

Victorian Healthcare Association Forum



Securing our workforce for the future

Kim Sykes
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A Victorian Government initiative



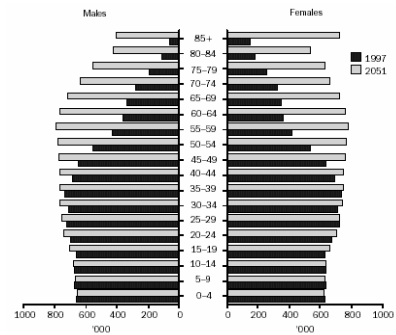
Overview

- Context and challenges
- Actions
- Future directions

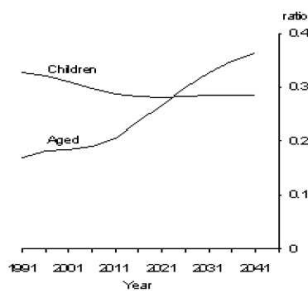
What we know now

- Critical shortages in some disciplines and workforces
- Community perception of health system is poor (despite health outcomes)
- Competing demand for workforce of the future

Australia's population profile



Projected dependency ratios



Age-related disability

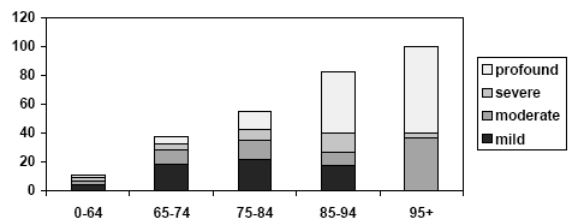


Figure 6: Age-related disability, Australian Males

The environment

- Ageing population
- Health demand changes
- Workforce behaviour changes
- Workforce supply challenges
- Consumer expectations
- Rising costs

and.....

- More supervision and clinical training
- Focus on competencies
- Specialist vs generalist roles
- Funding models and accountabilities
- National agenda
- Evolving partnerships
- Pressures on the health budget

Our response

Frank and Ernest



Working for better health

Clients want ...	Access to services where and when they need them.		Safe healthcare with the best possible outcome for themselves, their family and their community.	
Workforce policy aims to ...	People	Place	Environment	Performance
	Attract the best to a health profession in Victoria.	Increase the availability of health professionals in areas where people need services.	Ensure a workforce structure and environment that supports excellent client services.	Expand the competencies of health professionals to support them in meeting clients' needs.
With decisions underpinned by ...	Planning and analysis – Monitoring and evaluation – Improvement and innovation – Stakeholder engagement – Technical and allocative efficiency – Accountability			
Better health of individuals, communities and populations				

Ensuring enough people ...

- Growth in pre-entry places
- Clinical placements
- International recruitment
- Information, advice and assistance on health careers for:
 - Students
 - Early graduates
 - International graduates
 - Health professionals inside or outside of health.

... in the right place ...

- Planning and allocation of growth places
- Rural clinical schools
- Region of Choice
- Recruitment and retention strategies for allied health
- Targeted incentives
- Rural medical workforce strategy
- VET and flexible pathways

... with the right environment ...

- Regulation
- Role redesign/amendment
- Best practice learning environment
- Workforce reform
- Health & Hospitals Reform Commission
- Health Workforce Australia
- Bradley review of higher education

... and the capacity to perform.

- Curriculum/competencies design
- Education and training programs
- Regional training partnerships
- Cultural competency programs

National reforms: registration and accreditation scheme

Workforce regulation

- COAG agreed to a national registration and accreditation scheme in March 2008
- Aim: strong public safety, less red tape, easier mobility for health professionals
- National scheme due to start on 1 July 2010 for ten professional groups. National boards supported by National Agency
- Draft Bill containing substantive provisions of the scheme to be released soon

National reforms: registration and accreditation scheme – key features

- Complaints process managed flexibly
- National boards will approve accreditation standards submitted by an external independent authority
- Provision for separate specialist register
- Mandatory public indemnity insurance
- Mandatory reporting (practitioners and employers)
- Area of need requirements
- Reserve powers

National reforms: A new national health workforce agency

Health Workforce Australia

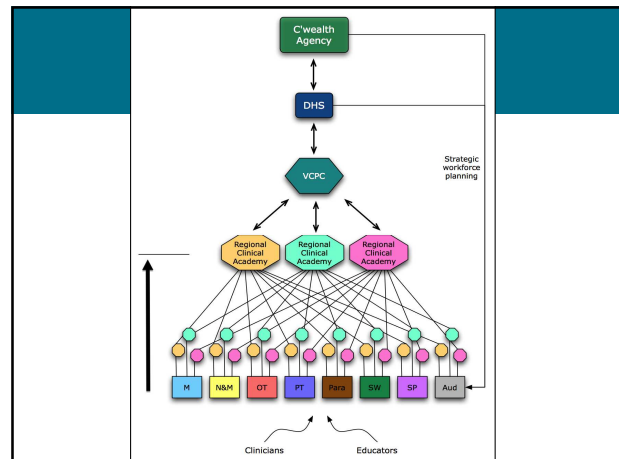
- Aims to “integrate workforce planning, policy and reform with complementary reforms to education and training”
- Will subsume the current NHWT and its work program
- To provide national coordination of clinical training:
 - \$496.5M Commonwealth subsidy for clinical training
 - \$28.0M to support clinical supervisors
 - \$48.5M from workforce elements funding plus a further \$45.6M from infrastructure fund for simulated learning environments
- Agreement to expand clinical placement settings, funding to follow the student
- Budget of approximately \$1.5B over 4 years (all sources)

A clinical placements vision for Victoria

- An efficient system of clinical placements planning and delivery that meets demand for consistently high quality training.
- As an outcome, this system provides a sufficient supply of well prepared health professionals to the health and community sector to meet Victoria's health workforce demands.

Development of a model

- Model of clinical placements governance
- Development of 3 options
- Models were presented, critiqued, and discussed at two roundtables: one metro, one rural
- Stakeholders represented in discussions included: public, private, VET, higher education, aged care, GPs and community services
- A preferred model emerged
- The model represents a process with different types and levels of engagement – each stage of the governance process may occur with different frequencies and at different times



Next steps

- Stakeholder consultation: release final report, invite written submissions, hold information forums.
- Feedback incorporated.
- Project steering committee agreement.
- Endorsed report and recommendations will be formally submitted.
- Partnership with HWA.
- Resources (staged implementation).
- The result: a flexible and expanded system of quality training for all students!

Clinical supervision

- Capacity
- Quality
- A key element of a positive learning environment
- Identified as a barrier to capacity – particularly in expanded settings

Clinical Supervision Grants Program

Aims

- To provide an opportunity for health clinicians to develop formal skills in student supervision
- Develop local and/or regional partnerships for supervision and clinical placement delivery
- Support training at all levels of supervision competence

Workforce policy



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