HRH areas as well as in support of the formulation and implementation of HRH Strategic Plan.**
- Facilitate electronic exchanges of best/good HRH management practices.
- Advocate for inclusion of HRH management courses in schools of public health and health professionals' curricula
- Facilitate bilateral mentorship between countries within the region
- Standardize core competences of health professionals and accreditation of courses

Action 5: Coordination of **technical support** as requested by member countries.

- Provide technical support to the member countries in developing HRH plans.**
- Network and cooperation between countries with similar issues**
- Identify different capabilities of member countries
- Support countries in the development of their proposals to the Global Fund and GAVI and for the formulation and implementation of the HRH strategic plan and policy as requested by the countries
- Create a list of regional expertise in the area of HRH

AAAH Administration:

- Formation of AAAH Steering Committee
- Establish formal Secretariat Office
- Identify country focal points
- Compile list of regional and country partners
- Communication with members and public

Key Activities in the first 2 years (2007 – 2008)

The priority action items shown above were translated into a number of key AAAH activities to be implemented during the first two years. The list of activities is shown in Table 1 below. More information of the activities with their respective timelines are provided in the Annex 2 – 4. Annex 2 summarizes the key activities by level of action. Annex 3 shows timelines of each activity item. Implementation details of selected key activities are described in annex 4.

Table 1: List of key activities in 2007-8

Priority actions	Key activities in 2007-8
1. Advocacy	<ul style="list-style-type: none"> - AAAH Website - AAAH Newsletter - AAAH media: slides, brochure - Email correspondents and other communications - Participation in key global and regional HRH events e.g. Peru, Sydney, Bali - Regional HRH consortium meeting with other regional HRH stakeholders
2. Information monitoring	<ul style="list-style-type: none"> - Develop minimum HRH core datasets - Develop regional database on HRH stocks, producers, strategic plans, etc. - Support development of country information systems - Support regular HRH assessment and situation analysis in member countries
3. Knowledge generation and sharing	<ul style="list-style-type: none"> - Regional database as above - Health Workforce Financing multi-country study - Collect case studies and best practices - Support country HRH knowledge management
4. Capacity strengthening	<ul style="list-style-type: none"> - HRH Planning Workshop for Trainers - HRH Leadership Development Workshop - Annual AAAH Conference - activities embedded in the AAAH Website & Newsletter - Other training workshops as needed
5. Technical support	<ul style="list-style-type: none"> - Proposal writing workshop for GAVI & GFTAM - National strategic plan development in 5 priority countries - others as requested
6. Secretariat / Governance	<ul style="list-style-type: none"> - STC meetings - Development of AAAH Charter and refinement of AAAH governance

AAAH Structure

Guiding principle

There will be a light, flexible, inclusive, and non-bureaucratic steering committee, with a small secretariat that is independent but has close relationship with regional and country political structures. The AAAH structure also relies on a focal point in each member country. Responsibilities should be shared among members on a voluntary basis subjected to their current capacity. Inclusion of other countries in the region is encouraged whenever feasible.

(a) The Steering Committee of AAAH

A Steering Committee will be established, in order to oversee all the activities of AAAH. The committee should be light, flexible, inclusive and non-bureaucratic. The participants of the First Conference recommended that Dr. Suwit Wibulpolprasert be the chair of the Steering Committee. Other members could be from 6 member countries (3 from Southeast Asia region and 3 from Western Pacific region), WHO regional offices (1 each from SEARO and WPRO), World Bank and funding agencies. However, the total number of the members should not be more than 12.

Criteria for the members of the Steering Committee

The members of the Steering Committee are champions of HRH management, research and policy development, with regional vision. They are enthusiastic and actively involve in the process of HRH management, research and policy development. They have established good relationship with government sectors, international organizations and funding agencies. The candidates for the first steering committee members have been recommended by the participants of the First Conference. The selection was carried out through consensus among all focal points. In the interim period, the terms of the Steering Committee membership could vary to create a transition system that could maintain institutional memory of the organization.

The members of the first steering committee include:

1. Thailand	Dr. Suwit Wibulpolprasert	Chair
2. Bangladesh	Dr. Khaled Shamsul Islam	Member
3. China	Dr. Zhang Junhua	Member
4. Fiji	Dr. Lepani Waqatakirewa	Member
5. India	Dr. Srinath Reddy	Member
6. Philippines	Prof. Marilyn Lorenzo	Member
7. WHO/SEARO	Dr. Myint Htwe	Member
8. WHO/WPRO	Dr. Ezekiel Nukuro	Member
9. Rockefeller Foundation	Dr. Katherine Bond	Member
10. World Bank	Dr. Fadia Saadah	Member

Responsibilities of the Steering Committee

1. To review annual workplan and the budget;
2. To mobilize resources and raise fund for AAAH;
3. To establish close relationship with international, regional and country political structures;
4. To allocate the funds according to the approved annual workplan;
5. To supervise and to provide guidance to the secretariat;
6. To review the progress reports and the expenditures;

(b) The Secretariat of AAAH

A secretariat with three staff is proposed to be set up. At least, one full time staff works for the secretariat, other two could be part-time or full time, depending on the workload. The secretariat could be contracted to an entity after the approval by the Steering Committee. It could be based in Thailand or elsewhere, its staff reporting directly to the Steering Committee. The staff salary and office expenditures would be financed by AAAH. In the initial two years period, 2007-2008, the secretariat will be based at the International Health Policy Program, Ministry of Public Health, Thailand. The coordinator of the AAAH is Dr. Piya Hanvoravongchai, the assistant coordinator is Ms. Cha-aim Pachanee, and the secretary is Ms. Lalittanan Moolsart.

Responsibilities of the Secretariat

1. To develop the annual workplan and the budget;
2. To coordinate activities as specified in the approved workplan;
3. To prepare meeting agendas, materials and relevant documents;
4. To contact the focal points at the member countries to call the meeting, coordinate and monitor the activities implemented by member countries;
5. To maintain AAAH website, to collect data and documents from member countries and set up the observatory of HRH in the Asia-Pacific Region;
6. To distribute documents approved by the Steering Committee among member countries and partners;
7. To provide logistics services to the Steering Committee and the participants of all AAAH meetings.
8. To coordinate multi-country HRH studies;
9. To mobilize technical assistants to help member countries building capacity on HRH management;
10. To organize teleconferences and meetings;
11. To disseminate findings generated from activities under AAAH.

(c) Focal Points of member countries

The person nominated as focal point should be the participant of the First Conference of AAAH, who is actively doing HRH management, research or policy development, and is able to coordinate all national partners.

Responsibilities of the country focal point

1. To coordinate activities and a network of HRH practitioners in the country;
2. To serve as a contact person for the AAAH secretariat for country level work

Expected outcome

1. An active and sustainable regional mechanism that works effectively to advance development of HRH system in each member country and in the region
2. Better HRH knowledge, information system, and management capacity among countries in the region
3. A competent network of regional and country's HRH managers and researchers
4. Functioning and dynamic HRH systems that efficiently lead health systems towards the ultimate objective of improving equitable health outcome.

Annexes

Annex 1: Action specific goals and corresponding activities

1. Governance & Administration

1.1 A functioning AAAH Steering Committee with clear rules and responsibilities and active interaction with the AAAH secretariat

Related activities:

- A) Develop ASC Governance system: Set up a working group to develop guidelines for the work and responsibilities of ASC members, serving terms, selection system, and a AAAH charter
- B) Form the ASC and develop communication mechanisms between ASC members and secretariat
- C) Convene at least one annual ASC face-to-face meeting per year with additional ASC teleconference on a quarterly basis

1.2 An active AAAH Secretariat that effectively coordinates the AAAH actions as described in AAAH Workplan

Related activities:

- A) Develop formal secretariat structure and responsible personnel
- B) Purchase necessary equipments
- C) Develop administrative and financial support system

1.3 A viable AAAH Charter to guide AAAH governance and functions:

Related activities:

- D) action by a working group identified in [0.2.A]

1.4 An enthusiastic group of country focal points who actively engage in networking with stakeholders in the country

Related activities:

- E) Identify country focal points
- F) Develop communication mechanisms for focal points and secretariat
- G) Develop clear roles and responsibilities of the focal points
- H) Identify and develop necessary supporting system for focal points' functions
- I) Leverage for funding for baseline focal point activities

1.5 Adequate financing for AAAH activities as identified in the Workplan

Related activities:

- J) Identify potential financing partners
- K) Meet with key partners for advocacy for AAAH support
- L) Develop long term strategy for sustainable AAAH financing

2. Advocacy

2.1 Recognition among global and regional HRH stakeholders of the existence and the functions of the AAAH

Related activities:

- A) Identify global HRH partners and other HRH-related regional partners
- B) Approach and disseminate AAAH information/ brochure to all partners
- C) Participate in regional health workforce and health systems meetings
- D) Create channel for AAAH participation by partners & non-members
- E) Conduct one regional HRH consortium meeting with regional stakeholders
- F) Develop and regularly update AAAH Website
- G) Publish AAAH brochure for distribution at various global and regional venues

2.2 Placement of HRH issues on national health agenda

Related activities:

- A) Support focal points and other members in putting HRH on the national agenda
- B) Develop guidelines for HRH planning in country

2.3 Awareness among members of ongoing HRH activities and existing supports from the AAAH and other partners

Related activities:

- A) Develop and regularly update the AAAH Website
- B) Support country focal points in publishing their country weblogs

3. Assessment & Monitoring

3.1 Availability of up-to-date information about health workforce system in the region and in each member country

Related activities:

- A) Publish and regularly update country HRH information on AAAH website
- B) Conduct annual Asia-Pacific HRH situation analysis on health workforce stock, distribution, and production capacity
- C) Compile a regional database of national health workforce strategies

3.2 Functioning health information system that includes essential health workforce information

Related activities:

- A) Develop minimum (core) list of HRH indicators
- B) Support HRH information system development in the context of Health Information System development
 - a. Coordinate with the Health Matrix Network and other relevant global and regional partners e.g. SEARO/WPRO, GHWA on procedure for health information system (HIS) development and the integration of HRH intelligence in the HIS
 - b. Support member countries in HIS development and integration of core HRH indicators in the HIS

4. Knowledge Generation & Management

4.1 Availability of case studies and best practices on HRH policy and management

Related activities:

- A) Identify in-country HRH KM activities
- B) Collect case studies and lessons learned in member countries
- C) Collaborate with GHWA and other global partners for knowledge sharing

4.2 Creation of new knowledge for HRH management and planning

Related activities:

- A) Conduct a multi-country study on Health Workforce Financing
- B) Collaborate with other partners in HRH and Health System research

5. Capacity Building

5.1 Strong health workforce planning and management capacity at country level

Related activities:

- A) Conduct a workshop on HRH Planning for Trainers
- B) Organize a HRH Leadership Development Summit
- C) Provide technical coordination and support as request
- D) Conduct other Workshops/Trainings on HRH as needed

5.2 Active network of health workforce practitioners in each member country

Related activities:

- A) Support focal point in HRH advocacy and networking efforts
- B) Promote AAAH activities at various regional venues with active provision of contact info of AAAH country focal points

6. Technical Support

6.1 Availability of national health workforce strategy in at least 5 member countries

Related activities:

- A) Support country capacity strengthening through 4.1 and 4.2
- B) Support HRH plan development in countries
- C) Coordinate technical support with other partners and country focal points