

Strengthening data-driven approaches to planning human resources for health

A new tool for PEPFAR-supported programs

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Around the globe, healthcare workers are essential to ensuring that people living with HIV (PLHIV) have access to quality health services and are key actors in global efforts to attain UNAIDS 95-95-95 targets. Yet, in many places, healthcare workers are in short supply—and are now additionally strained by the COVID-19 pandemic—and resources to expand the workforce are limited.

To optimize the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) investments in health worker staffing, the U.S. Agency for International Development (USAID) is using a digital tool to support data-driven planning and decision making. Developed in partnership with the PEPFAR-funded Data for Implementation (Data.FI) project, the *Human Resources for Health Needs and Optimization Planning Solution* (HRH Solution) is an analytical and decision-making tool that links HRH and program data in a standardized way across countries to analyze HRH needs and to inform program and funding decisions. It uses client pathways built on available evidence and expert consensus to calculate the time healthcare workers spend per client in delivering HIV care and treatment, testing, and pre-exposure prophylaxis (PrEP) services. Then, based on program targets, it estimates service delivery staffing needs, gaps, and costs; assigns a Priority Ranking Index score to each cadre, based on workload pressure; and recommends optimal staff allocation based on available budgets.

Earlier this year, USAID used the HRH Solution to examine PEPFAR HRH staffing investments in 14 countries. Findings showed that:

 Overall, across the 14 countries, there was a staffing gap of over 100,000 full-time employees (FTEs). Ninety percent of this gap was in HIV care and treatment services.







- Staffing gaps were 4 to 100 times greater for care and treatment services compared to gaps for PrEP or testing—with the range, perhaps, reflecting the variance in targets for these types of services across countries.
- Not all country programs had staffing gaps; six had estimated surpluses. Among them, only one had a staffing surplus for care and treatment services.
- Case managers and data clerks were estimated to be the most understaffed, and community health workers were the most overstaffed.

Data.FI is helping to improve the quality and use of global human resources for health data, this is critical to planning for HIV/AIDS programs and investments.

The initial round of applications of the HRH Solution helped USAID country teams and headquarters staff to optimize staffing investments during Country Operational Plan (COP21) planning. The HRH Solution allowed teams to play out different staffing and funding scenarios that suggested ways to redistribute current staff or make shifts in HRH investments to better align with program targets for greater programmatic impact and efficiency.

Discussions with initial users of the HRH Solution helped prioritize areas to update the analysis to best respond to key stakeholder questions. In response, enhancements have been made to the HRH Solution that will support additional HRH analytics and visualizations. These include:

- Customizing the amount of travel time required for community workers to reach clients in different settings, allowing more granular analysis of the community health worker time.
- Including options for enhanced analysis based on available budgets for staffing support.
- Examining the staffing impact of different service delivery models, which continue to evolve in
 response to COVID-19 and other factors. For example, preliminary findings suggest that
 increases in multi-month dispensing for PLHIV could result in a third fewer FTEs across all cadres
 needed to provide care and treatment services to the same number of clients if more clients come
 to clinics and receive medication every six months rather than more frequently.

The HRH Solution can now be applied using data from the new PEPFAR HRH Inventory—a comprehensive database of the health workforce supported by PEPFAR across all countries it supports; it was launched in 2021. The enhanced HRH Solution, driven by these improved data, will equip PEPFAR teams with important analytical tools for HRH planning and resource allocation for COP22 planning.

Photo by Yosef Wakwoya, USAID GHSC-PMS Project, of logisticians and pharmacy professionals providing supportive supervision at the Geda Health Center, Oromia Regional State, Ethiopia.

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See an overview of the HRH Solution on Data.FI's website at https://datafi.thepalladiumgroup.com/news-and-resources/data-for-action/, about halfway down the page.