Need for employers and state-commissioned education in the health field

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Summary

Access to and quality of health services is based on a sufficient amount of existing health care professionals. By the end of 2004 there were entered 4972 doctors, 9414 nurses, 1297 dentists and 448 midwives in the register of health care professionals. Thus, at the moment there are 3.7 doctors, 7 nurses, 1 dentist and 0.3 midwives per 1000 persons in Estonia. In connection with restructuring operations in health care, according to the Ministry of Social Affairs, by the year 2015 there is need for 2.9 doctors, 0.667 dentists, 8-9 nurses and 0.55 midwives per 1000 persons.

Comparing population and health care professional ratios in Estonia with those of the developed countries there are more doctors and dentists but less nurses per 1000 persons on the average. International practice is still very different and one cannot draw essential conclusions about the amount of health care professionals in Estonia on this basis as the need for employees depends on health care organisation of each state.

The SAO checked the present situation of the resource of health care professionals, the system evaluating the need for employees and the performance of state-commissioned education. Although, as a result of establishment of the register of health care professionals, the overview of the present health care professionals has essentially improved and a systematic evaluation of the needs of employees and a long-term state-commissioned education strategy is under development, the SAO came to a conclusion that on the basis of the present resources (primarily with training capacity) the state is not able to ensure the health care system with health care professionals at the level of interest and this jeopardizes sustainability of Estonian health care.

The actual labour force in the health care sector is substantially smaller than the registered amount of health care professionals. Many of the health care professionals have reached retirement age, do not work in the area of specialisation or have several jobs. Resulting from the principle of life-long registration and lack of compulsory evaluation system of competence, qualification of a part of health care professionals entered in the register may be expired as well. Ten per cent of the practicing doctors have reached retirement age. There are not enough younger doctors to replace the older doctors who leave the labour market soon. In the audit period (in 2004), approximately one tenth (1660 persons) of the registered health care professionals were not connected with any job offering health services. The analysis, made in the course of audit, have revealed that 550 registered health care professionals of working age (including 256 doctors, 203 nurses, 62 dentists and 29 midwives) have not received any salary in Estonia nor have worked as self-employed persons during the year 2004. Neither is the absence from labour market justified with maternity leave or parental leave. Many of them, most likely, work in foreign countries. 46 per cent of doctors, 37 per cent of dentists, 23 per cent of midwives and 12 per cent of nurses have several jobs. Even if all health care professionals had only one job, approximately 8000 jobs were still vacant (provided that all these jobs are needed and will be preserved after decrease of labour force). At the moment there are actually only 3976 practicing doctors of working age who have at least one job in health care sector or one thousand less than entered in the register. The total number of practicing dentists of working age is 1074, nurses 8059 and midwives 376.

The estimated need for health care professionals in the development plans does not accord with the actual situation nor with the needs of existing hospitals. The estimated number of doctors in the development plans of specialities of doctors approved in 2001 in the regulation of the Minister of Social Affairs was approximately 4030 by the year 2015 in Estonia. During the completion of the present audit new development plans concerning specialties of doctors are under revision in the Ministry of Social Affairs according to which a long-term training strategy will be worked out. Thereby also the supplementary need for staff in connection with organisation of hospital duties resulting from implementation requirements of the Working and Rest Time Act will be taken into account which hitherto was left without attention upon planning the staff. Essentially have been changed estimations on the need for many medical specialists compared with those in the earlier development plans, but no essential change in the total number.

According to the updated estimation of need, there should be 4051 practicing medical specialists of working age by the year 2015. Until now there has already been registered more than 700 medical

specialists, although the total number of practicing medical specialists of working age in health care sector is only 3976 or 75 persons less than the estimated need shows. At the same time, according to estimation of the hospitals being attached to the development plan of hospitals' network, there has to be completed 448 new vacancies of doctors during the next three years and already today there are less than 200 doctors. Consequently the deficit of doctors estimated by hospitals is many times bigger than according to the calculations made on the basis of development plans. It appears, observing by the areas of specialisation, that there is a great deficit of some medical specialists (e.g. emergency medicine and psychiatry) but in some areas of specialisation (e.g. paediatrics, general surgery, neurology) there is a big accounting surplus. In hospitals there is deficit also of such medical specialists whom we have more than according to accounting estimation (e.g. neurology, general surgery, anaesthesiology).

It is impossible to maintain the existing number of doctors and to increase the number of nurses sufficiently through state-commissioned education. Continuing the training of health care professionals at the level of present output, by year 2025 there will be, according to the most optimistic prognosis and not taking into account the possible emigration, 500 doctors of working age less than today and the number of nurses will increase only 8 per cent. In addition to money deficit, capacity of schools (training facilities, training means, teachers) and shortage of possible candidates to student places hinder increase of state-commissioned education. Although, according to the set target, there could be 8-10 nurses per 1000 persons in Estonia, by the year 2015, we could reach, even according to an ideal scenario, a level where there are only 7.5 nurses per 1000 persons. Pursuant to the updated estimation of the Ministry of Social Affairs, by the year 2015 we need 4051 practicing medical specialists, but even in accordance with the prognosis of the Ministry, we shall have only 3769 practicing medical specialists by that time.

Graduates who have acquired profession of general doctor and care nurse leave health care sector. Health care professionals hold to their area of specialisation relatively firmly and therefore investment in their state-commissioned education is quite profitable to the state. 70-90 per cent of the graduates of different medical areas of specialisation set to work according to their specialty and almost the same amount will stay there. After graduation even 91 per cent of the doctors set to work in their specialty of whom 86 per cent will stay in health care sector. Except those who have graduated as general doctors and care nurses. After completing the main courses of medical faculty in the University approximately 71 per cent of graduates set to work as general doctors in their specialty, but after some years only 61 per cent of them remain in health care sector which, compared to the other specialties of doctors, is a very poor index. From graduates who have acquired care nurse profession only 43 per cent set to work in health care sector.

Main proposals to the Minister of Social Affairs

- To transform the registration of health care professionals and registration so that it could be possible to estimate the actual number of health care professionals who are able to offer in Estonia health care services of high quality. The target is to get a more precise overview of the existing labour force concerning health care professionals and to improve the planning activity.
- To ensure internal conformity of development plans of different levels and to even out estimations concerning the needs of health care professionals. To settle the situation where the opinion of professional associations, the needs of hospitals and the actual labour force are not in conformity with each other, thereby jeopardizing sustainability of health care system.
- In co-operation with the Minister of Education and Research to provide a more clear responsibility for estimation and planning of the needs of health care professionals. As the result of the present division of tasks, the responsibility is diffused and delegated to different private and non-governmental organisations, although it is a task of a state to ensure a sufficient amount and training of health care professionals.
- In co-operation with the Minister of Education and Research to ensure the graduates of main courses of the medical faculty a possibility to pursue studies in residency or to employ them more in the area of specialisation corresponding to their qualification. The target is to avoid the situation that has continued for years where a great part of labour force that has received an expensive training on the basis of state-commissioned education and are highly qualified, leave health care sector.
- In co-operation with the Minister of Education and Research to review the curriculum of care nurse and to ascertain the reasons of the graduates of this specialty not hold to their area of specialisation. On this basis to consider the possibilities of reorganisation of the specialty of care nurse in such a way that investment in state-commissioned education would be profitable for the state.
- To review the existing hospitals' net and to estimate possibilities for its provision with a needed number of health care professionals in a situation where even state-commissioned education in full capacity and returning of the specialists who left their area of specialisation in the sector will

not be able to preserve the present number of doctors on and nor to increase the number of nurses to the level estimated as needed or meet the needs of the hospitals.

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In its answer to the SAO, the **Minister of Social Affairs** accepted the proposal of the SAO concerning the need to review the curriculum of care nurse and to analyse the possibilities of reorganisation of the area of specialisation, to promote medical specialties (particularly as to maintain courses of nurses) in order to ensure student places to be filled with student candidates on good level and to find possibilities to return specialists who left their jobs back in health care sector. At the same time the Minister of Social Affairs considered it necessary, alike the SAO, to keep in balance the number of graduates of main courses of doctors' specialty and student places of residency, but, at that, did not pay attention to the need to employ the specialists who had acquired specialty of general doctor already in the previous years, more in the area of specialisation.

The Minister of Social Affairs did not consider necessary to specify the data in the register of health care professionals and did not agree with the statement of the SAO that responsibility for estimation and planning of the needs of health care professionals is diffused and delegated to different private and non-governmental organisations. The SAO emphasizes hereby that it considers co-operation between different parties in estimation and planning activities concerning the needs of health care professionals very important and the work done by the training committee, professional associations and the University essentially important, but responsibility in this question has to be clearly distributed and provided by law.

In its answer to the problem, pointed out by the SAO that the actual amount of labour force in health care sector does not cover the need for employees estimated by the Ministry, professional associations and hospitals, the Minister only pays attention to the fact that one has to take a critical stand on the plan concerning the need for staff drawn up by the hospitals. As to ensuring internal conformity of development plans of different levels, the Minister has considered important to specify only the development plans of medical specialties. Unfortunately, the most important question regarding differences between the existing number of health care professionals and the estimated need and the fact that by the year 2015 one is not able to ensure a sufficient number of doctors and nurses in Estonia even according to the prognosis of the Ministry of Social Affairs, was disregarded.

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