CONCLUSION

The general objective of the Joint Action on European Health Workforce Planning and Forecasting, is to help countries to move forward on the planning process of health workforce and to prepare the future of the health workforce by creating a platform for collaboration and exchange between Member States. This will help the EU Member States to take effective and sustainable measures in terms of healthcare planning and forecasting.

This Handbook tries to make a contribution in this direction. In particular, we defined and identified the key elements of a planning system, the related minimum planning requirements and provide a series of contributions that can be used by Member States to implement or improve these planning requirements.

Consistent with the purpose, we analyzed and described some good practices related to these aspects. The advantage of a good practice is double: on one hand shows that the solution described is feasible, having already been applied, on the other hand, describing its results, suggests a shortcut for its implementation.

In support of the experiences we then provided, through the comparison of the seven planning system, some elements for a critical analysis and a series of insights on specific critical topics (that you can find in the next section "FOCUS ON").

This methodological approach, however, has also shown its limits. Focusing the analysis on minimal planning requirements and on consolidated experience of some Member States, the Handbook does not provide any tips for developing planning methodologies in line with a more comprehensive and exhaustive definition HWF planning. In particular, the Handbook provides useful information to plan two key dimensions at health workforce, that are quantity of health professionals ("right people") and timing ("at the right time"). While other dimensions are not sufficiently detailed or considered: for example, the critical issues related to the geographical mal-distribution and the challenges of international mobility are mentioned in the Handbook, but probably not analysed in sufficient depth, although "right skills in the right place" are fundamental issues for an effective strategic planning system. Other dimensions are not then entirely

In any case, the Handbook should not be considered as a stand-alone product, but rather a tool part of a kit in which the entire Joint Action and, more in general, the entire Action Plan for EU Health Workforce, contributes to provide comprehensive and practical solutions to "improve workforce planning".

With its limitations and its strengths, the Handbook is to be considered as a guideline to implement and improve minimum planning requirements that ensure a workforce numerically in line with demand, economically sustainable, at the appropriate time.

The efficacy of the Handbook in responding to these objectives will be tested in two Pilot Studies, in Italy and Portugal, and in two Feasibility Studies (in Germany and in Moldova and Romania) planned to start in January 2015. Results of Pilot Studies and Feasibility Studies will provide precious contributions in order to improve and update the Handbook here presented in a first version.

In particular, the chapter 9 "Lessons learned" will be completely rewritten based on the experiences of both the pilot studies and the feasibility studies, while the chapters of the Second Part about the good practices will be continually updated as new practices will be identified and analyzed.

In conclusion, referring to the objective of the Action Plan "Improve Workforce Planning", we still want to highlight that, beyond specific tools that, as the Handbook, can be constructed, the aim of the Action Plan for EU Health Workforce is achievable, mostly through the collaboration between the different Member States and stakeholders.

First, the HWF planning, as mentioned in the introduction, is a complex activity requiring skills and expertise. Some countries may have difficulty to find and involve some of these skills that instead are available in other countries; activating a network of experts (such as the **Joint Action on European Health Workforce Planning and Forecasting** aims) is a solution to this problem and the exchange of good practices between EU Member States is essential to trigger this network. Among other things this network of experts could also take the form of a "high-level group of independent experts" to provide useful advice to the different Member States and alerts.

Secondly, cooperation between Member States is needed because some of the current





problems that planning systems are facing have moved from national level to a, at least, EU level and can therefore only be solved through coordination and cooperation between Member States. For example, for the supply side, the critical issue of international mobility of health professionals and, for the demand side, increasingly in the future, the mobility of the patients.

We believe that the Handbook can represent an important step in activating an effective, efficient and permanent cooperation between Member States. While writing these conclusions, we are having the first signs of this cooperation: having started with the two Pilot Studies and in the two Feasibility Study, already the people of the four countries involved are starting talking to each other to find common solution. We hope that these first contacts, done "to the light of the Handbook" are the beginnings of a future HWF European network.