



The national context for health workforce reform

Australasian Pharmacist Prescribing Workshop
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National health workforce reform agenda

- COAG and health workforce reform (National Partnership Agreement 2008)
 - Acknowledgment that large scale workforce reform is necessary with a particular focus on linking efforts of health and higher education sectors
 - NPA, \$1.1Bn *new* funding over 4 years to
 - Develop a sound evidence base to inform national reform
 - Devise policy and programs that facilitate workforce reform
 - Work across jurisdictions, sectors, organisations and professions
 - Health Workforce Australia (HWA) established to lead implementation of the NPA



Health Workforce Australia

- Legislation enacted July 2009 –
- HWA established as a Commonwealth statutory authority
- Board – nominees from jurisdictions (9), independent Chair and 3 other directors
- Reports to Australian Health Ministers Conference (AHMC)
- Headquarters in Adelaide - CEO commenced 27 Jan 2010.
- Establishment phase



Context for health workforce reform

- Goal - Self sufficiency in health workforce supply while acknowledging that Australia is part of a global market
- Construct & consolidate the evidence base (planning and research)
- Develop and implement interventions
 - Training
 - Immigration
 - Innovation and reform



Core functions of HWA

- Progress the NPA national agenda focussed on four key areas
 - Workforce planning and research **
 - Clinical education and training reform
 - International recruitment
 - Innovation and reform **



Planning and research

- Lead, develop and support a health workforce research, planning and policy agenda
 - Continually improve national health workforce information
 - National health workforce statistical dataset
 - National workforce projections and research
 - National supply and demand model - macro and by specialty
 - Workforce demand and workload measures
 - National health workforce research collaboration



Supporting innovation and reform

- NPA allocated over \$70m over four years to
 - Promote better utilisation and adaptability of the workforce
 - Research local, national and international innovation initiatives for whole of system uptake
 - Test and evaluate health workforce reform models, including new and emerging roles to respond to changing demands
 - Promote national uptake of innovative reforms
 - Identify and develop options to address policy, regulatory, program and other barriers to new workforce models
 - Strategies to reform the structure, composition and training of the workforce



Innovation & reform - Supplementary (non medical) prescribing

- Develop a nationally consistent approach to prescribing by non medical professionals
- A sound evidence base for the adoption of supplementary prescribing as a national workforce reform strategy
- National framework
 - Service need & service models
 - Prescribing models
 - Competencies and standards for consideration by National Boards and Accreditation bodies
 - QA measures
 - Legislative and regulatory issues
 - Implementation pathways



Work to date

- Non-Medical (Supplementary) Prescribing Literature Review: *(Dr Lisa Nissen et al.; University of Queensland)*
 - explore the likely nature and contingencies for a nationally consistent approach to prescribing medications by non-medical health professionals
 - best practice jurisdictional and international models
- 'Think Tank' of selected jurisdictional and academic representatives



Outcomes

- Approximately 50 jurisdictional and other attendees
- Considered and advised on the findings of the literature review
- Support for development of :
 - consistent national framework for prescribing
 - common set of national competencies for prescribing
 - common criteria and consistent processes for assessing the benefit of expanding scopes of prescribing practice for different health professions

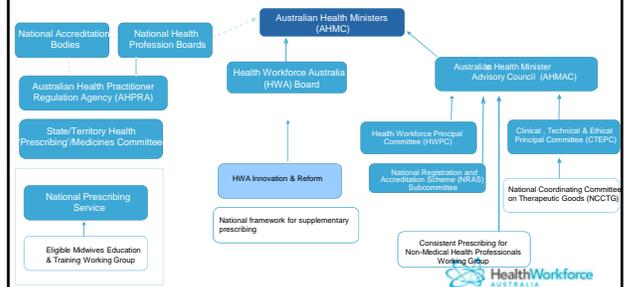


Outcomes

- Support for:
 - Applying the framework to all prescribers over time
 - Including the high level competencies and education required to prescribe at each levels
 - Having the consumer, quality and safety issues as core considerations
 - Consistent ongoing audit, competence assessment and re-credentialing mechanisms
 - Defining the settings and risk mitigation strategies rather than tailoring the approach for each jurisdiction



National non-medical prescribing work effort



Challenges & issues

- Getting the numbers right & understanding the demand drivers - *assembling the evidence*
- Targeting and linking reform effort to current and emerging burdens of disease - *impact on the long term goal*
- Seeking agreement on what matters most - *national strategy to focus effort*
- Supporting the reform and implementing change - *leadership and sponsorship*
- Progressively modernising regulation - *address barriers*
- Training, payment and remuneration systems - *enabling and sustaining*
- National health reforms - *relevance*



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