

One State, One Health System, Better Outcomes

DELIVERING SAFE AND
SUSTAINABLE CLINICAL SERVICES

Supplement No.2

Tasmania's Health
WORKFORCE

REBUILDING TASMANIA'S HEALTH SYSTEM

TASMANIA'S HEALTH WORKFORCE

The One State, One Health System, Better Outcomes reform program features the development of a White Paper outlining the Government's plan for the delivery of safe and sustainable clinical services. The White Paper will clearly define what clinical services can be delivered safely and where, and how care can be linked across the primary, secondary and tertiary health care sectors.

To inform the development of the White Paper a Green Paper has been released for public consultation detailing options for a comprehensive, evidence-based proposal for an efficient state-wide and regional service profile.

A series of supplementary documents have been developed to support the Green Paper. These documents will provide a deeper insight into particular areas of the health system, assisting the Tasmanian community to contribute to the public consultation process.

There are five supplementary documents. The first three are focussed on system wide issues that are key factors in the development of the clinical services profile. The latter two are focussed on key areas of ongoing stress and poor performance in our public hospitals;

1. Sustainability and the Tasmanian Health System
2. Tasmania's Health Workforce
3. Building a Stronger Community Care System
4. Emergency care
5. Elective Surgery

This document focuses on the health workforce that is an essential pillar in the delivery of services in Tasmania's health system.

Background

Australia's health system is facing unprecedented challenges. These challenges include an ageing population, which also means an ageing health workforce; changing burden of disease, in particular a growing level of chronic disease; and increased demand for health services with higher numbers of people requiring complex care and long term care¹.

As recognised by major national health initiatives in recent years the health sector needs to refocus on wellness, prevention and primary health care if it is to be sustainable in the future². Sustainability will require rebalancing many facets of the current system and making decisions based on community and consumer need and on evidence of the most cost effective, efficient workforce arrangements to deliver care.

1 Health Workforce Australia (2014) <http://www.hwa.gov.au/our-work/hwa-strategic-plan-and-work-plan>

2 Initiatives include: Closing the Gap between indigenous and Non-indigenous Australians; Department of Health and Ageing (2010) Building a 21st Century Primary Health Care System: Australia's First National Primary Health Care Strategy; Preventative Health Taskforce – National Prevention Health Strategy (2008); Fourth national mental health plan: an agenda for collaborative government action in mental health 2009-2014.

Tasmania's challenge is significant. The Tasmanian population is ageing at a rate faster than the rest of the nation – with the oldest population of all the states and territories (median age of 40.4 years as at June 2011³). Over the next 40 years the number of Tasmanians aged 65 years and over is expected to more than double while the number aged 80 years and over is expected to more than treble⁴. Tasmania's ageing population has an impact on both the supply and demand of the health workforce.

The Government recognises that system wide reform is needed to enable meaningful and long lasting change to deliver improved outcomes for patients⁵. Health workforce reform is an essential foundation for increasing access to services. Health workforce reform does not only mean a re-configuration of the workforce but also the education and training programs that prepare and support them.

The development of a clinical service profile provides Tasmania with the opportunity to systemically review the workforce's capability and capacity to deliver services, link workforce planning to service need, and focus our investment on the workforce of the future.

Ensuring a high quality, safe health workforce

The Tasmanian Government is responsible for ensuring that services provided to the Tasmanian community are provided in circumstances where safety and quality has been properly addressed and this includes ensuring that our health workforce delivers care within their profession's defined scope of practice.

An active program for monitoring and evaluating the quality of care provided to the Tasmanian community is critical to good governance. All participants in the healthcare system need to be able to detect and effectively respond to quality of care issues. We need to be able to inform planning, purchasing, and management decisions to ensure a continual focus on excellence.



Tasmania has the oldest population of all states and territories

National workforce projections highlight that Tasmania will struggle to meet the forecast growth required based on current service patterns and models of care.

3 Australian Bureau of Statistics, Population by Age and Sex, Regions of Australia (2011) <http://www.abs.gov.au/ausstats/abs@.nsf/Products/3235.0~2011~Main+Features~Tasmania>

4 Council of Australian Governments National Partnership Agreement 2009 Sub-acute plan Tasmanian 2009-2013

5 Rebuilding Tasmania's Health System Issues Paper 2014: http://www.dhhs.tas.gov.au/__data/assets/pdf_file/0006/170565/Rebuilding_Tasmanias_Health_System_-_Issues_Paper.pdf accessed on 8 October 2014

Planning our workforce of the future



We need the
right staff at the
right place at the
right time

Scope of Practice

“A scope of practice describes those activities that a health practitioner is educated, competent and legally authorised to perform. The scope is influenced by the needs of consumers; the settings in which they practice and the policies of employers. It is important that health care workers are enabled to work to the maximum of their scope as they continuously review their practice, learn and develop”.

In 2013 the Department of Health and Human Services (the Department) released the Strategic Framework for Health Workforce 2013-18 (the Framework). The Framework was the first step for Tasmania to plan and implement changes to ensure we have a flexible and sustainable health workforce for 2025. The vision of the Framework is to provide a dynamic, competent workforce that will meet the health and wellbeing challenges Tasmania faces.

The Framework highlights the challenge of developing a workforce that can provide safe, high quality, person-centred services within changing environments and budgetary constraints.

The Framework contains a range of key strategies currently being progressed by the Department, under the following domains:

- Culture of Safety and Quality
- Attraction and Workforce Distribution
- Patient and Consumer Centred Care
- Access Data and Systems
- Build Capability and Capacity to Work in New Ways
- Leadership
- Efficiency and Flexibility⁶

The development of a clinical services profile, to be outlined in the White Paper, enables Tasmania to grow its health workforce in line with forecasted service need. It provides the opportunity to reform health workforce roles to improve productivity and support more effective, efficient and accessible service delivery models. The Profile provides an opportunity to approach workforce planning based on outcomes for communities, consumers and the population, rather than from the basis of existing professions and their interests and skills, demarcations and responsibilities.

Building and utilising our health workforce to maximum potential

National workforce projects undertaken by the Australian Government found there:

- is an adequate supply of some specialty groups like cardiologists and not enough in others like psychiatrists
- is a maldistribution of the medical workforce, in particular general practitioners in regional and rural Australia
- is a growing trend towards specialisation and subspecialisation which means we don't have enough generalists
- will be a highly significant shortage of nurses by 2025⁷

⁶ Department of Health and Human Services (2013) *Strategic Framework for Health Workforce* www.dhhs.tas.gov.au

⁷ Australia's Future Health Workforce <http://www.hwa.gov.au/our-work/build-capacity/australias-future-health-workforce-hw2025> accessed 17 October 2014.

To implement health service reform within an environment of scarce resources we need to ensure that our workforce is used in the most efficient and effective way possible. We need to ensure that we support our highly skilled health professionals to work to their full scope of practice and do the work that they were trained to do.

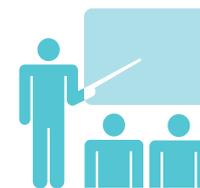
A recent Queensland study found that allied health practitioners in the public sector were not able to perform tasks to their full scope of practice even though these are performed by their colleagues in the private sector⁸.

Enabling our health workforce to maximise their scope of practice, including advanced clinical practice and extend the scope of practice where appropriate, will deliver better outcomes for patients, the community and the health system. This is particularly important in smaller and more remote communities where skilled staff are hard to recruit. Enabling the Tasmanian health workforce to work to their full scope of practice is largely dependent on redefining organisational processes, reviewing team roles and functions, education and training, supporting cultural change and addressing identified barriers e.g. legislative, administrative, funding, policy, custom and practice⁹.

The renewed focus on primary and preventative care combined with the increase in the number of patients with chronic illnesses and co-morbidities, signals the need to provide more complex care in the community. To do this we need to support our workforce to create a culture of collaboration and implement team based approaches to the delivery of safe, high quality care.

There is potential for assistants and support workers to build capacity in a range of workforce areas in Tasmania. These may include, allied health assistants, personal care workers and patient care attendants, medical practice assistants and peer workers. There is also the potential to increase the use of the enrolled nurse workforce to work across a broader range of health environments. For some service areas, such as mental health and aged care, there is also the opportunity to strengthen and support volunteer and carer roles to reinforce consumer self-management capability.

Broader use of Enrolled Nurses, assistants and other support roles provides highly skilled clinical staff and specialists the opportunity to work to their full scope of practice. Assistants and support staff need to be supported by strong governance frameworks using clear mechanisms of delegation and clinical supervision to build clinical capacity without compromising safety and quality.



We need to enable our workforce to do the work they are trained to do.

Assistants/ Support Workers

An assistant works to, and under the supervision of a health practitioner, takes on less complex treatment or care tasks, and/or performs administrative or other tasks that would otherwise reduce the time available for more complex direct care by more highly trained practitioners. Support workers denote a broad range of health care roles which may or may not require training or qualifications.

8 Ministerial Taskforce on health practitioner expanded scope of practice: Final report May 2014. Allied Health Professions Office of Queensland

9 Ministerial Taskforce on health practitioner expanded scope of practice: Final report May 2014. Allied Health Professions Office of Queensland



New workforce roles can help to reduce the pressures on the acute care sector.



We need a range of health professionals working together to deliver our services

Expanded scopes of practice

Consideration also needs to be given to how expanded scopes of practice can improve service delivery, reduce the pressures on the acute care sector and improve recruitment in areas of high need.

In 2013, the Department participated in the Extended Care Paramedics (ECPs) pilot project. ECPs are experienced paramedics with advanced training and skills in patient assessment, delivery of quality care and coordination of appropriate referral pathways. ECPs treat patients in collaboration with other health professionals, in their usual place of residence, reducing emergency department presentations and providing a more holistic level of care¹⁰. Evaluation of this project identified that it improved integration of care services for those transitioning from acute care to the community, resulted in a high proportion (69 per cent) of patients seen by ECPs not requiring transport to hospital enabling more patients to be treated at home, and that there were no adverse events or complaints from consumers reported¹¹.

Other expanded scope of practice pilot projects conducted in Australia recently include Physiotherapists in Emergency Departments and Advanced Practice in Endoscopy Nursing. While these projects were not piloted in Tasmania, the evaluation provided positive results and adoption of these roles could assist in meeting increased service demands. For example, the leading cause of death in Tasmania is cancer of all types and Tasmania has the second highest incidence and mortality rates of Australian states and territories¹². Bowel cancer is the second most common cause of death of both males and females in Tasmania¹³. Evidence is showing that the provision of nurse endoscopists as part of a collaborative service improves patient access, helps to reduce waiting times, and increases patient satisfaction.

Expanding scope of practice isn't about a single profession; it involves a range of health professionals working together to deliver comprehensive patient care. The roles of multidisciplinary teams need to be clearly negotiated and defined within agreed governance structures, systems and protocols to support the delivery of safe, high quality care (see Supplement No.1 - Sustainability and the Tasmanian Health System).

10 Health Workforce Australia, *Extended Care Paramedics* <http://www.hwa.gov.au/our-work/expanded-scopes-practice-program/extended-care-paramedics>

11 Thompson C, Williams K, Morris D, Lago L, Kobel C, Quinsey K, Eckermann S, Andersen P and Masso M (2014) HWA Expanded Scopes of Practice Program Evaluation: Extending the Role of Paramedics Sub-Project Final Report. Centre for Health Service Development, Australian Health Services Research Institute, University of Wollongong.

12 Australian Institute of Health and Welfare (2012) *Cancer in Australia: An Overview 2012*

13 Menzies Research Institute Tasmania (2010) *Cancer in Tasmania – A Snap Shot*

Training the workforce of the future

The Tasmanian health system plays a critical role in the education and training of our health workforce. Nurses, for example, are required to complete 800 hours of clinical training. Clinical training involves nursing students working under supervision in a specific healthcare setting, with the aim of providing the link between theoretical knowledge and practical application in a supportive environment. The Clinical Training Profile – Nursing, developed by the Australian Government, identified that nationally almost 70 per cent of clinical training for registered nurses took place in the acute care setting with only six per cent being undertaken in the primary care and community health setting. While it is recognised that clinical training is a very important part of nursing education and training, the numbers of students, available training places and minimum training requirements have created pressures on the existing system.

If we are to refocus our health system on wellness, prevention and primary health care we also need to refocus the education and training programs that prepare and support our workforce.



For more information on the *One State, One Health System, Better Outcomes* reform package please visit: www.dhhs.tas.gov.au/onehealthsystem or alternatively send an email to: onehealthsystem@dhhs.tas.gov.au

