Tzonetzouris and Gilbert, in their lead paper for this issue of HealthcarePapers on health human resources planning and strategies, begin by emphasizing that the healthcare system is continuously evolving and, therefore, the skills and competencies needed are also changing. In their paper, they describe the role of educational institutions in identifying and responding to changing needs. The authors outline five system factors that drive the development of an emerging skill or competency for health practitioners: scientific and technological developments in the field of practice, public interests and needs for the “best” health services, changing population characteristics, national and international healthcare trends and external factors that influence the climate toward human resources needs. Tzonetzouris and Gilbert proceed to describe the various roles that stakeholders – governments, professional associations and educational institutions – have in responding to the changing needs. They present a model where there is an assessment of any new emerging need for skills and competencies as well as a systematic process for identifying the risks and benefits posed to an educational institution. Finally, they present a number of options that an educational institution might pursue, ranging from doing nothing to a full-blown implementation of a new program. This paper provides a logical approach to a complex inter-organizational problem at national, provincial and local levels.

Sandra Leggat, in her response to Tzonetzouris and Gilbert, calls her paper “Moving beyond Obsolescence: An Important Role for Educational Institutions in Health Human Resources Needs.” She makes several important points. First, most institutions persist in educating health professionals for practices in the past. In other words, educational institutions have difficulty responding promptly or proactively to changes that should take place. Second, she indicates that healthcare systems around the world use incremental approaches to workforce development and often “steal” human resources from each other rather than growing their own. Third, she emphasizes that the focus in planning should be on restructuring practices so that they can integrate services and improve patient safety. She criticizes Tzonetzouris and Gilbert for the rather passive role they assign to educational institutions and because they have not outlined a leadership role for education. Her point is that waiting to be invited to the table has not been a successful strategy for educational institutions or for health human resources development. She asserts that it is difficult for professional associations to be objective in health human resources because of conflicts of interest.

Nick Busing and Irving Gold argue that Canadian faculties of medicine are already heavily involved in meeting the human resources needs for medicine and plan to take an even larger role in this area. They point out that, historically, planning for medicine has been to respond to the cry about the doctor shortage in Canada and elsewhere. Schools of medicine have waffled between answering governments’ requests to cut back on admissions to medical school and the more recent trend to increase the supply. This is obviously a complex issue and not just a numbers game. Canadian schools of medi-
cine will need to be at the forefront of health human resources planning.

Stephen Duckett, who has worked in both the health and education sectors, presents a model showing how the two sectors are intertwined. He advocates for a much closer partnership between the two sectors at national, provincial and local levels.

Sharon Mickan provides us with a perspective from the United Kingdom. She asserts that educational institutions have a pivotal role to play in responding to emerging health human resources needs. Mickan takes into consideration the lifelong learning needs of health professionals and suggests a model that focuses on post-registration (postgraduate) education. It is here that educational institutions can provide a very helpful service to professions and individuals. She makes a strong point that educators need to work closely with employers to flesh out their needs and to provide programs that meet these needs and those of learners. This approach calls for creative and flexible educational models.

Terrence Montague also presents the viewpoint that education and practice need to work together. From his perspective, it is the patients and their families who should be at the forefront in the strategies that are developed. Ideal care, which includes high-quality and safe practices, should be the basis for developing collaborative, efficient and effective healthcare – this should drive the health human resources needs.

Arguing for continuous quality improvement at the inter-organizational level, George Eisler makes a strong case for closer collaboration between health and education. Eisler suggests that a lifelong learning environment is critical and that there has been an expansion of educational providers from traditional post-secondary education programs to now include private sector providers as well as workplace opportunities. Eisler provides a model for a continuously linked process for healthcare planning and education planning, and illustrates the importance of system-level thinking, which goes beyond individual organizations’ needs to true collaboration that will move health human resources planning forward.

And, finally, Masoumeh Izadi, Dale Dauphinee, David Buckeridge and Robyn Tamblyn discuss the need for integration and co-operation between educational institutions and the professional associations and government agencies that actually license and regulate healthcare workers. They call for coordinated assessments of new interventions by each group to ensure that the interventions are aligned with the actual needs in the system.

Clearly, this is not the end of the story, and Tzountzouris and Gilbert did not intend it to be. Hopefully, this issue will help educators and practitioners to work together to develop flexible approaches to predicting and responding to changing health human resources needs for skills and competencies.

Peggy Leatt
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