

Strategic Framework for Health Workforce

2013–2018



Framework Foreword

Australia faces a number of challenges over the next ten to fifteen years in health care due to the changing demographics and health status of the population as a whole. While all Australian States and Territories face challenges, Tasmania has a number of unique issues to contend with such as the incidence of chronic disease and the fact that the age of the population is gradually increasing. However, there is an opportunity for us to take up the challenge, to not only sustain service delivery in the coming years but to improve services through innovations in workforce development.

In 2012, the report *Health Workforce 2025 Doctors, Nurses and Midwives*, provided Australia's first major long-term, national projections for these professions. The Report demonstrated that unless there were significant changes in workforce design and service delivery models Australia would not be able to meet the health care needs of the population.

The development of the Strategic Framework for Health Workforce 2013-2018 is the first step for Tasmania to plan and implement the changes required to ensure we have a flexible and sustainable health workforce for 2025.

The diversity of professions and occupations that make up the health workforce is a key part of our strength. The Strategic

Framework for Health Workforce will use those strengths to build the platforms we need so that all our Health Professionals are working to their full potential with the necessary assistant roles where possible.

The Framework was developed following consultation with input from a range of key stakeholders which acknowledges that we cannot do this alone and that we will need to work in partnership to develop our health workforce at a local level.

There is further work to be undertaken to make sure this document is dynamic. An implementation plan and tool kit will be released in 2014. A companion document will be produced in early 2014 that will provide a Strategic Workforce Framework for Human Services that will include the Community Sector and Children and Youth Services. These will complement a foundation set of enabling frameworks and policy documents that will link to the Tasmanian Health Planning Framework and the Service Plans of health organisations.



Matthew Daly – Secretary

The Purpose of the Strategic Workforce Framework

The Tasmanian health system includes a number of organisations where health services are provided. This includes but is not limited to public sector services; three (3) Tasmanian Health Organisations, Ambulance Tasmania, Population Health, Children and Youth Services, and Disability, Housing and Community Services.

The Strategic Framework for Health Workforce (the Framework) is part of a foundation set of enabling frameworks and policy documents that will link to the Tasmanian Health Planning Frameworks and the Service Plans of each of the organisations that are included in the Department of Health and Human Services (DHHS) through its policy, purchasing and statutory interactions with the Tasmanian Health Organisations (THOs).

The Framework is an overarching document that includes seven (7) key domains with high level strategies which can be progressed across a range of sectors. The domains and strategies have been designed to enable work plans to be developed for each year until 2018. A number of the strategies have been developed to ensure that there are enablers for the THOs and the DHHS to progress workforce reform.

The Framework and an accompanying Tool Kit is designed to support all services to engage with their employees; recognising that healthcare workers practice across a variety of settings and

that the health workforce is aligned to the changing healthcare needs of the Tasmanian community. The Framework will assist services to integrate workforce planning with service planning and ensure our communities receive the full benefit of the knowledge and skills of all members of the healthcare team. The Framework will support the development of new roles, including support roles, expanded scopes of practice and ways of working in teams to reinforce new and innovative ways of delivering safe, high quality health services to meet the future healthcare needs of Tasmanians.

A companion document will be produced in early 2014 that will provide a Strategic Workforce Framework for Human Services that will include the Community Sector and Children and Youth Services.

The development of the Framework will provide an opportunity to work with industry partners from a variety of sectors to support broader strategic workforce planning in Tasmania.

Our vision is to provide a dynamic, competent workforce that will meet the health and wellbeing challenges in Tasmania.

Our challenge is to develop a workforce that can provide safe, high quality person centred services within changing environments and budgetary constraints. This will only be possible if our health professionals have the skills, knowledge and responsive capability to make a difference.

The Case for Change

Tasmania is facing challenges to its healthcare system with an ageing population, facing significant increases in chronic disease and rising costs. While all States and Territories of Australia have similar issues, Tasmania has some unique patterns of socio-economic disadvantage that impact on health status and drive increasing service demand. The Tasmanian population is older than the rest of the nation, has a lower average income level and has higher rates of chronic disease and co-morbidities. The age profile is also reflected in the makeup of our current health workforce. At the same time that demand is projected to increase, a large proportion of our workforce is expected to retire between 2015 and 2025.

National workforce modelling by Health Workforce Australia shows that it is not possible, nor affordable, to address the impending shortage of health professionals by trying to replace or replicate the current workforce, as it will not meet future needs. An expansion of workforce numbers, new roles and additional skills are required to implement preventive strategies, meet rising aged services demand and provide for the complex care needs of increasing numbers of people.

Without change, Australia will face a health workforce shortage of over 30 000 by 2025¹; and rising service costs will place unsustainable pressures on our state and federal budgets threatening access and quality. In Tasmania, continuing on without change threatens to outstrip the capacity of the State to fund the system in the near to medium term.

Tasmania needs to create sustainable services that can provide safe, high quality, cost effective services that meet the needs of the population. While there is an undoubted need for the continuation of acute care and specialist services, there is a growing requirement for community based services and for models of care that are delivered in different ways. There is also an increasing need for services that keep people well and proactively focus on health literacy. As part of this, new roles will be required, including health professionals with a generalist range of skills and support roles that will free up professionals to practice at the top end of their scope utilising valuable skills and knowledge.

¹ HWA 2012, *Health Workforce 2025, Doctors, Nurses and Midwives*

Consultation Outcomes

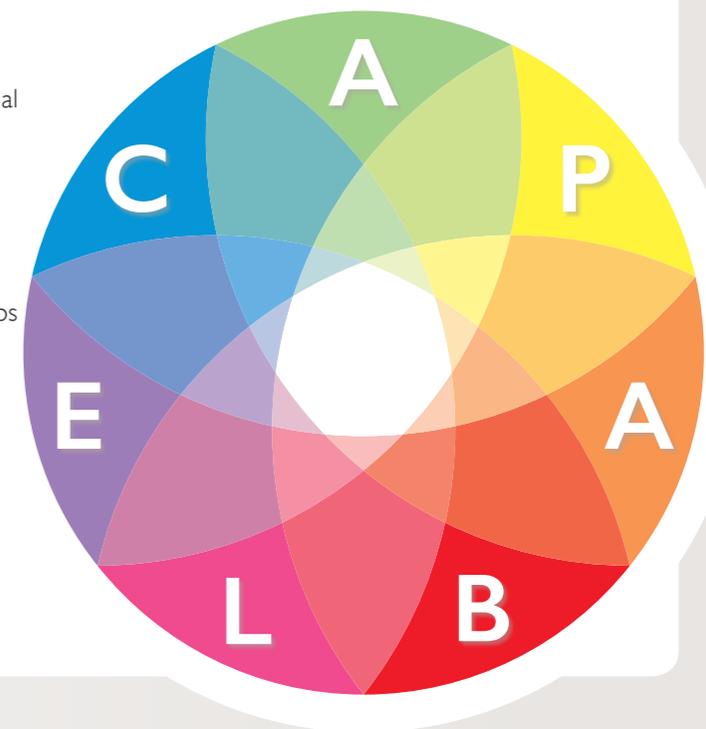
As part of the consultative process to achieve future sustainability, Tasmanian health professionals were asked to respond to the Discussion Paper.

The response from individuals, organisations and regional workshops revealed a strong understanding of the challenges and the purpose of the Framework. The feedback showed willingness for change with many responses including examples of national and international innovations that have demonstrated improved outcomes.

Three regional workshops were held with participants providing strategies for achieving quality sustainable services into the future.

Seven domains have emerged from the consultations and workshops with key strategies aligned to each domain.

- **C**ulture of Safety and Quality
- **A**ttention and Workforce Distribution
- **P**atient and Consumer Centred Care
- **A**ccess Data and Systems
- **B**uild Capability and Capacity to Work in New Ways
- **L**eadership
- **E**fficiency and Flexibility





Domain I:

Culture of Safety and Quality

A healthy and safe culture is critical to ensuring the long term sustainability of the Tasmanian health system. Culture is learned and manifests in the way we relate to people and our language, decision making and daily work practices. Our current culture has been shaped by the history and social expectations from the past century. It is therefore necessary to reshape our culture to meet the needs of this century and to create environments that strongly support safety and quality, innovation and health and wellbeing.

All Australian governments recognise that appropriate and consistent delivery of care can be improved. The Australian Commission on Safety and Quality in Health Care (the Commission) is leading and coordinating a focus on addressing variations in care that include the overuse of treatments or procedures that do not help people, underuse of things the evidence shows can help, or doing things incorrectly and harming people². Tasmania is committed to progressing the National Clinical Safety and Quality Standards and initiatives to ensure our health workforce is “consumer centred, driven by information, and organised for safety”³. This requires knowledge of safety and quality systems and skills to embed continuous improvement into everyday work at all levels of the organisation.

How we relate to people, whether to clients/patients or to each other, is central to creating supportive environments. All

health workers need to work together to create healthy and safe workplaces that strive for the wellbeing of patients/clients, staff and the wider population. This requires increased efforts in facilitating shared decision making between health professionals and consumers. The Commission confirms that shared decision making leads to better quality decisions and that patients/clients using evidence-based decision aids have improved knowledge of the options and more accurate expectations of possible benefits, harms and potential outcomes.

Knowledge of workplace health and safety and the ability to apply continuous improvement skills to the culture of our workplaces is also a required core capability. It is important that our culture supports staff health literacy and the care of our own health. The National Partnership Agreement on Preventive Health includes a Healthy Workers initiative⁴ with opportunities for staff to improve their own healthy lifestyle choices.

Culture significantly impacts on our working environment and enjoyment of work. Fundamental to a focus on person centred care, is an appreciation and respect for all staff and their contribution to the health service provision.

It is important that there is recognition that innovation comes from all levels in the organisation and that culture plays an important part in creating an environment that enables people to thrive.

Key strategies

- Implement a workplace health & safety & wellbeing framework across DHHS and the THOs.
- Implement a Statewide Clinical Governance Framework across DHHS and the THOs.
- Identify and progress strategies from the national innovation and reform agenda that are relevant in the Tasmanian context.
- Increase health literacy across the agency and community through implementation of Working in Health Promoting Ways
- Recognise and encourage innovation and participation in change through a state-wide innovation program.

² Commission on Safety and Quality in Health Care <http://www.safetyandquality.gov.au/>

³ The Australian Quality and Safety Framework for Health Care <http://www.safetyandquality.gov.au/national-priorities/australian-safety-and-quality-framework-for-health-care/>

⁴ National Partnership Agreement on Preventive Health <http://www.healthyworkers.gov.au/>

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Domain 2:

Attraction and Workforce Distribution

The current design of much of the healthcare system and training of health professionals reflects a time when the dominant requirement in healthcare was episodic acute care. As a result, there are emerging gaps in training and development pathways that fail to meet the changing population demographics and healthcare needs of the population. In common with the rest of Australia, Tasmania is facing a shortage of skilled regional and rural health professionals and in some small but critical sections of our workforce in tertiary care centres.

While specialisation will always be required, the increasing rates of sub-specialisation in the workforce over the past decades will not meet the increase in health service demand. The increase in multi-system co-morbidities in the community and the need to reduce the demand on the acute care sector, points to the need for systematic structural redesign of care delivery systems and the education and training of clinicians.

The medical profession has already identified the need to increase the numbers of generalists including developing highly skilled generalists who specialise in regional and rural practice. Nationally, there are moves to models of care that draw on sub-specialist support of a generalist trained workforce in order to provide a more efficient and holistic approach to the increasing number of

people in the community with multiple co-morbidities and to provide effective services in targeted locations. These developments also apply to other members of the healthcare team in regional and rural services.

There is a need to develop enhanced training pathways to address workforce distribution and changing environmental trends. Initiatives to attract healthcare workers into the future also require retention strategies. As well as increased educational and professional support, the development of options for multiple career pathways is required to enable people to move locations and to change roles as service needs change or as career preferences emerge. The development of new roles and work design and flexible employment models may also offer opportunities for the retention of older workers with valuable knowledge and skills.

Key strategies

- Grow the workforce in line with forecasted service need, including developing a planning structure for small but critical sections of the health workforce.
- Develop career and education pathways for rural health professionals in conjunction with education providers, including training pathways for regional and rural specialists with broad generalist capabilities.
- Increase the utilisation of contemporary teaching and learning technologies, including to regional and remote areas.
- Develop flexible career pathways that enable professionals to transition in and out of rural areas to maintain skill development.
- Explore attraction and retention strategies for hard-to-recruit areas including flexible employment models that enable professionals to move 'in and out' of these areas.

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Domain 3:

Patient and Consumer Centred Care

Patient or consumer centred care is healthcare that is respectful of, and responsive to, the preferences, needs and values of patients and consumers. Different definitions and terminology have been used to describe the concepts in this area but key principles focus on the people at the centre of care. Patient and consumer centred approaches include:

- treating patients, consumers, carers and families with dignity and respect;
- ensuring participation in decision making by patients, consumers, carers and families;
- communicating and sharing information with patients, consumers, carers and families;
- fostering collaboration with patients, consumers, carers, families and health professionals in program and policy development, and in health service design, delivery and evaluation⁵

⁵ Safety and Quality Commission –www.Safety and Quality Commission

⁶ Australian Commission on Safety and Quality in Health Care (2011), Patient Centred Care: improving quality and safety through partnerships with patients and consumers, ACQHC, Sydney.

⁷ Ibid page21

There is strong evidence that a patient or community centred focus in healthcare can lead to improvements in outcomes by increasing safety, cost effectiveness and patient satisfaction. A patient/client, community centred approach satisfies an ethical imperative of involving patients in their own care and in the planning and governance of health .

While it is clear that patient/client, community participation in care improves safety and quality, research suggests that clients are often discouraged from communicating their concerns to health professionals due to age socio-demographic and health literacy factors . Improving the health literacy of individuals and communities requires health professionals to genuinely engage in order to facilitate shared decision making based on a clear understanding of options and potential outcomes. New information and communication technologies are also offering increasing opportunities for enhanced engagement and informed self-management. Tasmania has a peak clinical advisory group (Lead Clinicians Group) that is made up of clinicians from across the State. The role of the Lead Clinicians Group is to help drive positive change in Tasmania's health system. While the group is to apply a strategic view to the clinical advice from practising clinicians and is to engage and consult

with clinicians, they also have a mandate to engage with consumers. The Lead Clinicians Group is to drive effective communication with consumers at the strategic level while the THOs interface with their local communities.

Key strategies

- Identify and progress initiatives to improve patient and consumer centred care that is relevant in the Tasmanian context.
- Continue to support partnerships with NGOs and communities in primary health to strengthen consumer and community participation.
- Continue to support the establishment of the International Practice Development Collaborative in Tasmania to facilitate skill acquisition for person and community centred care.
- Work collaboratively with THOs and education providers across a range of sectors; to identify opportunities for research, innovation and education in person and community centred care.
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Domain 4: Access Data and Systems

Improving information management practices is a key focus for many organisations, driven by the need to improve the efficiency and effectiveness of organisations⁸. Health systems are complex and effective information management goes beyond the technology to include the business processes and practices that underpin the creation and effective use of the information⁹.

⁸ 10 Principles of effective information management (2005) Step Two Design. www.steptwo.com.au

⁹ *ibid*

¹⁰ Tasmanian Health Education Online: <https://theo.dhhs.tas.gov.au/login/index.php>

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The use of consistent data and information to inform decision making in workforce planning is critical to understanding the development needs of the workforce for the future. Better reporting and measurement systems have been introduced by the Australian Health Practitioner Regulation Agency to capture the registrations of the health professionals in the National Scheme. This is providing Australia with better access to data about registered health practitioners from which workforce data can be extrapolated.

Health Workforce 2025 was initiated by State and Territory health ministers, through the Standing Council on Health,

to provide medium to long-term national workforce planning projections for doctors, nurses and midwives. The workforce projections are being expanded to include the oral health workforce and allied health occupations. It is recognised that these projections provide a guide and that improved source data will enrich the progressive findings.

Workforce planning is reliant on good workforce data from organisational systems together with the ability to use that data in integrated planning for services in the community. Being able to capture information about the number of health professional students and the areas in which they can practice will also enable us to plan our student load as well as identify areas where we need to develop small but critical health professional services, particularly in allied health.

Our organisation is striving to improve communication with employees; sharing information for learning and about our workforce is a key priority. The Tasmanian Clinical Education Network is beginning to establish communities of interest using a number of strategies including web based and face to face communication as well as developing on line communities of education and learning. The Tasmanian Health Education Online system has also been developed as a DHHS learning management platform and is available to support e-learning across

the State¹⁰. It is important to recognise that people are communicating in different ways and that all organisations in Tasmania's health care system need to embrace new communication modes.

Key strategies

- Contribute to the national collection of workforce data and ensure Tasmania has workforce data for informed planning and decision making.
- Develop and implement systems that capture and monitor student placements across the total health system in Tasmania.
- Collaborate with key stakeholders to improve access to workforce data, including at the local level.
- Strengthen the use of information and communication technology by health professionals and consumers to improve service effectiveness and make efficiencies.
- Maximise the use of contemporary communication and social networking technologies to enhance engagement of the workforce..

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Domain 5:

Build Capability and Capacity to Work in New Ways

Increasingly, healthcare involves a range of health professionals and models of care in a variety of interdisciplinary settings. There is a need for a much stronger emphasis on primary and preventative healthcare, and the development of evidence based services that provide a quality alternative to hospital care.

All health professionals need to be equipped with the skills to work safely in team based and collaborative models of care including service models that span acute and primary care. These models feature partnering with patients/clients for preventative strategies and improving the health literacy of our communities.

Technological advances offer enormous potential for increasing the efficiency, safety and quality of clinical practice. While it is a given that every health worker must be competent to safely use any new technology introduced into the area, there is also a need to grow the capability and confidence to initiate and utilise telemedicine and e-health systems. The National Broadband Network will present numerous opportunities for Tasmania to innovate and to take advantage of telehealth systems for outreach consulting, for co-ordination of patient/client care, and

for supporting patients/clients in the monitoring and self-management of chronic illness.

There is a growing national and international evidence base supporting the redesign of health services using new ways of working. Tasmania has a history of innovation however this has not always translated into state-wide gains. The skills to review clinical and organisational evidence and outcomes, and translate that evidence into practice will underpin ongoing innovation in service delivery and workforce development.

In addition, the skills for knowledge sharing and facilitating the learning and development of other employees and students in our workplaces will be critical to achieving the right workforce for service needs.

Key strategies

- Progress initiatives that enable Tasmania to deliver enhanced workforce capabilities including the introduction of new workforce roles.
- Work with key stakeholders to ensure education and training pathways reflect the needs of the health system workforce and desired population health outcomes.
- Identify and develop opportunities for inter-professional learning and practice.
- Maximise the use of simulated learning environments for education, training and professional development across the Tasmanian healthcare system.

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Domain 6: Leadership

Leadership is required at all levels if Tasmania is to provide sustainable and responsive services to meet current and future needs and is critically important to cultural change.

The purpose of leadership is to bring about movement and constructive change. Involving, supporting and encouraging people to solve problems associated with innovation and reform requires strong leadership at all levels within the health system¹¹.

Clinical leadership involves everyone with the capacity and desire for improvement to lead, working to ensure a vision of a person centred health system that is equitable, effective and sustainable¹².

Cultural change is needed at all levels if Tasmania is to provide sustainable and responsive services to meet current and future needs.

The most profound culture change occurs when the workforce is engaged in the discussions and solutions from the beginning. Employees then take ownership for the outcomes, take pride in its success and use managers as resources instead of the owners of the change.

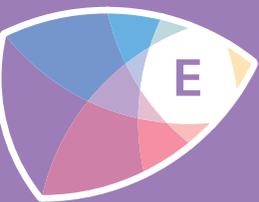
Further, collaborative practice is most effective when each team member works in a culture of understanding and respect for the roles of others, learns from others in a respectful manner and works together to deliver safe, high quality care for patients.

Strategies to strengthen and develop leaders throughout the workforce will be critical for culture change, for ongoing redesign of services to achieve the desired outcomes of the Tasmanian Health Plan, to create sustainable services and to improve the health outcomes of Tasmanians.

Key strategies

- Develop a range of collaborative networks for cross sector innovation and reform.
- Build on the LEADs Framework to develop a contemporary leadership strategy for leaders at all levels of the organisations involved in the Tasmanian healthcare system.
- Implement the Tasmanian Senior Executive Service leadership and capability framework.
- Develop structures that support access to contemporary management training and development, including the use of communication technologies and application of knowledge to practice.

¹¹ HWA, National Health Workforce Strategic Framework for Action 2011 – 2015)
¹² HWA, Health Leads Australia



Domain 7:

Efficiency and Flexibility

The Productivity Commission report *Australia's Health Workforce* has identified that there are “significant impediments” preventing workforce competencies’ being “fully developed, assessed, recognised and utilised¹³.”

The evidence in healthcare and the knowledge base of Australia’s health professions has expanded rapidly over the past decades. While each member of the team holds a set of unique knowledge and skills, there is a large body of knowledge, skills and competencies that are shared across all professions. Health Workforce Australia is coordinating a national effort to enhance the capacity and flexibility of the health workforce, including working in teams, the utilisation of full scopes of practice and the development of new roles, and training and development pathways that will support the workforce of the future.

Tasmania is currently guided by a multi-year Information and Communications Technology (ICT) Strategy called Connected Care. Connected Care is a means to coordinate or integrate the way that we care for our patients across the whole health system. The Connected Care system will

underpin improved sharing of clinical information and the development of new models of care and services.

Best practice workforce planning and human resource management will underpin the application of these developments into practice. Flexible, diverse and inclusive working arrangements have been shown to increase productivity, retention and minimise knowledge loss to an organisation. There is a need to identify barriers to professionals working to full scopes of practice, as well as enablers for the implementation of initiatives that will create greater workforce flexibility to meet current and future workforce and service needs. A broader focus may also be required to re-skill our existing workforce to ensure flexibility to meet ongoing challenges as the population changes and new healthcare technologies and treatments emerge.

Key strategies

- Identify and progress initiatives that extend the scope of practice of health professionals.
- Identify and address barriers to enable all members of the healthcare team to work to their full scope of practice.
- Implement assistant and support roles in healthcare.
- Ensure best practice human resource management and workforce planning.

¹³ Australian Productivity Commission, *Australia's Health Workforce Reform Research Report*, 2005



Tasmanian
Government