



Government of **Western Australia**
Department of **Health**



Contemporary Workforce Roles Executive Summary

Clinical Senate of Western Australia
11 June 2021

Acknowledgement of Country and People

WA Health acknowledges the Aboriginal people of the many traditional lands and language groups of Western Australia. It acknowledges the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

Using the term - Aboriginal

Aboriginal and Torres Strait Islander may be referred to in the national context and 'Indigenous' may be referred to in the international context. Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. No disrespect is intended to our Torres Strait Islander colleagues and community.

Contents

Contents	3
Message from the Chair and Executive Sponsor.....	4
Introduction and Process	5
Observations and Opportunities	5
Next steps	7
Presenters	8
Invited guests	8
Senate Executive Committee.....	9
Additional members	9

Message from the Chair and Executive Sponsor

The focus for this meeting was Contemporary Workforce Roles ably supported by our Executive Sponsor, Mr Jeff Moffet, Chief Executive, WA Country Health Service and the Chief's Forum.

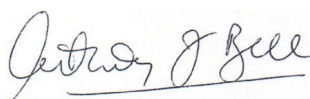
Our specific focus was to hone in and focus on the relevant Sustainable Health Review (SHR) recommendations. Principally, Recommendation 25 calls for the implementation of contemporary workforce roles and enhanced scope of practice where there is a proven record of supporting better health outcomes and sustainability and secondly, Recommendation 26 that got us thinking about to develop the health and social care workforce of the future through partnering with tertiary and vocational training providers.

We are grateful that the Chief's forum were able to provide valuable assistance to the Senate in providing context and background, specifically the current and proposed projects across WA, as described in the state-wide Recommendation 25: Survey Report. Senators were surveyed prior to the meeting to garner their perspectives on the barriers and enablers to healthcare providers working to top of scope of practice. The scene was set.


The Senate meeting was attended by the Minister for Health, Hon. Roger Cook MLA and Director General Dr David Russell-Weisz, who both acknowledged from the outset, the enormous pressure that the Western Australian health system is under and the flow-on effect this has on the clinical workforce. This Senate meeting occurred at a critical point of time for the WA Health system, a time when workforce wellbeing has been brought sharply into the focus.

Workforce wellbeing is inextricably linked to the care we deliver and overall system performance and sustainability, but most importantly to the outcomes for our patients. The Minister for Health identified that for our health system to perform optimally at all levels and all times, it must operate with a strong and supportive culture. He highlighted that WA Health's workforce is its most valuable asset, especially when public demand for healthcare services is at an all-time high.

The Senate acknowledges the feedback and concerns of Senators who have observed and confirmed we have a morale and wellbeing challenge within our workforce. The Senate supports any and all efforts by HEC, the HSPs and the Department to ensure patients get the care they need and staff are provided the support they require to operate to the top of scope of practice and contribute to the development of contemporary models or implement those that are already proven to work.



Clinical Associate Professor Anthony Bell
Chair
Clinical Senate of WA



Mr Jeffrey Moffet
Chief Executive
WA Country Health Service

Introduction and Process

The Clinical Senate met on 11 June 2021 to explore Contemporary Workforce Roles with context and background gained from the work of the Chief's Forum on the SHR Recommendations 25 and 26 on 'Contemporary Workforce Roles'.

This process involved the following steps:

1. The Senate members 'Listening to the System'
 - a. comprised of the members' lived experience,
 - b. the SHR,
 - c. the Senate survey, and
 - d. perspectives from the speaker and panel discussion
2. The Senate members 'Reflecting on What they Heard' (Reflections, Thoughts and Feelings) in respect to four key areas;
 - a. Leadership and Culture,
 - b. Workforce Design,
 - c. Clinical Education and Training and
 - d. Employment Regulation & Administration), and
3. Seeing what 'Emerged'
4. Application of a 'Stop/Keep/Start' approach.

From this approach and process, observations and opportunities were synthesized under the four workshop themes as outlined below.

Observations and Opportunities

Leadership and Culture

Observations
<p>The lack of trust and belief in the system is embedded and tacitly accepted.</p> <p>There is an inherent disconnect within the system and across the silos that make it up and this feeds a level of distrust, wariness and turf protection.</p> <p>Conflict resolution is (small p) politicised and adversarial, rather than mutually respectful and solution focussed.</p> <p>Overall the workforce is not ready for significant change, without their first being an enabling culture and trust in leadership.</p> <p>There is cynicism about whether there will ever be an implementation of the SHR, which seems to be stuck in more planning, more committees, more consultants etc.</p>
Opportunities
<p>Communication from the leaders needs to be more frequent, informative and authentic and invite response.</p> <p>Leaders need to be engaged with and visible to every level of the workforce.</p> <p>With respect to the input provided by participants at the Senate's meeting, leaders need to shift from 'heard it all before' to 'why do I keep hearing this'</p>

Workforce Design

Observations
<p>Roles are driven by JDFs rather than changing needs, situations and circumstances</p> <p>There is not sufficient encouragement, support or opportunity for workers to build high performanceteams.</p> <p>The FTE freeze and reducing administrative support is a major contributor to workforce disenchantment.</p> <p>People's thinking about contemporary workforce roles is limited to what exists and what they know, rather than what might be possible.</p>
Opportunities
<p>Administrative function and support needs' to be properly resourced.</p> <p>Leadership to support development and implementation of highly performing teams. Important for these to be situation specific and therefore not the same across the board.</p> <p>A deliberate investment in technology, including education and integration.</p> <p>Appropriate roles for Aboriginal Health workers.</p> <p>Strengthen workforce security by addressing FTE issue and expanding flexible work arrangements.</p>

Clinical Education

Observations
<p>Education and training are not given priority.</p> <p>Workforce development, formal and informal, is inconsistent and creates confusion and tension.</p> <p>There is a need to align workforce development to contemporary roles and not JDFs or professional traditions</p>
Opportunities
<p>An integrated training and development framework for the workforce</p> <p>Investment in workforce development at leadership, policy and operational level and informed by the framework</p>

Employment Regulation and Administration

Observations
<p>The separate regulation and administration of the major public hospitals creates inconsistency and does not enable efficient and effective workforce flow across the system</p> <p>One system, many systems</p> <p>The adversarial approach to industrial awards is not delivering a healthy and high performing workforce</p>
Opportunities
<p>Creating policies and practices that enable the smooth flow of people and workforce roles across the system</p> <p>Addressing inconsistent funding and its impact on the workforce</p>

Recommendations

The key observation from the Senate is that the on the morale and wellbeing on the workforce issignificantly challenged and levels of trust within the system have been eroded. The Clinical Senate will do what it can to support HEC, HSPs and the Department in ongoing staff engagement efforts and work within the system to advocate for how staff can be better supported in these uncertain times.

The recommendations presented below were informed by the presentations from keynote speakers, a plenary debate and workshops.

In accordance with Senate processes, the recommendations from the debate will be shared with both the System Manager and the Health Executive Council (HEC) for consideration and implementation.

Contemporary Workforce Roles Recommendations

Recommendation 1

The Clinical Senate to provide in kind support to the Office of the Chief Medical Officer's projectteam to facilitate the translation of ideas; for the implementation of sustainable contemporary workforce roles and teams, working to their top of scope of practice, across the system.

Recommendation 2

HEC encourage the adoption of a skills matrix-based approach for;

1. when developing new individual roles and team-based models of care, and
2. when reviewing existing individual roles and team-based models of care,

To provide clarity of a skill-mix within models of care and optimise technical and/or administrative support for the clinical workforce.

Recommendation 3

Health Service Providers build capability in health information and logistical literacy, in electronic medical records, to enable the workforce in a connected digital world.

Next steps

Following the meeting, the recommendations will be submitted to the Health Executive Council and Director General of Health, for endorsement and implementation. These recommendations will then be disseminated to the senate membership, the relevant departments in the Department of Health and the Health Service Providers for implementation.

Reporting on the recommendations will occur within 12-18 months and be available on the Clinical Senate of Western Australia [website](#).

Collaboration

Presenters

- Mr Jeffrey Moffet, Chief Executive, WA Country Health Service
- Dr Michael Levitt, Chief Medical Officer, Department of Health
- Ms Catherine Choate, Partner, Ernst & Young
- Ms Sonia Sharp, Partner, Ernst & Young
- Dr Victoria Brazil, Emergency Physician, Gold Coast Health System and Medical Educator
- Mr Gerald Williams, Area Director Nursing and Midwifery, Fiona Stanley Hospital
- Dr Alison Jones, Director of Medical Education, Fiona Stanley Hospital
- Mr Mitch Messer, Consumer Representative
- Ms Liz Macleod, Chief Executive, East Metropolitan Health Service

Invited guests

- Dr Robina Redknap, Chief Nurse and Midwifery Officer, Department of Health
- Dr Soniya Nanda, Chief Dental Officer, Department of Health
- Dr Sophie Davison, Chief Medical Officer, Mental Health Commission
- Ms Jennifer Persaud, Advanced Scope Physiotherapist, Sir Charles Gairdner Hospital
- Prof Jane Courtney, School of Medicine, Notre Dame University
- Prof Helena Halton, School of Nursing and Midwifery, ECU
- Ms Marani Hutton, Manager Workforce and Clinical Strategy, Fiona Stanley Hospital
- Mr Brendan Robb, Principal Project Officer Office of the Chief Medical Officer, Department of Health
- Ms Bernadette Kenny, General Manager, Primary Care Innovation and Development, WA Primary Health Alliance
- Dr Sean Stevens, Chair Royal Australian College of General Practitioners WA
- Ms Wendy Casey, Director, Aboriginal Health Division DOH
- Dr Tanya Ashoorian, Resident Medical Officer, Fiona Stanley Hospital
- Ms Holly Carlyle, Aboriginal Cadet, Rockingham Hospital

Organising Committee

Senate Executive Committee

- Clinical Associate Professor Anthony Bell, Chair and Director of Clinical Services, Rockingham Peel Health Group
- Ms Tanya Basile, Immediate Past Chair and Nurse Co-Director, Sir Charles Gairdner Hospital
- Ms Kate Reynolds, Coordinator of Midwifery, WA Country Health Service
- Dr Tony Mylius AM, Cardiologist and Consultant Physician, Wheatbelt Medical Specialists
- Mr Daniel Mahony, A/Operations Manager - Inland, WA Country Health Service
- Dr Amanda Stafford, Emergency Consultant, Royal Perth Hospital
- Ms Pip Brennan, Executive Director, Health Consumers Council

Additional members

- Ms Kimberly Olson, Program Support Officer, Clinical Senate of Western Australia
- Ms Jennifer Watchorn, A/Coordinator, Secretariat, Clinical Senate of Western Australia

For more information contact
Clinical Senate of Western Australia, Clinical Excellence Division, Department of Health:
email clinicalsenate@health.wa.gov.au phone: 9222 4096

An electronic version of this document is available at www.clinicalsenate.wa.gov.au

**This document can be made available in alternative
format on request for a person with disability.**

© Department of Health 2021

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.