

<p>Reference 4122 (19-24): Ms Dominish 25/7/24</p> <p>Q: What sort of data goes into the modelling for projections out to 2040?</p>	<p>Data that is utilised to produce the modelling includes:</p> <ul style="list-style-type: none"> • National Health Workforce dataset • NSW Health payroll • Medical Education and Training (MET) Data Collection • Medical Deans Medical School - graduates, enrolments etc • Commonwealth Department of Education training dataset • National Centre for Vocational Education Research - VET Statistics • Royal Australasian College of Surgeons workforce and activities reports • NSW Health - Recruitment & Onboarding Portal data <p>Data, projections, surveys, research and reporting that is utilised to produce the demand includes, but is not limited to:</p> <p>Datasets</p> <ul style="list-style-type: none"> • Medicare statistics • Pharmaceutical Benefits Schedule Item Statistics • Admitted patients' datasets • NSW Health Mental health dataset • Activity Based Management data <p>Projections</p> <ul style="list-style-type: none"> • NSW Health service acute, subacute and emergency projections (includes private hospital projections) • NSW Department of Planning population projections • SEIFA - ABS Index of Relative Socio-Economic Disadvantage (IRSD) • NSW Department of Planning fertility projections • National Mental Health Service Planning Framework • NSW Cancer institute cancer projections <p>Surveys</p> <ul style="list-style-type: none"> • The Medicine in Australia: Balancing Employment and Life (MABEL) • Household, Income and Labour Dynamics in Australia (HILDA) Survey • Australian Institute of Health and Welfare (AIHW) e.g. national drug strategy household survey, aged care, Australian disability, housing survey etc • Australian Prudential Regulation Authority, private health insurance statistics • Bureau of Health Information <p>Research</p> <ul style="list-style-type: none"> • UNSW - national drug and alcohol research centre • Social determinants of health (ABS, World Health Organisation, AIHW) • Bureau of crime statistics and research • Australian centre for monitoring population health (AIHW) • Bureau of crime statistics and research • University of Wollongong palliative care outcomes
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	<ul style="list-style-type: none"> Productivity commission eg reports such as making the most of technology in health care, the future of healthcare productivity, the snapshot of inequality in Australia <p>Reporting</p> <ul style="list-style-type: none"> Health stats NSW Jobs and Skills Australia - insights
<p>Reference 4138 (8-14): Ms Dominish 25/7/24</p> <p>Q: Can we come to 4.3 (HWP), "Graduates entering the workforce are appropriately prepared for contemporary health care delivery", and then the supplementary guide tells us that the ministry, and in particular your branch, will play a lead role in implementing programs to support the development of the workforce pipeline.</p> <p>How does your branch do that?</p>	<p>Workforce Planning and Talent Development (WPTD) implements a range of programs to support pipeline development across the journey from student to commencement in a health career, which start with building awareness, building interest, demonstrating the realities of the health careers, and supporting rewarding experiences in the health system. For example:</p> <ul style="list-style-type: none"> Raising awareness and interest in health careers: <ul style="list-style-type: none"> Health Career fares Map my Health Career website Future of Work Thought Leadership Series to provide workforce insights on what working in NSW Health might look like in the future. Supporting student engagement and enrolment in health careers: including the Rural Health Education Scholarships and the Tertiary Health Study Subsidies. Improving the student placement experience: WPTD has governance over student placements. Senior representatives from WPTD and other MOH representatives, meet regularly with University Deans of Medicine and Allied Health. In 2024, a key focus at the Allied Health Deans meeting was to improve the student placement experience. WPTD, and other MOH representatives review, propose updates and edits to VET sector qualifications through the Industry Collaboration Reference Groups hosted through TAFE NSW. <p>WPTD supports discipline specific initiatives to grow the health workforce pipeline, particularly in areas of focus (e.g. rural, Aboriginal and small/critical workforces). Examples include:</p> <p>Medical:</p> <ul style="list-style-type: none"> NSW Rural Resident Medical Officer Cadetship Program Supporting Entry into University Medicine Program Scholarship, Rural preferential placement <p>Allied Health</p> <ul style="list-style-type: none"> Orthotics and Prosthetics Technician Training Pathway (small critical workforce) Diagnostic Imaging Medical Physicist Training Program (small critical workforce) Allied Health Graduate Workforce Pipeline project Allied Health Educators Project Report Aboriginal Allied Health Cadetships

	<p>WPTD supports the Nursing and Midwifery Office (NAMO) team, through the newly created Nursing and Midwifery Workforce Advisor role, in a range of strategies and programs, including:</p> <ul style="list-style-type: none"> • working with TAFE around the model of delivery for the EN Diploma. This is to trial in 2024 a virtual/hybrid model with a view to expand student places and access . • Mid-start/Grad-start programs
<p>Reference 4141 (33-36 & 45-46) Ms Dominish 25/7/24</p> <p>Q: That then feeds in to point 5.2, in which your branch will develop an organised and strategic approach to monitoring workforce trends and data-driven decision-making.</p> <p>What work is being done by your branch to achieve that aim?</p>	<p>The Future Workforce Unit, was recently established to develop the strategic foresight methodology for the purposes of monitoring local and global workforce trends.</p> <p>The unit is in a maturing phase, and conducts this work by:</p> <ul style="list-style-type: none"> • Scanning and monitoring for external trend changes in workforce and healthcare, using a number of tools that aggregate this information. • Interpreting this information and scenario planning on how this may impact the NSW health system positively and negatively into the future. • Testing scenarios through workshops with the current workforce with participants from all clinical and non-clinical roles at the coal face. For example, MegaTrends that will impact NSW Health are validated in the local context to instil opportunities for initiatives and local pilots. • Empowering the workforce with insights through connections into District strategy and planning functions to have forward-thinking strategic approaches to workforce decision making. <p>Workforce Insights and Transformation Centre of Excellence project is underway following recommendations from People and Culture for Future Health Review focusing on building insights for people analytics.</p> <ul style="list-style-type: none"> • Work is also underway to uplift governance practices across NSW Health. The Workforce Insights and Transformation Unit (WITU) is linked into this work and promulgating data governance via the workforce analytics COP. • The Centre of Excellence project along with the governance project will drive better definitions and practices around how metrics and measures are calculated to improve consistency of data, and trust in quality of data used for workforce planning. • The cloud transition project offers opportunities to improve data quality. WITU is engaged in conversation with EHealth around the analytics needs and technological stack to better meet and support these needs to deliver this action. Including both the PowerBI rollout, data governance, expanding access to more data in DW and work and uplift prioritisation.
<p>Reference 4139 (9-10) & 4140 (35-38): Ms Dominish 25/7/24</p>	<p>When medical workforce modelling is undertaken, WPTD consults with medical colleges throughout the process. WPTD presented medical colleges with modelling methodology, data used and the results in 2021 when the last modelling was completed. Colleges will again be engaged when we commence the next round of modelling of this workforce.</p>

<p>Q: similar conversations had with the specialist medical colleges?</p> <p>Relates to previous question of “As part of that work in assessing curriculum and training pathways to current and future workforce needs and competencies, is the modelling that you spoke of earlier in your evidence utilised to progress that initiative? “</p> <p>Reference 4253 (11-15) Dr McPherson 30/7/24</p> <p>Q: Do you know what sort of collaboration, if any, is happening between ministry and colleges about those workforce planning type issues - that is to say, where training positions should be, how many training positions there should be, et cetera.</p>	<p>The main formal conversations with colleges at both a Ministry and LHD level is regarding accreditation of positions. However, there is informal ad hoc collaboration occurring with colleges regarding areas of workforce shortages or a need to look at other options regarding regional based training, such as with RACGP, ACCRM, RANZCR, CICM, RACP (BPT), RACS, Royal Australian and New Zealand College of P. But these would not cover directing where training occurs and FTE of positions needed.</p> <p>To date there has been positive engagement with a number of colleges, and the Council of Medical College Presidents, and we are confident of constructive engagement moving forward. It is acknowledged that there is an opportunity to enhance collaboration with this group regarding workforce planning.</p> <p>Medical colleges do not fund training positions, these are funded by the LHDS/Specialty Networks. Even if positions are funded, if they are not accredited by the relevant college, it can't be filled by an accredited trainee. This is unlike universities for non- medical Commonwealth Supported Places where the university determines the number of training places offered.</p>
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<p>Reference 3736 (4-9): Mr Halse 22/7/24</p> <p>In response to Mr Halse, HSU statement that only 126 workers were consulted in the development of the Health Workforce Plan</p>	<p>There was significant consultation in the development of the Health Workforce Plan. This consultation began in 2018 and continued until its release in 2022.</p> <p><u>Advisory Steering Group (ASG)</u> This group was established to advise and oversee the project. It is comprised of nine senior executive representatives (CE, EDs or Directors) from across the system, including:</p> <ul style="list-style-type: none"> • Ministry of Health • Local Health Districts (LHD) • Mental Health • eHealth • Health Education and Training Institute (HETI) <p><u>Nine Subject Matter Expert (SME) interviews</u> consisting of representation both internal and external to NSW Health_</p> <ul style="list-style-type: none"> • Annette Solman, Chief Executive, HETI • Farhoud Salimi, Director Corporate IT, eHealth NSW • Tania Skippen, Deputy Commissioner, Mental Health Commission of NSW • Tim Shaw, Professor of eHealth & Director Research in Implementation Science and eHealth (RISe), The University of Sydney • Geraldine Wilson, Executive Director, Centre for Aboriginal Health, NSW Ministry of Health • Allan Groth, Chief Operating Officer, Indigenous Allied Health Australia • NSW Department of Industry • Catherine Maloney, Acting CEO, Services for Australian Rural and Remote Allied Health • Petra Miles, Director of eHealth, eHealth NSW <p><u>Three Roundtable Events</u> were also held to invite a wide cross section of representatives. These included:</p> <ul style="list-style-type: none"> • LHDs, Pillars, and health agencies like Justice Health & Forensic Mental Health, NSW Pathology, NSW Ambulance • University Representatives such as USYD • Rural Doctors Network • Professional Peak bodies <p><u>Staff were engaged through Surveys and local forums.</u> 97 responses received largely from Nursing & Midwifery, Allied Health, Workforce Planning, Medical and Educators.</p> <p><u>1 x session was held with local high school students</u> to understand what the future of health and health workforce could look like.</p>
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	<p>There was ongoing consultation with the NSW Health Senior Executive Forum, Directors of People and Culture (DPC), Directors of Allied Health, Directors of Nursing and Midwifery, and Directors of Medical Services throughout the drafting phase of the HWP. The HWP was a frequent agenda item at the DPC meetings to refine the wording and priorities. In addition, the plan was presented to other key Statewide leadership groups.</p> <p>In 2022, the Health Workforce Plan developed was closely aligned to the Future Health Strategy consultation program, and became a delivery plan of Future Health (Strategic Outcome area 4). This expanded the consultation even further and ensured synchronicity.</p> <p>The DRAFT Report was distributed to all health organisations and presented and validated through NSW Health Ministry Executive (MEM) and Senior Executive Forum (SEF) prior to being approved by the Secretary. Following release of the Future Health Strategy, the Health Workforce Plan was released on 23 June 2022.</p>
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