

Long-Term Plan for Healthcare in Tasmania 2040

SUMMARY



June 2023

Acknowledgements

ACKNOWLEDGEMENT OF COUNTRY

The Department of Health Tasmania respectfully acknowledges Tasmanian Aboriginal people as the traditional custodians of the land on which we live, work and play and pay respect to Aboriginal Elders past and present.

RECOGNITION STATEMENT

Tasmanian Aboriginal people's traditional lifestyle promoted physical and emotional health and wellbeing, centred around Country, Kin, Community and Spirituality. Aboriginal people continue to value the importance of culture, community connection and being on Country as vital components of health and wellness.

Through colonisation, Aboriginal people experienced displacement and disconnection, which has significantly affected their health and wellbeing.

We recognise Aboriginal people are the knowledge holders and provide best practice in promoting health and wellbeing for Aboriginal people. We acknowledge and learn from the ongoing work of Aboriginal organisations in ensuring continued health and wellness.

We commit to working in partnership with Tasmanian Aboriginal communities and health leaders now and into the future to improve health and wellbeing.

Copyright notice and disclaimer

Copyright in this publication is owned by the Crown in Right of Tasmania, represented by the Department of Health.

Information in this publication is intended for general information only and does not constitute professional advice and should not be relied upon as such. No representation or warranty is made as to the accuracy, reliability or completeness of any information in this publication.

Readers should make their own enquiries and seek independent professional advice before acting on or relying upon any of the information provided.

The Crown, its officers, employees and agents do not accept liability however arising, including liability for negligence, for any loss resulting from the use of or reliance upon information in this publication.

© State of Tasmania June 2023



Contents

Overview	3
Introduction	4
The Long-Term Plan for Healthcare in Tasmania 2040	5
Clinical Services Profiles	6
Tasmanian Role Delineation Framework	6
Action Areas	6
Next Steps	6
Planning Framework	7
Detailed List of Actions	9



reception 

Admissions | Cashier
K Block Lifts
IFA

Blocks   
Liverpool St

Overview



Overview

INTRODUCTION

The release of the *Long-Term Plan for Healthcare in Tasmania 2040* (the Long-Term Plan) and three Clinical Services Profiles represents a key milestone in the Tasmanian Government's long term health reform agenda, which commenced in 2014 with the *One State, One Health System, Better Outcomes* (Stage One) reforms.

The Stage One reforms focussed on clearly defining the role of our public hospitals and restructuring Government-delivered health services to establish a single service – the Tasmanian Health Service (THS).

Stage Two of the Government's long-term health reform agenda is *Our Healthcare Future*. Through partnership and collaboration, *Our Healthcare Future* focuses on securing a sustainable healthcare system that is balanced and connected across acute, subacute, mental health and primary health sectors. It extends the vision for an integrated health system beyond Government-delivered health services to the full spectrum of health service delivery in Tasmania.

Progress towards this Long-Term Plan is already underway. Through initiatives such as the *Health Workforce 2040*, the 10 year strategy for *Digital Health Transformation – Improving Patient Outcomes*, and hospital masterplans, the Department of Health has delivered significant achievements, at the same time as continuing to manage the COVID-19 pandemic. We will continue to build upon the progress made.

Given the long-term nature of the Long-Term Plan, aspects of its implementation will be phased over a number of years.

This document summarises the key policy directions and priority actions of the Long-Term Plan and Clinical Services Profiles. The full documents are available on the Tasmanian Department of Health website.

THE LONG-TERM PLAN FOR HEALTHCARE IN TASMANIA 2040

The Tasmanian Government is building a sustainable health system to meet the needs of the Tasmanian community, our consumers and our workforce over the next 20 years.

The Long-Term Plan provides a blueprint for how we will work together with our partners to achieve our vision of all Tasmanians being supported by a world class, innovative and integrated health system.

The health system of the future will look very different to today. To meet the needs of Tasmanians into the coming years, we must build on the strengths of the current system, while taking advantage of innovations in technology, research and models of care.

The Long-Term Plan has been developed in response to the aspirational vision, principles and policy direction provided in *Our Healthcare Future: Advancing Tasmania's Health*, released in 2022.

The Long-Term Plan considers current and future services across the continuum of healthcare in Tasmania, from primary care to complex acute care. It describes how we will position future clinical service delivery in response to long-term shifts in Tasmania's demographic and population health characteristics and anticipated service needs.

The Long-Term Plan is also a continuation and extension of the Stage One reforms. Building on the 2015 clinical service plan, *Delivering Safe and Sustainable Clinical Services*, the Long-Term Plan provides further direction and strategy towards a fully integrated and balanced health system that provides seamless care and optimal health outcomes for Tasmanians.

VISION

All Tasmanians are supported by a world class, innovative and integrated health system.

PRINCIPLES

Consumer centred

Collaborative

Innovative

Integrated

Equitable

Evidence-Based

STRATEGIC AMBITIONS

Better and More Accessible Community Care

Strengthening Prevention

Partnering with Consumers and Clinicians

Building the Health Workforce

Delivering the Health Infrastructure of the Future

Strengthening the Pandemic Response

CLINICAL SERVICES PROFILES

The Long-Term Plan sits within, and aligns to, a broader health landscape and planning framework (Figure 1) that includes Clinical Services Profiles as well as the *Tasmanian Role Delineation Framework for Health Services (2023)* (TRDF).

The three Clinical Services Profiles provide the detailed service capacity and capability planning for each region in Tasmania and have been developed together with the Long-Term Plan. Due to the ever-changing nature of forecasting of future service need, the Clinical Services Profiles have a five year horizon.

The Long-Term Plan leverages the local service capacity and capability described in each Clinical Services Profile, together with system-wide strategies, to provide a blueprint for how we will work together with our partners to achieve our vision of all Tasmanians being supported by a world class, innovative and integrated health system.

TASMANIAN ROLE DELINEATION FRAMEWORK

Development of the Long-Term Plan and Clinical Services Profiles has been underpinned by a revision to the TRDF. The TRDF is a health planning tool which describes the health services available in Tasmania, categorised by levels ranging from one to six. Level one describes generalist health services delivered by primary care providers, while higher levels describe greater levels of specialisation.

Extensive consultation with clinicians, consumers and health services managers has enabled a complete refresh of the TRDF. The TRDF is a dynamic document that will continue to be updated as clinical services evolve.

ACTION AREAS

The Long-Term Plan contains six action areas which have been designed to deliver the strategic ambitions and vision set out in *Advancing Tasmania's Health*:

- a single, integrated, statewide system
- providing the right care, in the right place, at the right time
- governed with our partners to proactively meet demand
- investing in our future to deliver sustainable and environmentally responsible services
- enabled by digital technology and infrastructure
- delivered by a valued and supported workforce.

Further detail of initiatives under each of these action areas is listed at the end of this paper.

NEXT STEPS

Detailed implementation planning will be undertaken to operationalise the priorities described in the Long-Term Plan. This will include extensive consultation and collaboration with consumers, clinicians and other key partners.

The Long-Term Plan will strengthen the system toward priorities that will enable better health outcomes for Tasmanians. This will require enabling resources such as digital technology transformation, data and research, contemporary infrastructure and a skilled workforce.

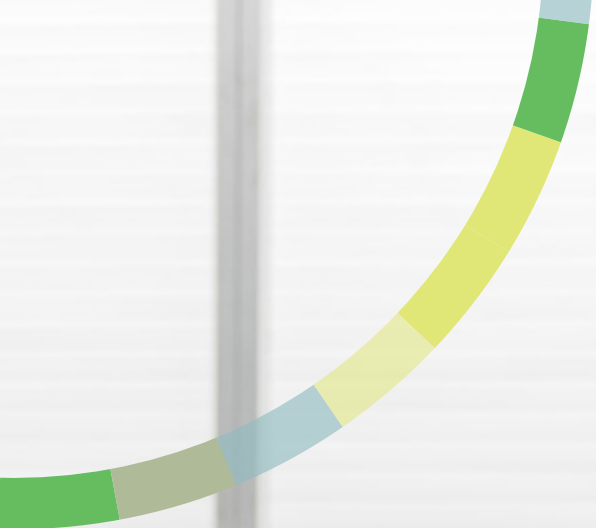
Monitoring, evaluation and review of the implementation will occur to ensure the goals of the Long-Term Plan are achieved, and to inform any adjustments that may be required as the health environment continues to change over time.

Progress toward implementation of the Long-Term Plan will be publicly reported at regular intervals so that Tasmanians can remain connected and informed of clinical service improvements as they occur.

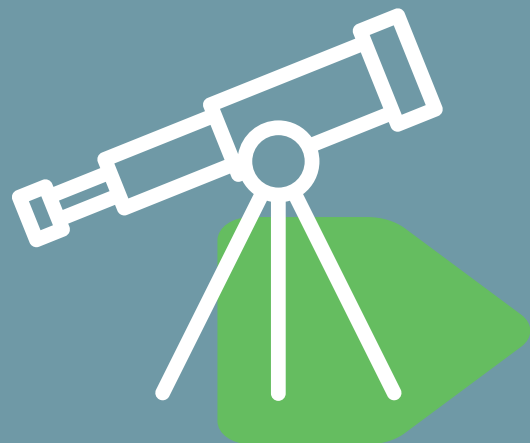
PLANNING FRAMEWORK

Figure 1: Strategic Planning Environment





Detailed List of Actions



Detailed List of Actions

The following list of detailed actions has been developed to drive reform across each of the six action areas outlined in the Long-Term Plan. Given the long-term nature of the reforms, aspects of implementation will, by necessity, be phased over a number of years. The Long-Term

Plan will be used as a guide to direct future priority and budget setting. Those activities which will have the greatest immediate effect on the health outcomes that matter the most to Tasmanians will be prioritised for implementation.

ACTION AREA I. A SINGLE, INTEGRATED, STATEWIDE SYSTEM

Action I.1 Strengthening our relationship with primary care	1.1.1 – Co-develop a Primary Healthcare Strategy and Action Plan in response to <i>Australia’ Primary Health Care 10 Year Plan</i> .
	1.1.2 – Building rural workforce capacity in Tasmania – Single Employer Model to allow the seamless transition of GP training placements between hospital and community-based services, to support the attraction and retention of doctors in rural and remote Tasmania.
	1.1.3 – Develop a services framework to guide the future direction of after hours primary healthcare and urgent care services in Tasmania including: the Australian Government’s Urgent Care Clinics, the GP After Hours Grants, Primary Health Support Initiative, Hospital Avoidance Co-Investment Fund and the utilisation of virtual care models of care such as My Emergency Doctor.
	1.1.4 – Strengthening use of HealthPathways in Tasmania to connect health professionals with each other and improve the shared transfer of care between parts of the health system.
	1.1.5 – Embed a model to enable General Practitioners with a Specific Interest (GPSIs) to extend their skills and work in hospital and other health settings in areas of specialty medicine in Tasmania to increase access to specialist outpatient services to the community and support integration between primary and acute care.
	1.1.6 – Partnering to develop a Tasmanian Chronic Conditions with a focus on initiatives to support people living with chronic conditions and reduce the risk factors associate with chronic disease.
	1.1.7 – Enhance Tasmania’s outpatient eReferral system to enable Tasmanian healthcare providers to send, receive and navigate electronic referrals to deliver more efficient and appropriate patient care.
	1.1.8 – Establish a Mental Health and Alcohol and Other Drugs Central Intake and Referral Service to streamline mental health and alcohol and other drug support service access in Tasmania.
Action I.2 Continuing System Role Delineation	1.2.1 – Implementing the revised Tasmanian Role Delineation system role delineation Framework and Clinical Services Profiles across our hospitals to ensure all services meet the requirements of their designated role in each region.

ACTION AREA I. A SINGLE, INTEGRATED, STATEWIDE SYSTEM

Action I.3 Distributing services for quality and access

1.3.1 – **Enhance service sustainability through the enhanced delivery of statewide services and care networks** where services are provided in multiple locations and require services to work together as a single, statewide system.

1.3.2 – **Strengthen integrated care across the North and North West** through integrated care hubs at the LGH in key areas, including neurology, rheumatology, cardiology, and specialist women’s and children’s services.

1.3.3 – **Planning for equitable access to elective surgery, endoscopy, dental care under general anaesthetic and outpatient services** ensuring that Tasmanians receive their planned procedures within clinically recommended timeframes, based on their clinical need, not on where they live.

1.3.4 – **Co-design a new breast care centre for Tasmania**, building on BreastScreen Tasmania’s successful screening program and our co-investment with the Australian Government to introduce public diagnostic mammography services for Tasmanians.

ACTION AREA I. A SINGLE, INTEGRATED, STATEWIDE SYSTEM

Action I.4 – Integrating mental health services

1.4.1 – **Continue the implementation of Rethink Mental Health Reforms** for mental health system integration and service improvement in Tasmania, including service expansion, particularly in high priority areas such as the North West of Tasmania, older person’s and child and adolescent mental health and services at home and in the community.

1.4.2 – **Establish mental health Integrated Care Hubs** located in the Northern suburbs of Hobart, and in Launceston, to provide a broad spectrum of mental health services from day-support to short-term recovery beds and connect people living with mental illness to a range of health, community and social services.

1.4.3 – **Strengthen the interface with Alcohol and Drug Services (ADS)** and mental health services for those who require continuity of care and support across both these areas, as well as the broader health system. This is work supported through our *Reform Agenda for the Alcohol and Other Drugs Sector in Tasmania*.

1.4.4 – **Implement the Tasmanian Suicide Prevention Strategy 2023-27**, to support a compassionate and connected community that works together to prevent suicide.

ACTION AREA I. A SINGLE, INTEGRATED, STATEWIDE SYSTEM

Action 1.5 – Improving how we use our service network

1.5.1 – **Improving co-ordination of patient flow into and out of our hospitals** through the establishment of a system-wide Integrated Operations Centre that will bring together the three existing regional Integrated Operations Centres with views from other care settings such as private hospitals, residential aged care facilities, district hospitals and HITH services to direct the flow of patients and resources within the THS.

1.5.2 – **Provide enhanced information and navigation tools for consumers** to improve the community's knowledge of what care options are available to best suit their needs.

1.5.3 – **Enhance clinical transport** through investment in new and upgraded transport infrastructure, development of a Patient Transport and Interfacility Coordination Unit, alternate care pathways for lower acuity Ambulance Tasmania pathways, and the use of Extended Care Paramedics and Community Paramedics to avoid emergency medical transport where it is not appropriate.

Action 1.6 – Supporting the health of older Tasmanians and those living with a disability

1.6.1 – **Establish a frailty clinical network** to address the challenges of frailty and improve patient outcomes.

1.6.2 – **Establish an Older Persons Strategy for Tasmania** to address continuity of care and positive health outcomes for Tasmanians.

1.6.3 – **Enhancing dementia care** for patients, carers and families.

1.6.4 – **Provide greater specialist support into residential aged care and supported accommodation** through in-reach models of care in key areas such as urgent care, home-based services (central virtual care hubs), palliative care, and dementia.

1.6.5 – **Partnering with the Australian Government to enhance care to older Tasmanians and those in our community living with a disability**, including through the Tasmanian Aged Care Collaborative to improve the timely access to residential aged care and NDIS support services, and enhance aged care service capabilities in areas of specialised care needs such as dementia.

Action 1.7 – Working together to enhance care

1.7.1 – **Partnering with the private hospital sector to optimise care delivery and sustainability** to provide better access to care through joint health service planning, and the implementation of the TRDF, and colocation of services.

1.7.2 – **Collaborating with our partners** to build a single, integrated statewide health system.

ACTION AREA 2. PROVIDING THE RIGHT CARE, IN THE RIGHT PLACE, AT THE RIGHT TIME

Action 2.1 – Addressing subacute care needs

2.1.1 – **Enhancing subacute care services in the North and North West of Tasmania** to provide high-quality, patient-centred, multidisciplinary treatment in palliative care, rehabilitation, geriatric evaluation and management, and older persons mental health.

2.1.2 – **Establishing a Health and Wellbeing precinct at St John’s Park servicing Southern Tasmania** to enhance access to, and coordination of, inpatient, outpatient, community and home-based subacute care.

Action 2.2 – More care delivered in the home and community

2.2.1 – **Establishing central virtual care navigations hubs** to provide overall health system benefits through defined Hospital avoidance, and Hospital substitution strategies alongside strengthened and better coordinated delivery of home and community-based services.

2.2.2 – **Establishing enhanced and integrated community and home-based services** strengthen and better coordinate the delivery of home and community-based services across a range of care areas, including intermediate care, subacute care, and HiTH.

2.2.3 – **Changing the way we deliver outpatient services**, providing more services in the community, through the implementation of the *Transforming Outpatient Services 2022-26*.

Action 2.3 – Optimising planning, planning rural health services

2.3.1 – **Adopt a place-based approach to rural health service implementation and delivery** supported by the development of a DoH framework to guide place-based approaches to health.

2.3.2 – **Establishment of a Tasmanian Rural and Remote Clinical Network** to understand rural needs, make connections and provide advice to health leaders for decision making.

2.3.3 – **Develop a Master Plan for Tasmanian District Hospitals and Community Health Centres** to ensure our infrastructure in rural communities meets need now and into the future.

2.3.4 – **Optimising rural service delivery** in partnership with communities by mapping healthcare capacity across the rural health network, strengthening resources and infrastructure in rural areas, and developing health service optimisation plans through the place-based approach.

ACTION AREA 2. PROVIDING THE RIGHT CARE, IN THE RIGHT PLACE, AT THE RIGHT TIME

Action 2.4 – Strengthening prevention and early intervention

2.4.1 – **Prioritising preventative health at all levels of the organisation**, including leading by example as a healthy organisation and the ongoing implementation of the *Healthy Tasmania Five-Year Strategic Plan 2022-26*.

2.4.2 – **Supporting priority population groups** through a range of strategies including: *Improving Aboriginal Cultural Respect Across Tasmania's Health System*; *Rethink 2020: A state plan for mental health in Tasmania 2020-25*; *It Takes a Tasmanian Village, the Health Literacy Action Plan 2019-2024*, and the *Food Relief to Food Resilience Strategy and Action Plan*.

2.4.3 – **Apply population-based priority setting to deliver enhanced preventative health measures** using population health data, social determinants data, and predictive analytics, to target prevention strategies that will be of greatest benefit to Tasmanians.

2.4.4 – **Applying a prevention lens** to clinical service planning, commissioning and evaluation to ensure evidence-based opportunities for prevention are identified and actioned.

2.4.5 – **Increase the dissemination of preventative health information** using digital health platforms, partner organisations, peer approaches and tailored messaging to give people access to trusted health information that is relevant to them.

2.4.6 – **Co-ordinate a multi-level system response** to embed prevention across the entire health system through leadership, capacity building, performance measurement and dedicated time and resources for clinicians to work in health promoting ways.

2.4.7 – **Embed prevention into our ways of working** through strategies including clinical pathways; early predictive decision support technologies; monitoring and responding to clinical variation trends that identify preventive health needs, and embedding health promotion, health literacy and cultural competency training into the health workforce.

2.4.8 – **Enhance mental health and alcohol and other drugs early intervention and prevention**

2.4.9 – **Prioritising children and young people** to ensure our infants, children and their families thrive as part of a healthy community.

2.4.10 – **Increasing child safety and wellbeing** creating a culture where children's safety is prioritised.

ACTION AREA 3. DESIGNED WITH OUR PARTNERS TO PROACTIVELY MEET DEMAND

Action 3.1 – Planning in a commissioning environment	3.1.1 – Establish a stronger commissioning cycle to ensure health services purchased by the Tasmanian Government from the THS address the community's health needs in the most effective and efficient way.
Action 3.2 – Partnering with consumers and communities	3.2.1 – Embedding the voice of lived experience in the planning and delivery of mental health and alcohol and other drug services by working closely with peak bodies for people with a lived experience of mental ill-health and/or alcohol and drug use and their families and friends.
Action 3.3 – Partnering with clinicians	<p>3.3.1 – Strengthening our clinical engagement practices through a new clinical engagement framework to ensure that the clinician voice is included in all clinical planning and reforms.</p> <p>3.3.2 – Statewide Clinical Networks strengthened through the addition of new Networks in key clinical areas not currently supported by a Network and a Tasmanian Clinical Network Steering Committee to provide the networks with oversight and direction.</p> <p>3.3.3 – Tasmanian Health Senate to provide clinical leadership and independent advice for complex, system-wide health service delivery issues and plans.</p> <p>3.3.4 – Leadership 2040 Forum to provide clinical leadership and independent advice for complex, system-wide health service delivery issues and plans.</p>

ACTION AREA 4. INVESTING IN OUR FUTURE TO DELIVER SUSTAINABLE AND ENVIRONMENTALLY RESPONSIBLE SERVICES

Action 4.1 – Value-based healthcare	4.1.1 – Applying a value-based approach to service design, commissioning, purchasing and procurement ensuring we are investing in the health services of greatest benefit to Tasmanians.
Action 4.2 – Research and industry development	<p>4.2.1 – Increasing access to health and medical research and harnessing new technology-led innovation that will improve the quality of health care and the health and wellbeing of Tasmanians.</p> <p>4.2.2 – Harnessing personalised medicine into the future to improve health through prevention and individualised therapeutics that have cost benefits for the health system.</p>
Action 4.3 – Environmentally Sustainable healthcare	<p>4.3.1 – A net zero health service by 2030 in line with the <i>Tasmanian Government's Climate Change Act (State Action) Amendment Bill 2021</i>.</p> <p>4.3.2 – A strategic approach to cleaner health services oversighted by a DoH Environmental Sustainability Committee with responsibility for developing and implementing a comprehensive strategy.</p> <p>4.3.3 – Progressing the Global Green Healthy Hospitals (GGHH) goals of Leadership, Waste, Transportation and Buildings throughout the DoH as members of the GGHH international network.</p>

ACTION AREA 5. ENABLED BY DIGITAL TECHNOLOGY AND INFRASTRUCTURE

Action 5.1 – Digital health transformation	5.1.1 – Implementing the Digital Health Transformation Strategy 10-Year Program of work to enable the key digital advances of virtual care, eReferral and a statewide Electronic Medical Record (EMR).
Action 5.2 – 20 Year Infrastructure Strategy	5.2.1 – Develop a 20 Year Infrastructure Strategy encompassing the hospital masterplans to inform asset management and investment decisions that meet future demand and consumer and community expectations. 5.2.2 – Implement an Asset Management System and Health Facility Planning and Delivery Process to apply a lifecycle asset management approach to DoH facilities and ensure that all new and upgraded health facilities are fit for purpose, future focused and enable high quality and safe care.

ACTION AREA 6: DELIVERED BY A VALUED AND SUPPORTED WORKFORCE

Action 6.1 – Implementing our Health Workforce 2040 Strategy	6.1.1 – Implement the actions outlined in the Health Workforce to deliver on our 2040 strategic ambitions for our 2040 people.
Action 6.2 – Valuing and supporting our workforce	6.2.1 – Implement the One Health Culture program to build an inclusive and supportive working environment through actions including the Aspire leadership program, a DoH Wellbeing Framework and the Human Resources Information System Transformation Project. 6.2.2 – Implement Ambulance Tasmania Cultural Improvement Action Plan , an immediate and long-term commitment to build safe, supportive work environments of professionalism, dignity and respect. 6.2.3 – Child Safe Governance Review of the Launceston General Hospital and Human Resources – implementation of all 92 recommendations to build a strong and healthy organisation where children can feel and be safe in all healthcare settings. 6.2.4 – Transforming the systems that support the capability, capacity and engagement of our people and enable contemporary human resource practises and processes.

ACTION AREA 6: DELIVERED BY A VALUED AND SUPPORTED WORKFORCE

Action 6.3 – Increasing capacity	<p>6.3.1 – Growing the multidisciplinary rural workforce by: strengthening capacity and establishing generalist and education pathways in line with Tasmania's health workforce needs; considering a new, multidisciplinary Rural Health Workforce Centre at the MCH by building on the existing Rural Medical Workforce Centre; and working in partnership with other Agencies and our private healthcare partners to attract health professionals to Tasmania.</p> <p>6.3.2 – Demand driven recruitment in line with the health services needs of Tasmania as outlined in the TRDF and Clinical Services Profiles.</p> <p>6.3.3 – Supporting extension of our non-clinical and support staff by trialling and implementing new ways of working that increase delegation of non-clinical tasks to non-clinical workers and partnering with TAFE Tasmania and other vocational education providers to boost this important workforce.</p> <p>6.3.4 – Health professionals working to their full scope of practice by removing barriers, supporting staff to upskill and expand their scope of practice, and where appropriate, introducing advanced scope of practice and extended scope of practice roles.</p> <p>6.3.5 – Embedding roles for people with lived experience into service provision for the alcohol and other drugs, mental health and suicide prevention sectors through development and implementation of a Tasmanian Lived Experience Workforce Framework.</p>
Action 6.4 – Improving workforce distribution	<p>6.4.1 – Improving geographic workforce distribution in generalist service areas through strategies including incentivising practice and professional development in rural areas, new training opportunities in rural areas, and working with educational partners to rebuild the general workforce in medicine, nursing and allied health.</p> <p>6.4.2 – Improving the distribution of specialist skills through digital technologies such as telehealth, remote access to interstate service providers, and shared employment of specialists with the private sector.</p> <p>6.4.3 – Increasing distribution through skill-sharing and a more mobile workforce by facilitating multidisciplinary teams across care settings and health organisations, strengthening shared-care arrangements between specialist and generalist providers, and making it easier for clinicians to move across multiple sites.</p>
Action 6.5 – Workforce Flexibility	<p>6.5.1 – Reforming legislative and employment Frameworks to support innovation and flexibility</p> <p>6.5.2 – Enhancing the role of our paramedic workforce beyond traditional roles within ambulance services and into hospital and community settings, including considering the establishment of a Chief Paramedic Officer to further diversify the paramedic role both in the public and private health sectors.</p> <p>6.5.3 – Further support the Rural Generalist Pathway to attract, retain and support rural generalist doctors in partnership with a range of stakeholders.</p> <p>6.5.4 – Enhance Nurse Practitioner Models to increase service access and efficiency and improve patient experiences through innovative models.</p> <p>6.5.5 – Technology assisted access to specialised health workforces in Tasmania to expand local access to highly specialised health professionals, where it is clinically safe and appropriate.</p> <p>6.5.6 – Maximise scope of practice of pharmacists to consider what other services and supports they may be able to safely provide to Tasmanians.</p> <p>6.5.7 – Increased utilisation of support roles to enable alternate workforce models to enhance access to services.</p>

