

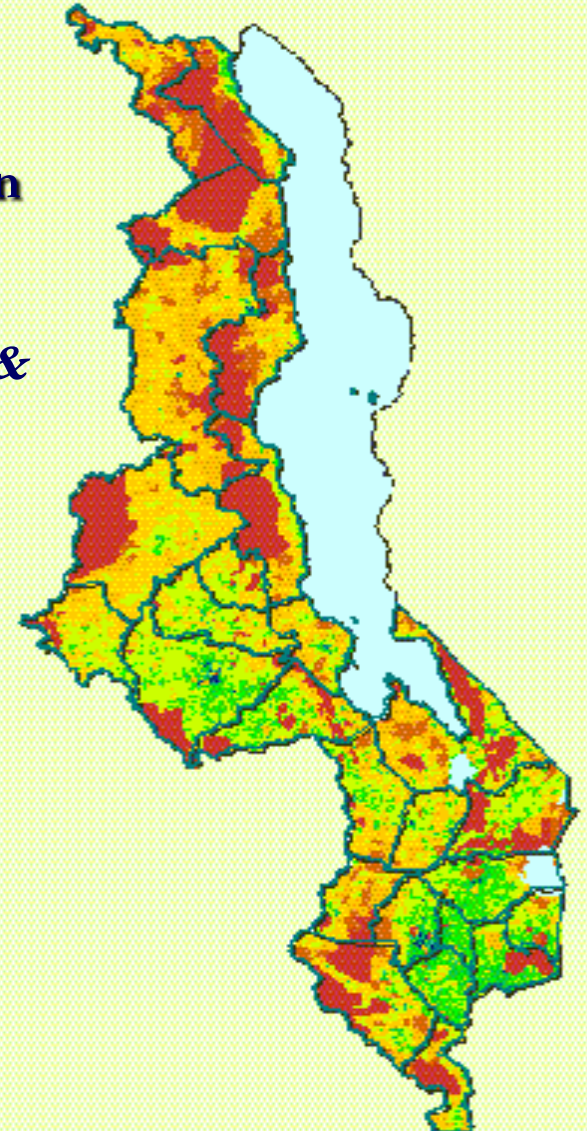
# COUNTDOWN TO 2015

## **Development and retention of the Health Workforce in Malawi**

*Tracking Progress in Maternal and Newborn & Child Survival, Cape Town, South Africa*

17-19 April 2008

**Dr. Chisale Mhango,  
Director for Reproductive Health Services**



# HRH SITUATION IN MALAWI

The current human resources for health (HRH) situation is critical-severely weakening the already precarious health care delivery systems

- Due to:
  - Inadequate output from training schools
  - High attrition rate of health workers
  - Imbalance between rural and urban deployment of health workers

## Summary of the 'critical' situation (contd.)

- ❑ **High attrition rates:**
  - **around 5% (approx. 300) of higher level professional staff categories leave the sector annually &**
  - **up to 30% of essential health worker categories in the MoH leave the sector each decade.**
  
- ❑ **Unbalanced deployment of health workers:**
  - **97% Clinical Officers and 82% nurses urban based**

# Malawi's response to the challenge

- ❑ Concerted and strategic efforts to better manage its scarce resources through the development and roll-out of:
  - ✿ the *health sector wide approach* (SWAp) joint *programme of work* (PoW)(2004-2010)
  - ✿ the *six-year emergency pre-service training plan*, launched in 2002
  - ✿ *emergency human resource programme* (EHRP) of April 2004.
  - ✿ Use of locums on maternity wards
- ❑ Use of Health Surveillance Assistants.

# Implementation of the HRH Strategy

1. Empower training schools to increase output of health professionals
2. Provide incentives to retain staff
3. Put in place a deployment policy that insures availability of staff in rural facilities

# **TRAINING INTERVENTIONS**

**Specifically, the plan targets the 11 categories of professional health workers, which are considered as key priority areas in the delivery of health services.**

# Empowering Training Schools

Increase students intakes in health training institutions by:

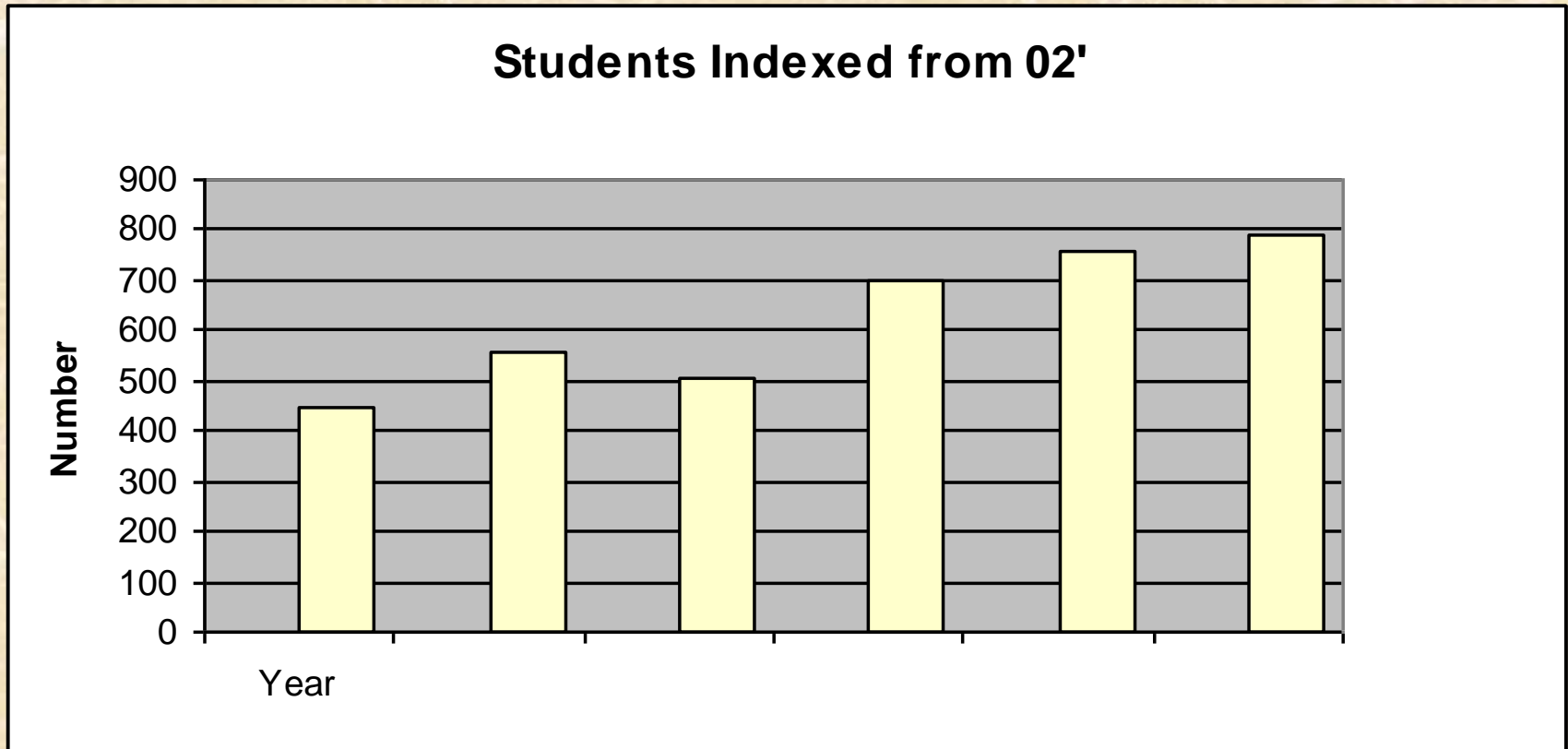
- Ensuring that all health training institutions (HTI) are operating at 100% capacity.
- Expanding capacity of Health Training Institutions (equipment, health learning materials, libraries accommodation, etc).
- Improve existing tutor/student ratios in line with national standards (1:10).
- Develop/improve tutor retention (monetary and non-monetary) package (including career structures).

# Pre-Service Training

- **The sponsorship is in a form of a loan.**

**Each trainee is granted a loan on the condition that he/she agrees to serve the Ministry or CHAM for a period of not less than five years upon successful completion of the training.**

# Actual Student Intakes in Training Institutions



# STUDENT OUTPUT VS TARGETS

CADRES	Year of Graduation							
	2005		2006		2007		2008	
	Actual	Target	Actual	Target	Actual	Target	Actual	Target
Medical Doctors	19	60	22	60	39	60	60	60
Clinical Officers	-	75	99	75	121	75	108	75
Medical Assistants	109	125	147	125	184	125	180	125
Health Technical Support Services*	55	110	108	110	98	110	92	110
Nurse Midwife Technicians	346	410	-	410	371	410	533	410
Registered Nurses	41	60	48	60	57	60	66	60
<b>Total for all cadres</b>	<b>570</b>	<b>840</b>	<b>424</b>	<b>840</b>	<b>870</b>	<b>840</b>	<b>1039</b>	<b>840</b>

# Strategy for Retention of staff

- Provide incentives
- Deployment that includes rotation in rural areas

# Key Challenges

2. Retention of Nurse Tutors at training Institutions and professional health workers deployed at difficult to reach remote public health facilities in Malawi.
  - *To address this problem, the Ministry and its partners approved introduction of Short-term and Long-term Incentives for Nurse Tutors at training institutions and professional health workers deployed at difficult to reach remote public health facilities.*

# **Summary of Approved short-term Monetary and Non-monetary incentives for Tutors only**

- **Expedite promotions of Nurse Tutors to fill the newly created vacancies in training institutions at the PO, P8, P7 and P5 grades**
- **Free housing for all tutors provided by training institutions.**
- **Free medical care for all tutors to be negotiated by all college proprietors.**
- **Installation of television and DSTV facilities where there is no local TV coverage.**

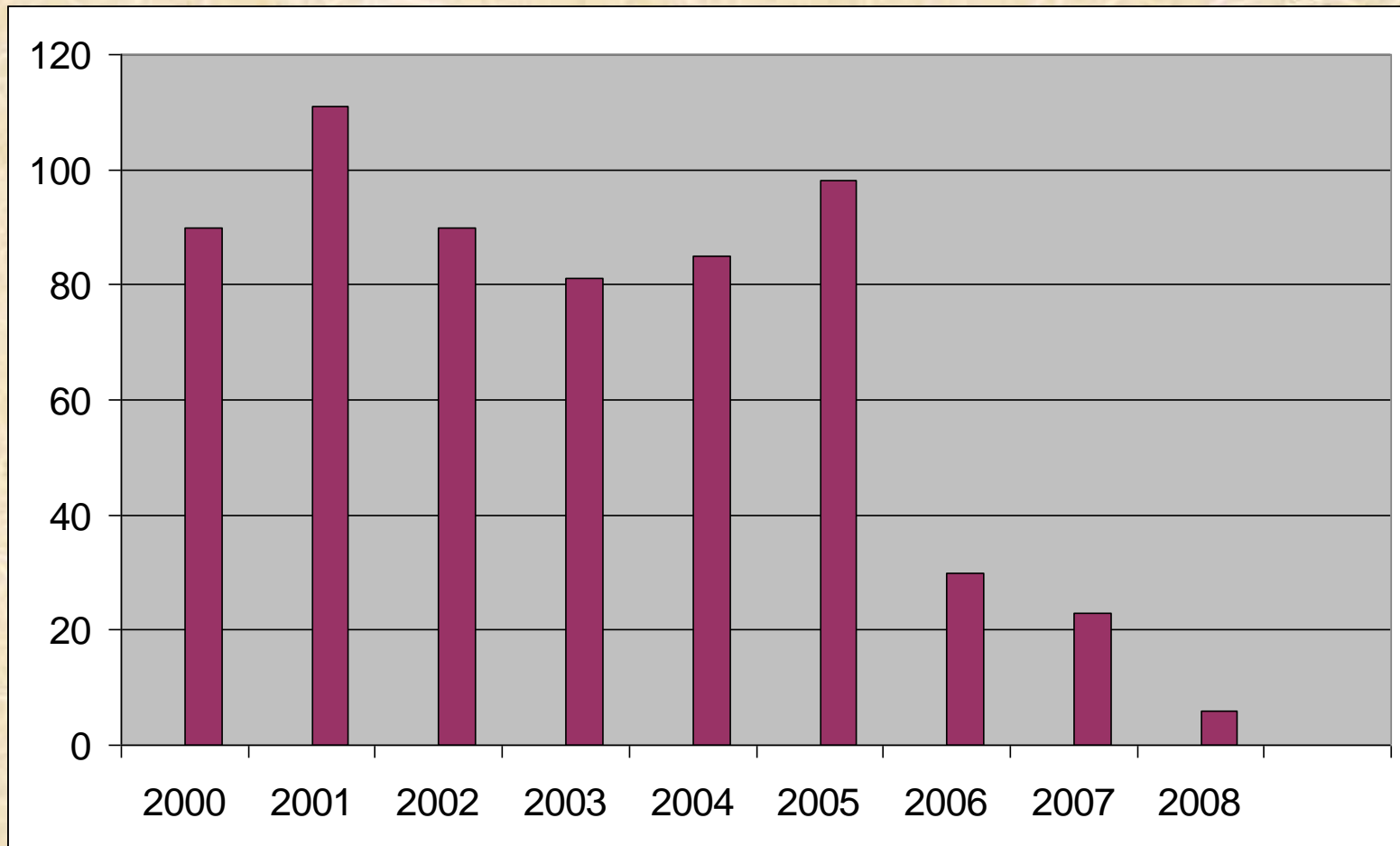
# **Summary of approved Long-term Non-monetary Incentives for Tutors and all Professional Health Workers**

- **Subsidized utilities (water, electricity & telephone allowances) to be provided by government for all health workers.**
- **A Special Preference Access to Loans/Advances Scheme**
- **Automatic Masters Degree Training Programme and priority consideration for local and international short-term training/professional development opportunities**

## **Summary of approved Long-term Non-monetary Incentives for Tutors and all Professional Health Workers (Cont'd)**

- **Provision of piped water and water reticulation systems through the Ministry of Water and Regional Water Boards**
- **Morning, afternoon and night shift refreshments including tea/coffee and soft drinks**

# Trends in Nurse Migration Overseas



# Incentives for Rural Staff

- **Building of attractive accommodation in rural health facilities**
- **Free transport to a shopping centre once a month on a designated date/day**
- **Provision of generators and solar panels where ESCOM services are non-existent**
- **Improved professional interaction with District Health Personnel through rotational locum systems and other interventions**
- **Enhanced field services support, supervision and mentoring of health workers by headquarters, zone offices, central and DHO personnel to avoid the feeling of isolation**

# Conclusion

- **The Ministry of Health and its partners shall therefore endeavour to provide continuous competency-based learning and professional development opportunities to ensure that all health workers are equipped with the requisite skills, technical expertise and knowledge in order maintain leading edge skills at all times so as to realise their full potential and contribute to the successful attainment of the strategic vision, mission, goals and objectives of the Ministry and its partners.**

**Thank You**