

**HealthWorkforce**  
AUSTRALIA

# Clinical training funding for student growth and expanding clinical training capacity

## RFP Information Sessions

Mark Cormack  
Peter Carver



# Health Workforce Australia

- Governance
  - Commonwealth statutory authority
  - Board – jurisdictions (9), independent Chair and 3 others
  - Reports to the Australian Health Ministers Conference (AHMC)
- Progress a national agenda (COAG health workforce reform) focussed on
  - Research and workforce planning
  - Clinical education and training
  - International recruitment
  - Solutions that integrate workforce policy and reform with reforms to education and training
  - Cross jurisdictional, sectoral, organisations and professions

# Health Workforce Australia

- Legislation enacted July 2009
- Headquarters in Adelaide
- CEO commenced 27 January 2010
- Board announced 12 February 2010 - chaired by Hon Jim McGinty
- First meeting 5 March 2010 with two further meetings already held
- Transition of NHWT work program to HWA

# Funding clinical placements

- Principles and objectives for clinical training payments
  - Increase capacity and promote quality placements
  - Funding follows students in whatever service setting they train
  - Maintain /strengthen existing and develop new relationships between education providers and health care settings
  - Make better use of under-utilised capacity (e.g. in regional/remote hospitals, primary care/ community-based settings, mental health aged care and private hospitals)

# Clinical training funding measure

- The 2008 National Partnership Agreement (NPA) on Hospital and Health Workforce Reform is a significant response to Australia's health workforce needs
  - recognises increased clinical training demand on the hospital, health and aged care systems due to growth in students
  - provides, growth in clinical training capacity across public and non-government health and aged care settings to support more students in these settings
- On 22nd April 2010 the Australian Health Ministers Conference (AHMC) agreed a Request for Proposal (RFP) process would be undertaken by HWA

# Request for Proposals (RFP)

- The RFP is seeking proposals from higher education and clinical training providers to meet the CTF objectives
- In addition to supporting student growth, the RFP seeks to provide specific funding support to clinical training providers to manage the increased demand for clinical placements
- The aim is to increase the overall capacity for quality clinical training, with additional incentives and support for clinical training in non-traditional and underserved settings

# Request for Proposals (RFP)

- Funding provided will:
  - Give higher education and clinical training providers resources to support growth of student numbers and clinical training placements
  - Address clinical training across eligible disciplines, settings and locations with particular focus on underserviced or priority need placement types
  - Allow once-off capital purchases, initiatives and works to increase training capacity

# RFP funding envelope

- Total funding available is up to \$145m annually for the period 2010/11 to 2012/2013 FYs (supporting student growth and clinical training capacity in the 2011 to 2013 academic years)
- In the first year Funding structured in two components:
  - Core Funding Pool of \$139m for growth in clinical student places and clinical training on top of the agreed 2010 baseline
  - A one off additional \$70M Incentive Pool to support growth in under serviced areas. These include rural and remote, primary care, community care, mental health, aged care, dental and the private sector
- HWA may adjust the funding pools at its discretion

# RFP – Services required

- Proposals are sought from public sector health and hospital agencies, higher education providers and non government health and aged care providers for growth in clinical training capacity to support increased student numbers and clinical training requirements for the 2011 to 2013 academic years
- Proposals must demonstrate both growth in student numbers and clinical training places
- Preference will be given to proposals which provide a breadth and depth of clinical training experience across the priority areas

# RFP – What is covered?

## Eligible proposals

- To ensure that growth in student numbers and clinical training places are accurately identified, proposals from clinical training providers must be supported by the higher education providers supplying the students
- Proposals will be accepted from government and non-government health and aged care clinical training providers and higher education providers
- Therefore partnerships and alliances across the higher education and health and aged care sectors will be required

# RFP – What is covered?

## Eligible professions/students

- Health Ministers have agreed the eligible health professions for the clinical training funding and are detailed in RFP
- Support is for health profession entry courses only and their clinical training requirements
  - Undergraduate and postgraduate professional entry higher education courses are eligible
  - Professional entry course - a higher education course in Australia which confers a qualification that will allow a person entry to a profession in Australia that they were not previously eligible to enter (assuming all other professional entry requirements are met)

# RFP – What is covered?

## Eligible professions/students

- Domestic Commonwealth supported students
- HWA may consider funding support which has the effect of providing *incidental* support for international and other full fee paying students where workforce need is identified
- Not all eligible professions will necessarily be funded depending on priorities
- Funding may be further refined and allocated through the negotiation process based on identified areas of workforce shortage

# RFP – What is covered?

## Eligible clinical placement types

- Where they deliver training in a clinical component recognised for accreditation purposes within an approved course

## Eligible clinical training providers

- Public/government health services
- Non-government and other private health services
- Aged care providers
- Primary care providers
- Other human services providers
- Higher education providers

# RFP – What is covered?

## Student and clinical training growth

- State and Territory Health Ministers have committed to the maintenance of current funding and effort in clinical training to support current student numbers
- Funding will be provided to support clinical training growth in existing and new settings arising from growth in student numbers
- Proposals must commit to and demonstrate maintenance of resources and clinical training effort
- Growth performance indicators for successful applications will be measured against a validated baseline

# RFP – What is covered?

## Clinical training priority areas

- All settings in RFP will be covered, however, priority and additional support will be given to creating and growing “under serviced” or high need areas of clinical training
  - Rural and remote
  - Community care
  - Mental health
  - Private/non-government settings
  - Primary care
  - Dental
  - Aged care
- Proposals to support settings where clinical training placements have been reported as being difficult to establish may also be considered

# RFP – What information is required?

- Proposals must ensure that each party authorises their organisation's participation for the purposes of entering into a Service Level Agreement with HWA
- A Proposal response schedule must be completed for each course in which an increase in students is proposed and the total clinical placement requirements for the proposed additional students must be detailed
- Unless otherwise identified and agreed in the Proposal, funding for services provided by public health organisations will be paid by HWA to the State/Territory for distribution
- Payments to other clinical training providers will be made directly by HWA unless the proposal identifies other payment mechanisms agreed by all parties

# RFP – What information is required?

## Student growth and clinical training for 2011

- Respondents will be required to provide the number of existing and growth students (domestic Commonwealth supported and international and other full fee paying students) proposed to be supported
  - Growth in student numbers is the number of new or continuing student places in excess of the 2009 baseline
  - Baseline of students is the number of commencing and continuing students in 2009 minus discontinuing students
- Confirmation of the baseline through retrospective reconciliation at the end of the academic year by higher education providers and DEEWR

# RFP – What information is required?

## Student growth and clinical training for 2011

- Growth in clinical training places is additional places to be delivered in 2011 above the baseline delivered in 2010, recognizing placements tend to increase in later years of most courses
  - Support for clinical placements from 2011 will include students who commenced their course in 2010
  - Growth is net growth in the system above the total placement activity required by the number of students who commenced their course up to the end of 2009
- Proposals must specify the placement type and service providing the additional clinical training in 2011

# RFP – What information is required?

## Student growth and clinical training for 2012 onwards

- Proposals for 2012 to 2013 must demonstrate the projected clinical training requirements by placement type and the proposed provider (if known)
  - Noting that this may be subject to change
  - For the purpose of calculating future growth and courses that run beyond the life of the NPA, respondents are asked to also identify the 2014 projected growth
- Details of outer years will be negotiated in the annual clinical placement planning and agreement review process

# RFP – What information is required?

## Student growth and clinical training for 2012 onwards

- It is understood Year 2 (2012) and subsequent years' activity levels will be less clear than for Year 1
  - Due to the requirement by higher education providers to identify subsequent year enrolment levels, placement needs and specific placement requirements each year aligning with the timing of curriculum delivery
  - As outlined, adjustment of the Year 2 and subsequent year activity levels and targets may be undertaken in line with the the annual SLA adjustment processes
- The HWA mapping work will provide support for higher education and clinical training providers to source placements

# RFP – What information is required?

## Estimates of cost – core funding pool

- Student growth and clinical training for 2011
  - Proposals must provide best estimate of the costs to support the growth in student numbers and clinical training for additional students to commence in 2011 and clinical training effort required to support the growth
- Student growth and clinical training for 2012 onwards
  - Proposals must provide best estimate of the costs for 2012 and beyond
  - Estimates will be used for proposal assessment only
  - As identified Service Level Agreement negotiations and annual business planning will allow adjustment in annual payments for outer years

# RFP – What information is required?

## Estimates of cost – incentive funding pool

- Capital cost estimates
  - Proposals should detail capital cost estimates to support growth in student numbers and clinical training capacity for the 2011 to 2013 years
  - Capital funding includes payments for building activities, direct building costs for building new or upgrading existing premises, essential clinical equipment, and information management and technology systems
- Capital budgets should define projects and their importance to growing clinical training outcomes in priority areas

# RFP – What information is required?

## Estimates of cost – incentive funding pool

- Establishment/other costs estimates
  - Proposals should detail costs for establishment of new growth in student numbers or clinical placements

## Other funding sources

- Respondents should provide any other sources of funding, including the Commonwealth's *Increased Clinical Training Capacity* grants program
- Respondents will be required to detail any additional charges, fees or levies that are received or passed through to higher education and clinical training providers or students and their purpose

# Proposal assessment

- RFP responses will be assessed against
  - Student growth in 2010 and proposed for 2011, 2012, and 2013
  - Clinical training growth proposed for 2011, 2012, and 2013
  - Size and breadth of clinical training providers – including public non government sectors
  - Value for money
  - Student and placement distribution
  - Demonstration of growth in students and clinical placements in under serviced settings
  - Potential to also support post-graduate, specialist/ vocational, VET and other training

# Proposal assessment

- An assessment of proposed costs will be made against benchmarks established through independent financial modelling currently underway on behalf of HWA
- The HWA subsidy will be based on a consideration of the Proposal's costs, benchmarking and volume of students and places to be supported within the funding envelope
- Proposals may be fully or partially funded
- HWA may offer successful applicants funds that differ from the amount requested
- HWA may also, where it considers there is a deficit in meeting priorities, negotiate additional funding packages to provide student and clinical training growth

# Proposal assessment

- HWA reserves right to negotiate on all aspects of a proposal
- Following negotiations a final offer of funding will be made
- Respondents will need to agree to enter into a Service Level Agreement with HWA for the agreed period and provision of growth in student numbers and clinical training capacity

# Implementation

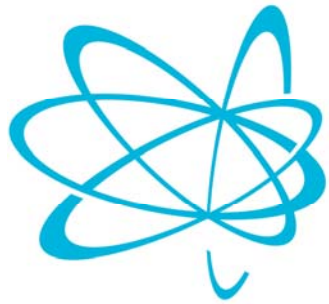
- Service Level Agreements will be for the 2011 to 2013 academic years with funding allocation, agreed student numbers and clinical training places in the SLA
- HWA mapping project will provide and validate data and targets for inclusion in the SLA for clinical training placement location, setting and type
- Annual review and adjustment of service level agreements would be based on:
  - Validation of actual against projected activity
  - Unforeseen changes in demand
  - Changing priorities across professions
  - Year on year clinical training variation

# Implementation

- National clinical training performance indicators and reporting will be developed by HWA for implementation in the 2011 academic year in line with AHMC decisions
- Achievement of and reporting against indicators will be required as part of the conditions of funding
- An annual performance review for SLA targets, budget reporting requirements and qualitative delivery requirements will be developed
- An ongoing audit program will determine the compliance with the SLA and accountabilities of all parties

# Next steps

- RFP release 15/5/10 with response date of 15/6/10
- Information forums being conducted in all capital cities
- Potential respondent questions will be dealt with only in writing and, along with response, published on HWA website within 48 hours of receipt
- Decision on successful proposals and funding envelope in July 2010 (anticipated)
- Successful respondents will be notified by HWA for the purposes of entering negotiations in good faith
- Service Level Agreements will need to be finalised in time for the commencement of 2011 academic year



**HealthWorkforce**  
AUSTRALIA

**Clinical training funding for student  
growth and expanding  
clinical training capacity**

**RFP Information Sessions**

**Questions**

