Workforce redesign: Better Skills
Best Care

Luisa Abiuso
Manager, Allied Health and Innovation
Service and Workforce Planning

26 July 2006
## Victorian workforce strategies & solutions

### Improve workforce supply
- **Short term**
  - Reduce training burden on health services
- **Medium term**
  - Expand strategies to encourage re-entry
  - Expand overseas recruitment and use of locally trained international students
- **Long term**
  - Increase funding for clinical placements

### Improve workforce distribution
- **Short term**
- **Medium term**
  - Fund growth in early graduate positions
- **Long term**
  - Establish alternative approaches to management & allocation of early graduate & vocational training positions
  - Expand recruitment & retention strategies in priority services & occupations

### Redesign the workforce
- **Short term**
- **Medium term**
  - Fund projects to design & influence curriculum
  - Support skills mix projects
- **Long term**
  - Expand training & utilisation of certificate trained staff
  - Fund local workforce innovation projects which pilot work roles &/or design

### Health Workforce

<table>
<thead>
<tr>
<th>Short term</th>
<th>Medium term</th>
<th>Long term</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td><strong>Reduce training burden on health services</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Expand strategies to encourage re-entry</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Expand overseas recruitment and use of locally trained international students</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Increase funding for clinical placements</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Fund growth in early graduate positions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Establish alternative approaches to management &amp; allocation of early graduate &amp; vocational training positions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Expand recruitment &amp; retention strategies in priority services &amp; occupations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fund projects to design &amp; influence curriculum</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Support skills mix projects</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Expand training &amp; utilisation of certificate trained staff</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fund local workforce innovation projects which pilot work roles &amp;/or design</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Better Skills, Best Care

Improved work design

• Reorganising work to minimise duplication of effort and make best use of available staff
• Ensuring people use their skills
• Improving the patient journey
Better Skills, Best Care: Benefits

Research shows that job redesign can result in improved patient and staff satisfaction.

- Interesting and rewarding work biggest influence on intention to join and stay (Day 2005, McCabe, Nowak and Mullen 2005)

- Job design, when used as part of HR bundle, can be associated with low levels of turnover (Adams et al 2000 & Paul & Anantharaman 2003)

- The way work is organised can impact on workers’ health (Lowe et al 2003)

- NP can lead to increased patient satisfaction (Kinnersley et al 2000, Shum et al 2000, Venning et al 2000)
Better Skills, Best Care

Improved work design

- Develop advanced scope of practice for AH
- Further develop Allied Health Assistants
- Increase scope of practice for Division 2 Nurses
- Develop PCA Role
- Expand use of technology
- Review time based learning
- Overhaul curriculum
- Negotiate changes to teaching models
- Increase scope of nurse practitioners
- Overhaul curriculum
- Negotiate changes to teaching models
- Increase scope of nurse practitioners
- Overhaul curriculum
- Negotiate changes to teaching models
Better Skills, Best Care

BSBC Methodology

1. Identified need
2. System mapping
3. Assessment of competencies
4. Identify service gaps

- Knowledge through policy work & projects
- Calls for expressions of interest

- Amend/develop training
- Regulation
- Supervision
- Indemnity

- Impact on patients
- Impact on service
- Impact on new/redesigned workforce

- Reorganise
- Role redesign
- New roles

Evaluate
Better Skills, Best Care

BSBC Stage 1 – Role specific pilots

- Call for submissions in May 05
- 103 submissions received from around Victoria
- 26 service initiated projects and 11 DHS initiated projects funded. All commenced in June 2005
- Final reports now being submitted
- Analysis of evaluations: impact on services, staff satisfaction (inc qualitative), patient satisfaction
- Use both to identify effective approaches and test tools
Role specific pilots

- Consultation with stakeholders
- Agreement – which roles do we progress?
- Considering:
  - Training and development requirements
  - Legislative/regulatory barriers
  - Organisational barriers
  - Industrial issues
- Sector wide roll-out through forums, implementation kits, training.
Better Skills, Best Care

BSBC Stage 2 - Service-wide workforce design

• Adopting a service-wide approach
• In consultation and partnership with:
  – VHSMIC
  – Unions
  – Professional associations/colleges
  – Health Services
• Explore opportunities for more comprehensive substitution across complete services
Better Skills, Best Care

Service-wide projects

- 8 projects established at metropolitan and rural services, targeting:
  - Anaesthetics
  - Emergency
  - ICU
- Aim to systematically identify and delegate tasks to appropriate staff across service continuum
- Functions mapped and new roles identified by December 2006
- Training and curriculum developed and delivered and new roles commencing from March 2007
## Service-wide design

<table>
<thead>
<tr>
<th>Existing medical</th>
<th>Existing health professions</th>
<th>Existing support</th>
<th>Existing admin</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Illustration" /></td>
<td><img src="image" alt="Illustration" /></td>
<td><img src="image" alt="Illustration" /></td>
<td><img src="image" alt="Illustration" /></td>
</tr>
</tbody>
</table>

Better Skills, Best Care
Better Skills, Best Care

Types of change

- New roles – (eg case manager, physician assistant, medical care practitioner)
- Vertical – eg role extension within a profession (expanded scope nursing – nurse practitioner)
- Horizontal – eg role extension across professions (Rehab practitioner – physio and OT skills)
- Existing roles in new settings (eg Div 2 in ED)
Governance

• Local Project Groups
  – At each hospital site
  – Provide oversight and local management of project activities
  – Provide solutions to local barriers to implementation
  – Liaise and engage with local stakeholders

• Project Reference Groups
  – x3: Anaesthetics, ICU, ED
  – Key industrial, professional, education sector and health executive stakeholders
  – Provide expert input on roles and workforce configurations
  – Provide advice on existing and emerging issues that impact on role development and implementation
  – Communicate with own members on project developments
Governance

- **Stream Steering Groups**
  - x3: Anaesthetics, ICU, ED
  - endorse the project deliverables
  - ensure learnings are shared
  - Ensure a coordinated and consistent approach is applied
  - provide advice on policy implications
  - manage key stakeholders as necessary.
Workforce redesign – Better Skills
Best Care

Luisa Abiuso
Service and Workforce Planning

Department of Human Services