

# Annex 22. Liberalization of Professional Practice: Moving Forward Across Borders to Improve Access, Service Delivery, Population Health Outcomes

*APEC SEMINAR ON TRADE IN HEALTH SERVICES*

**Liberalization of Professional Practice—Moving Forward Across Borders to Improve Access, Service Delivery, Population Health Outcomes**

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Cebu, Philippines*

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**Session Overview**

- Objectives of trade liberalization and MRAs
- Identified common issues, options for further action
- Protection of the public and “competence” of health professionals—qualifications to enter into practice, linked to technical standards and licensing requirements
  - Validating competence; scopes of practice; regulatory matters
- Call for *Radical Transformation*

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**Trade Liberalization—Promoting Global Trade in Services**

- Health services facilitated by movement of health workers
- Health services, under GATS: “Trade” in 4 modes:
  - Cross-border services supply from country to country, via IT
  - Consumption abroad of services by patients traveling abroad for treatment
  - Commercial investments, establishment of subsidiaries in other countries
  - Health professional emigration between countries
- MRAs—facilitate movement of professionals and the processes of international recognition

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**Trade Liberalization**

Trade liberalization has both positive and negative potential effects:

- New employment opportunities may open up
- Mitigate unemployment
- Economic growth, stability via employment, remittances
- Can also lead to higher costs of health services and supplies, lower quality of services, health personnel shortages in due to increased migration and/or urban concentration
- Access to services by remote or vulnerable populations may be negatively impacted

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**Trade Liberalization**

**Does trade liberalization cause changes in health outcomes or vice versa??**

- Protect positive gains/reduce negative impacts
  - Governance—Monitor policy objectives to ensure national health policy aims are not sacrificed by for-profit commercial enterprises
  - New employment opportunities .....However, in some countries, private sector expansion furthers rural to urban migration [problematic without protection for migrant workers]

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**Trade Liberalization**

- Protect positive gains/reduce negative impacts
  - Potential risks for increased gender-based violence
  - Employment opportunities but health risks due to hazardous work environments
  - Careful monitoring of negotiations, agreements and their implementation

[ICRW. *Trade Liberalization and Women’s Reproductive Health: Linkages and Pathways*. 2009]

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## Globalization, Emerging Threats and Health Systems



**Are patients satisfied or dissatisfied with health services, given the many advances in medical science, health professions, technology?**

### Why are patients dissatisfied?

- "Disease" rather than "illness" or person-focused care—supply driven, rather than customer driven health services
- Limited patient voice in treatment decisions
- Lack of a conducive atmosphere for expression of anxieties, distress
- Mechanical care for many patients, those with terminal illnesses
- Lack of privacy, protection of dignity; environments not conducive to recovery
- Costs too high or unaffordable

Recent review findings from interviews with people with chronic conditions

People want:

- More time with their doctors and nurse
- Better explanations about their conditions
- Less unsettling failures in communication
- Assistance with accessing and coordinating services
- Assistance with the costs of health care
- Recognition of their life and culture
- Acknowledgement of links between mental and physical health

• **Only 55% of patients diagnosed and treated adequately**

*(United States of America, Report of Institute of Medicine, 1999)*

• **About 10% of hospital patients suffer adverse effects**

*(United Kingdom, An Organization with a Memory, Department of Health, 1999)*

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### Statistics

The World Alliance for Patient Safety reports that the *risk of health care-associated infection in developing countries is 2 to 20 times higher* than in developed countries...and up to 10% of patients admitted to modern hospitals in the developed world acquire one or more infections. **Poor populations** are at even higher risk.

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### No Health Workers, No Care.

- > The message in the World Health Report 2006 (WHR) is simple - without health workers, the key global health challenges cannot be met.
- > The report reveals a shortage of almost 4.3 million doctors, midwives, nurses and support workers worldwide.
- > The shortage is most severe in the poorest countries, where health workers are most needed.

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### Ethical Principles Guiding Health Care Decision-Making

#### Beneficence

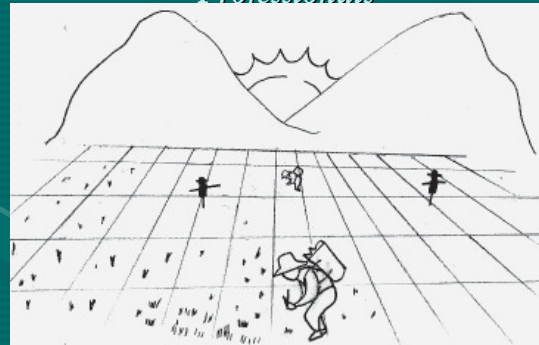
To protect and promote the best interests of the individual and community at all times

#### Maleficence

To do no harm

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### Growing Competent Health Professionals



### Defining Competence

- A level of performance demonstrating the effective application of:
  - Knowledge and attitude
  - Skill
  - Judgment

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### Performance abilities

- Knowledge, understanding and judgment
- Range of skills - thinking, technical, and interpersonal
- A range of personal attributes and attitudes

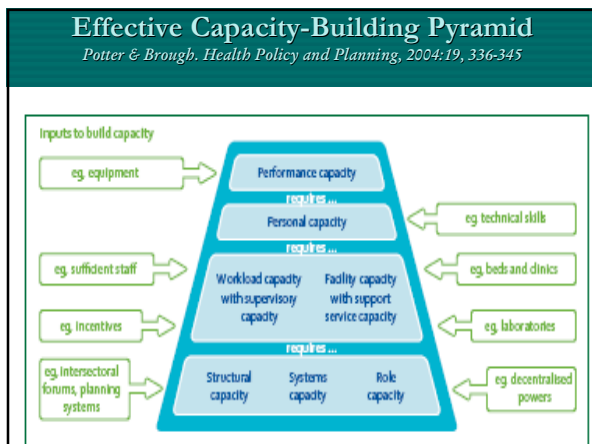
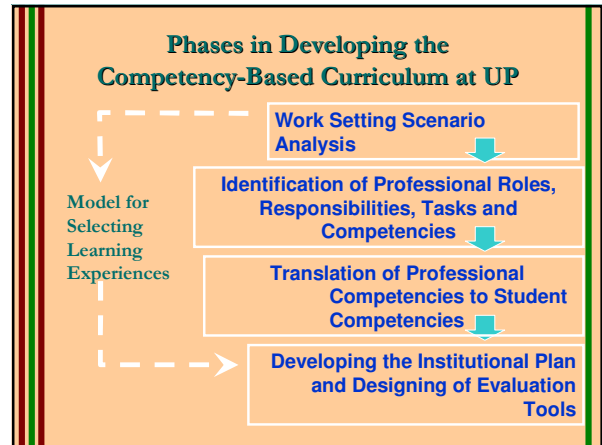
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- ### Core Health Professional Competencies to Address Population Health Needs
- Epidemiology, health determinants, public health
  - **Communication** (verbal and non-verbal—direct, indirect use);
  - **Inter-professional collaboration, team-building and teamwork**
  - Community partnerships, empowerment
  - Accountability, organizational effectiveness
  - **Entry to practice safety in increasingly complex practice environments**
  - Continuous Quality improvement

- ### Core Health Professional Competencies to Address Population Health Needs
- Cost analysis; health economics
  - **Cultural competence**
  - Health promotion, disease prevention
  - Strategic planning, policy-making
  - Mobilization, advocacy, coalition-building
  - **Evidence-base for practice**



- ### Principles Supporting Health Trade in Health Services
- **Role competency**
  - **Systems, supports**
  - **Regulatory needs**
  - **Planning, monitoring**
  - **Compensation, workplace safety**
  - **New demands, functions**
  - **Economic analyzes**
  - **Health system quality monitoring**
  - **Role complementarity and integration**
- [ICM, 2008]

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