

is developed to project the supply of and demand for different physician occupations over time. Based on this, it is calculated what adjustments in the training inflow should be taken to achieve or sustain equilibrium between demand and supply. So what appears if this model is applied to other EU member states? Exploring this question learns how planning systems fit health care systems. We will focus on the planning of general practitioners (GPs) in different countries, as they are a key profession in (public) health care. Basic data about the size and composition of the GP workforce from EU countries are used to run the model for these countries. Then, for each country, it is estimated what the optimal inflow in GP training would be for different scenarios. Implications of these scenarios are elaborated for each country, reflecting on the planning-system-fit question.

#### **Results**

Countries differ in their current balance between demand and supply of GPs and think differently about this balance. Countries can be clustered by their current and future position of GPs and how health workforce governance is recognising variation in skill-mix expectations related to policy ambitions.

#### **Conclusion**

This paper is included in the Workshop because it discusses systems of health workforce planning in relation to health care systems. It seeks to explore the opportunities and boundaries to integrate approaches from different countries, focusing on the human resource planning of primary care.

#### **Key messages**

- Health workforce planning needs to fit a countries' health care system, but enables structural reforms as well.
- Integration of health workforce planning systems needs to be based on smart clustering of countries.

## **Health workforce governance and integration: the fit between planning and system**

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### **Background**

The EU Joint Action on Health Workforce Planning and Forecasting has taken up the challenge to let countries share and exchange practices in health workforce planning. It appears however, that not many countries actually apply (needs-based forecasting) models to support this. But does every country 'need' health workforce planning? And if so, what type of system fits what type of health care system?

### **Methods**

A needs-based forecasting model is the backbone of the Dutch system of physician workforce planning since 2000. The model