



HWA Work Plan 2011/12

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HWA Work Plan 2011/12

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1. Information, Analysis and Planning

1.1. National Training Plan Mark 1

Objective/Purpose	To provide a set of planning objectives for training doctors, nurses and midwives to achieve self-sufficiency in these professions by 2025.
Description	The National Training Plan (NTP) uses simulation modelling to project the number of doctors, nurses and midwives required under a number of planning scenarios. For each scenario, a pipelining analysis will be conducted to project the number of undergraduate and postgraduate trainee positions required to meet the planning objective.
Output measures	The NTP will culminate in a report to Health Ministers in December 2011. Success will be measured by acceptance of the plan by jurisdictions and other stakeholders and its adoption into long term planning by these bodies.

1.2. National Training Plan Mark 2

Objective/Purpose	<ol style="list-style-type: none"> 1) To expand the first NTP to take account of new data sources and any improvements to model mechanics that were recommended as a result of releasing the first plan, thereby providing a set of updated estimates for planning purposes. 2) To expand the scope of the plan to include a number of selected allied health professions.
Description	The NTP uses simulation modelling to project the number of doctors, nurses, midwives and selected allied health professionals required under a number of planning scenarios. For each scenario, a pipelining analysis will be conducted to project the number of undergraduate and postgraduate trainee positions required to meet the planning objective.
Output measures	A report for ministers updating the estimates from NTP mark 1, setting in place a program of annual updates for the NTP and expanding its scope to selected allied health professions. The project will be successful if accepted by jurisdictions and other stakeholders and is used by them in long term planning.

1.3. Workforce profile reports and data resource

Objective/Purpose	<ol style="list-style-type: none"> (1) To commence a series of regular workforce profiles which bring together information on various health workforces, focusing on student pathways, immigration, deployment geographically and within settings and working patterns. (2) To make available a set of data resources on the health workforce to allow jurisdictions, researchers and other stakeholders to conduct detailed workforce analysis and planning using a common, nationally comparable data source.
Description	The program will design and deliver the first set of reports from a series of workforce profiles focusing on particular professions, settings or issues of interest. The major health professions and some specialties would be covered, as well as areas such as aged care, acute care, rural and regional workforce or the overseas trained and temporary migrant workforces. In addition to the reports a statistical resource will be developed including data cubes, which will allow researchers and others interested in workforce issues to access and analyse the data.
Output measures	Release of three public reports and associated data products. Success will be measured by download and usage of the reports and their citation in workforce planning literature.

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1.4. Statistical resource and data collections

Objective/Purpose	Development of the HWA statistical resource and data library, including workforce, training and activity data to underpin HWA workforce planning and modelling work.
Description	The program has several major streams of work, involving the development of data management and analysis infrastructure; management and analysis of data from secondary sources, including AHPRA, MSOD and workforce surveys conducted by professional associations (e.g. optometrists); development and promulgation of policies regarding data access and the development and management of any ongoing primary data collection (e.g. clinical placements).
Output measures	The program is designed to provide a set of well documented, centrally available data from which further analysis can be conducted by HWA staff or externally. Success will be measured by the ease and level of data use.

1.5. Specialist workforce studies

Objective/Purpose	Analysis of specialist health workforces that are not analysed as part of the broader program of profiles or training plan studies.
Description	This is a program of small scale or micro studies of particular specialist workforces designed to highlight particular issues or planning needs.
Output measures	Two reports will be produced; success will be measured by stakeholder feedback and the degree to which the reports are acted on.

1.6. Workforce planning for innovation studies

Objective/Purpose	This program involves a series of studies in partnership with Innovation and Reform. The first study will be of the cancer workforce.
Description	Each of the innovation and reform projects will have a workforce planning component to understand the composition and size of the workforce of interest. There will also potentially be a requirement for quantitative analysis of the effects of particular reforms or innovations.
Output measures	The deliverable will be the contribution of material to a report that is managed by the WIR team.

1.7. Research collaboration

Objective/Purpose	This program involves a series of research projects in collaboration with the Australian Health Workforce Institute (AHWI) and PriceWaterhouseCoopers (PWC).
Description	This program is agreed between the collaboration partners and approved by the HWA board for inclusion in the HWA work program. The projects proposed for 2011/12 are based on the HWA priority areas of National Training Plan, interprofessional learning, rural and regional workforce issues, mental health workforce and the role of carers.
Output measures	The outcomes will be reports providing technical advice to HWA to inform our major projects, or primary research which can guide HWA work in the priority areas.

2. Clinical Training Reform

2.1 Clinical Training Funding Subsidy

<p>Objective/Purpose</p>	<p>The Clinical Training Funding (CTF) program is a major initiative of HWA with the objective of enabling greater workforce capacity in addressing Australia's workforce shortages to:</p> <ul style="list-style-type: none"> • Support growth in numbers of students in 22 of the health professions through expanding clinical training capacity • Contribute to the cost of growth in clinical training activity by offering a recurrent subsidy to support clinical placement days and providing funds to support capital and establishment.
<p>Description</p>	<p>The key components of CTF are:</p> <ul style="list-style-type: none"> • Recurrent funding agreements with universities, government and private bodies to subsidise clinical placement growth from 2011- 2013. • One-off capital and establishment funding agreements with universities, government and private bodies to support growth in clinical training activity, including: <ul style="list-style-type: none"> ○ Capital Purchase ○ Capital Works ○ Goods and Services.
<p>Output measures</p>	<ul style="list-style-type: none"> • Number of funding agreements executed • Money allocated as per HWA Board allocation • Establishment of Grants Administration Unit and Grants Administration System • Other key performance indicators to be established in 2011/12

2.2 Simulated Learning Environments

<p>Objective/Purpose</p>	<p>Increase the use of simulated learning methodologies in clinical training for entry level health professionals, postgraduate and vocational educational and training students and clinicians with the goal of increasing clinical training capacity and improving quality. This measure will increase equity of access for students to simulated educational experiences in regional, rural and remote settings.</p>
<p>Description</p>	<p>The Simulated Learning Environments (SLE) program forms part of the HWA's work program as approved by the HWA Board on 5 March 2010. The objective of the SLE program is to expand clinical training capacity across Australia by through the use of simulated learning methodology, to develop clinical skills and competencies required by health professionals, increase the capacity of the health system to provide clinical training and distribute training experiences into regional, rural and remote settings. This will include building or enhancing SLEs, with a focus being on accessibility to regional and rural centres. An Expert Reference Group (ERG) was formed to provide specialist advice and to help inform the program.</p>

<p>Output measures</p>	<ul style="list-style-type: none"> • Demonstrated simulation program governance with clear linkages to the integrated regional clinical training networks (IRCTN) • Evidence that the jurisdictional simulation program plans (inclusive of the education and non-government providers) will increase clinical placement capacity and is aligned to network activity • Collaboration/alliance agreements are established and ongoing between health, education and non-government partners. The program is accessible to proposed students both geographically and logistically • Commitment is evidenced whereby no current funding supported through the jurisdictions, education sector or private providers is withdrawn from the program • Submission of a detailed 5 year business plan for jurisdictions, education and non-government providers which links with IRCTNs • Documented program evaluation with quarterly reporting cycles
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2.3 Clinical Supervision Support Program

<p>Objective/Purpose</p>	<p>The Clinical Supervision Support Program (CSSP) of Health aims to expand clinical supervision capacity and competence across the educational and training continuum, inclusive of the Vocational Education and Training (VET) sector, professional entry to postgraduate students and vocational trainees, for medicine, nursing and midwifery, dental and allied health professions by supporting measures to:</p> <ul style="list-style-type: none"> • Prepare and train clinical supervisors • Support and develop a competent clinical supervision workforce, which delivers quality clinical training.
<p>Description</p>	<p>Key strategies and initiatives of the CSSP include:</p> <ul style="list-style-type: none"> • Defining roles, responsibilities and accountabilities of key stakeholders involved in the delivery of clinical training and supervision • Improving the quality of clinical supervision at organisation, service and clinical supervisor levels • Coordination and consistency of supervision approaches across higher education and clinical training providers • Enhancing clinical supervision capacity in the health system • Promoting continuous improvement and innovation in clinical supervision.
<p>Output measures</p>	<p>The program will be measured on the success of its programs by preparing and training clinical supervisors and supporting and developing a competency clinical supervision workforce which delivers quality clinical training. Key Performance Indicators will be developed in 2011/12 to enable the success of the Program to be measured.</p>

2.4 Integrated Regional Clinical Training Networks

<p>Objective/Purpose</p>	<p>The aim of the Project is to establish Integrated Regional Clinical Training Networks (IRCTNs) across jurisdictions by 30 September 2011, to facilitate the co-ordination, planning and facilitation of quality clinical training activity across a number of health sectors including public and non government health providers and higher education and training providers. The scope of clinical training includes professional entry, postgraduate and specialist training.</p>
<p>Description</p>	<p>The IRCTNs will undertake the following:</p> <ul style="list-style-type: none"> • Promote access to clinical training placements opportunities i.e. network profiling to determine available placement types and number • Demonstrate systematic reporting of clinical training activity key performance indicators (KPI's) • Build relationships and collaborations between higher education and government and non-government clinical training providers (particularly when exploring new capacity) including sourcing new clinical placement settings and opportunities, facilitating practical solutions to barriers, and auspicing innovative projects within and across IRCTNs • Demonstrate forward planning and deployment of training requirements and placement opportunities i.e. monitoring and addressing local workforce needs • Match supply and demand for placements and recommend distribution accordingly by facilitating planning and multilateral negotiation processes for clinical placements • Support higher education and training providers and government and non-government service providers in the management of clinical placements including at the local level • Support and engage with higher education and government and non government clinical training providers on other key national workforce reform issues consistent with the National Partnership Agreement (NPA).
<p>Output measures</p>	<p>Establishment of IRCTNs across the jurisdictions to expand the capacity for clinical training. Interim KPIs (subject to further agreement) are:</p> <ul style="list-style-type: none"> • Documentation of supply and demand per profession in your jurisdiction including oversupply and undersupply of clinical training placements • Documentation of all clinical training placements in your jurisdiction at 6 monthly intervals and growth in clinical training placements that have resulted • Documentation of actions to engage with all sectors • Documentation of management support for clinical training placement providers offered by the Participant.

3. Workforce Innovation and Reform

3.1 Aged Care Workforce Reform

Objective/Purpose	To improve aged care workforce supply, capacity, productivity and efficiency nationally through the identification and implementation of new workforce models and redesign initiatives and to develop the support, assistant and supplementary workforce to enable existing health disciplines to work to their full scope of practice.
Description	This project builds upon previous testing and trialling of strategies to explore various scopes of practice and workforce redesign to optimise current workforce skills and adaptability within the aged care sector. The project focuses on funding and supporting uptake and national adoption of evidence based initiatives that will broaden inter-professional scope and flexibility of practice, further develop support and assistant workforce roles, improve integration within disciplines delivering care and improve delegation of service activity in selected areas of high need across the aged care sector. The project also examines innovative ways to implement and evaluate assistant roles in delivering evidence-based practice in aged care.
Output measures	<ul style="list-style-type: none"> • Composite models for greater use of support, assistant and supplementary workforce, and interdisciplinary teamwork • Development of the support and assistant workforce to enable improved service delivery in the aged care sector • Identify potential for successful local innovations and reforms to be scaled up to regional or national application • Increased uptake and implementation of sustainable workforce redesign across the aged sector • Expanded workforce competencies at the continuum of care transition points (acute-aged care) and in high need areas such as dementia care

3.2 Assistants & Support Roles in Acute, Mental Health and Primary Care Sectors

Objective/Purpose	Determine and develop innovative workforce models for the support, assistant and supplementary workforce to improve capacity, productivity and enable the existing health disciplines to work to their full scope of practice.
Description	Collaborate with and support key stakeholders nationally to identify, develop, evaluate and disseminate innovative models to determine future workforce sectors where developing assistant and supplementary workforce would improve productivity, efficiency and effectiveness. This will include conducting implementation trials and support mechanisms that will, evaluate and build evidence regarding preferred workforce models in cross-jurisdictional settings. Settings may include mental health, high cost acute care and primary health care sectors and roles may include enrolled nurses.
Output measures	<ul style="list-style-type: none"> • Identify potential for successful local innovations and reforms to be scaled up to regional or national application • Conduct implementation trials and support mechanisms that will, evaluate and build evidence • National implementation support program for successful innovations • Development of the assistant and support workforce to enable improved service delivery in the selected sector

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3.3 Physician Assistants

Objective/Purpose	Examine the potential impact and value of Physician Assistants on the roles, functions, training and development of current practice and advanced scope of practice by other health practitioners in the Australian health environment.
Description	Investigate and review literature, completed pilots and ongoing evaluation of Physician Assistants in Australia and internationally to report on potential roles, value and impact of Physician Assistants on current practice, other health professional groups and in meeting future health worker requirements in underserved areas. This project will result in the development of a Report with associated recommendations for consideration by AHMAC.
Output measures	<ul style="list-style-type: none"> Independent review and associated Report with recommendations for consideration by AHMAC

3.4 Expanding Workforce Scope Initiatives

Objective/Purpose	Expanding the scope and uptake of new or redesigned roles of health workers and increasing recruitment within areas of high need with the aim of increasing productivity, retention, accessibility, efficiency and effectiveness of health care services.
Description	This project involves undertaking a number of targeted innovative health workforce reform initiatives with a specific focus on role redesign and expanding the scope of existing health workers in high cost acute care, cancer and rural/remote settings. In addition, the project will also provide implementation support for reform initiatives and projects across various health care settings. This may be undertaken by HWA or in various collaborations with existing initiatives of potential national relevance undertaken by groups such as jurisdictions.
Output measures	<ul style="list-style-type: none"> Provision of implementation support for reform initiatives and projects across various health care settings National adoption strategy to incorporate and embed scope expansion within educational institutions, professional bodies and health services. Faster and more effective workforce solutions of potential national relevance Effective coordination of national effort to reduce duplication of effort in service redesign

3.5 Oral Health Scope of Practice Review

Objective/Purpose	The Australian Health Workforce Ministerial Council (AHWMC) has requested the Health Workforce Principal Committee (HWPC) review role and scope of practice of Dental Hygienists, Dental Therapists And Oral Health Therapists. The HWPC has requested that HWA undertake this review on its behalf.
Description	This project involves a review of the Dental Board of Australia's standards relating to role and scope of practice of dental therapists and hygienists. The purpose of the review is to assess any impact on the scope of practice of dental therapists and hygienists to assist HWPC in providing advice to the Australian Health Workforce Ministerial Council (AHWMC) on the potential workforce and related impacts of this standard.
Output measures	<ul style="list-style-type: none"> Independent review as requested by HWPC

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3.6 Non-Medical Prescribing

Objective/Purpose	The Non-Medical Prescribing Project aims to increase productivity, accessibility, efficiency and effectiveness of health care services through expanding prescribing scope.
Description	This project will develop a nationally consistent approach to prescribing medications by non-medical health professions including the development of a national implementation support program to drive change.
Output measures	<ul style="list-style-type: none"> • Update review of current non-medical prescribing • Develop consensus on suitable nationally consistent models for non-medical prescribing • Contribute to scope and recommendations for the competencies required for non-medical prescribing

3.7 Aboriginal and Torres Strait Islander Health Workforce

Objective/Purpose	Contribute workforce solutions to “Closing the Gap” to reduce the gap in health workforce participation between Indigenous and non-Indigenous Australians by 20% in the priority areas of medicine, nursing and allied health within 10 years and to strengthen the Aboriginal and Torres Strait Islander Health Worker workforce to deliver care in response to the known burden and distribution of disease in the Aboriginal and Torres Strait Islander population.
Description	<p>This project will develop a national picture of the Aboriginal and Torres Strait Islander Health Worker workforce. The focus of the project will be to increase participation of Aboriginal and Torres Strait Islander people in the health workforce and will result in the development of an implementation support plan (in partnership with key stakeholders) to identify and implement innovative strategies and initiatives that will:</p> <ul style="list-style-type: none"> • Increase the numbers of Aboriginal and Torres Strait Islander people entering the health workforce across all levels • Optimise the retention of Aboriginal and Torres Strait Islander people in the health workforce. • Strengthen the capacity of Aboriginal and Torres Strait Islander Health Workers
Output measures	<ul style="list-style-type: none"> • Provision of cross-sectoral implementation support to increase numbers and optimise retention of Aboriginal and Torres Strait Islanders in the health workforce • Development of national training for Aboriginal and Torres Strait Islander Health Workers following on from implementation of the nationally regulated Aboriginal and Torres Strait Islander Health Practitioner in July 2012 • Development of a culturally inclusive, interdisciplinary Aboriginal and Torres Strait Islander health curriculum framework to be integrated into entry level health profession training • Increase the number of Aboriginal and Torres Strait Islander people entering the health workforce across all levels and optimise their retention

3.8 Regional Rural and Remote Health Workforce Strategy

Objective/Purpose	Develop a National Regional, Rural and Remote health workforce strategy that addresses inequalities in service access.
Description	This project focuses on the development of a National Regional, Rural and Remote Workforce Strategy, including targeted recommendations and an implementation support plan that will provide robust national guidance on future needs, reforms and initiatives to improve the health care services of those in regional, rural and remote communities. The strategy and implementation support program will promote better utilisation of existing workforce; support optimal use of skills and workforce adaptability; and build workforce capacity for responding and adapting to changing demands in rural and remote communities. The Strategy, associated recommendations and targeted projects, will complement the Commonwealth National Strategic Framework for Rural and Remote Health currently under review by the jurisdictions.
Output measures	<ul style="list-style-type: none"> • National Regional, Rural and Remote Health Workforce Strategy • Implementation Plan • Targeted projects to support implementation

3.9 Rural Medical Generalist Education Pathways

Objective/Purpose	Develop the appropriate balance between generalist and specialist medical services to meet community need.
Description	This project seeks to build upon trials of rural and remote medical generalist postgraduate education pathways to increase the range of generalist education available across rural and remote settings. This will include the development of a national jurisdictional platform to deliver common training pathways and placements to support rural medical generalist training and an evaluation framework that will contribute to the evidence for efficacy of a national approach to improvements in educating rural medical generalists.
Output measures	<ul style="list-style-type: none"> • National implementation support program • National evaluation framework • Increase in nationally consistent training pathways for rural medical generalists • Improved models for training generalists

3.10 Rural Allied Health Generalist

Objective/Purpose	Develop the appropriate balance between generalist and specialist allied health services to meet community need.
Description	<p>This project seeks to evaluate the outcome of several initiatives currently being trialled and identify opportunities to develop an innovative workforce model for adoption nationally. HWA’s role will be to provide implementation support in order to:</p> <ul style="list-style-type: none"> • Determine the productivity gains possible through developing models for rural allied health generalist practice and to determine the requirements for national uptake • Improve the attractiveness to allied health practitioners of working, well supported, as generalists in rural settings • Improve service viability and increase recruitment and retention • Generate better career and training links for generalist allied health disciplines.
Output measures	<ul style="list-style-type: none"> • Generation of nationally consistent models for training rural allied health professionals for generalist practice

3.11 National Cancer Workforce Strategy

Objective/Purpose	This project involves the development of a national cancer workforce strategy that addresses workforce issues for the cancer workforce and identifies key innovation and reform that has potential national application.
Description	<p>HWA has been requested to provide input into the COAG Improving Cancer Care Initiative in relation to the cancer workforce. HWA will profile the current cancer workforce, identify future requirements and prepare and deliver a national cancer workforce strategy. This project will deliver a cancer workforce strategy document inclusive of detailed workforce planning, workforce reform and development measures. In addition, a national adoption approach will be developed in consultation with stakeholders to identify initiatives that will address key workforce issues and provide workforce innovation and reform. HWA will provide support to achieve national adoption and implementation of the strategy recommendations.</p>
Output measures	<ul style="list-style-type: none"> • Improved and better integrated baseline data planning and modelling projections for the cancer workforce • Identification of and analyses of programs and sites to inform cancer workforce reform and innovation • Implementation of measures to support national adoption of targeted reforms

3.12 Optimisation of National e-Health Measures and Strengthening Health Workforce Capability

<p>Objective/Purpose</p>	<p>Increasing the capability and competencies of the health workforce, particularly in the mental health and rural and remote sectors, in the implementation of national e-health initiatives and systems to improve access, quality and timeliness of health service delivery and return on investment across a broad range of e-Health applications.</p>
<p>Description</p>	<p>This project will build the capacity of the health workforce to increase use and optimisation of e-Health technology, particularly within the mental health and rural and remote sectors, to support and promote greater accessibility to health care services, enable patient self-management, improve provider support and access to secondary consultations. In addition, this project will also examine the capacity of the mental health workforce in rural and remote locations through the application of Telehealth, to improve provider support, increase retention and improve access to secondary consultations. It will include:</p> <ul style="list-style-type: none"> • engaging with MHWAC and other key stakeholders to develop & test new innovative workforce models within the mental health sector using e-technology to improve retention and access to specialist expertise • analysis of current gaps and future competency frameworks to optimise the current and future use of e-Health • focusing on evidence based practice e.g. optimise greater use of Telehealth by health workers to support and promote greater accessibility to health care services • engaging with key stakeholders to identify implementation sites and support needs, where selected applications may be trialled and evaluated.
<p>Output measures</p>	<ul style="list-style-type: none"> • National policy recommendations to sustain improved workforce capacity in the Mental Health and Regional, Rural and Remote sectors • Production of best evidence approaches to increase workforce adoption of national e-health measures within the mental health and rural and remote sectors • Improved workforce ability to use existing and future e-health technologies • National policy recommendations to sustain improved workforce capacity in the Mental Health and Regional, Rural and Remote sector • Improve return on e-health investment

3.13 Leadership for Sustainable Change

Objective/Purpose	Develop national health leadership training and capacity building mechanisms to drive innovation and reform and improve productivity.
Description	This project will build on current work and will include the development of a national leadership for change strategy and provide a national adoption framework to build upon existing evidence based best practice nationally and internationally with a view to enhancing the development of leadership programs and embedding best practice within traditional training mechanisms, courses and curricula.
Output measures	<ul style="list-style-type: none"> • Evaluation of current leadership capacity and the return on investment of current training approaches • Definition of leadership for sustainable change competencies • National and international partnerships in leadership development • A national strategy and implementation program

3.14 National Workforce Competency Framework

Objective/Purpose	To improve the articulation of training pathways for all levels of the health workforce. This will enable improved flexibility and efficiency of training, and reduce training time within and between professions. Furthermore, to streamline education of the existing workforce and assist in more effective re-entry pathways.
Description	This project builds on the findings of the National Health Workforce Planning and Research Collaboration (NHWPRC) report titled Competency- based Education and Competency- based Career Frameworks: Informing Australian health workforce development. The Report highlights the issue of diverse and fragmented health workforce educational structures and lack of integration between the aims of education, and the needs of health services. The project will focus on the development of a Framework to build upon and integrate with existing standards, competencies and capability frameworks to promote the adaptability, flexibility and capacity of the future workforce. The Framework will also complement national education reform initiatives arising from the Bradley Review.
Output measures	<ul style="list-style-type: none"> • A nationally consistent framework • Commitment by key stakeholders to action the recommendations within the Directions paper • Identification of vertical and horizontal career structures likely to facilitate a more flexible workforce

3.15 Mental Health Workforce Competencies

Objective/Purpose	To support the provision of mental health services for the Australian community, assist with mental health workforce development expansion and reform and provide innovative mental health workforce models.
Description	<p>This project will support expansion of the scope and uptake of new or redesigned roles of mental health workers by enhancing their competencies to achieve a more adaptable and transferable mental health workforce. It will build upon work already undertaken by various groups including the jurisdictions, the Mental Health Standing Committee and the Mental Health NGO workforce project of NHWT and will focus on:</p> <ul style="list-style-type: none"> • Reviewing outcomes of projects undertaken to support development of the competencies • Developing mental health workforce competencies for national consultation and adoption • Defining an implementation support program. <p>This project will be conducted collaboratively with MHWAC and support implementation of the National Mental Health Workforce Strategy and Plan.</p>
Output measures	<ul style="list-style-type: none"> • Stakeholder report canvassing the views and feedback from consultations • Mental Health Workforce Competencies

3.16 Medical Graduate Competency Framework

Objective/Purpose	This project progresses work on the Draft Competencies Framework for Medical Graduates.
Description	The project is designed to identify necessary procedural and diagnostic skills competencies, and refine current work on a common core competency framework for medical graduates at professional entry level. It will enhance nationally consistent procedural and diagnostic skills for medical graduates and improve work readiness of interns. It will enhance the vertical integration of competencies with those required in early postgraduate training. It will streamline postgraduate training requirements and reduce the training burden on supervisors.
Output measures	<ul style="list-style-type: none"> • Medical Graduate Competency Framework

3.17 Inter Professional Education in Health

Objective/Purpose	This work responds to the urgent need to ensure that clinical education in the health professions provides all graduates with relevant clinical skills for practice and in particular, the need to graduate students from all health professions with well-developed inter professional practice (IPP) capabilities. This project will build a national best practice knowledge base about current educational practices in Inter Professional Education in Health (IPEH) in Australia and will inform and support future developments in national health workforce and higher education development in inter professional education and practice.
Description	The project will develop a detailed profile and analysis of current activity and achievement in IPEH across all relevant Australian universities and provide best practice in inter professional education in Australian practice contexts. This will result in the identification of gaps, opportunities and development of recommendations on future development and deployment of IPEH models nationally.

Output measures	<ul style="list-style-type: none"> • A national profile of current practice and identification of best practice and leadership for future development work • Case studies addressing the challenge of innovation, sustainability and scalability • Package of digital resources to support future development
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4. International Health Professionals

4.1 National Strategy for International Health Professionals

Objective/Purpose	To develop a nationally consistent approach to the recruitment of international health professionals to Australia.
Description	HWA will prepare a national strategy document for Australia which will guide HWA's investment in international recruitment and directions for Australia.
Output measures	<ul style="list-style-type: none"> • Delivery of national strategy document. • Acceptance by Jurisdictional Policy Committee. • Acceptance by Health Ministers.

4.2 Nursing and Allied Health Recruitment for Rural and Regional Australia

Objective/Purpose	To increase nursing and allied health recruitment into rural and regional Australia.
Description	Establishment of a targeted recruitment program for rural and regional Australia focusing on the recruitment and retention of nursing and allied health professionals.
Output measures	<ul style="list-style-type: none"> • Delivery of a scoping study by Rural Health Workforce Australia (RHWA) identifying level and areas of need and strategy for targeted recruitment and retention. • Contract with RHWA to deliver specified targets. • Delivery of increased nursing and allied health professionals to rural and regional Australia. • Retention of nursing and allied health professionals in rural and regional Australia.

4.3 International Health Professionals Website Development

Objective/Purpose	To establish an international presence for Australia through the use of a single portal and national branding initiative.
Description	Australia currently recruits through eight different jurisdictions, each with its own branding, approach and processes. National registration provides an opportunity for Australia to provide a coordinated national approach to international recruitment and the establishment of an Australia portal will be the initial starting point for this work.
Output measures	<ul style="list-style-type: none"> • Development of a marketing and branding strategy for Australia • Establishment of a website portal