



## Special Commission of Inquiry into Healthcare Funding

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# Special Commission of Inquiry into Healthcare Funding

Occupational Therapy Australia submission

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## Introduction

Thank you for writing to Occupational Therapy Australia (OTA) regarding the establishment of a Special Commission of Inquiry to enquire into the funding of health services provided in NSW and related matters (the Inquiry). OTA welcomes the opportunity to provide a submission to the Special Commission of Inquiry into Healthcare Funding.

The terms of reference of the inquiry includes “... *The current capacity and capability of the NSW Health workforce to meet the current needs of patients and staff and its sustainability to meet future demands and deliver efficient, equitable and effective health services, including:*

- i. the distribution of health workers in NSW;*
- ii. an examination of existing shortages;*
- iii. evaluating financial and non-financial factors impacting on the retention and attraction of staff;*
- iv. existing employment standards;*
- v. the role and scope of workforce accreditation and registration;*
- vi. the skill mix, distribution and scope of practice of the health workforce;*
- vii. the use of locums, Visiting Medical Officers, agency staff and other temporary staff arrangements;*
- viii. the relationship between NSW Health agencies and medical practitioners;*
- ix. opportunities for an expanded scope of practice for paramedics, community and allied health workers, nurses and/or midwives.*
- x. The role of multi-disciplinary community health services in meeting current and future demand and reducing pressure on the hospital system;*
- xi. Opportunities and quality of care outcomes in maintaining direct employment arrangements with health workers.”*

OTA will address these items in the terms of reference in this submission.

## Occupational therapists

OTA is the professional association and peak representative body for occupational therapists (OTs) in Australia. OTs are allied health professionals whose role is to enable their clients to engage in meaningful and productive activities. OTs work with people and communities across the entire lifespan to overcome limitations to everyday living caused by such things as injury or illness, psychological or emotional difficulties, developmental delay, or the effects of ageing. OTs work in a diverse range of practice settings including acute hospitals, rehabilitation settings, community and primary health, chronic disease self-management, mental health, education, driver assessment, paediatrics, and aged care.

Individuals practising occupational therapy must be registered with the regulatory body, the Occupational Therapy Board of Australia, under the auspices of the Australian Health Practitioner Regulation Agency (AHPRA).

## Workforce shortages

Occupational therapy is the third largest allied health workforce in Australia, comprising practitioners working across a wide range of practice areas. As of June 2023, there are almost 30,000 registered OTs working across Australia, including almost 8,000 in New South Wales<sup>1</sup>.

According to data from the Australian Government Department of Health, occupational therapy is one of the fastest growing registered allied health professions, with the total workforce increasing by 7 per cent per annum between 2015 and 2019<sup>2</sup>. However, the NSW public and community health sectors experience significant difficulty attracting and retaining OTs, and there is a shortage of OTs in both metropolitan and regional NSW. Feedback from our members indicates that recruiting OTs is more difficult than it has been in decades. While there are difficulties across all grades, shortages are most pronounced among senior clinicians.

The shortage has been strongly influenced by OTs exiting the public and community health system in favour of private practice (particularly under the NDIS) which typically offers higher remuneration, more flexible work options, and the ability to be more selective with caseloads.

The COVID-19 pandemic and subsequent lockdowns have also prompted significant migration from Sydney to other parts of regional New South Wales. Regional communities have expanded, and their needs have become more complex, placing further demand on regional workforces.

Reduced resources, workforce shortages and high service demands in the public system has resulted in bed blocking and ever-growing surgery wait lists, and a resultant focus on expediting discharges. This has narrowed the scope of OT services, meaning that OTs are often directed to focus their assessment and intervention in a manner that focuses only on achieving a “safe discharge”. Consequently, they are unable to provide the comprehensive and holistic therapies and interventions that they not only have the clinical expertise to perform, but which has the capacity to improve patient outcomes, and prevent future hospital admissions.

OTA recently conducted an OTA workforce survey, which included almost 2200 respondents, 579 of whom were based in NSW and 500 based in remote and regional settings. The findings were that scope of practice is a key factor that influences an OT’s sense of professional satisfaction and can impact their decisions about remaining as a service provider or working in a certain setting. Only 68% of respondents agreed that they were able to work to their full scope of practice. Being unable to practice at full scope can create feelings of stress, burnout, and frustration which can impact on an OT’s personal and professional satisfaction and increases the risk that they will exit from the profession. Conversely, working in a narrow scope without appropriate supports or downtime can also create stress and burnout.

A limited occupational therapy workforce is impacting waiting lists, service access, and is resulting in excessive workloads, workforce burnout, high staff turnover, and occupational therapy scope of practice loss and creep. From a consumer perspective the public health system is under significant strain.

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<sup>1</sup> Occupational Therapy Board of Australia (Australian Health Practitioner Regulation Agency), 30 June 2023; <https://www.occupationaltherapyboard.gov.au/News/Annual-report.aspx>

<sup>2</sup> Australian Government Department of Health and Aged Care, 2019; <https://hwd.health.gov.au/resources/publications/factsheet-allied-occupational-therapists-2019.pdf>

## Addressing workforce issues

The issues described above highlight the opportunity for the NSW Government to improve workforce structures and support to attract and retain expertise to meet the needs of the growing regions. The key barriers to engaging and retaining OTs include insufficient remuneration and lack of supervision, and increased government investment into the public and community health system will help to address these issues. There is also an urgent need to implement strategies that retain OTs, to ensure that burnout and exit from the profession is addressed, to better enable consumers to access vital OT services.

The following is a list of recommendations for addressing some of the issues that are exacerbating the exit of OTs in the NSW community and public health system, or which are impacting on the ability to recruit to positions in the first place:

- **Investigate alternative clinical supervision models:** Limited supervision opportunities can impact upon quality of care for consumers and the professional development of OTs. As described previously, workforce shortages are most pronounced among senior clinicians, which has a flow on effect to the provision of adequate supervision and support to early career therapists. Alternative approaches to supervision and professional support, such as peer supervision models, the employment of clinical educators, development of communities of practice and mentorship programs should be explored.
- **Invest in discipline specific roles:** OTs work across a wide range of disciplines. Increasingly within the NSW health system there has been a shift away from discipline specific roles in favour of generic multi-disciplinary positions. To achieve a diverse, multidisciplinary workforce, OTs must be provided with opportunities to develop both specialist and generalist skillsets. Discipline specific roles enable OTs to work to top of scope within their chosen area and ensures a high standard of care. Limiting prospects to generic multi-disciplinary roles reduces opportunities for discipline-specific career progression, support and supervision, and negatively impacts retention of senior staff. This can also affect the attraction of new graduate OTs to careers in the public health system. Options for addressing this challenge should be investigated, such as adopting a hybrid model of practice, whereby allied health professionals could choose to dedicate a defined percentage of time to a generic position and discipline specific role.
- **Offer flexible working arrangements:** Since the COVID pandemic, many healthcare sectors such as private occupational therapy practice have adopted more flexible working arrangements including hybrid working models and the option to work from home to complete administrative, or non-client-facing tasks such as report writing, attending meetings, and working on quality improvement projects. The benefits of a hybrid working model have been shown to improve flexibility, productivity, and importantly worker satisfaction rates. The public health system tends to require staff to work onsite, which has likely contributed to the departure of OTs to more flexible working arrangements.
- **Build employer understanding of OT scope of practice:** The scope of OT practice is not well understood by some commissioners of health services and individual clinicians. This can lead to the exclusion of OTs, low utilisation in certain settings, and OTs either working out of scope or not to full scope. OTA has published the [Occupational Therapy Scope of Practice Framework 2017](#)) which articulates a strong and clear position of what the occupational therapy scope of practice is in Australia, now and into the future.

## OTA Contact

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