Background

The WHO Global Strategy on Human Resources for Health: Workforce 2030 (the “Global Strategy”) recognizes a continuing need for a transnational agenda on human resources for health. Learning from the legacy of the Global Health Workforce Alliance (2006–2016), the Board has conducted an extensive consultation exercise and determined to request the Health Workforce Department of the World Health Organization to facilitate a Network of stakeholders - across the education, employment, finance, health and labour sectors – to foster coordination and alignment on a set of priority activities to enable implementation of the Global Strategy.

Network Aims and Objectives

The purpose of the WHO Global Health Workforce Network (hereinafter referred to as the “Network” or “GHWN”) is to promote the implementation of the Global Strategy’s vision to: “Accelerate progress towards universal health coverage and the UN Sustainable Development Goals by ensuring equitable access to health workers within strengthened health systems through inter-sectoral engagement. In this regard, Network activities will be aligned with the evolving work of another thematic network facilitated by WHO focused on health evidence, the Data Collaborative; the emerging governance arrangements for health systems strengthening and universal health coverage; and the outcomes of the High-Level Commission on Health Employment and Economic Growth, launched by the United Nations Secretary-General in March 2016.

Network Aims:
The Network, in supporting WHO, will aim to:

a. maintain high-level political commitment,

b. promote inter-sectoral and multilateral policy dialogue, including, as appropriate, through public–private collaboration,

c. facilitate the alignment of global health initiatives to the HRH investment priorities outlined in the Global Strategy, and

d. foster global coordination and mutual accountability.

1 http://www.who.int/hrh/resources/globstrathrh-2030/en/
3 http://www.who.int/hrh/com-heeg/en/
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Network Objectives:
The specific objectives of the Network are:

1. To inform high-level political engagement, intersectoral and multilateral policy dialogue in support of the implementation of the WHO Global Strategy on HRH at global, regional and country levels.

2. To provide forum, in relation to the implementation of the WHO Global Strategy, for multi-sector and multi stakeholder agenda setting, sharing of best practices, and harmonization and alignment of international support to HRH.

3. To foster global monitoring and mutual accountability on international HRH goals, targets and commitments, effectively linked with United Nations system processes and mechanisms for monitoring of UHC and the Sustainable Development Goals (SDGs), and operating in close coherence with existing multilateral human rights frameworks and institutions.

Network Operations
The Network operations will be supported by a core team within the WHO Health Workforce Department (the “Core Team”) that will engage with a broad range of actors through technical work streams and thematic hubs. The Network will also benefit from the technical advice through a WHO convened Strategic Advisory Committee. Stakeholders will come from GHWA’s existing constituencies and be broadened to reflect the inter-connected and inter-sectoral nature of health workforce development. The governance arrangements for the Network are set out in annex 1.

2 Year Action Plan for the Network (2016-2018)
The table below summarizes the priority deliverables and activities of the Network generated by the consultative process. It presents activities and outputs during its first two years, categorized according to the 4 strategic objectives of the Global Strategy.
### Priority work streams for the first 2 years (2016-2018)

1. Develop and promote competency and performance standards linking SDGs 3 (health & well-being) and 4 (education and life-long learning):
   - develop competency framework(s) for technical and vocational education and training within countries;
   - inform global guidelines on community-based health workers and catalyse support for their implementation at country level.

2. Develop and promote standards to harmonize and align investments from Global Health Initiatives, multilateral, bilateral and other official development assistance (health, education, employment etc) for health workforce development.

3. Develop and enable an accredited leadership programme on health workforce.

4. Promote alignment and adoption of National Health Workforce Accounts; linking with the Health Data Collaborative.

5. Promote inter-sectoral reporting on SDG Goal 3c with relevant stakeholders.

### Outputs (2016-2018):

<table>
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<th>Priority work streams for the first 2 years (2016-2018)</th>
<th>Competency framework (x 1) for country policy &amp; planning.</th>
<th>Ex-ante impact assessment tool to guide country investments.</th>
<th>Health workforce leadership programme for national stakeholders (progressing to accredited status)</th>
<th>Scale-up of country activities on adoption and reporting of NHWA. SDG3c reporting process</th>
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### Cross-cutting activities:

Engage inter-sectoral stakeholders in a Strategic Advisory Committee and the work of the thematic hubs. Develop and disseminate global public goods, engaging and informing members and stakeholders.

### Priority activities for 2016-2018

1. **Competency and performance standards linking SDGs 3 (health & well-being) and 4 (education and life-long learning).**
   The education and training of health workers is an area with the greatest potential for improvements and efficiency gains, adopting a transformative approach that updates both contents of education and modalities of training. To support this agenda, and recognizing the key role played by education institutions and professional councils, the Core Team will establish a Network thematic hub with representation from key actors and constituencies in the education, health and labour sectors. The education hub will focus on technical and vocational education and training for learning pathways of less than 4 years. This will include relevant stakeholders in community health systems and the peer review of WHO guidelines on community-based health worker programmes.

2. **Standards to harmonize and align investments from Global Health Initiatives, multilateral, bilateral and other official development assistance in health labour markets.**
   The Global Strategy calls upon global health initiatives and multilateral and bilateral partners to invest in a more strategic and systematic manner in HRH; contributing to better matching supply and demand within national health labour markets. The Core Team will establish a Network
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thematic hub on development assistance for HRH, comprising representation from key partners and global health initiatives, to contribute to defining parameters and models for more efficient and strategic investment in HRH by international partners, and for a more systematic, ex-ante approach to assess the workforce impact from their investments.

3. Governance and leadership development.
The Global Strategy recognizes the need for building core management and leadership capacity for effective HRH stewardship. To this end a Network thematic hub focused on human capacity development will be established by the Core Team. This HRH leadership hub will collaborate with relevant academic institutions and partners to develop a state of the art post-graduate leadership programme on HRH, administered by one or more collaborating institutions, and awarding an accredited certificate/diploma. The programme will be targeted on a priority basis to planners and policy makers in low- and middle-income countries and decision-makers in UN agencies and international partners, and will aim at equipping them with the skills to identify needs, analyse trends and drivers in national health labour markets, and develop, implement and monitor relevant health workforce strategies and policies.

4. Health workforce information and evidence: promote alignment and adoption of National Health Workforce Accounts; linking with the Health Data Collaborative.
The health workforce information field is particularly fragmented, with a dispersion of data sources at national level, and a multiplicity of international actors and initiatives placing additional demand on already strained data and reporting systems. The Core Team will establish a Network thematic hub on HRH evidence linked to the WHO Health Data Collaborative, which will focus on developing a standardized approach for data collation, analysis and reporting, consistent with the adoption of National Health Workforce Accounts.

5. Health workforce information and evidence: monitoring and accountability.
The Global Strategy, the SDG Goal 3c, and the UN Commission on Health Employment and Economic Growth set out an ambitious and transformative agenda for change. Following up on the implementation of this agenda will benefit from a strong reporting mechanism for tracking of progress and accountability. The Core Team will establish a Network hub on HRH monitoring to track implementation of SDG3c and progress towards relevant milestones in the Global Strategy.

6. WHO Strategic Advisory Committee.
The Strategic Advisory Committee established by WHO will advise WHO, and indirectly through it, the Network, on all aspects of the work of the Network. It also provides a strategic opportunity to engage key actors from relevant sectors and constituencies at a policy level. Regular meetings (whether virtual or physical) of the Strategic Advisory Committee will represent an opportunity to present and advocate on evidence and best practices, and discuss in a common forum challenges and opportunities for collaboration to advance the HRH agenda.

7. Develop and disseminate global public goods, engaging and informing members and stakeholders.
Selected communication products and channels will, in close collaboration with WHO, be developed and maintained to strengthen engagement with a broader constituency of actors and players interested in engaging with the Network on a more limited basis (e.g., through
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information sharing, implementation of best practices and participation in specific one-off activities). Communication products and channels may include newsletters, social media, communities of practice, among others.

Value added

The Network’s added value will be integrated with and complementary to core WHO activities. While the HRH agenda and the WHO mandate are broader than the activities identified in these TOR, the Network will focus on those work streams where other institutions and constituencies bring significant expertise, mandate and funding. The Network can therefore advance the health workforce agenda in a way that WHO alone would not be able to do.

The proposed activities accordingly focus either on aspects with a clear inter-sectoral nature (e.g. with a strong focus on education or financing), hence the need to engage beyond the health sector in their delivery; or on the HRH information and evidence agenda, recognizing the current fragmentation of initiatives and multiplicity of partners involved.

WHO, as the lead agency in the UN system with a mandate on health, is well positioned to coordinate an inter-sectoral and multi-constituency health workforce agenda. The WHO health workforce department brings the experience of the development of the Global Strategy, the facilitation of the proceedings of the High-Level Commission on Health Employment and Economic Growth, and it can harness the experience from 10 years of GHWA operations.

Funding of the Network (2016-2018)

Commitments of $1 million per annum are required to implement the planned activities of the Network in the period June 2016 to May 2018. This would be divided on a 70/30 split of activities ($1.4m) and staff ($600k). Any additional resources required will be mobilized or provided as in-kind contributions by the institutions involved in the thematic hubs to ensure their viability and sustainability. The staff component will fund one full-time equivalent staff member in the WHO Health Workforce Department to coordinate the Network. Other WHO staff in the health workforce department will contribute to the technical activities of the network in the areas that are related to their respective work responsibilities. The Network’s activity budget will cover each priority theme and their outputs (at an average of $100,000). The WHO Strategic Advisory Committee will review and propose additional priority themes as the Network develops, and provide advice on the resource requirements.
Annex 1 - Governance

The Network will be convened and managed by WHO and will bring together key stakeholders around a common goal. Stakeholders include representatives from

- health workforce in the form of professional associations and labor unions;
- the private sector;
- representatives from the civil society (NGOs), academia, foundations.

In this connection, the Network will complement and support the work of WHO, providing it with a platform for enhanced collaboration and dialogue with the key technical agencies (e.g. ILO, UNESCO, WB) with a mandate that goes beyond the health sector focus of WHO, without competing with their functions.

The Network will have a “hub and spoke” structure, with a small Core Team in the WHO health workforce department, which will liaise with WHO regional and country offices as appropriate to harness the Network capacity of all 3 levels of the organization.

The Core Team will have well defined and agreed linkages to the thematic hubs some which will be established by WHO and others by stakeholders. In addition to providing direct coordination and oversight of the thematic hubs established as part of the Network, WHO will also interface with other existing and independent networks, platforms and institutions with a mandate relevant to HRH at regional and global level. Some of these will have a function and stakeholders of global nature, and they will mostly relate with WHO Headquarters; entities that have primarily a regional (or country) level mandate and comparative advantage will interface with the Network through the WHO country and regional offices. These may include existing inter-governmental platforms at regional level focused on HRH, as well as HRH working groups established under platforms and cooperative entities with a broader mandate.

**Network Core Team at WHO**

The operations of the Network will be facilitated by a Core Team at the WHO Secretariat, which will convene the thematic hubs and consult as relevant with WHO regional offices in performing the functions that relate to supporting the Network.

The Core Team, in addition to the convening, facilitation, information sharing and alignment of thematic hubs, will measure progress on the implementation of the Global Strategy on HRH, linking it as appropriate to the UHC and SDG monitoring and accountability processes.

**Strategic Advisory Committee**

A Strategic Advisory Committee – comprising balanced representation of individual experts from the health, education, employment and labour sectors – will provide WHO with advice on high-level strategic and technical matters. The Advisory Committee will also flag to WHO the emerging needs that warrant further action including the conclusion of and establishment of time-bound thematic hubs. WHO will communicate and engage with the satellite hubs based on recommendations from the Strategic Advisory Committee.

The size and composition of the Strategic Advisory Committee will reflect the priority objectives of WHO in advancing the Network’s implementation of the Global Strategy. Membership of the Strategic Advisory Committee will be determined by the WHO Secretariat following standard operating procedures.
In the inception phase, WHO will convene the Strategic Advisory Committee on a regular basis (potentially every two/three months) to review progress and provide advice on strategic matters. For transition purposes, the current Chair of the GHWA Board will assume the chair of the Strategic Advisory Committee for the first year of activities. The work of the Advisory Committee will be facilitated by WHO.

**Thematic WHO and Partner-Hubs**

A framework for collaboration among Network members and partners, together with other interested agencies and groups, will be developed by the Core Team based on themes of mutual interest and complementary expertise to address specific issues identified under the Global Strategy, as well as strategic priorities.

Network thematic hubs may be established by WHO on a temporary basis as advisory or technical working groups. WHO will approve the TORs of such hubs and monitor compliance with such TORs. WHO will invite existing agencies to support such hubs on the basis of mutually agreed terms of reference. There will be flexibility on the composition and organization of these thematic WHO-hubs, depending on the strength and the actual engagement of the members, and the requirements and priorities to be established under the Global Strategy. Such hubs will report to WHO.

Other existing entities with a relevant mandate may approach WHO to explore interest in mutual engagement with the Network. Following advice by the Strategic Advisory Committee, WHO may formalize a collaboration with such Partner-hubs in accordance with its rules, policies and procedures. Partner-hubs will follow their own governance arrangements and TORs, and their operations will be facilitated by the entities which will provide them with a legal status and secretariat functions, according to their respective governance structures. The relevant lead agencies or the secretariats of the thematic Partner-hubs will provide regular feedback and inputs to the WHO Core Team to assist in identifying emerging opportunities, informing strategic discussions and contribute to priority-setting.

Thematic hubs will be encouraged to interact among themselves, while regularly sharing with the WHO Core Team updates on intended, emerging and ongoing work streams, so as to enable a participatory identification of priorities and a wide sharing of tools, norms, research, evidence and knowledge products.

**WHO HRH Network Hub & Spoke Model**

![Diagram of WHO HRH Network Hub & Spoke Model]

- **WHO Strategic Advisory Committee**
- **WHO Core Team**
- **WHO-hub 1**
- **WHO-hub 2**
- **WHO-hub 3**
- **Partner-hub 1**
- **Partner-hub 2**
- **Partner-hub 3**
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Membership

Members will interact with the Network primarily by joining and contributing to the operations of a thematic hub whose strategic priorities relate to an area that the member organization has an interest and a comparative advantage on.

When members wish to establish a new Partner-hub in the context of the Network, they will, through the Core Team, approach the WHO HQ, regional or country office level to scope opportunities and interest, and develop, if appropriate, a costed and funded plan for the operations of the thematic hub. WHO, following consultation with the Strategic Advisory Committee, will decide on the establishment of additional Partner-hubs based on their potential to add value to the efforts to implement the Global Strategy, and their programmatic, institutional and financial sustainability.

Modus Operandi

WHO, acting through the Health Workforce Department, will provide overall leadership and guidance and be responsible for all activities and products resulting from the work of the Network. In this capacity it will select and invite Network members, convene meetings, plan the meeting agenda, disseminate meeting reports, build and maintain a website and coordinate communication among Network members, as relevant and appropriate.

Any Network Member may terminate its involvement in the Network by providing written notice to WHO. In addition, WHO may, in its discretion, terminate the participation of any Network member, dissolve a Network hub or terminate the collaboration with a partner hub.

Network members will not be remunerated for their participation. Each Network member is, in principle, responsible for meeting its own expenses in relation to Network meetings, unless agreed otherwise on a case by case basis by WHO.

Decisions concerning Network activities will be made by WHO taking into account the views and of Network members.

Network members shall not make public statements about Network activities, or on behalf of WHO, unless specifically requested to do so by WHO or with the prior consent of WHO. The contributions to the Network made by Network members will be acknowledged by WHO in accordance with its applicable rules, policies and practices.

WHO shall not assume any liability for independent acts carried out by Network members regardless of whether such acts were carried out in the name of Network.

As a general rule, WHO shall be responsible for issuing publications about Network activities and outcomes. All decisions about the preparation and dissemination of publications made by Network members (other than WHO) concerning Network activities shall be made by consensus.
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Copyright in any publications made by WHO shall be vested in WHO. Copyright in a specific separable work prepared by a Network member shall remain vested in that member (or remain in the public domain, if applicable), even if it forms part of another work that is published by WHO.

"Publications" include any form, whether paper or electronic, and in any manner. Parties are always allowed to cite or refer to Network publications, except for purpose of promoting any commercial products, services or entities.

Any publication about Network activities issued by a member other than WHO shall contain appropriate disclaimers as decided by WHO, including that the content does not necessarily reflect the views or stated policy of the participating organizations, agencies and institutions (including WHO, acting as the secretariat of the Network).

All Network activities undertaken by WHO, are subject to the availability of sufficient funds for that purpose. In addition, all funds provided to WHO for Network activities shall be administered in accordance with WHO's financial regulations, rules, and practices, and is subject to WHO's normal programme support costs.

The Network will collaborate and interface with UHC 2030 to facilitate international and inter-agency information exchange and dialogue on core concepts, objectives and approaches in pursuit of the UHC goal.

The value added of the Network will maintain and improve momentum on health workforce issues as a priority global policy agenda item in the context of UHC, universal access to quality health care and the Sustainable Development Goals.

Transition Arrangements

The anticipated adoption of the Global Strategy provides an opportunity for the Network to prioritize the initial actions. The proposed thematic WHO-hubs result from discussion within the GHWA Board and a public consultation. After final endorsement by those Member States represented on the GWHA Board, a proposal will be submitted to WHO ADG for Health Systems and Innovation to consider the establishment of the HRH Network.

Subject to the acceptance of the proposal by the WHO ADG, the Core Team at WHO will initiate the outreach to both current GHWA stakeholders and new partners to take part in or establish links with the structures (thematic hubs and strategic advisory committee) of the new Network.

The work of the GHWA secretariat will be brought to a successful completion by producing a synthesis document describing and analyzing GHWA’s legacy. The closure of the GHWA Secretariat will take place according to relevant procedures for ending the hosting agreement when the agreed time period in the MoU is completed, ensuring that all the administrative and financial requirements are adhered to. The arrangements for the closure of the current GHWA structures will include a meaningful transition of experiences, products and capacities to benefit future collaborative global HRH action. The GHWA Board will inform members, partners and other related stakeholders about the closure of GHWA in its present form under the time-limited mandate with WHO. WHO will invite selected members and partners to
consider engaging in the new HRH Network, contributing according to their mandates and capacity to its operations.

Following the World Health Assembly in 2016, WHO will develop terms of reference for the Strategic Advisory Committee and the initial thematic WHO-hubs of the new HRH Network, defining the expected contributions of key HRH players within the new structure, coherently with the emerging Global Strategy.

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