World Health Organization

WORKLOAD INDICATORS OF STAFFING NEED (WISN): SELECTED COUNTRY IMPLEMENTATION EXPERIENCES

Human Resources for Health Observer Series No. 15

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Foreword

The Global Strategy on Human Resources for Health: Workforce 2030, being submitted to the World Health Assembly in May 2016, projects the vision to accelerate progress towards universal health coverage and the Sustainable Development Goals by ensuring universal access to health workers. The need for an evidence-based planning method that could estimate actual health worker staffing needs in health facilities that could in turn contribute to producing and managing staff in the required numbers at the required places, is principal.

The Road map for scaling up human resources for health for improved health service delivery in the African Region 2012–2025 lays emphasis on the availability of sufficient numbers of qualified health workers in the right place as essential for the delivery of quality health services to the population.

The significance of health workers to meet the health-related Millennium Development Goals was also underlined in the World Health Report 2006: working together for health, that drew global attention to the critical shortages of skilled health professionals (physicians, nurses and midwives) in 57 countries the majority of which are in the AFRO region.

Beside the shortage of health workers, the lack of credible data hinders management to make evidence based policy decisions to manage their existing health workers with regards to understanding their workload and efficient deployment.

Since the launch of the computerised version of the Workload Indicators of Staffing Need (WISN) tool in 2010, many countries have implemented WISN studies in varying settings to assess actual workload of their existing health workers at the health facilities, in an attempt to understand issues of real gaps in required staff, maldistribution and low performance and productivity of existing staff.

This publication touches on the very element of health workforce planning and the importance of access to scientific evidence as the basis for health worker deployment plans, be it to reduce inequities in health worker distribution, to apply principles of task sharing or to ensure proper skill mix in a health care team.

The intention of this publication is to share the experiences of few selected countries from the African Region in implementing WISN tool. It is recommended to all those interested in understanding the implications of HRH planning at national level. The potential user could gauge the strength of the tool and its contribution to deploy the workforce at various levels of the health system to achieve a more responsive and balanced distribution of staff.

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Executive summary

The Workload Indicators of Staffing Need (WISN) tool has been around since the 1990s and has been implemented in many countries since. The original Excel-based version was revised and computerized in 2010, making it more user friendly. Since the release of the computerized version, several countries have conducted WISN studies in varying scopes. To date, however, there has been no consolidated effort to document the various processes undertaken, challenges faced and lessons learned. This publication attempts to document the experience of the World Health Organization (WHO) in building capacity and offering technical guidance to Member States. Though this document focuses mainly on four countries in the WHO African Region, there are many other countries not alluded to herein where WISN studies have been conducted.

The WISN tool has a methodology that can, if followed accurately, produce results that are evidence based and understood by all relevant stakeholders and partners in the country, with the ministry of health as the preferred lead institution. Implementation of the WISN tool is more likely to succeed when institutional leaders are involved in the steering process from the start. Thus, the briefing session that is conducted to enable policy-makers to make a final decision whether to proceed with WISN or not is important, as experience has shown that when this step is not properly carried out, the technical process that follows does not yield much fruit.