



- Multi-profession Health and Social Care Regulator
- Republic of Ireland/ Member State European Union
- Young(ish) organisation
- Expanding list of professional registers (12 now & still growing)
- High proportion of internationally qualified professionals

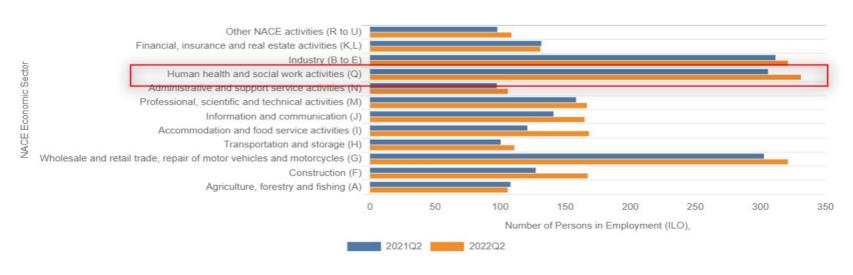


## Ireland – Small open economy



## Total employment in Healthcare

Figure 3.4 Persons aged 15 - 89 years in employment classified by NACE Rev. 2 Economic Sector, Quarter 2 2021 and Quarter 2 2022







## Projected requirements 2035

- Population growth to 5.4 million
- Aged 85+ will more than double
- Health and Social Care Professions need to increase by 2.3% – 3.3% per annum to meet needs



## Ireland & international mobility

- Not enough health & social care professionals trained domestically
- Growing demand for professionals in health and social care causing a reliance on internationally trained professionals



## Barriers to international mobility

- Differences in scope of practice
- Complexity
- Time delays
- Access to information



# Sustainable Regulation – The Big Picture

- The project is currently ongoing
- Re-design the governance structure of CORU
- Current model will become unsustainable & is creating an administrative burden
- Opportunity to improve access



## Why Sustainable Regulation?

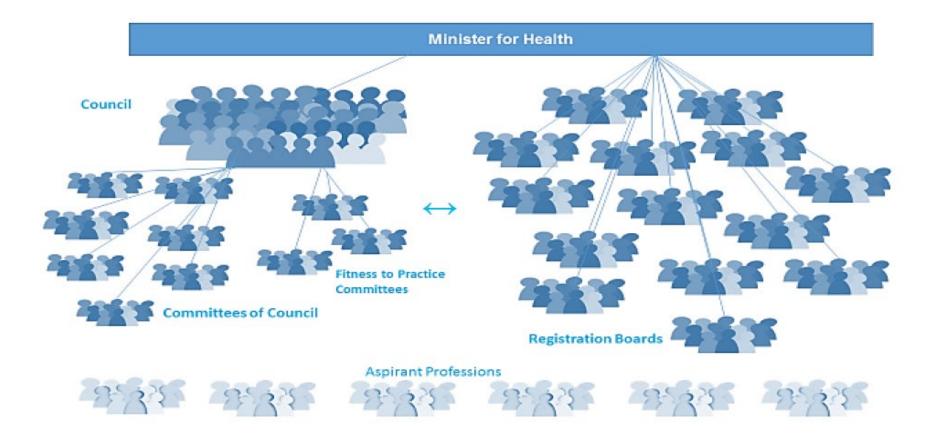
- Currently 12 Board established (9 open registers)
- Regulating 15 professions
- Each Board has 13 members who volunteer their time to CORU
- Board meeting scheduled at least every six weeks



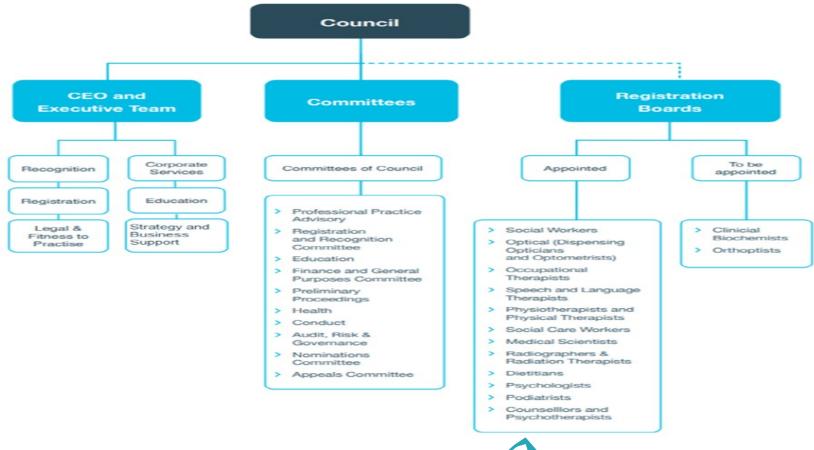
## CORU Meetings 2023 Calendar

							_		_	_		_
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Wed	1	1 ORB (IP)	1 CPRB IP									
Thurs		2	2 DRB		<b>†</b>	1 OTRB / E4 Com						
Fri	1	3	3			2						
Sat		4	4			3			2			2
Sun	1	5	5	2			2		3			3
Mon	2 Bank Haliday	6 Bank Haliday	4	3	1 Bank Hal	5 Bank Hal	3		4	2		4
Tue	3	7 PSRB	7 OTRB (IP)	4 ORB	2	6 PSRB (IP)/PPC	4 RRB	1 ORB	5 CPRB	3 ORB (IP)		5 PRB
Wed			* ARG	5 MSRD	3 CLEAR	7		2		4 DRB	,	6 Council (IF
	5 FTP Oaly	9 FTP Only	9 FTP Oaly									7 Causeil
Thurs	Causcil	Causcil	Causcil	6 SWRB (IP)	4 CLEAR	# ORB / PPAC	6 DRB	3 PRB	7 Causcil (IP)	5 OTRB	2 MSRB	(IP)
Fri	١.	10	10	7 Gand Friday	5 CLEAR	•	7	4	* PSRB	Cauacil	3	•
Sat	7	11	11	*	6	10		5	,	7	4	,
Sun		12	12	•	7	11	,	6	10		5	10
			(Unreheduled									
Mon	,	13	meeting)	10 Bank Hal	*	12	10	7	11	•	6	11 MSRB
Tue	10 SWRB	14	14 PPC	11	9 PRB/PPC	13 CPRB	11 SLTRB (Cancella	* SWRB	12 SLTRB (IP)	10	7	12 PPC
Wed	11 PRB	15						_	13 PRB		* RRB	
wea	11 PKB	15	15	12 DRB (IP)	10 SLTRB	14	12 OTRB	•	13 PKB	11	* KKB	13 SWRB
						15 FTP unity	13 FTP unity					
Thurs	12 MSRB	16 PRB (IP)	16	13 RRB	11 Council (IP)	Council	Cauacil	10 MSRB	14 H== C==	12	9 E4 C==/ ARG / PPAC	14 RRB
				14 FTP Only								15 FTP unity
Fri Sat	13	17	17 Beak Hel	Cauncil	12	16	14	11	15	13	10	Council 16
	14	10	10	15	13	17			16	14	11	
Sun	15	19	19	16	14	18	16	13	17	15	12	17
Mon	16	20	20	17	15	19	17	14	1\$ PODRB	16	13 PPC	18
Tue	17 RRB	21 SWRB	21 PODRB	1# OTRB/PPC	16 SWRB	20 PRB	1# PODRB	15 PPC	19 SWRB (IP)	17 PSRB	CPRB (IP)	19
Wed	1# DRB	22 MSRB (IP)	22	19	17 PODRB (IP)	21	19	16 DRB	20	1#	15 OTRB (IP)	20
Thurs	19 Cuuncil (IP)	23 Cuuncil/OMT	23 Cuuncil (IP)	20 PSRB	1# HSRB	22 SCWRB	20	17 RRB	21 MSRB/ (IP)/OH	19 Cuuncil	16 SLTRB	21
Fri	20 CPRB IP	24 SCWRB (IP)	24 SCWRB (IP)	21	19	23	21	10	22 FTP Only Council	20	17 FTP unly Council	22
Sat	21	25 25 WKB (IF)	25 25	22	20	24	22	19	23	21	10	23
Sun	22	26	26	23	21	25	23	20	24	22	19	24
Mon	23	27	27	24	22	26	24	21	25 RRB (IP)	23	20	25
	2.7					24			25 KKB (IP)		2.0	
Tue	24 OTRB	2# RRB/PPC	2# SLTRB (IP)/P	25 CPRB IP	23 FTP Only Council	27 MSRB/PPC	25 SCWRB	22 OTRB	26 CLEAR/PPC	24 SCWRB	21 PODRB (IP)	26
Wed	25 PODRB		29	26 E4 C==	24 RRB (IP)	2# SWRB	26 27 OHT/SLTRB	23 ARG	27 CLEAR 2# SCWRB /	25 PODRB/PPC 26 PRB	22 DRB (IP)	27
Thurs	26 SLTRB/OMT		30 PRB/OHT	27 SCWRB/OHT/H	25 DRB/OMT	29 Cuuncil/OHT	(rescheduled)	24 E4 C==	CLEAR / PPAC	(IP)/OHT	23	28
Fri	27		31	2#	26	30	2#	25	29	27	24	29
Sat	2#			29	27		29	26	30	2#	25	30
Sun	29			30	2#		3●	27		29	26	31
Mon	30				29		31	20		30 Bank Hall	27	
Tue	31 SCWRB (IP)/PPC				30 SCWRB			29 SCWRB		31 SWRB	2# PSRB/PPC	
Wed					31 ARG			30			29 ORB	
Thurs								31			34 SCWRR IP/OHT	











## Sustainable Regulation Projections

#### **Projections for 2024:**

- Largest register opened Nov 2023, Social Care Workers
- 140 governance meetings
- 70+ statutory committee meetings
- 400+ individuals, voted in and working on a voluntary basis



## Why Sustainable Regulation?

- Year on year increase in applications for Registration, Recognition, Education Programme Approval, FTP & Appeals
- The variety of work required of the executive is increasing
- Public expectations of CORU have increased



# Recognition of international qualifications

- Professional qualifications awarded outside the State are assessed through a process of 'recognition'.
- Directive 2005/36/EC
  - SI 8 2017
  - CORU Recognition Policy



- Currently, the EU process is employed by CORU for recognising all qualifications awarded outside the State
- Done in the interests of fairness and equality
  - May not be the right approach



## Recognition Process

- 'General System'
- Individual portfolio review/case-by-case basis
- Comparison of the qualification (and relevant lifelong learning) with the standard of proficiency required of approved Irish qualifications
- Substantial differences/deficits = compensation measures

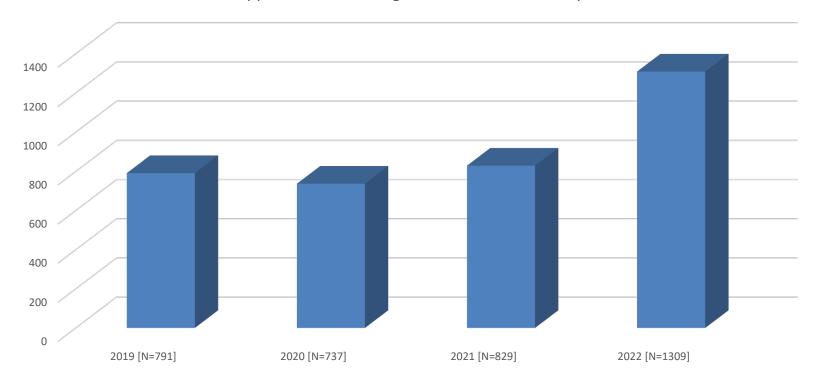


### Process issues

- Resource intensive, time consuming & disproportionate
- Demand is rising rapidly (doubled last year, set to triple this year)
- Ireland is competing to attract internationally qualified Health and Social Care professionals.
- Need to achieve effective change and avoid becoming a barrier

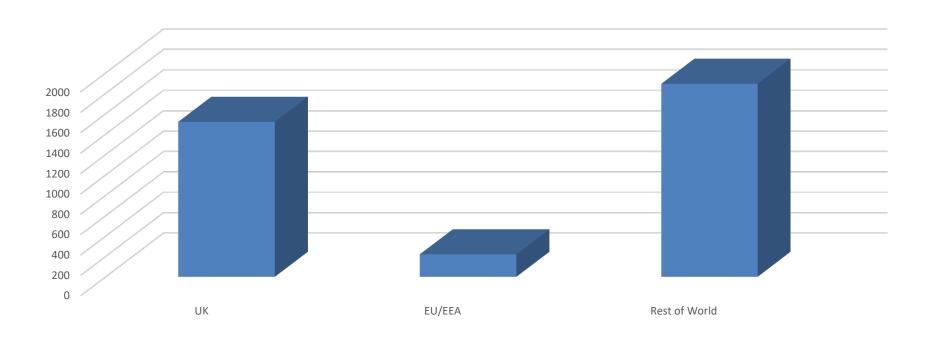


#### Volume of applications for recognition of international qualifications

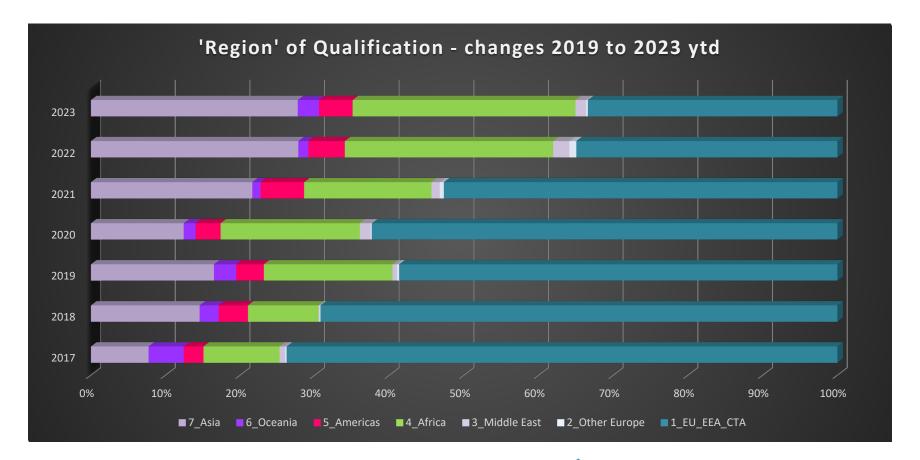




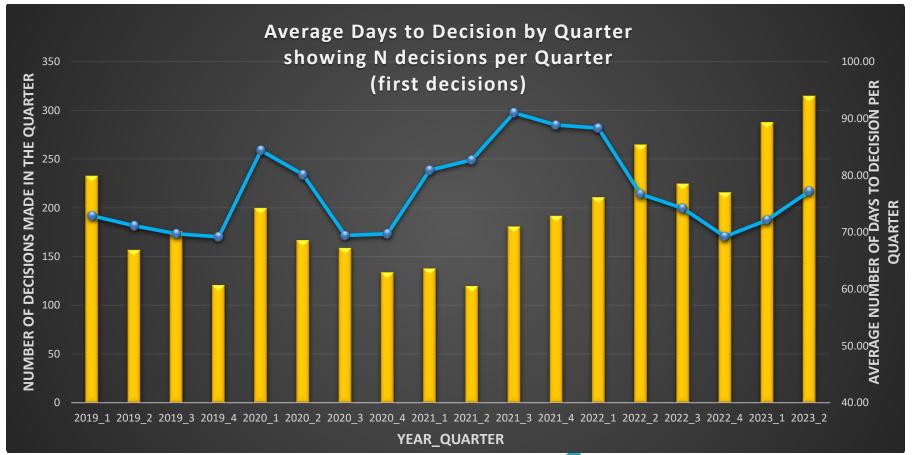
#### Global spread of CORU recognition applicants











## Recognition Projects



## Frequently Seen Qualifications Pilot



- Could we take applicants with qualifications that:
- 1) align well with the Irish standards of proficiency out of the standard application pathway,
- 2) reduce documentation requirements and;
- 3) remove requirement for assessment of each individual application?



 Over a period of 18 months, the Recognition Department implemented a pilot project to test the feasibility and potential impact of this initiative.





Pilot ran from January 2022 – August 2023

 Aim – remove high volumes of applications that are seen frequently and have consistent, positive outcomes from the standard process.



## Key Objectives

- Ensure public protection objective through identification and management of risk
- Reduce time taken to recognise qualifications
- Reduce resource requirements in terms of processing applications
- Improve efficiencies (process & cost)
- Improve applicant/professional experience
- Continue to develop expertise and leadership within CORU



## Methodology

- Legal advice
- Research
- Empirical data
- Risk mitigation
- Review



### Results

- Outcomes of the trial cases were as anticipated
- Reduced timeframe for decision for applications in pilot vs. standard process
- Reduced documentation requirements for applicants/professionals and higher education institutes
- Improved efficiencies (process & cost)



## Challenges

 Communication/cooperation from some stakeholders



## Conclusion

 The Frequently Seen Qualifications Pilot exhibited promising results, indicating the potential for reducing regulatory barriers on the Health and Social Care professionals who wish to have their international qualification recognised.



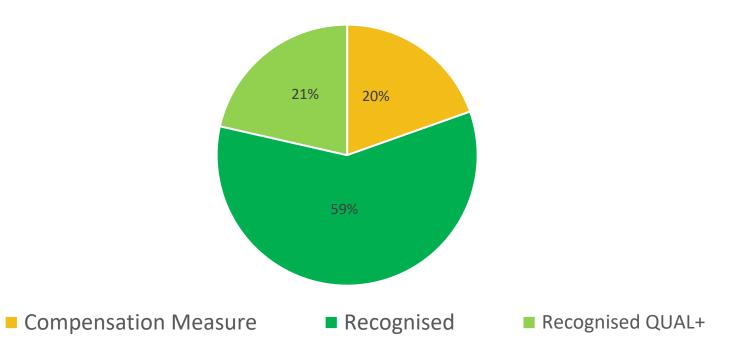
## Compensation Measures Survey



- Compensation Measures are intended to address situations where the level of training or qualification in the destination country is substantially different than that of the professional seeking recognition.
- Two compensation measure options
  - 1) the Period of Adaptation (POA) or;
  - 2) the Aptitude Test.



# Recognition of International Qualifications Outcomes 2018 - 2022





 Approximately 73% of applicants who are required to complete a compensation measure before their qualification can be recognised for the purposes of registration do not proceed with compensation measures.



 With international mobility on the rise, recruitment of health and social care professionals increasing, and new professions to be regulated coming on stream; it is imperative that an accessible and robust compensation measure process is in place for those that require it.



- The Compensation Measures Stakeholder Survey was issued to stakeholders in December 2022 and closed in January 2023.
- Aim to gather feedback on the current Compensation Measure process employed by CORU to better understand their perceptions and expectations of the process as well as any areas for improvement.



### Key Objectives

- To improve the Compensation Measure process for stakeholders,
- To make Compensation Measure more accessible for applicants,
- To make the provision of Period of Adaptation placements an attractive and workable choice for potential supervisors and sites
- To make Compensation Measures an attractive and effective way
  of completing the learning required for practice in Ireland,



- To progress applicants to successful recognition and registration
- To ensure that applicants can recognise Compensation Measures for the opportunity they are intended to be
- To contribute to the working environments applicants operate in when undertaking Compensation Measures
- To streamline the process for the recognition team.



#### Methodology

- Stakeholder survey
  - online survey
  - separate survey be created for each stakeholder group
  - clear and concise survey questions a mix of closed and open-ended questions as well as multiple choice, ranking etc.
  - Pilot of survey before launching



### Findings

- Many barriers
  - Availability of POA sites & supervisors
  - Visa issues
  - Frequency of Aptitude Test availability
  - Documentation



#### What are we doing?

- New Compensation Measure manager
- Reviewing guidance documentation
- New application system in development
- More qualification assessment carried out in advance identify deficits in advance to make applicants aware and allow them to prepare
- More aptitude tests procured
- Research into alternative routes for third country applicants underway



#### Conclusion

 The Compensation Measures Stakeholder Survey has provided valuable insights into CORU's stakeholders' perspectives of the Compensation Measures process. It has highlighted areas of strength and improvement that can help the process avoid becoming a regulatory barrier.



#### Ethical Recruitment - The backdrop

- Small open economy highly dependent on international trade and labour
- Other initiatives = no compromise of ethical recruitment principles



# Why must we consider ethical recruitment?

- Ethical recruitment "A problem that not only affects the people but also the countries and companies that want to do ethical work"
- Laura Thompson, Deputy Director General of the International Organisation for Migration



#### Labour migration statistics

- 272 million global migrants in 2019
- 169 million of those were labour migration
- Migrant workers make an average 4.9% of a countries work force



### Global Shortages

- The World Health Organisation (WHO) estimate the global healthcare shortage of 2.6 million in 2013
- The WHO also project a global shortage of 10 million healthcare workers by 2030



### WHO Global Code of Practice on the International Recruitment of Health Personnel

Global in scope and includes a variety of direct, indirect, public and private stakeholders

Encourages incorporating ethical principles designed to strengthen developing countries



- 5.5 Sustain and retain
- 6.1 Data gathering to evidence base
- 6.2 Encourage development of information systems for better policies



# How do we contribute to ethical recruitment principles?

- Being aware of the increased demand & global shortages
- Collecting & sharing data, forming evidence base and developing strategies to address needs
- Sharing both nationally and internationally
- Increasing awareness of the WHO code in our interaction with recruiters



# Removing barriers whilst ensuring we do not compromise on ethics

- Need for effective workforce planning & engagement with other stakeholders
  - By collecting improved data to assist in workforce planning & sharing it
- By critically assessing our processes
  - Reviewing policies to ensure they reflect this
  - Process improvements
  - Projects



- continued need to balance the ethical and efficiency considerations that international mobility issues give rise to
- need to go beyond a simple linear "brain drain" argument to grasp the full implications of health professional mobility
  - rights of individuals to move
  - career development for individual health professionals,
  - possible financial benefit to source countries of remittances sent home by migrant health professionals
  - benefits when mobile health professionals return home with skills acquired abroad



#### International Mobility Survey







