
PANORAMA PEOPLE

Interview with Nicola Bedlington



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Nicola Bedlington is Secretary-General of the European Patients' Forum, an umbrella organization representing the interests of patients within the European Union.

What developments will affect the future of the health workforce?

We at the European Patients' Forum, in our long-term collaboration with different stakeholders representing health care professionals, look at issues such as patient safety and quality of care, and increasingly the role of new technologies. We do this through the lens of patient empowerment, with the premise that patients, both independently and collectively, can support health workforce sustainability.

High-quality information for patients and health literacy; the new dialogue needed between patients and their trusted health care professionals; and co-decision-making and creating an enabling environment are key issues in the context of the kind of health workforce we need in the future. Moreover, the role of self-management, with patients managing their care with technological and human support, will bring a benefit to health workforces across Europe, relieving some of the pressure on them, if well managed.

Planning and forecasting are needed to make the most effective use of resources. From that perspective, patients are an underused resource. Patients who are experts in their own illnesses are very well aware of where waste and redundancies exist and what may be superfluous to their specific needs. An Organisation for Economic Co-operation and Development (OECD) report revealed that around 20% of health care expenditure is wasteful and of low value. Clearly, we need to address that to support the idea of a better, more receptive health workforce of the future.

We also need to look at patients' own experiences. Patients should be involved in the development of patient-reported outcomes and experience measures. These cannot simply be developed by analysts and health care professionals in isolation.

This need to look at people-centred health systems will play a tremendous role and give a different sort of backdrop against which health care professionals can do their jobs.

There are also points I want to raise linked to coherence and fairness at local, national and European levels. There is a trend of health care professionals trained in central and eastern Europe moving westwards. Passionate people who come into the caring profession should be able to work in their own environment and their own culture and should receive the right remuneration.

Here I want to home in on Brexit. It has been very well publicized that the United Kingdom relies heavily on experts and health care professionals, not just from central and eastern Europe but from throughout the European continent: health workforce mobility is particularly prominent, and has been over the last number of years, to very good effect. Statistics and reports from the National Health Service (NHS) demonstrate the added value of this collaboration. Brexit, unless managed well, will have an impact on patients' quality of life in the United Kingdom. This should be carefully monitored by the health care profession advocacy movement and organizations and institutions like WHO, OECD and the European Commission.

What skills does the health workforce of the future need to develop to stay relevant?

Shifting towards integrated care requires significant change management. It needs strong and supportive leadership throughout the hierarchy of an organization and the ability to embrace new technology. It needs a new set of skills, new professions that are accepted and understood by the existing community, a new culture and a new mindset for working with technology and with patients.

New technology will not undermine the role of health care professionals; on the contrary, it will enhance it. New technology can facilitate patient empowerment and vice versa, but it is important to not lose personal interaction between patients and their trusted health care professionals.

Another point I would like to make is that the WHO definition of well-being also applies to health care professionals. We need to make sure that their physical and mental health, personal and professional development and work-life balance are taken into consideration. Investment is needed to ensure that balance – to avoid cynicism and disengagement and ultimately burnout – because this has a huge impact on patient safety and quality of life. It should be looked at closely as we develop health workforces that can deliver in the future.

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