

Pathways into Careers in Health

Introduction

Australia's health workforce is facing significant challenges which are escalating due to the ageing of the population and the increasing burden of chronic disease. The sector is already experiencing absolute shortages across a wide range of health professions and inequitable distribution of the workforce. These shortages are predicted to increase as the health workforce itself ages, with the impact being greatest in rural and regional locations.

In addition, the relative size of the entrants into the workforce pool is shrinking and will continue to do so over the next decade due to the demographic shift in the population¹. This has resulted in the adoption of active recruitment approaches by other industry sectors that are competing for a share of the same workforce pool.

These workforce challenges have necessitated new approaches that expand the supply pool from which the health workforce can be drawn and positions health as an attractive and accessible sector for career opportunities. One strategy developed to assist in addressing these issues has been to implement alternative and innovative pathways into careers in health. Building and offering better pathways into health careers will be critical to the future sustainability of our health workforce. This is already evident in rural and regional health services that are experiencing recruitment difficulties and where the ability to 'growing your own workforce' is becoming increasingly important.

There are three key areas of focus for health pathways activity. These are:

- 1. training pathways from secondary school into a career in health;
- 2. horizontal and vertical skill development for the existing health workforce; and
- 3. supporting and re-training workers from declining industries to transition into the health sector.

The Department of Health's (the department's) Health Workforce Branch undertakes health workforce planning, forecasting and development. It focusses on the measurement and pursuit of productivity across the Victorian health system. The Health Workforce Innovation and Reform Unit (HWIR), situated within the Health Workforce Branch, tests and drives workforce reforms that enhance the productivity and effectiveness of our health workforces and makes recommendations for future implementation. HWIR focuses on reforms that strengthen health teams and works with the wider department and health sector to identify areas in which service delivery and plans require a different workforce approach to be identified, tested and implemented.

This paper provides a summary of HWIR's activities to support pathways into careers in health.

¹ Commonwealth of Australia, 2010, *Australia to 2050: Future Challenges - the 2010 Intergenerational Report*.



1. Training pathways from secondary school into a career in health

HWIR recognises the need to actively attract the next generation of workers into the health workforce and understands that early exposure to training and career options in the sector greatly influences concrete decisions regarding future career directions.

Since 2005 HWIR has funded a number of projects that have exposed secondary school students to careers in health during these early influential years. These initiatives have ranged from the provision of information regarding the diverse range of exciting careers available in the health sector to the implementation of structured programs that offer Vocational Education and Training (VET) pathways for secondary school students considering a career in health.

Health and Community Services Careers Program

In 2005 the department implemented a state-wide health and community services careers program which promoted careers in health and community services to young people to encourage them to work in the sector. The department undertook an independent evaluation of the program in 2011 and found that the program was well regarded and considered to be the 'gold standard' in careers' resources in Victoria. However, the evaluation also concluded that the impact of the program would be vastly improved if these resources were integrated into other education initiatives that were better utilised by Victorian secondary school students². This occurred in 2012 with the department negotiating the integration of the program resources into the "Careers That Matter" website, a national program administered by the Community Services and Health Industry Skills Council (CS&H ISC).

Health training pathways - pilot projects

While past approaches to health workforce recruitment and retention have largely focused on attracting young university graduates into the health workforce, recent HWIR activities have also recognised the value of increasing the reach of health into schools by supporting the development of VET-based training pathways. The role of the VET sector, which can rapidly produce an appropriately skilled workforce and provide pathways into health careers is enormous, and the full potential has not yet been realised. These models also demonstrate the increasing value of support-level roles in service delivery and highlight the importance of embedding complementary workforce models that optimise the use of the existing skills in the current professional and assistant workforces.

In recognition of this, the department has undertaken a range of initiatives that support secondary school students to commence a training pathway in the health and community services sector. These projects have sought to develop documented models and resources to promote and support the implementation of clearly articulated pathways into health across Victoria. They also seek to develop transferable demonstration models that have wider application across Victoria and encourage the sector to consider implementing these models at the local level.

In this work, HWIR has also sought to build on the evidence demonstrating that rurality is a key determinant in decisions to work in a rural location, with students from a rural background more likely to work, remain or return to a rural setting. This has led to rural health services adopting a 'grow your own' workforce approach which is underpinned by the development of training pathways into a health career. The approach also recognises that exposing secondary school students to the types of careers available in the health workforce, through practical placements and exposure to

² TNS Social Research for the Department of Health, 2011, *Evaluation of the Health and Community Services Careers Program – Final Report*.



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the day-to-day activities of different professions, helps to ensure that students are making more informed decisions regarding their career choices. This, in turn, should impact on the retention of these individuals once they enter the workforce.

G21 Region Health Pathways Project

In 2010-11 the department funded the G21 Region Health Pathways Project to implement a regionally coordinated approach to grow the number of health and community services' pathways available to local school students, including Aboriginal young people.

The project has successfully engaged students at every school year level (from year 5 through to year 12), has implemented seven VET in Schools (VETiS) programs in the Geelong Region (including two traineeship programs) and has developed educational resources to support the sustainability of the program. The success of the program has been underpinned by the development of strong cross-sectoral community-based partnerships and a comprehensive communication strategy which has supported active engagement with a range of employers and secondary school stakeholders, including students and their parents.

The number of students enrolled in the VETiS programs has grown substantially; from 15 in 2012, to 93 in 2013 and 165 in 2014. The number of local employers now involved in the program is 33, which has actively addressed the challenges relating to securing structured work placements for participating students.

Due to the success and increasing popularity of the program, Skilling the Bay (a State government funded initiative to proactively address economic and industry changes impacting the Geelong region) has agreed to integrate and embed the program as part of its regional workforce planning approach. This will be done through an integrated framework with health and community service stakeholders working collaboratively within the Geelong region and will ensure the sustainability of the broader training pathways program and approach³.

While the project was developed for the purposes of the Geelong region, the broader model has been designed to be flexible and transferable so it can be easily replicated in other regions. The cross-sectoral collaboration and partnerships which underpin the program have assisted it to overcome challenges relating to securing clinical placements and has enabled the model to be easily incorporated in broader regional and subregional planning to ensure its relevance and long-term sustainability. The training and pathways model has strong resonance for other regions implementing or considering a cross-sectoral approach to the economic and development challenges they are facing.

VET in Schools Allied Health Pathways Program

In 2010-11 the department funded Victoria University, Echuca Regional Health and St Joseph's College to develop and implement a VETiS health pathways and gap year program. The model includes a two and three year VETiS program targeted at year 10-12 students and is underpinned by blended learning which utilises multimedia and other online learning tools. The program includes core units that are transferable across VET qualifications and upon completion offer graduation in up to three Certificates in health occupations.

The program engages secondary school students early and offers them a pathway into further education and/or a career in the health. The program also brings broad benefits to the health sector, enabling students who have completed the Certificate(s) to work in a health or community services role while undertaking their undergraduate qualification, instead of seeking more

³ The Gordon, Skilling the Bay, available at: http://www.thegordon.edu.au/Employers/Skilling/Pages/SkillingBayhome.aspx



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traditional 'student' employment (i.e retail or food services). This will also ensure that these students gain practical experience in, and knowledge of, the health sector, and are therefore more 'work ready' when they transition into full-time employment.

The program has established strong community links and has been contextualised to the local environment to maximise interest and participation by students, their families and employers in Echuca. This has been reflected in the consistently high number of enrolments; 38 in 2011, 50 in 2012, 43 in 2013 and 69 in 2014, and the increased number of service providers offering clinical placements, now 12 in total.

While a traineeship 'gap year' was offered to students after year 12, at this stage no student has elected to proceed with this option. However, one student from the 2012 cohort has used the program to transition into direct employment, securing an allied health assistant (AHA) position at Kerang District Health. A further 13 students from the 2012 cohort have also used the program as an educational pathway, enrolling in Health-based University courses in Melbourne, Regional Victoria and interstate. These courses include Psychology, Speech Pathology, Exercise Physiology, Nursing, Health Science, Medicine and Physiotherapy.

The success of the program has also led to its expansion into other metropolitan and regional areas including Werribee, Geelong, St Albans, Sunshine, Footscray, Seymour and Hoppers Crossing.

The Echuca program is continuing to be delivered by St Joseph's College in partnership with Victoria University, Echuca Regional Health and a local apprenticeship group that will assist in identifying future GAP-year traineeship opportunities. Strong community partnerships combined with increasing student enrolments and active participation by local employers will continue to ensure the relevance and longevity of the program into the future.

Central Gippsland Health Service Allied Health Traineeship Program

Central Gippsland Health Service (CGHS) received a grant, through the 2008-09 Workforce Innovation Grant Program, to pilot an AHA traineeship program. The introduction of a model to support the development of a VET qualified allied health workforce underpins CGHS's establishment of a service capability approach to the delivery of health services and aligns with CGHS's strategic objective to develop learning pathways for local people.

The AHA traineeship program pilot engaged a group of young adults from the local area and supported them to undertake a Certificate IV in Allied Health Assistance qualification. CGHS engaged and worked closely with the Australian Institute of Flexible Learning⁴ to develop and deliver the training. The traineeship model blended on-line theory with workplace delivery and supported the trainees to undertake clinical rotations across of range of allied health disciplines. The first four trainees completed their training in 2010 and all secured ongoing employment at CGHS as an AHA.

In 2011, the program was refined to specifically focus on increasing the number of Indigenous people employed at CGHS (another of CGHS's strategic objectives). Since this shift, the program has utilised Closing the Gap funding to support five indigenous students to complete the traineeship program. These trainees all reside in the local area and have varied in age from 16 to 32. Of these, three have secured employment at CGHS as an AHA, one has secured employment as an AHA at a private metropolitan hospital and one is on maternity leave. A further two indigenous students were expected to commence the program in June 2014.

⁴ The Australian Institute of Flexible Learning is Upper Murray Health and Community Services' Registered Training Organisation.



In 2010 the department released a video case study of two innovative health training models, including CGHS's AHA traineeship model⁵. In 2011 CGHS developed a written case study describing how the traineeship program has supported Aboriginal people to undertake training and transition into employment⁶. The case study included the results of an internal evaluation which highlighted the benefits of the program for participants. These included increases in career and work opportunities, personal development (health and wellbeing benefits, improved confidence and self-esteem, a change in attitude towards learning new skills and being part of a team) and the broader benefits resulting from improved engagement with the Aboriginal community. It also identified some inherent challenges (managing stress, communication issues, unfamiliar environment and new role and cultural differences) and outlined how these challenges were proactively addressed and overcome.

The CGHS AHA traineeship program continues to play an important role in ensuring the delivery of allied health and therapy services in Central Gippsland. The program has also enhanced the employment opportunities for Aboriginal people, facilitated the development of new and ongoing relationships with local and regional Aboriginal organisations and improved the cultural capability of the organisation as a whole.

Summary

The funding of these three innovative, community-based pilot programs has enabled the development of varied training pathway models that support secondary school students and young adults to make informed decisions about pursuing a career in health and offer them training pathways into employment or further study. Importantly, these models also provide short, medium and long-term solutions to local workforce shortages.

The Certificate III and IV in Allied Heath Assistance have been the primary qualifications delivered as part of these pilot programs for several reasons. These courses equip students with foundation knowledge and skills required to work in the health and community services sector and expose these students to a broad range of different professions that operate in these sectors. There has also been a sharp increase in interest and enrolments in these courses by students across Victoria, so to harness this momentum, and use these qualifications as a potential pathway into a career in health, is a potential opportunity. Finally, the allied health workforce plays a pivotal and growing role in the delivery of services to patients across a diverse range of sectors, contexts and settings and as such a 2009 scoping report predicted that demand for AHAs would increase significantly in coming years. Therefore, the development and promotion of training pathways into these careers has been an important element of a broader program of work to support the growth and utilisation of this workforce across Victoria.

The pilots have demonstrated that these models are successful and benefit participating students, organisations and communities. While these pilots have focused on the Allied Health Assistance and Health Services Assistance qualifications, the pathways models can be used to support training for any health assistant level role or workforce. Collectively, the models provide a range of approaches and learnings that can be adapted by organisations to meet local community needs and circumstances and actively address challenges relating to securing clinical placements for local students and building a workforce for the future.

⁶ Central Gippsland Health Service, 2012, *CGHS Aboriginal Allied Health Assistant Traineeship Case Study* 2012.



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⁵ These case studies are available on the department's health workforce website at: http://www.health.vic.gov.au/workforce/reform/assistant.htm

Core spine of Competencies

In 2010 the department undertook a process to identify a cluster of units of competency which occur most frequently, and as pre-requisites to qualifications, in the Health and Community Services training packages. These units, known as the Core Spine of Competencies (core spine), provide a common foundation of industry-relevant skills that facilitate movement between roles and settings as sector demand or personal career choices change, and supports the development of career pathways and potential articulation opportunities for the health support workforce.

The department has developed a number of resources to support the broad implementation of the core spine. These resources clearly outline the core spine approach and how the core spine will benefit employers, students, parents and Registered Training Organisations. They are available for download from the department's Health Workforce website at: http://www.health.vic.gov.au/workforce/learning/competencies.htm.

The Victorian Curriculum and Assessment Authority (VCAA) and other key sector stakeholders continue to promote the existence and benefits of the core spine in informing the design and delivery of VET health programs across Victoria.

Since 2012, the VCAA, through the VCE VET Health Program⁷, has promoted and included the core spine in the delivery of VETiS. The core spine was also included in the G21 Health Pathways programs. While the VETiS Allied Health Pathways program was developed before the release of the core spine units, a similar analysis of the training packages resulted in the inclusion of many of the core spine units in the final program.

The Community Services and Health Industry Skills Council (CS&H ISC) is currently undertaking a review of the Health and Community Services Training Packages which is expected to be released in 2016 and will result in significant changes to the existing training packages. To ensure the currency and validity of the core spine resources, a review will be undertaken in parallel with the release of the new national training packages.

Articulation between VET and Higher Education

There is increasing demand for the creation of flexible training pathways that support the articulation between VET and Higher Education qualifications. More effective articulation between these qualifications would help to address growing concerns regarding the limited career path opportunities for VET-trained support workers and would offer more effective alternative pathways into University qualifications.

While nursing courses recognise competence and provide advanced standing for nursing students, very little work has occurred to determine how similar recognition may be applied to other qualifications and workforces.

In 2010 HWIR engaged the Community Services and Health Industry Training Board (CS&H ITB) to explore (at a high level) the similarities between the first year in Health Sciences delivered by La Trobe University and the Certificate IV in Allied Health Assistance. The report identified a number of barriers that exist (based on language and variations of the focus of the qualifications), however concluded that obvious similarities exist between the qualifications and there would be value in

⁷ Victorian Curriculum and Assessment Authority, VCE VET Health available at: http://www.vcaa.vic.edu.au/Pages/vet/programs/health/health.aspx



exploring this further⁸. No further work has been done to progress this preliminary analysis by the CS&H ITB.

A number of Universities have undertaken some work to explore the development of a generic health qualification that could act as a bridge between VET and University. This activity has been relatively ad hoc, and has largely sought to create a new diploma level qualification that sits between a health-based Certificate IV and a bachelor degree, rather than offering credit or advanced standing for entry from the Certificate IV into a bachelor degree. While the existence of these new qualifications does offer a viable training pathway for AHAs and other VET-trained health staff, it also involves a financial burden which may act as a significant barrier for students and existing health sector staff considering this option.

External programs of work

There are a number of programs that are being developed by other organisations and government departments which seek to adequately prepare students for a range of vocations within industries, including health and community services. The department's Health Workforce Branch works closely with other government departments and sector stakeholders to provide advice and input into external projects or programs of work relating to health workforce training and transition into employment.

2. Horizontal and vertical skill development for the existing health workforce

A key area of focus for HWIR has been testing and evaluating new roles and expanded scopes of practice for existing health professions. This work has sought to make the best use of the skills in the existing and future health workforce and also create career pathway opportunities for existing workers. Enabling and encouraging practitioners to work to their full scope of practice contributes to increased workplace satisfaction, which in turn supports the department's broader retention strategies for the health workforce.

HWIR has taken a sector-wide, structured approach to reform that builds on existing arrangements in ways that align with, and enhance, the Victorian health workforce. HWIR has implemented new and amended roles and models of care that can be piloted and robustly evaluated to inform wider implementation. Much of this work has also sought to support training and career pathways for the existing health workforce. This has included piloting advanced and extended practice roles (enabled through vertical skill development) and comprehensive practice roles (enabled through horizontal skill development).

The department's Health Workforce Reform Implementation Taskforce (the Taskforce) has been established by the Minister of Health to endorse, lead and oversee the implementation of workforce reforms in Victoria. HWIR seeks to implement and manage programs of work in-line with the priorities identified by this group.

One of the main priority areas for the Taskforce is increasing the utilisation of advanced allied health roles that improve quality of care and are cost-effective. Advanced allied health roles use the skills of senior allied health clinicians to expand the range of activities undertaken by allied health professionals. Advanced roles increase options for service provision, as well as enabling the development of additional career pathways and leadership opportunities for allied health. A number of roles and new models of care have been piloted and implemented by the HWIR team across Victoria. These have included advanced physiotherapy, pharmacy, eye health and exercise

⁸ Community Services and Health Industry Training Board, 2011, *Building Pathways: Allied Health Assistance and Health Sciences*.



physiology. Work is also occurring with the nursing workforce, including contemporary (extended) nursing roles and how these fit within the mix, structure and operation of team-based health care. This is also a priority area for the taskforce. HWIR will continue to pilot and implement new roles and models of care which support advanced practice, vertical skill development and career pathways.

HWIR is also implementing a broad body of work which involves horizontal skill development for the support level workforce. This has included the identification and development of additional skill sets for AHAs in the areas of medical imaging, telehealth, operating under remote supervision and social work. Victoria also has emerging AHA roles in orthoptics, prosthetics and orthotics, music therapy, art therapy, exercise physiology and stroke management. This has provided AHAs with an opportunity to pursue a career path in an alternative discipline area and has also supported AHAs to work to their full scope of practice within innovative models of care supported by remote supervision arrangements and new technology.

HWIR has also developed practical resources to support the introduction and increased utilisation of these new and amended support and professional roles. These include the *Supervision and delegation framework for AHAs*⁹, *Delegation and supervision guidelines for Victorian nurses and midwives*¹⁰ and the *Allied health: credentialling, competency and capability framework.* These resources will also assist in ensuring consistency in supervision and delegation across support workforces and may allow for the exploration of more shared roles between these workforces.

The Workforce Innovation Grants Program 2013-14 is also supporting a number of projects that focus on the future structure of the Home and Community Care workforce. These include the development and introduction of new and redesigned roles that will reconfigure, broaden and add depth to the workforce and its skill mix, and roles that will operate at the interface between the acute and primary care sectors.

3. Supporting and re-training workers from declining industries to transition into the health sector

The third area of focus relates to identifying opportunities to actively attract and re-train mature workers from other sectors that may be experiencing a downturn, for example manufacturing. While this has been an area of some interest, there has been limited work undertaken by HWIR to-date to actively explore this potential workforce solution.

HWIR is aware of existing projects being funded by other government departments which seek to target this pool of potential employees. This includes a project that has been established in the Geelong Region which uses an approach (partly modelled in the G21 Health Pathways Project) to support locally retrenched men to transition into training and employment in the Community Services Sector. Early reports indicate that there has been much interest expressed by exemployees from Forestaff and Qantas, as well as a keen willingness by local employers to participate in the program.

While this provides a promising example of how such a program might be designed and implemented, it should be noted that the Geelong region has recently experienced a substantial economic downturn and significant regional job losses (including the closing of Ford and Aloca).

¹⁰ Victorian Department of Health, 2014, *Delegation and supervision guidelines for Victorian nurses and midwives*, available at: http://docs.health.vic.gov.au/docs/doc/Delegation-and-supervision-guidelines-for-Victorian-nurses-and-midwives



⁹ Victorian Department of Health, 2012, *Supervision and delegation framework for allied health assistants*, available at: http://docs.health.vic.gov.au/docs/doc/Supervision-and-delegation-framework-for-allied-health-assistants

This means that a structured response which actively targets those that have been the subject of mass redundancies within this region is possible. This may not be the same for other regions of Victoria.

While the Health Workforce Branch is not currently identifying opportunities to actively attract and re-train retrenched workers, some of the resources developed by the branch (i.e. the core spine of competencies) may be tailored to accommodate these situations and considered during the development of future external programs targeted toward the health sector. The Branch's knowledge of the sector may also help to inform the design of these programs and identify opportunities that may exist to introduce or expand them.

Conclusion

The development, strengthening and promotion of training and career pathways in health continues to be an important component of the department's approach to attract and retain the future health workforce to meet growing and changing consumer needs.

Workforce challenges relating to inequitable distribution of the existing health workforce has meant that some health and community services, particularly in rural and regional locations, have sought to implement approaches to 'grow their own workforce' through the development of training pathways from secondary school, through VET (and sometimes University), into a career in health.

The department has successfully supported the establishment of a number of these training and pathway models and will continue to support the promotion of these models and the dissemination of resources to support the development of similar models in other locations. Promotion of, and support for, these models may also come from a range of existing bodies, networks and programs that have been established across the State including, but not limited to, the Victorian Curriculum and Assessment Authority¹¹, Local Learning and Employment Networks¹², Workplace Learning Coordinators¹³, Allied Health Regional Workforce Development Managers¹⁴, Clinical Training Networks¹⁵ and the Victorian Clinical Training Council¹⁶. Some of these pathway models, and the resources to support them, may also be tailored and used in new programs to attract workers from declining industries into the health sector.

HWIR continues to focus on the expansion of career pathways through the piloting and evaluation of new and amended roles and workforce models that support advanced and comprehensive scopes of practice for health disciplines, in-line with the priorities identified by the Taskforce. This includes the development of resources to support governance and supervision arrangements for these emerging and expanding workforces. These roles and models seek to make the best use of the skills in the existing workforce and help to ensure that all professions are able to operate at the higher end of their scope of practice, which in-turn can contribute to increased efficiency, job satisfaction and workforce retention.

The development and implementation of education and training pathways into the health sector, and the availability of opportunities for health workers to expand and build on their skills and competencies whilst working, will continue to be a vital element of any successful attempt to address the workforce challenges impacting the health sector, now and into the future.

¹⁶ http://www.health.vic.gov.au/placements/vctc.htm



¹¹ http://www.vcaa.vic.edu.au/Pages/index.aspx

http://www.education.vic.gov.au/about/programs/pathways/Pages/llens.aspx?Redirect=1

http://www.education.vic.gov.au/about/programs/pathways/pages/coordinators.aspx

http://www.health.vic.gov.au/workforce/working/allied.htm

http://www.health.vic.gov.au/placements/ctn/background.htm