



Workforce presentation to the Clinical Senate

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Sustainable Health Review

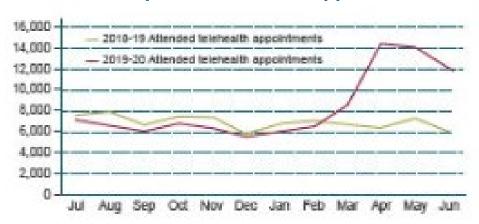
Enduring Strategy 7 – Culture and workforce to support new models of care

Recommendations 23 - 27



(WACHS) COVID context

Total outpatient telehealth appointments



Over 24,000 COVID vaccines administered in country so far

34,500+
covid TESTS
ADMINISTERED
in regional and remote
Western Australia

260+ STAFF STEPPED INTO SPECIFIC EMERGENCY RESPONSE ROLES (within Regional or Central Emergency Operations Centres)







Virtual care skills

- Virtual care & digital skills HIVE / WACHS Command Centre.
- Model of care that requires careful design & skills development.
- Standardisation of equipment / drugs / work practices.
- Skills development at both ends.
- Contemporaneous clinical information, both sites

Contextual awareness from the proximal site – geography, local capacity, options.

Empathy achieved through awareness and responsiveness.









Missing workforce / skills?

- We operate within wards, departments, divisions, hospitals, health services & a health system – with diminishing connectivity & situational awareness as we ascend that list.
- We are very busy 40 000 plus staff delivering millions & millions of interventions / interactions every year.
- Access to us & navigation is difficult it's largely analogue & not that visible to people waiting. Thousands of outpatients & thousands of surgical patients wait for months & years to access care.

Missing workforce / skills?

- Lots of big companies have similar circumstances high volumes, relentless demand, high internal interdependency of their functions to be efficient.
- They all have embraced logistics & digital ways of operating airlines, pizza chains, mining giants, retailers, police service & military.

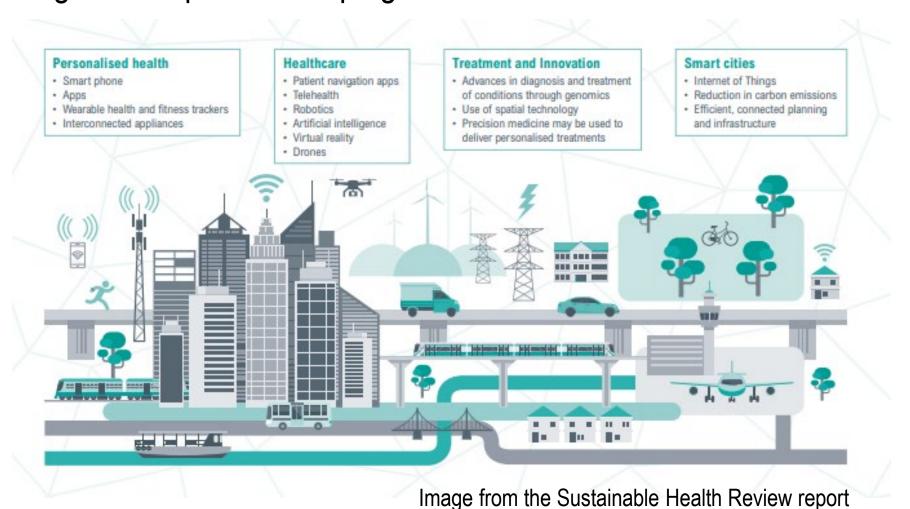


Missing workforce / skills?

- We don't appear to have a logistics mindset & it requires specialist skills & thinking.
- Should we be more focussed on logistics to operate our health system in a more aware, informed & transparent way?
- Many large North American health systems have been doing this for years & are rapidly developing.
- Do we need to have logistic workforce capability & capacity?
- Data scientists would need to support them, should we have some of these?

Logistics & digital disruption

Digital disruption is shaping the future of healthcare & workforce



Data science and better coordination

The 2019 OAG Access to State-Managed Adult Mental Health Services audit report highlighted that of the 212,000 people in WA who experienced a mental health care event between 2013 and 2017, just 10% used 90% of the total Statemanaged mental health hospital care and almost 50% of emergency and community treatment services.

Peer workforce

- Our system is difficult to access & navigate, particularly for more disadvantaged patient cohorts & communities.
- We have commenced, albeit it slowly, engaging peer workers in mental health to enhance the effectiveness & compassion of our care.
- Why would we not explore this with vulnerable mothers who don't readily access perinatal or child health care, by engaging more experienced mothers who are embedded in community?
- Similarly, reaching & influencing youth could benefit from a complementary older youth / young adult workforce that enables access & builds trust.





Country workforce support

- 24/7 senior management capability for 100 sites
- 24/7 staff security and safety virtually



- A WACHS Nursing & Midwifery & Command Centre collaboration.
- The 'BACKUP Nurse' virtual service supports graduate nurses in country hospitals seven days a week using 24/7 telehealth support.

Thank-you Any questions?

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