



Group 1

Attraction and retention of health workers in rural areas



Challenges

Optimisation of division of tasks between medical workers	Number of workers and skills	Health care workforce planning by MS	Primary care
Low attractiveness of rural areas	Medical desertification	Availability of data on health needs, availability of workers, etc	Lack of planning and vision of health care policies and actions at national and local levels
Change the culture	Huge workload (primary care)	Issues not sufficiently addressed in current health care projects	Lack of generalists with extended skills (primary + secondary care)
Lack of commitment of universities/schools to form workers dedicated to rural areas contexts	Ambition of students in specialties difficult to apply in rural areas	Attractivity of basic infrastructures	Collaboration between Ministries of health and education?



Supportive frameworks

Health systems	Invest in digital solutions for professional consultations	Multidisciplinary team of workers with free medical services (carvans)	RO: Mobile health care act
Rosia Project (users requirements from patients and doctors)	Cooperation programmes (Interreg)	Castilla la Mancha: Innovative Public policies to talent retention and return (retention packs for health workers)	



Practical solutions

Assessment of needs from users and practitioners	Social agriculture with health an community development	Attraction and retention packs	UK: academy focused on non traditional learning approaches on health
Need champions (more rural students in medical schools, rural background)	Better planning, more resources to share the workload	Better advocacy to support health support in rural areas	Provide continuous training and education
Better access to medical trainings targeted on rural areas contexts and needs. Ensure good experience in rural areas	Support placements of students in rural health places	Develop rural options in curricula	Connection between students and champions in health care in rural areas (Increase the advocacy)
Find the drivers that guide the choices of students	Improve connection facilities/ matchmaking		



Lessons and recommendations

Increase investments in trainings (training hubs)	Focus on students with rural background	Rural proofing for health equity	Support engagement of people and communities	Promote exciting careers/quality of life in rural areas
Improve policy coherence across sectors	Collaboration between countries	Subsidies and incentives for health workers (including housing access) in rural areas; increase earnings	Foster digital skills of patients and doctors	Long students placements, research centers all located in rural areas
Tools for mapping availability of medical professionals	Develop indicators on health services	HARBOR: Support cross border care in rural areas (legal frameworks)	Social accountability/ Moral incentive	Promote the wifi coverage to implement telemedicines
			Include competition criteria to favourite access to rural areas	