



# Global Perspective: the Social Service Workforce In Health Facilities & Settings

Social Service Workforce Alliance

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#Working4Health

# Health & Social Care Workforce

- ❑ **234 million+** people work in the health and social sector, will grow to **350 million by 2030**
- ❑ **90%** of countries report **disruptions** to essential health & care services since the COVID-19 pandemic
- ❑ **Increased integration** of health and social care services – including social work
- ❑ Collaboration & coordination between **health, social care and community** settings
- ❑ Protecting and maximizing workforce **funding & investment**



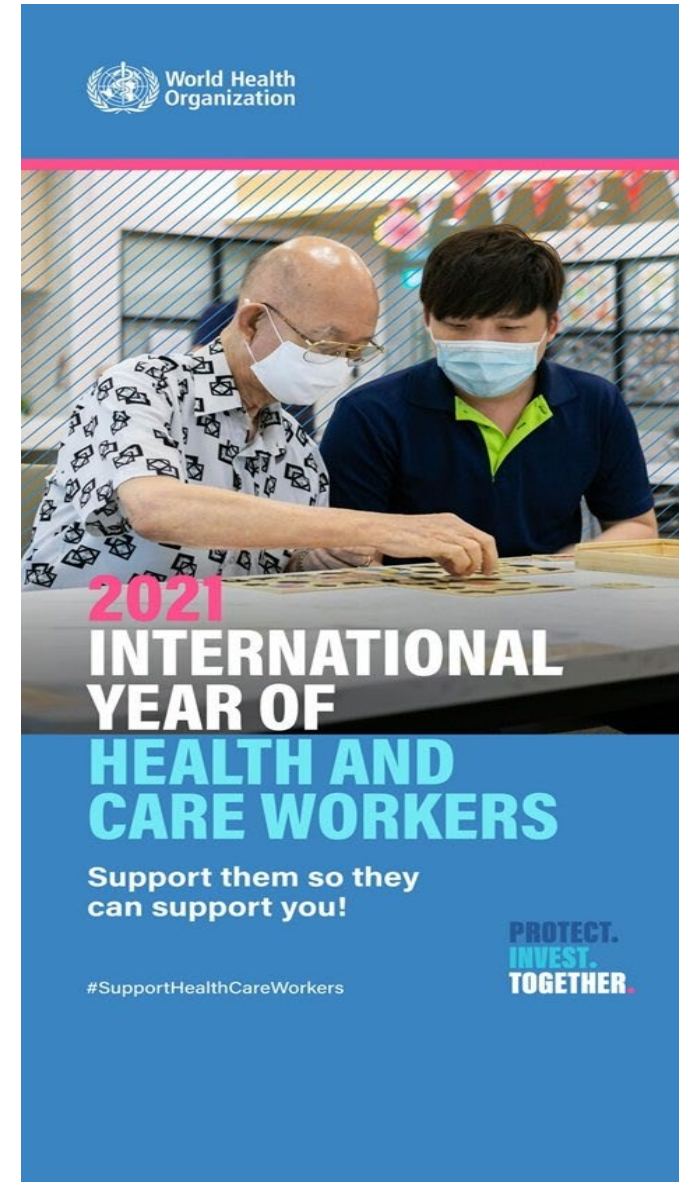
WORKING FOR HEALTH



Photo courtesy of the World Bank

Expanding and transforming the health and social workforce for the Sustainable Development Goals

1. Working for Health Action Plan: 2022-2030
2. Global Health & Care Worker Compact
3. Planning and forecasting model for the health and care workforce
4. Global competency framework for universal health coverage





**Optimize the existing health and care workforce, creating and distributing the skills and jobs needed to accelerate progress to UHC.**

**Build the diversity, availability, and capacity of the health and care workforce, addressing critical shortages by 2030.**

**Strengthen the protection and performance of the health and care workforce to deliver health for all and respond to health emergencies.**

# Working for Health

## ACTION PLAN 2022-2030

PLANNING & FINANCE

**Bolster data-driven planning and secure investment in the workforce**

**Scale up data-driven planning and investment in the workforce**

**Sustain data-driven planning and investment in the workforce**

EDUCATION & EMPLOYMENT

**Absorb and retain existing health and care workers**

**Build education capacity and increase employment opportunities for the workforce**

**Strengthen the quality of workforce education and enhance working conditions**

PROTECTION & PERFORMANCE

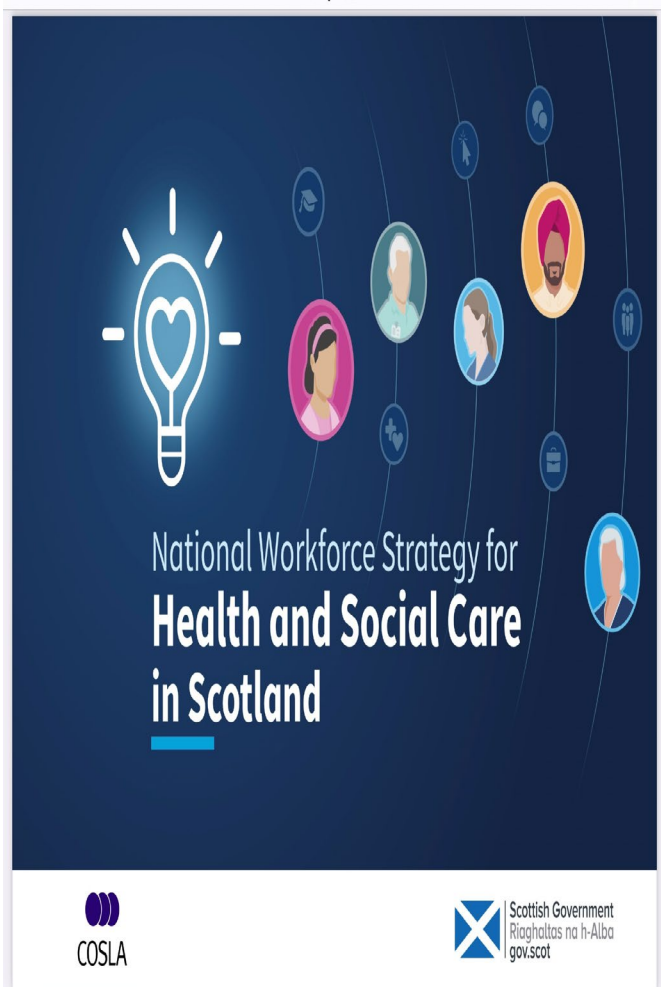
**Enforce safe and decent work, and advance gender equality and youth development**

**Build an equitable, equipped and supported workforce**

**Strengthen the effectiveness and efficiency of the workforce**



- Post pandemic & demographic shift from health and clinical interventions to increased promotion, prevention, and well-being (social determinants, NCDs, child protection, aging care, etc.)
- Service delivery within primary care teams & settings (outpatient care, post-clinical care plans, non-clinical interventions)
- Mental health & well-being services in primary care settings
- Psychosocial care & support
- Adult and aging social & long-term care
- Case management, continuity of care, and referral



**SCOTLAND:** a National Care Service & integrated Workforce Strategy

**INDIA:** Medical Social Work deployment in in hospitals

**DENMARK:** linking social workers with aging care programmes at facility and outreach level

**USA:** expanded medical social work and primary care teams

**ZAMBIA:** Integrated health and social care in the community

# Benefits of integrated teams within facilities & health settings

1. Increased access to services that provide person-centred care
  2. A biomedical and social work approach to service availability & delivery
  3. A sustainable, integrated and enabled health and social care workforce at all levels:
    - Facility and long-term care settings
    - Communities
    - Emergency, fragile, and conflict settings
- **To support these:**
    - Evidence-based guidance on integrated care in facilities and care settings
    - Support countries to develop evidence-based policy and delivery choices;
    - Improve health and social workers' knowledge and core competencies
    - Enhance the scope of social work services to deliver health for all.

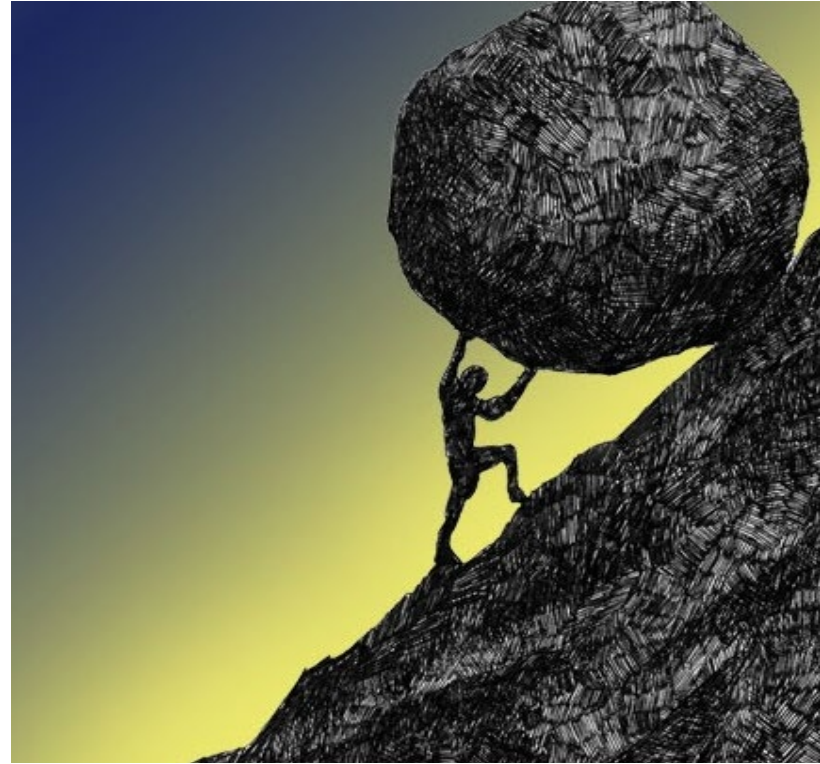


## Workforce Implications

1. More clinical & social work provider 'teams' with relevant skills and qualifications (promotion, prevention, diagnosis, treatment, disease-management, rehabilitation and palliative).
2. Social work providers deployed and utilized to deliver 'specialized' services
3. Support patient-focused care and people-centered, integrated health services.
4. Care coordinators, case managers etc. in chronic disease management and in primary care to fill gaps and address non-clinical needs
5. Social work practitioner competencies and scopes of practice

# WHAT CAN WE DO?

1. Engage in policy and social dialogue on integrated health and social care, and service standards
2. Accommodate expanding scopes of practice and competencies for the deployment of social work providers in health facilities & teams
3. Enhance access to person-centred and integrated care
4. Ensure secure pay, terms, safeguards and working conditions for health and social care workers, within a supportive governance, legal and regulatory framework.



**PROTECT - INVEST - TOGETHER**

**THANK YOU**