

Malta's comments on a Public Consultation document entitled 'Green Paper on the European Workforce for Health'

Malta supports the Commission's initiative to put forward a Green Paper on the European Workforce on Health. Malta believes that the issues presented in this Green Paper are of great importance in ensuring the highest possible levels of accessibility, quality of care and sustainability of healthcare systems.

For this reason, the Ministry for Social Policy has consulted with a number of internal and external stakeholders in order to present the following consolidated position on the Commission's Green Paper.

Malta acknowledges the important role of the EU in providing the necessary support to Member States in order to address the challenges posed to the health workforce, whilst adding value by means of networking and the sharing of good practices, whilst fully respecting the responsibilities of the Member States for the organisation and delivery of health services and medical care.

The demand for healthcare and long-term care services in Malta is set to increase with the growth in the aging population. As at 31 December 2007, the total population of the Maltese islands stood at 410,290 persons. The percentage of the population aged 60 years and over stood at 20.57%. This proportion of the population is projected to reach 24% by 2015 and almost 27% by 2025. The life expectancy at birth, as calculated in 2007, stood at 77.23 years for males and 81.75 years for females, whereas at age 65 it stood at 16.60 years for males and 20.11 years for females.

Malta is experiencing growing shortages in a number of different healthcare professional groups. These include medical doctors choosing to go abroad for specialist training, together with nurses and other professionals who find employment elsewhere, either in the private sector or abroad. During 2008, 22% (29 out of 132) of the junior doctors (house officers and senior house officers) employed at Mater Dei Hospital, which is the major acute public general hospital on the Maltese islands, resigned from their posts in order to take up employment in other Member State, mostly in the UK.

The above information shows how essential it is for Malta to increase activity directed towards the recruitment and training of healthcare workers within all the relevant age groups, especially children and youth and towards potential workers that may opt to enter or re-enter the workforce at a later stage in their life.

It is also considered necessary to carry out ongoing campaigns to entice schoolchildren and teenagers to look favourably on the prospects of engaging in studies that makes them eligible to enrol in courses and training that will eventually lead to different possible careers in the healthcare workforce. These activities need to be planned and implemented in close conjunction with the education authorities and with other entities and bodies that work with children and youth and include more promotion and publicising of the healthcare professions through the media. In this regard, time-motion studies and other relevant management tools need to be used and exploited fully to identify the present and potential future needs of the various facets of healthcare. The information obtained from these studies and the subsequent forecasting exercises needs to reach the national education systems in real-time. Secondary,

post-secondary and higher education institutions need to be well informed, involved and empowered to engage in any required change process and activities. The educational system is the major stakeholder in this scenario, as it is the powerhouse that has the remit to produce competent, reflective and highly knowledgeable practitioners who have to fit into, what is today a highly technological, knowledge and evidence-based health care process. Moreover, the educational system has to be involved with healthcare policy and planning from the inception of projects that either maintain current or propose new healthcare facilities and their function. Career guidance services for healthcare professions amongst students need to be strengthened and include information on available career pathways, training opportunities and other incentives.

On the other hand, active campaigns to encourage older workers to enter or re-enter the health workforce should also be sustained and encouraged together with the further development of suitable training and re-training opportunities and other incentives. In this regard, EU added value can be reaped through the fostering of networking and the sharing of best practices, in addition to EU-funded projects aimed at the development of tools which help forecast for future needs and also at the development of training and sharing of expertise for the engagement of older workers into the system.

Motivating factors that are likely to help in the retention of young practitioners include satisfactory working conditions leading to a guaranteed career progression, continued education, the adoption of family-friendly measures and the fostering of a good work-life balance, including a salary that appropriately rewards the time invested in developing the appropriate skills and the knowledge-base required for the execution of their professional job effectively and safely.

One of the greatest motivational factors that lead to the retention of young professionals that have graduated after studying in a small Member State such as Malta is the availability of post-graduate specialist training. Malta is currently very active in the formulation and conduction of specialist training programmes in a number of medical and nursing specialities and also in a number of other healthcare professional strands. However, due to the small population and consequently to the limitations imposed by the available resources and facilities and also of the exposure to an appropriate number and differentiation of pathologies and conditions necessary to attain specialist expertise it will always remain essential that specialist trainees spend some of their training and working time abroad. Due to this, the development of the concept of 'circular' migration is of great interest and will be fully supported by Malta.

There is the need to collect more comparable information on the health workforce and the professional mobility in Europe, possibly without increasing administrative burdens associated with additional data collection requirements. This is another avenue through which EU added value can be accrued. This data should include demographic data on the available professional people currently working in the EU and in the individual Member States as well as their specialisation and accreditation status, possibly their economic activity and whether they are engaged in any training and Continuing Professional Development (CPD). It is also important for EUROSTAT to liaise with international organisations such as the OECD and the WHO when compiling common questionnaires and collecting data, thus avoiding duplication of data collection.

Malta also supports the commitment of the EU towards developing a Code of Conduct for the ethical recruitment of health workers from non-EU countries and to take further steps to minimise the negative and maximise the positive impacts on developing countries resulting

from the immigration of health workers to the EU. In this regard, Malta also supports the WHO in its work to develop a global code of conduct for ethical recruitment.

In view of Malta's ageing population, like most of the other Member States, it is necessary for Malta to strengthen its healthcare and social care services in the community so as to reduce the likelihood that elderly persons are institutionalised, thus putting further pressure on the long-term healthcare provision. Strong health community services could reach out to elderly persons who need healthcare services but are also able to live a relatively independent life in the community. Moreover, the expansion of the social care workforce could also lessen the burden which is currently being carried by the healthcare system. In a number of instances, members within the community would require social care rather than medical care or else medical care would be needed, albeit at a minimum level. Furthermore, the introduction of new healthcare technologies such as telemedicine could also help provide a better and more efficient medical service without increasing the pressure on the health workforce. Strengthening the capacity for screening, health promotion and disease prevention could reduce the need for more healthcare professionals.

Finally, Member States should share amongst themselves good practice examples on how to support, maintain and retain the present healthcare workforce and generate ideas, incentives and studies on how to enhance healthcare professions within the labour market. The most important role for further action by the Commission in the field of the healthcare workforce in the EU Member States is to coordinate networking and sharing of good practice initiatives between Member States and between Member States and the Global Community.

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