



# Victorian Health Workforce strategy

A 10-year strategy for a modern, sustainable  
and engaged healthcare workforce

## **Acknowledgement of Aboriginal and Torres Strait Islander Victorians**

The Victorian Government acknowledges the Traditional Owners of the lands on which we all work and live. We recognise that Aboriginal people in Victoria practice their lore, customs and languages, and nurture Country through their deep spiritual and cultural connections and practices to land and water.

The Victorian Government is committed to a future based on equality, truth, and justice, and acknowledge that the entrenched systemic injustices experienced by Aboriginal people endure.

We pay our deepest respect and gratitude to ancestors, Elders, and leaders – past and present. They have paved the way, with strength and courage, for our future generations.

To receive this document in another format, email the [Workforce Strategy and Wellbeing Team <workforcestrategyreform@health.vic.gov.au>](mailto:Workforce Strategy and Wellbeing Team <workforcestrategyreform@health.vic.gov.au>).

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

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ISBN - 978-1-76131-474-2 (online/PDF)

Available at the [Department's website <https://www.health.vic.gov.au/strategy-and-planning/health-workforce-strategy>](https://www.health.vic.gov.au/strategy-and-planning/health-workforce-strategy)

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# Minister's foreword



**Victoria's healthcare workers are the backbone of our healthcare system. We put our lives in their hands every day.**

We thank them for their dedication to timely, safe and high-quality care – especially during the COVID-19 pandemic, which put intense strain on health services and healthcare workers.

This is the context for the Victorian health workforce strategy, which sets out our plan to bolster Victoria's workforce capacity and capability.

It's a plan to help us overcome some of the longer-lasting impacts of the pandemic, like planned surgery care delays. It also aims to modernise models of care, roles and tools for the future.

Each year, Victoria's health system provides services to millions of Victorians. In 2022 alone:

- GPs delivered nearly 48 million services (including telehealth)
- public hospitals discharged more than 3.8 million patients and delivered over 160,000 elective surgeries
- Ambulance Victoria responded to over one million calls and dispatched ambulances to more than 385,000 code 1 'lights and sirens' incidents.

The Victorian Government continues to provide the sustained investment in the services and people that make up our world-class health system.

We are delivering the largest health infrastructure pipeline in the state's history, having invested over \$15 billion to ensure Victorians have the facilities and services we need now, and into the future.

The Hon. Mary-Anne Thomas, MP



A skilled and engaged healthcare workforce underpins our health system. Since 2014, we have invested more than \$54 billion in our healthcare system as well as the people we need to run it.

We have significantly increased the number of doctors, nurses, and allied health professionals to better manage the increasing pressures on our health system and deliver better outcomes for the Victorian community.

This includes more than \$2.7 billion on training and developing our workforce through initiatives including free graduate nursing scholarships, a new GP grants program, investing in a new Paramedic Practitioner role, clinical placements, and recruitment of international trained workers.

But we know there is still more to do.

Our healthcare workers need the workplaces, systems, career pathways, training and capacity so they can do their best work.

This strategy acknowledges existing pressures and provides a roadmap for how we will support our workforce to deliver high-quality healthcare for all Victorians.

It also outlines how we will build the workforce capacity and capabilities we need to ensure a modern, sustainable and engaged healthcare workforce over the next 10 years.

It recognises the immense contribution our healthcare workers make each day, and it outlines initiatives to enable them to build long, successful and rewarding careers.



I thank all of Victoria's healthcare workers for their contributions to our community.

I look forward to implementing the Victorian health workforce strategy and developing and supporting our healthcare workforce to deliver world-class healthcare for Victoria now and into the future.

A handwritten signature in black ink that reads "Mary-Anne Thomas".

**The Hon. Mary-Anne Thomas, MP**  
Minister for Health  
Minister for Health Infrastructure  
Minister for Ambulance Services

# Executive summary

## Victoria's health sector workforce is the backbone of our community.

### Our healthcare workforce plays a significant role in our economy.

Every single Victorian benefits from our 340,000 strong healthcare workforce.

It is the largest workforce in our state – 1 in 10 working Victorians are employed in medical, nursing, allied health, social services, administration, corporate or operational healthcare roles.

Nearly one-quarter of these workers live in rural or regional Victoria – helping to ensure access to healthcare and providing economic opportunities that keep our regional communities strong.

This essential workforce looks after us and keeps us healthy, and it also is one of the largest economic sectors in Victoria.

### Growing demand for healthcare workers

Local and global demand for healthcare workers will continue to grow. Competition for talent is fierce. The Victorian Skills Authority projects significant growth in the health industry with nearly 60,000 new workers needed in Victoria between 2023 and 2026.

Victoria's healthcare workforce has grown by 33% since 2011, faster than the general population.

This is driven by an ageing population, increasing prevalence of chronic disease, and the government's ongoing focus on ensuring Victorians receive the right care, at the right time, in the right place.

This growth will continue, and it matches global health workforce shortages and growth trends. The World Health Organization estimates that an additional 10 million full-time jobs will be needed in the health and social care sectors worldwide by 2030<sup>1</sup>. At the same time, existing healthcare workers need to rebuild following the pressures of managing the COVID-19 pandemic<sup>2</sup>.

This backdrop of workforce shortages and growing demand means that we need to retain the skilled healthcare workers we already have.

Demand growth translates into more opportunity for Victorian workers. The government needs to act to ensure workforce growth aligns with need.

This strategy sets out how we will attract, develop and retain the experienced healthcare workers we need. This work will be underpinned by improving healthcare workers' experience.

## Access to healthcare in rural and regional locations

Victoria's population is widely distributed across the state. People who live in rural and regional areas can find it difficult to access to healthcare services and healthcare workers.

Healthcare workers in rural and regional Victoria can have greater challenges compared to their colleagues in metropolitan areas to access the amenities, training and professional development to establish and grow their careers.

We need to create local training pathways and more opportunities for career development so we can attract and retain people in rural and regional roles.

As we build workforce supply, we will also work with the sector to develop and implement new models of care that promote workforce flexibility and enable top-of-scope practice. This is central to ensuring that all Victorians have access to the care they need.

## New technologies and models of care

Medical and technology advances mean tomorrow's health workers will need to be supported to develop new skills to fulfil new and different roles.

Healthcare delivery has changed significantly in recent years. This pace of change will only continue because of rapidly evolving population health, technology and models of care.

The COVID-19 pandemic saw a rapid expansion of digitally enabled services like virtual care and telehealth services. These have increased flexibility, service choice and responsiveness.

Our focus on patient-centred care and using multidisciplinary teams will create further changes for our healthcare workers.

We are also leveraging technology to improve preventive care and enable more care in the community.

We will collaborate across the sector to design and deliver contemporary roles and models of care, and ensure our workforces are equipped with the skills to thrive.

## Five focus areas for change

The Victorian Government is taking a holistic approach to attracting, retaining, and supporting a modern, engaged and sustainable health workforce.

A stronger and more sustainable workforce is one of the strategic drivers in the *Department of Health's Strategic plan 2023–27*.

There has never been a more important time to attract, develop and retain a local world-class healthcare workforce. To do this, we need to work across the healthcare system to design the roles, education pathways, skills and experiences that support this workforce.

The Victorian Government's 10-year strategy for the Victorian healthcare workforce will support workers' journeys from education and training through to lifelong learning and fulfilling careers.

We will do this by concentrating on five focus areas.

1. World Health Organization, *Global strategy on human resources for health: Workforce 2030*, 2020. <<https://www.who.int/publications/i/item/9789241511131>>.
2. World Health Organization, *Health and care workforce in Europe: time to act*, 2022 <<https://www.who.int/europe/publications/i/item/9789289058339>>.

**Figure 1: The 5 focus areas**

**1**

### **Increase supply of priority roles**

Bring in new workforce supply. Recruit and train new workers to support growth and a fit-for-purpose workforce

**2**

### **Strengthen rural and regional workforces**

Improve capacity and distribution in rural and regional locations for equity in access to healthcare

**3**

### **Improve employee experience**

Build a world-leading experience to retain the skilled workers we have and attract new people into healthcare

**4**

### **Build future roles and capabilities**

Develop the workforce, roles, skills and models of care we need in future

**5**

### **Leverage digital, data and technology**

Augment workforce capacity, patient experience and continued innovation through digital

We will bring in more healthcare workers for Victoria and increase our efforts to maintain the workforce we already have. We want to ensure they have the skills and capabilities to work to the breadth of their scope and have fulfilling careers as we build the healthcare system of tomorrow.

These 5 focus areas inform 12 action areas. These actions will immediately strengthen Victoria's health workforce and lay the foundations for longer-term reform, so all Victorians can access the right care, in the right place at the right time.

# Historic investment in our healthcare workforce

This strategy sits alongside historic investment in our healthcare workforce. It represents an ongoing commitment to ensuring the strength and capability of the largest workforce in our state.

The Victorian Government is demonstrating its commitment to the people who make up our healthcare system by investing in a skilled and empowered workforce that delivers quality care to our community.

We know how important it is to prepare our healthcare workforce for the future.

This investment includes:

**\$154.2m**

for election commitments, including strengthening staffing ratios to improve safety and increasing nursing and midwifery staff.

**\$15.3m**

for key initiatives to implement this strategy, including building rural nursing and midwifery capability.

**\$440.3m**

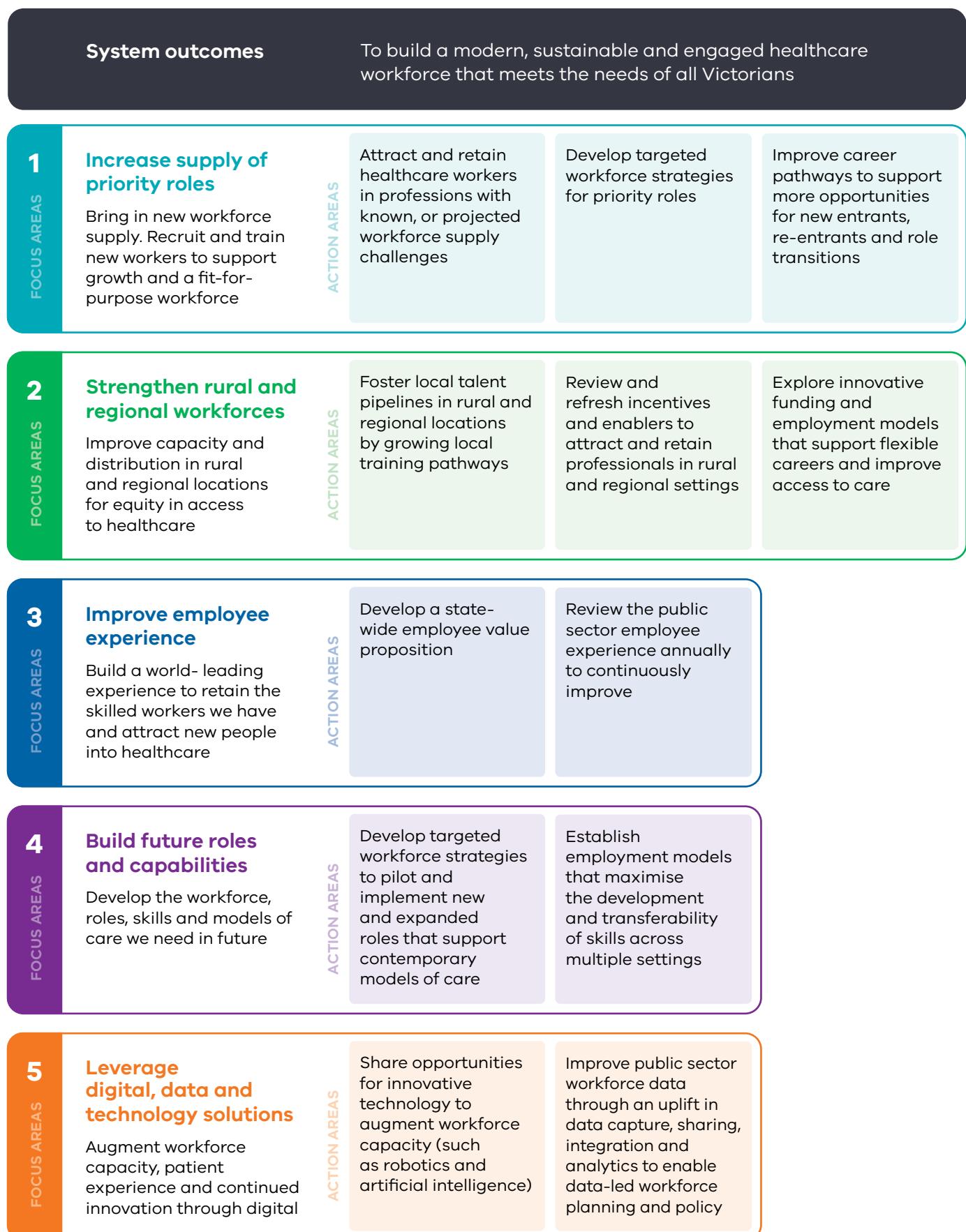
for ongoing investment in health workforce training and development, including training the next generation of graduates and supporting postgraduate studies so we can keep developing our existing workforce.

This funding will support early reforms in our ambitious 10-year strategy to build a modern, sustainable and engaged healthcare workforce – and a healthcare system that meets the needs of all Victorians.

**Our workforce is at the heart of our vision to ensure Victorians are the healthiest people in the world.**

# Strategy on a page

Figure 2: An overview of the strategy



## Spotlight

### Focusing on recovery and new ways of working

The COVID-19 pandemic brought significant and sustained change to Victoria's health system and placed unprecedented pressure on the health workforce<sup>3</sup>.

Victoria's healthcare workers adapted quickly – trying new roles, skills and service delivery models to meet rapidly changing needs in managing a novel disease under ongoing pressure.

In addition, we expanded and embedded technological methods of care, which quickly became routine.

During the pandemic, the healthcare workforce demonstrated ongoing flexibility and adaptability.

Examples include:

- rapidly expanding training to support new people to work in intensive care and emergency departments
- extended team-based models of care enabling healthcare workers to perform to the top of their scope
- scaling up testing and vaccination services with new professional groups.

The pandemic also delivered the long-desired expansion of telehealth as a core component of service delivery. This significantly expands a clinician's potential range and their ability to meet community needs.



Services such as remote monitoring through the Victorian Virtual Emergency Department have quickly become integral to Victoria's health system, allowing people to access flexible services that work with their needs.

As we look to the next 10 years, we will harness the dedication, skill, responsiveness and innovation of our people.

This 10-year workforce strategy underpins this by boosting our focus on the experience of our healthcare workforces. We want to ensure our people have the systems and support that enable them to do their best work.

<sup>3</sup> N Smallwood, M Bismark and K Willis, 'Burn-out in the health workforce during the COVID-19 pandemic: opportunities for workplace and leadership approaches to improve well-being', *BMJ Leader*, 10 March 2023.

# Victoria's healthcare workforce

Healthcare workers constitute Victoria's largest workforce, with more than 340,000 people employed across settings including hospitals, community health organisations, private practice, and residential care.

## Workforce profile

Victoria's healthcare workforce has grown significantly since 2011, at a rate approximately 50% faster than the general population.

The workforce is becoming increasingly diverse, with a growing proportion of the workforce born overseas. However, we still need to do more work to ensure health careers are accessible to people from all backgrounds.

This is particularly the case for Aboriginal and Torres Strait Islander peoples, who are 1% of Victoria's population but only 0.36% of our healthcare workforce.

**Table 1: Victoria's workforce profile**

Workforce profile	Total 2011	Total 2021	Change	Public health services 2011	Public health services 2021	Change
Headcount	228,425	342,239	▲ 33.26%	100,996	138,583	▲ 37.22%
Full-time equivalent (FTE)	183,679	271,355	▲ 32.31%	77,314.59	104,735.78	▲ 35.47%
% female	79%	78%	▼	78.83%	78.26%	▼
Average age	43.16	42.5	▼	42.67	42.21	▼
% part-time (≤ 0.8 FTE)	43.7%	44.5%	▲	45.50%	46.79%	▲
Aboriginal and Torres Strait Islander	0.08%	0.36%	▲ 377%	0.08%	0.36%	377%
% born overseas	32.4%	39%	▲	N/A	N/A	N/A

Source: Australian Bureau of Statistics (2021)

## Workforce categories and locations

The Victorian health sector overwhelmingly comprises clinical workers, such as medical, nursing and allied health workers, and workers in clinical support roles, such as medical technicians and personal care assistants.

Ahpra-registered professions account for most of the clinical workforce, in particular nurses (more than 80,000 registered nurses and 17,000 enrolled nurses) and doctors (over 26,000, including more than 6,500 general practitioners).

Allied health practitioners are another major workforce, including more than 8,500 psychologists, 7,500 physiotherapists and 6,900 pharmacists.

These workforces are supported by niche but growing roles such as public health physicians.

**Table 2: Breakdown of workforce categories**

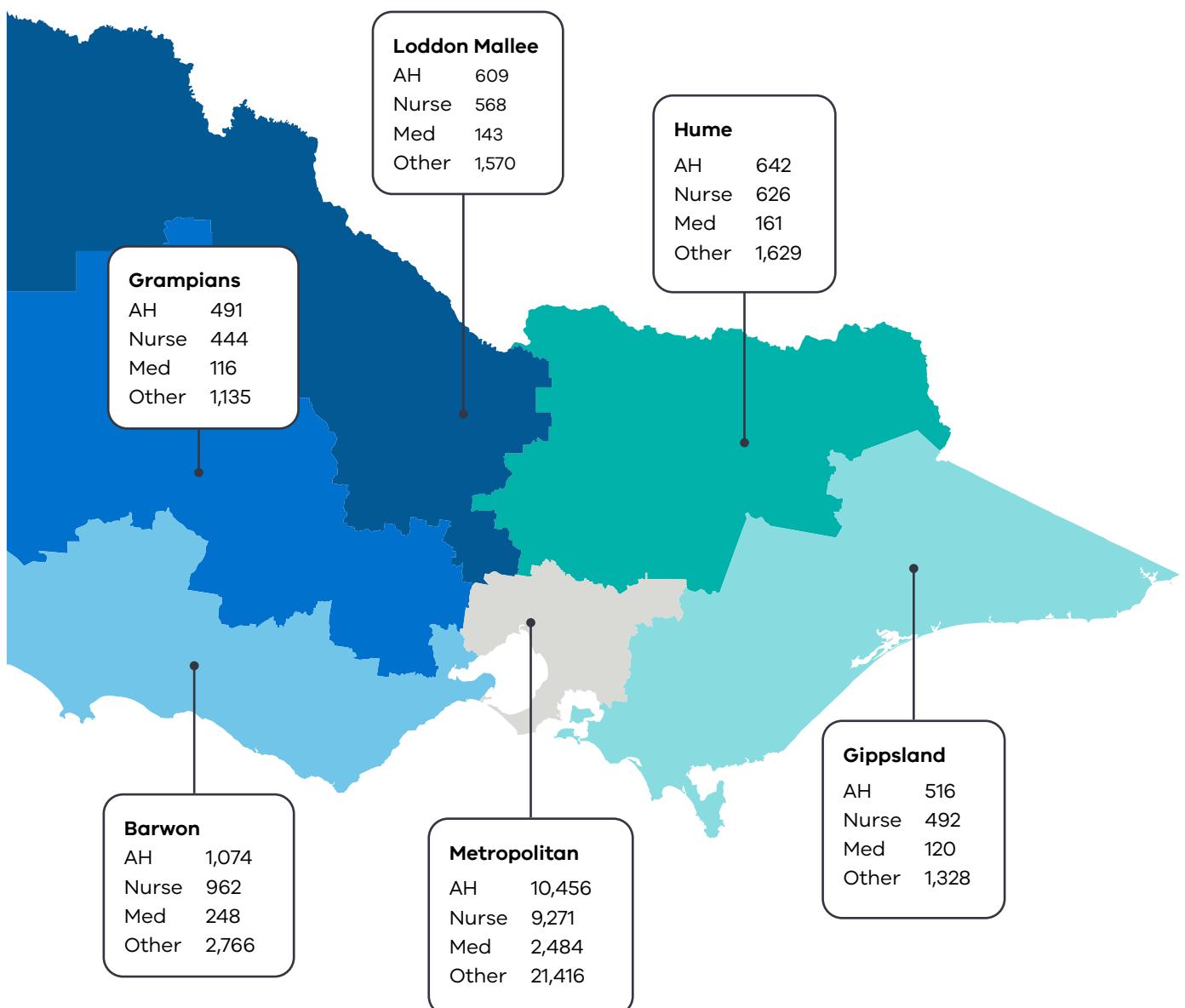
2021 workforce categories	Headcount 2011	Headcount 2021 (growth% since 2011)	Percentage breakdown	% metro	% rural
Clinical	97,629	141,878 (+45%)	41.5%	73%	27%
Clinical support	47,068	75,805 (+61%)	22.2%	74%	26%
Administrative	45,009	68,179 (+51%)	19.9%	77%	23%
Infrastructure and customer services	21,344	29,638 (+39%)	8.7%	68%	32%
Social services	14,258	23,521 (+65%)	6.9%	75%	25%
Other <sup>4</sup>	2,728	2,835 (+4%)	0.8%	82%	18%
Victoria population	-	-	-	76%	24%

<sup>4</sup> Other categorisation reflects roles that were not stated, inadequately stated, or niche (such as farming).

## Future employment projections

The Victorian Skills Authority projects that Victoria will need 59,267 new workers by 2026, with 26% of these being required in rural and regional locations.

**Figure 3: New workers required by 2026 (Victorian Skills Authority)**



## Demand for health services and workforce is increasing

The Victorian healthcare workforce grew by 33% between 2011 to 2021, and healthcare demand is expected to continue to grow. This is due to:

- population growth
- ageing population
- rise in chronic disease
- new health service infrastructure
- evolving community expectations.

Reforms to improve the quality and safety of care will further increase demand for healthcare workers over the next 10 years. These include the following.

### Aged care reforms

In response to the Commonwealth Royal Commission into Aged Care Quality and Safety, the Australian government introduced mandatory minimum care time and 24/7 nursing requirements for government-funded residential aged care services.

This will create additional demand for aged care professionals including nurses and personal care workers.

### Mental health system reforms

The Royal Commission into Victoria's Mental Health System recommended significant workforce reform. This will require an estimated 2,500 additional workers in the public system.

### National Disability Insurance Scheme (NDIS)

The introduction of NDIS funding in the disability sector led to a proliferation of private sector allied health opportunities. This created increased competition and demand for allied health services and professionals. An analysis of Ahpра-registered workers in pivotal roles shows that many professions will face workforce shortages. In particular, this includes allied health roles, some specialist medical roles and nursing roles.

## Addressing changing needs

Some roles, like midwives, may have enough registered professionals to meet demand but experience operational shortages due to people not practicing, or fulfilling different roles; whilst strong training pipelines for other roles such as Paramedics present an opportunity to explore innovative models of care.

Workforce projections will be impacted by numerous factors including changes to policy, funding and population needs.

Victoria needs to be prepared to develop a sustainable health workforce that is ready to meet these known and potential changes in demand.

# Spotlight

## 16 priority roles

The National Skills Commission has identified shortages in more than 60 healthcare roles in Victoria<sup>5</sup>.

The healthcare workforce comprises a huge range of roles, from registered professions providing direct service delivery to enabling roles that are essential to ensuring a well-functioning health system such as cooks, cleaners and health service managers. All of these roles play a pivotal role in Victoria's health system.

Modelling and sector-wide consultation has highlighted 16 roles the department will have an initial focus on.

Focus area 1 of this strategy aims to increase the supply of these important roles. This will ensure the health sector has the workforce capacity and capability needed now, and in 10 years' time.

**Figure 4: 16 priority roles**

Medical	Nursing	Allied Health
<ul style="list-style-type: none"><li>• General practitioners</li><li>• Surgeons</li><li>• Anaesthetists</li><li>• Emergency medicine specialists</li><li>• Physicians</li><li>• Psychiatrists</li></ul>	<ul style="list-style-type: none"><li>• Enrolled nurses</li><li>• Registered nurses</li><li>• Midwives</li></ul>	<ul style="list-style-type: none"><li>• Occupational Therapists</li><li>• Physiotherapists</li><li>• Sonographers</li><li>• Radiation therapists</li><li>• Social workers</li><li>• Aboriginal health practitioners</li><li>• Psychologists</li><li>• Speech pathologists</li></ul>

### Contributing factors

- Size of the workforce
- Significant change to projected in workforce supply
- Significant change to workforce profile or patterns such as age or FTE
- Projected workforce capacity shortfalls
- Government priorities (such as reducing surgery backlog)
- Consultation

5. National Skills Commission, Skills priority list 2022, 2022.

## Themes from consultation and research

The department undertook extensive consultation for the strategy during 2022 and 2023. This process captured the expertise and lived experiences of thousands of people. Participants included those in clinical and non-clinical backgrounds, health services, professional bodies, unions and education providers.

We used an iterative, consultative and research-based approach (outlined in Appendix 1) to make sure the strategy focuses on the right things.

Environmental scanning, sector-wide consultation and data analysis identified a consistent set of themes that informed the focus areas of this strategy. These focus areas will make sure we concentrate our efforts on things that will have a meaningful and sustainable impact on the health sector.

### Capacity and retention

Participants told us we need to retain skilled healthcare workers to deliver high-quality care. Many said the lack of available, experienced staff is a core source of system stress. Others expressed concern that experienced staff intended to leave the health workforce.

Retaining skilled and experienced people is integral to high-quality service delivery. It allows new professionals to be supervised and trained, which supports the growth and stability of the health system.

### Agility and flexibility

A key issue for many healthcare workers is their ability to access flexible work arrangements. This includes rostering systems and approaches that allow them to meet their personal needs and plan for the future.

Participants also highlighted the need for greater career agility and flexibility, including greater portability of advanced clinical roles between employers and settings. They also wanted better options for career transitions and growth across roles, professions and workplaces.

### Leadership

Strong leadership helps to create and maintain engaging workplaces. Participants highlighted the need for leadership development at all levels.

In particular, they said we need to focus on supporting people to transition effectively to management roles. We also need to ensure that the scope of these roles is achievable and appropriate.

## Rural and regional challenges

Participants raised unique challenges in recruiting and retaining workers in rural and regional locations.

They told us that roles in rural and regional areas may need to be designed differently to those in metropolitan areas to ensure appropriate skill mixes. They also said healthcare workers and their families need greater support settling and building connections with the local community.

Further challenges included the availability of student placements, ongoing training and access to practical considerations like suitable accommodation.

## Wellbeing

Participants were concerned about the wellbeing of the workforce. This included the intensification of work and escalating stress, with a lack of time for mentoring, supervision and education.

They also raised issues with informal expectations of overtime or additional tasks, and deep concern regarding increased violence towards healthcare workers.

## Non-clinical workforces

Participants said it is difficult to attract and retain employees in non-clinical roles in areas such as finance, information technology, people services and logistics.

This is mainly because employment conditions in the health system are sometimes no longer competitive with other sectors where people with these skills can be employed.

They also noted that clinical support positions, such as assistant and technician roles, patient services roles, cooks and cleaners, among others, may have limited career development pathways.

## Facilities and systems

Many participants identified the need to improve basic back-end processes and systems, as well as staff facilities, to support wellbeing and professional satisfaction.

# The strategy: 5 focus areas for change

To achieve our vision, we need to have the right number of healthcare workers, with the right skills, in the right roles and locations. We will increase workforce supply with a focus on growing our own, retaining the skilled workers we have, and supporting ongoing skill and career development.

This Strategy outlines how we will achieve this through five pillars of change and 12 action areas to build the workforce Victoria needs now and in 10 years' time. Actions will be implemented over three horizons – short, medium and long term.

The 5 focus areas are:

1. Increase supply of priority roles.
2. Strengthen rural regional workforces.
3. Improve employee experience.
4. Build future roles and capabilities.
5. Leverage digital, data and technology.

**Figure 5: The 5 focus areas**

- 1** Increase supply of priority roles
- 2** Strengthen rural and regional workforces
- 3** Improve employee experience
- 4** Build future roles and capabilities
- 5** Leverage digital, data and technology

# 1

# Increase supply of priority roles

## 2034 outcomes

Increase supply of priority roles and close projected workforce shortage gaps.

Increase retention of health workers in priority roles by 20% at 10 years post qualification.

Increase Aboriginal and Torres Strait Islander representation equal to the Victorian population.

Increase university places, clinical supervisory capacity, and clinical placements through a more integrated education pipeline.

## Workforce shortages

Growing demand for workers, coupled with constraints on workforce availability, mean there is strong competition for workers and occupational shortages in many industries. This is more acute in regional communities<sup>6</sup>.

Victoria's population is projected to grow by 23% between 2022 and 2032, from 6.71 million to 8.24 million people. To support population growth and high-quality care, Victoria's health services are also growing. In 2022, the Victorian Government committed more than \$12 billion in investment to put patients first through more staff, better hospitals and first-class care.

Demand for healthcare workers continues to increase. Workforce projections show that, if historical growth continues, numerous roles will experience significant workforce shortages. This is particularly the case for allied health roles, which have seen large increases in demand since the introduction of the National Disability Insurance Scheme (NDIS).

Many factors contribute to demand growth, including population demographics and policy settings.

Understanding demand growth will help us lay the foundation for future workforce needs now.

Each role, setting and professional group has its own nuances. Some roles are high-priority because of a lack of people wanting to study or perform them, some are in emerging growth areas, and others have significant shortages in particular locations.

For Victoria to meet everyone's healthcare needs, we need the right number of healthcare workers, with the right skills, in the right place. We will ensure Victoria has the workforce it needs to deliver world-class health services to all Victorians.

To achieve this, we will:

- promote careers in the health sector
- develop new pathways for people to train or retrain in priority roles projected to have capacity issues
- develop targeted workforce strategies for these roles to give greater insight into the numbers, future capabilities and distribution.

<sup>6</sup> Victorian Skills Authority, State of the Victorian Labour Market, 2022.

## Supporting workforce growth: making it free to study nursing and midwifery initiative

As part of the 'Making it free to study nursing and midwifery' initiative in 2022–23, the department supported 154 nurses and midwives who were taking a break from work to return to practice in public health services by completing a refresher program.

We funded health services to offer refresher programs that included scholarships to cover the costs of participation.

Feedback showed that the program was effective and beneficial for both the participant and the health service.

The program provided a structured entry pathway back into public health, and it allowed experienced nurses to regain clinical skills in a supported environment.

The health services that hosted refresher program participants offered permanent contracts to participants who finished the program.

Implementation of policies and programs like this can help improve supply and support the retention of a highly skilled and professional workforce.



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**'I would want to see a continual attraction to the profession by people who see themselves progressing through a [health] career.'**

*Respondent, Health Workforce Survey, 2022*

## Building workforce supply to meet changing community needs

The number of healthcare workers in most disciplines has increased over recent years. Between 2017 and 2022, clinical and clinical support staff numbers at Victorian public hospitals rose by almost 20,000 full-time equivalent (FTE) positions, an increase of more than 30%.



Despite this growth, supply and distribution challenges are expected to persist in many professions. This includes nurses, general practitioners, psychiatrists, psychologists, occupational therapists, and physiotherapists.

This is a worldwide challenge. The World Health Organization estimates a global shortfall of 10 million health workers by 2030, which will intensify competition for skilled professionals.

As we grow our workforce, we also need to promote equitable distribution of skilled healthcare workers to the specialties and locations needed to increase sustainability.

This will reduce our reliance on international medical graduates (IMGs), locums and other supplementary workforces to ensure continuity of care for Victorians.

The health sector is also in strong competition for non-clinical workforces that support the health system in its day-to-day functions, such as service management, digital, data, finance, and human resources. As the clinical workforce grows, we also need to ensure they are supported by the essential non-clinical workforces that enable them to perform to the top of their scope.



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**'Health is a sector where people can work the rest of their life across multiple roles.'**

*Participant, Supply forum, 2022*

To achieve this, we will develop targeted strategies to attract more healthcare workers to priority roles and improve career pathways. These will support new employees as well as the re-entry or reskilling of former and current staff.

Across Australia, more than 3,000 international students of medicine and nursing alone graduate each year.

Ensuring parity in postgraduate employment outcomes and creating career pathways that maximise employment of these valuable workforces is imperative to bolstering workforce supply and positioning Victoria as an employer of choice.

We will develop and promote the roles available in the health system. This includes encouraging prospective students and jobseekers into training opportunities and positions for which we know we need more people.

As we grow, we will work collaboratively across the sector to increase the participation of under-represented groups such as Aboriginal and Torres Strait Islander peoples and ensure Victoria's health workforce is increasingly reflective of the multicultural community we serve.

## Action areas

The following activities will be delivered in the short term, from 2024–2026.

2024

→ 2026

### **1. Attract and retain healthcare workers in professions with known, or projected workforce supply challenges**

Collaborate with the Commonwealth on modernisation of health programs and funding models

Increase inclusion and diversity of under-represented groups

Establish a suite of career planning supports for prospective students and jobseekers

### **2. Develop targeted workforce strategies for priority roles**

Partner across Government, service providers, education providers and accreditation and regulatory bodies to develop new and innovative approaches to sustainable workforce supply

Develop targeted approaches to enable workers in priority roles to operate at the top of their scope, including alternate workforce models and supplementary roles

### **3. Improve career pathways to support more opportunities for new entrants, re-entrants and role transitions.**

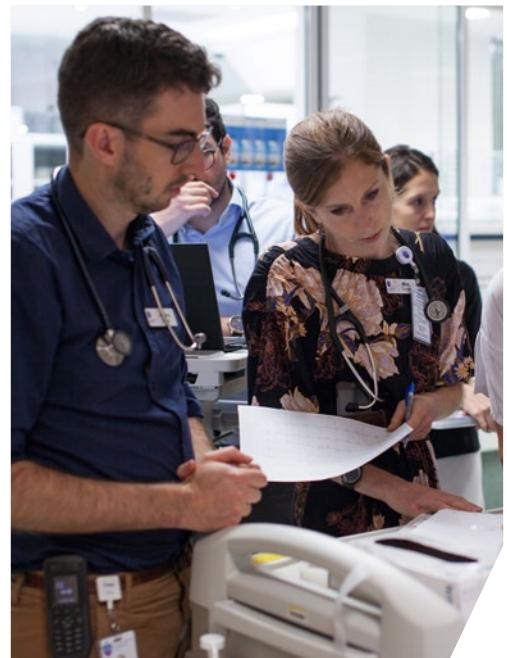
Work with the tertiary sector to scope potential for Recognition of Prior Learning (RPL) that will enable reskilling and co-qualification

Investigate opportunities to better support re-entry into priority roles

Invest in entry level roles and pathways into health careers

## Medium-term reforms

- Lift public awareness of the diverse career opportunities available in the health sector, including less-visible health professions.
- Guide career pathways through contemporary self-directed career planning tools and targeted marketing to potential talent segments including new entrants and re-entrants.
- Continue to develop targeted workforce strategies that address the unique challenges and opportunities for each role, to support optimal workforce supply and distribution.
- Outline structured plans and initiatives for growing targeted workforces, including training and development pathways, alternative workforce approaches, and recruitment and retention.
- Build professional development opportunities that support career pathways and lifelong learning.
- Expand structured programs such as formal education, work experience, clinical placements, and mentoring.



## Long-term reforms

- Establish new approaches to acquiring health qualifications, including working with the education sector to recognise prior learning and reduce the time to competency for professionals seeking to develop in, or transition to, different disciplines.

# Strengthen rural and regional workforces

## 2034 outcomes

Improve workforce supply and distribution for equitable service delivery to rural and regional locations.

Increase clinical placements and supervision capacity in rural and regional locations by 20% for increased local talent pipelines.

Develop innovative funding and employment models that enable increased service delivery to rural and regional locations.

Delivering high-quality health services across Victoria requires tailored approaches that recognise the unique workforce challenges and opportunities in rural and regional areas.

Recruitment and retention challenges in our regions include:

- personal lifestyle needs such as amenities, schooling and employment for family members
- remoteness and limited social or professional networks
- perceived lack of prestige and professional development opportunities.

After significant investment, many professions now have sufficient overall workforce supply, but there is an uneven distribution of healthcare workers across some locations and specialties.

Some rural and regional health services are currently augmenting their workforces through partnerships.

A survey conducted in June 2023 found that public metropolitan health services supplied more than 120 FTE doctors to public rural health services through partnership arrangements. This included 29 FTE surgeons, 11 FTE anaesthetists and 9 FTE paediatricians. Doctors can travel up to 550 kilometres to reach a rural location.



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**'We need to better highlight the unique benefits of rural health careers.'**

*Participant, Rural and Regional workshop, 2022*

Our vision is for a rural and regional health workforce with local access to the necessary skills, training and support required to thrive in their communities.

We will increase the number of healthcare workers based in, or available to, rural and regional locations. We will also enhance local delivery of training and skills development, and support people to join and remain in rural and regional communities.

In the 2022 health workforce survey, 19% of respondents indicated they had worked in rural and regional Victoria, while 42% indicated they had considered it.

This suggests an opportunity to increase the uptake of rural and regional roles and address longer-term workforce shortages by removing barriers and improving incentives for people to live, stay, and work in rural and regional Victoria.

## Attracting and retaining skilled people

We need to encourage more people to establish or develop their health careers in rural and regional Victoria. This is integral to ensuring our health system provides the same level of access, care and quality for metropolitan, rural and regional residents.

The consultation identified longstanding issues in finding and retaining suitable staff for rural and regional health services. This has become particularly challenging in the competitive health employment market of recent years.

These issues affect roles ranging from administrative staff and practice managers through to allied health professionals and specialist clinicians.

Challenges are often intensified for smaller health services and private businesses (such as GP clinics), particularly in smaller towns.

To encourage professionals to take up roles in rural and regional areas, we know the workforce needs accessible and affordable amenities such as accommodation, transport, schooling and childcare.

Employment opportunities for family members are also important, as well as avenues to build early and sustained community connections outside work, such as through community groups.

## Growing local pathways

Health services across Victoria are developing local solutions to growing their workforce.

This includes partnering with training providers to deliver qualifications, skills and opportunities in clinical and non-clinical roles across the health sector.

Approaches range from apprenticeships and traineeships for roles as diverse as enrolled nursing in aged care and administration in a major hospital.

Other strategies include building longer-term relationships with future clinicians through long-term casual employment during university holiday periods, helping to maintain connections and relationships.

These broad and creative approaches to building and sustaining their workforce are enabling people in rural and regional Victoria to learn locally, work locally, and stay embedded in their communities.

## Supporting professional development and contemporary models of care

Healthcare workers highly value effective professional networks, particularly those with specialised skills.

People working in rural and regional healthcare – in both clinical and non-clinical roles – need to have local access to:

- routine training and education to develop and consolidate skills and knowledge
- effective professional supervision and mentoring
- clearly identified pathways for the referral and escalation of issues
- valuable and viable career development pathways
- opportunities to develop, refine and utilise specialised skills.

Many roles, such as rural generalist clinician, embrace the range and complexity of clinical practice needed in smaller communities. Improved understanding, recognition, and access to training for people

working to develop and utilise a generalist scope of practice will ensure these types of roles can be more effective and widespread. Increasing flexibility will also be important in smaller communities or professional groups where the level of demand for specific skills or services can be split across multiple service streams or employers.

To encourage and support healthcare careers in rural and regional Victoria, we will focus on building local talent pipelines and professional development pathways. We will focus on building the supply while promoting new models of care and flexibility that better utilise existing workforces.

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**[Telehealth] has helped improve access for our rural community to specialist services.'**

*Respondent, Health Workforce Survey 2022*

## Action areas

The following activities will be delivered in the short term, from 2024–2026.

2024

→ 2026

### **4. Foster local talent pipelines in rural and regional locations by growing local training pathways.**

Identify, share and expand successful models of local training and employment pathways

Enhance availability of rural and regional clinical placements and rotations

Improve availability of continuing professional development training

Improve capacity and capability to deliver specialised and advanced clinical training

### **5. Review and refresh incentives and enablers to attract and retain professionals in rural and regional settings.**

Partner across government to explore opportunities to improve accommodation availability.

Review and refresh existing recruitment and retention incentive programs.

Promote best practice community connection and integration programs for healthcare workers new to rural and regional areas

### **6. Explore innovative funding and employment models that support flexible careers and improve access to care.**

Partner with the sector to pilot employment models that increase serviceability to rural and regional locations such as single employer and hub and spoke.

Review opportunities to increase flexibility in funding models to improve service delivery and employment arrangements.

## Medium-term reforms

- Establish and expand training programs that are accessible to residents of rural and regional areas.
- Create local pipelines of skilled clinical and non-clinical workers familiar with the unique healthcare needs of their communities.
- Work with the sector to identify best practice models of social and community connection for newly relocated healthcare workers and their families and share these models widely.

## Long-term reforms

- Provide opportunities to develop specialised skills that are relevant to regions' needs and build more sustainable workforce models.
- Drive new and innovative programs in areas such as professional development and accommodation that support the recruitment and retention of a skilled workforce.
- Create innovative funding models that support flexible employment arrangements across public, private, and community health services.



# 3

# Improve employee experience

## 2034 outcomes

Reduce the public health service staff separation rate by 10%.

Reduce public health service WorkSafe claims by 10%.

Improve public health sector employee sentiment by 20% in psychological and physical safety, wellbeing, workload, learning and development, and leadership.

The continued delivery of quality healthcare centres on attracting and retaining a highly skilled, engaged, and adaptable workforce and providing a consistently positive employee experience. This requires us first to establish a vision for what a world-leading health employee experience looks like.

The pandemic saw our healthcare workers face a period of sustained pressure, high workloads, and burnout<sup>7</sup>. Building and maintaining a healthy and engaged workforce requires a strong sense of purpose and the underlying systems, tools, and processes that support workers' experience and ability to fulfil their purpose<sup>8</sup>.

*The Victorian health workforce strategy* acknowledges this, and the importance of building better workplaces and experiences for our people.

Our consultations, combined with independent People Matter Survey employee experience data for public healthcare workers, identified key value propositions that are important to engaging and retaining our healthcare workers. We have a bold vision for Victoria to be the first state to develop a statewide minimum Employee Value Proposition (EVP), a systemic guide that will enable us to develop a world-leading employee experience for Victoria's valued healthcare workers.

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**'Kindness is essential – when dealing with ourselves, our colleagues and consumers/patients. We need a greater emphasis on kindness, sharing and caring.'**

*Participant, Capability forum, 2022*

<sup>7</sup> SJ Armstrong, JE Porter, JA Larkins et al., 'Burnout, stress and resilience of an Australian regional hospital during COVID-19: a longitudinal study', *BMC Health Serv Res*, 2022, 22: 1115; S L McGuinness, J Johnson, O Eades, P A Cameron, A Forbes, J Fisher, K Grantham, C Hodgson, P Hunter, J Kasza, H L Kelsall, M Kirkman, G Russell, P L Russo, M R Sim, K P Singh, H Skouteris, K L Smith, R L Stuart, H J Teede, K Leder, 'Mental health outcomes in Australian healthcare and aged-care workers during the second year of the COVID-19 pandemic', *International Journal of Environmental Research and Public Health*, 2022, 19(9): 4951.

<sup>8</sup> MJ Ireland, ML Engel, S March, S Parmar, BA Clough, A Sharp, L Moses, 'Doctor workplace attrition: An examination of pathways from work demands to organisational commitment', *Asia Pacific Journal of Health Management*, 2022, 17(2): 1–15.



## Focusing on what is important to healthcare workers

**Victoria's health sector provides many challenging and fulfilling roles in the clinical and non-clinical spheres.**

Our healthcare workers cite a desire to help others, a passion for health, making a worthwhile contribution and long-term job security as some of the primary drivers and benefits of working in our health system.

Despite this, approximately 4.6% of Australia's registered medical practitioners, and 8.2% of Australia's registered nursing and midwifery workers, are currently not practising.

We want to build a health system in which every worker feels valued, supported and inspired to fulfil their purpose.

Victoria's healthcare workers work together in often difficult circumstances, with individuals and teams forming strong bonds and pulling together in crises, including the unprecedented challenges of the pandemic.

## Key factors driving the workforce

**62%**

of workers believe flexible work arrangements would be the most helpful way to attract and retain employees.

**22%**

of workers cited workload as the primary driver of their work-related stress.

**54%**

of workers want to see better learning and development opportunities at their organisations.

**58%**

of workers indicated they want to have their daily administrative tasks and processes made easier through more integrated technology.

Workers want to see emerging leaders receive appropriate training to build innovative skill sets for the challenges of today.

Workers identified physical amenities as an area in need of improvement across the sector to enhance the delivery of care.

Workers want competitive remuneration packages.

Source: Victorian Health Workforce Survey 2022

The employee value proposition is a cornerstone of this 10-year strategy because we know that valuing, respecting and elevating our carers enhances the quality of care to every Victorian.

Through consultation, we identified 9 core domains.

Two of these are purpose and strong co-worker relationships, which are existing strengths that drive Victoria's healthcare workforce to be connected and inspired.

**This strategy focuses on advancing the remaining 7 domains to build this foundation.**

## Flexibility

Healthcare workers want work-life balance and greater flexibility in rostering.

Employee expectations of flexibility across the health sector, and the labour market more broadly, have changed.

Workers want to balance when, where and how often they work with their personal needs. This requires more flexible work arrangements and rostering practices.

## Safety and wellbeing

Healthcare workers have a right to feel healthy and safe at work.

Eliminating occupational violence and aggression, bullying and harassment is essential.

As we transition to new ways of working and models of care arising from the pandemic, we also need to balance workloads and improve the supports available to prevent burnout and fatigue.

Mandatory cultural safety training will be key to ensuring culturally and psychologically safe workplaces.

## Career development and agility

Career progression and lifelong learning are integral to healthcare workers' career satisfaction and contemporary skills development.

All professionals, irrespective of location, should have the opportunity to advance their professional skills and operate at the top of their scope.

Clearer career pathways need to be developed that provide more diverse opportunities, and support mobility.



## Leadership

Leadership development influences all facets of the employee experience, including workplace culture, career pathways, and support for mental health and wellbeing.

Targeted leadership programs will equip emerging leaders with dynamic skill sets to adapt to the evolving nature of care.

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**'A good workplace ... where you are valued, can make meaningful changes and can grow professionally, will assist with retaining employees.'**

*Respondent, Health Workforce Survey 2022*

## Workplace

Healthcare workers want modern facilities and workplaces that support them to deliver quality patient care while supporting worker wellbeing through amenities such as rest and recovery spaces.

Providing modern workplaces is integral to satisfaction at work.

## Technology

As the environment around us becomes increasingly digital, healthcare workers also expect processes and services that are intuitive, integrated, and convenient.

Modern technology, and knowing how to use it, are required to encourage collaboration and innovation for workers and patients.

## Benefits

Securing fair financial and non-financial benefits are key considerations for employment decisions and satisfaction.

Competitive financial remuneration is also increasingly challenging for non-clinical roles in a highly competitive labour market. Enterprise Agreement negotiations provide an opportunity to review existing settings and refresh benefits.

## Action areas

The following activities will be delivered in the short term.

2024

→ 2026

### **7. Develop a state-wide value proposition for the healthcare workforce**

Provide resources and training to prevent and reduce incidents of occupational violence and aggression

Establish a health leadership framework, self-assessment tool and development pathways

Co-design an approach to refreshing rest and recovery spaces

Identify opportunities to improve flexibility and other benefits through enterprise agreement negotiations

Embed consistent approach to role redesign to reduce workload impact

### **8. Review the public sector healthcare workforce annually to continuously improve**

Implement annual review of public health workforce data and develop associated plans for continuous improvement of the health sector's employee value propositions.

#### **Medium term reforms**

- Identify opportunities to modernise workplaces and technologies.
- Ensure workplaces promote physical, psychological, and cultural safety.
- Further develop and scale contemporary practices in flexibility, wellbeing and safety, leadership development and career development.

#### **Long term reforms**

- Revise and continuously improve the EVP underpinned by an annual review of employee experience sentiment.

# 4

# Build future roles and capabilities

## 2034 outcomes

Establish 9 future roles to create additional capacity in the healthcare system, support new models of care, and improve pathways.

Develop innovative education models for career agility, including reskilling pathways across professions.

Increase supply of 20 standardised advanced roles to improve the ability of existing roles to operate to the top of scope.

Increase cross-skilling programs for integrated and person-centered transdisciplinary care.

The rapid mobilisation of new roles and the adaptation of existing ones during the pandemic showed our health system's strengths in establishing innovative models of care and roles.

It also highlighted that, in some roles, healthcare workers are working to a broad scope that can present a risk to the efficacy of service delivery, or a narrow scope that limits career growth and satisfaction.

There are opportunities to develop new roles and grow existing ones, which will build stepped career paths while supporting professionals to operate to the top of their scope.

This strategy focuses on a broad range of roles that will enable the modernisation of healthcare service delivery, including:

- medical
  - rural medical generalists
  - medical assistants

- nursing
  - nurse practitioners
  - registered undergraduate student of nursing/midwifery
- allied health
  - allied health advanced/extended scope of practice
  - rural allied health generalist
  - allied health assistants
- other
  - paramedic practitioners
  - patient support officers

These roles can create additional capacity in the healthcare system. They can also improve the ability of existing roles to:

- operate to the top of scope
- support new models of care
- improve career pathways.

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**'We need to enable systems to adapt to change, rather than defining the workforce in a more static way – the workforce needs to be dynamic.'**

*Participant, Capability forum, 2022*

## **Growing and diversifying skills**

Consultation identified that health professionals want to improve their skills, diversify their work and respond innovatively to new challenges.

There is complexity in identifying not only where roles can grow but also how to successfully delegate and redefine activities to ensure balanced workloads and opportunities for sharing and teaching new skills.

With ever-increasing demand for health services, and changing community needs, it will be necessary to work differently. Establishing new and innovative roles, including contemporary credentialling and scopes of practice, is a priority for Victoria in delivering modern health services. Growing peoples' skills in line with their desire for engaging careers will also aid longer-term retention in the health sector.

## **Case study: innovative models of care**

Several health services have created advanced practice dietitian roles to identify people on the gastroenterology waitlist with symptoms compatible with irritable bowel syndrome. The dietitian reviews these patients and provides a comprehensive assessment.

Some patients have 'red flags' for faster escalation to the gastroenterologist, while others receive symptom management while waiting for their medical appointment.

Some patients are managed and treated within a dietetics framework and removed from the gastroenterology waiting list entirely, which improves timeliness and quality of care.

Using innovative roles can improve patient care and make better use of the breadth of skills held across health professional groups.

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**'The sector wants increased scope of practice, advanced scopes, diversity of work, continued opportunities to learn and develop.'**

*Participant, Allied Health workshop, 2022*

## Skills for person-centred care



**Ensuring healthcare workers have opportunities to develop new technical and general skills is integral to enabling our people to achieve their purpose and pursue meaningful and varied careers in a way that supports centred-person care.**

The Health and community services industry report 2022 published by the Victorian Skills Authority articulates the need to develop workers' multidisciplinary skills to effectively respond to government reform.

As government reform repositions the health and community services industry to be more integrated and driven by service users' needs, this requires workers to have inclusive, person-centred, and digital skills to lift quality service delivery.

While certain skills are shortage across the industry, others relate to sectors or occupations. A 2021 survey

of health and community services industry employers identified five skill needs for continued development in the sector.

- the right attitude (mindset, motivation, consistency)
- job-ready skills (teamwork, problem solving, communication, initiative)
- technical/job specific skills (for a specific role)
- digital skills (working with digital devices, applications & networks)
- foundation skills (language, literacy, and numeracy skills).

Embedding opportunities for healthcare workers to develop these skills at all points in their career journeys will further support the desired outcomes of this strategy and will be a focus throughout implementation.

## Action areas

The following activities will be delivered in the short term, from 2024 to 2026.

2024

→ 2026

### **9. Develop targeted workforce strategies to pilot and implement new and expanded roles that support contemporary models of care**

Develop a consistent and scalable process to formalise new and expanded roles

Establish career pathways and progression models for new and expanded roles

Work with education providers to develop new or updated qualifications and pathways to new and expanded roles

Develop baseline scope of practice, qualification and credentialling requirements for each innovative role

### **10. Establish employment models that maximise the development and transferability of skills across multiple settings**

Establish innovative employment models that maximise the development and transferability of skills across multiple settings and professions.

Partner with Ahpra and professional bodies to expand skills and scopes of practice through interjurisdictional advocacy.

#### **Medium-term reforms**

- Expand systems and processes that allow new roles and approaches to be piloted, established, and scaled.
- Expand innovative workforce models, including those that have been developed locally, in Australia and overseas.
- Enable new settings to embed innovative roles.

#### **Long-term reforms**

- Work with the sector to develop a standardised baseline scope of practice and credentialing requirements, and a standardised approach to endorse future roles.
- Identify and systematically address relevant legislative or regulatory barriers to new roles and models of care.
- Work with Ahpra and other groups to ensure training and accreditation requirements remain fit for purpose as new roles, technologies and techniques develop across the health system.

# 5

# Leverage digital, data and technology solutions

## 2034 outcomes

Enable modern digitally enabled workplaces supported with guidance on digital best practice.

Increase data-led public-sector workforce planning and policy for Victoria, and contribute to improved national healthcare workforce planning.

**'The pandemic facilitated upgrades in ICT and infrastructure, but there is a long way to go.'**

*Participant, Capability forum, 2022*

Continuous digital, data and technology innovation is the new normal. It provides opportunities for the Victorian health sector to reimagine delivery of health services.

This continuous innovation, combined with external forces such as the demands on service delivery during the COVID-19 pandemic, has resulted in numerous technology-enabled advances being implemented or scaled across the world. These include the use of drones to deliver medical supplies, virtual reality in rehabilitation and increased use of telehealth.

As digital technologies evolve, our communities and workforces expect the health sector to keep pace with streamlined services that can maximise performance and outcomes.

We will achieve continued digital innovation by implementing Victoria's digital health roadmap 2021, and through ongoing investment in the infrastructure, skills and training to equip our people to provide contemporary health services.

In the digital era, citizens are surrounded by services and products that seamlessly meet their needs.

Our workforce also increasingly expects systems that are as intuitive and integrated as those they use in everyday life.

## Improving our workforce's digital experience

Victoria is systematising digital investment by sharing best practices and innovation across the state.

Digital innovation and transformation require strong leadership.

We will promote and build workforce capability in digital, data and technology solutions to ensure our leaders have the skills to promote and deliver large-scale change. We will also ensure our workforces can confidently manage this change.

A shift to cloud-based platforms and the increasing accessibility of artificial intelligence is shaping how organisations drive capacity. This also has the potential to reduce the administrative burden on healthcare workers so they can focus on care.

Achieving strong digital health outcomes for our workforce will be a significant, complex and multi-year proposition for government and the public health system.

It requires us to invest in digital, data, and technology solutions – and our people.

This will ensure that we modernise employment arrangements and use digital channels to deliver new care models and ways of working as they emerge.

## Harnessing digital and data solutions for the future

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**'Robotics, biometrics etc. are talked about, but not yet put all together.'**

*Participant, Aged Care workshop, 2022*

Victorian health workforce data exists across numerous organisations and systems with different reporting standards and cadences.

This means that there are significant challenges for data-led sector workforce planning and understanding workforce supply and demand.

We will work with the Commonwealth and other jurisdictions to improve workforce data capture, integration, sharing and analytics to advance state and national health workforce planning capabilities.

This will give us a greater understanding of workforce supply challenges and where investment in other capabilities, such as technology, can augment workforce capacity.



## Using technology to enhance care

As we build, expand and upgrade Victoria's health infrastructure to meet evolving community needs, we also need to ensure we use the latest technologies to augment workforce capacity in innovative ways.

This was a key priority for the construction of the \$630 million Bendigo Hospital, which is now one of the most technologically advanced hospitals in Australia, featuring several innovations that ensure clinicians can deliver world-class care.

Digital medical records ensure patient health information is not stored in five different systems, but in one unified, safe and secure data bank accessible to clinicians in and outside of the hospital.

This system is complemented by a sophisticated patient entertainment unit, so that patients can view their health information and results at the bedside with their doctor.

The hospital also incorporates 16 different telehealth services that provide specialist consultations to patients living across the Loddon Mallee region.

Telehealth services expand the walls of the hospital to remote and rural hospitals – providing clinical conferencing and training.

Real-time location technology ensures nurses and clinicians can find medical equipment easily and efficiently, while automated guided vehicles transport linen and food via wireless technology.

Complete with the right foundations and information architecture, Bendigo Hospital has the technological capabilities to continue to innovate for the next 20 years. The Bendigo Hospital construction is a brilliant example of how technology, design and community consultation can together create a hospital ready for growth, now and into the future.

## Action areas

The following activities will be delivered in the short-term, from 2024 to 2026.

2024

→ 2026

**11. Share opportunities for innovative technology to augment workforce capacity (such as robotics and artificial intelligence).**

Identify and share leading practice use of innovative technologies in the health sector

**12. Improve public sector workforce data through an uplift in data capture, sharing, integration and analytics to enable data-led workforce planning and policy.**

Complete a proof of concept for a comprehensive workforce data solution

Advance common principles for data capture, sharing, integration and analytics of health workforce data

Utilise public sector standards to improve quality and timeliness of health sector workforce data

### Medium-term reforms

- Leverage digital capability to enable employment arrangements that promote workforce quality, flexibility and sustainability.
- Enhance workforce capacity by using innovative technologies to manage repetitive manual tasks.
- Work with the tertiary education sector to determine opportunities to increase graduate knowledge of digital health.

### Long-term reforms

- Foster new technologies, such as artificial intelligence and robotics.
- Leverage data as a key strategic asset to identify and define emerging issues and drive informed, data-backed regulatory decisions.
- Advocate for and enable inter-jurisdictional cooperation to create common standards for the capture, storage, integration, and sharing of data.
- Upskill the healthcare workforce for new or evolving digital systems and processes as required.

# Working together to deliver Victoria's future healthcare workforce

Strong partnerships and sector-wide action are central to successful delivery and achieving a stronger healthcare workforce capable of serving all Victorians.

## Guiding principles

The following principles will ensure we achieve our future healthcare workforce aspirations.

- 1** We will be innovative and bold in effecting change across workforce policies, programs, funding, systems and technology to achieve the capacity and capabilities we need.
- 2** We will collaborate across the sector, including with employers, education and training providers, and industrial bodies as we design and deliver contemporary roles and models of care to build the workforce of the future.
- 3** We will focus on improving the employee experience as we design solutions to ensure we can attract and retain a sustainable and engaged workforce.

## Timeframes

The strategy will be delivered over three timeframes with an iterative approach.

### 2024 Short term: 0–2 years

Some initiatives will be implemented in the short term to immediately strengthen Victoria's health workforce for current needs, while laying the foundations for longer-term reform.

### 2026 Medium term: 3–5 years

Further initiatives will be delivered, with an emphasis on programs that have significant cross-sector involvement, strategic investment and regulatory or legislative reform.

### 2028

### 2029 Long term: 6–10 years

Initiatives that require significant consultation, investment and change management will be prioritised over the long term.

### 2031

### 2032

### 2033

## Governance and reporting

Governance of implementation will include:

- quarterly reporting to an internal committee
- annual reporting to the Victorian Minister for Health

Implementation will be overseen by a project control group for advice and risk management.

Where required, short-term advisory groups will be established to provide input on technical or cross-cutting initiatives.

Progress reports will be published on the Department of Health's website, with a final report to be delivered after the strategy's 10-year timeframe.

# Appendix 1: Stakeholder engagement and acknowledgments

## Development of the strategy

The department hosted multiple consultation activities with the Victorian health workforce between August and October 2022. These took the form of forums, workshops, targeted consultations, written submissions and an online survey.

More than 500 participants from over 200 organisations engaged in direct consultations, while a further 3,987 participants completed an online survey. In addition, the department received 59 written submissions.

Participants included individuals and organisations from clinical and non-clinical backgrounds, including healthcare workers, professional bodies, health services and industrial bodies.

In February and March 2023, we held further consultations with over 890 participants across the health system to confirm the strategy's key themes and focus areas.

### August – October 2022

consulted a wide range of stakeholders via face to face consultations, survey and written submissions

**200+**  
organisations

**4800+**  
participants

### February – April 2023

targeted consultations to test strategy focus areas and priorities

**890**  
participants

**Total ~5,700 consultation points**

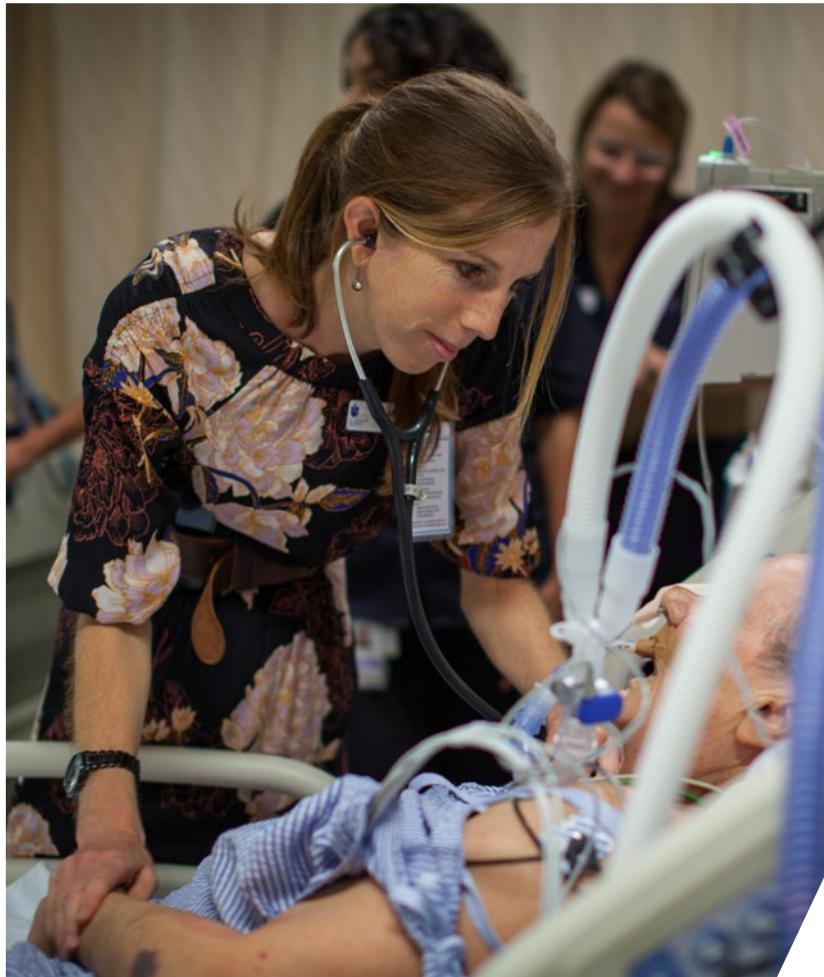
## Acknowledgments

We would like to express our gratitude to all those who contributed to the development of Victoria's health workforce strategy.

We extend our special thanks to the Health Workforce Council, whose vision, commitment and guidance were pivotal.

We would also like to express our appreciation to the following groups for their invaluable contributions to the strategy by participating in our stakeholder consultations:

- Victoria's public health services
- community health services
- mental health services
- public and private ageing, aged, and home care services
- primary care services
- major private hospitals
- health sector industrial bodies and unions
- national health practitioner boards
- health sector peak bodies and professional associations
- specialist medical colleges
- health education providers
- nursing, medical, and allied health students.



## Appendix 2: Action plan 2024–2026

The first step of the Victorian Government's 10-year strategy to build a modern, sustainable and engaged healthcare workforce.

*The Victorian health workforce strategy: action plan* outlines how we will deliver on the Victorian Government's ambition to create a modern, sustainable and engaged healthcare workforce.

It sets out the actions we are taking in the first phase of implementation.

Implementation will be supported by an annual review and the development of a refreshed action plan every 2 years.

This will ensure we are consistently evaluating progress and outcomes and identifying and planning for emerging priorities.

# Increase supply of priority roles

## Action areas

The following activities will be delivered in the short term, from 2024–2026.

2024

→ 2026

### **1. Attract and retain healthcare workers in professions with known, or projected workforce supply challenges**

Collaborate with the Commonwealth on modernisation of health programs and funding models

Increase inclusion and diversity of under-represented groups

Establish a suite of career planning supports for prospective students and jobseekers

### **2. Develop targeted workforce strategies for priority roles**

Partner across Government, service providers, education providers and accreditation and regulatory bodies to develop new and innovative approaches to sustainable workforce supply

Develop targeted approaches to enable workers in priority roles to operate at the top of their scope, including alternate workforce models and supplementary roles

### **3. Improve career pathways to support more opportunities for new entrants, re-entrants and role transitions.**

Work with the tertiary sector to scope potential for Recognition of Prior Learning (RPL) that will enable reskilling and co-qualification

Investigate opportunities to better support re-entry into critical roles

Invest in entry level roles and pathways into health careers

## Strengthen rural and regional workforces

2024

→ 2026

### **4. Foster local talent pipelines in rural and regional locations by growing local training pathways.**

Identify, share and expand successful models of local training and employment pathways

Enhance availability of rural and regional clinical placements and rotations

Improve availability of continuing professional development training

Improve capacity and capability to deliver specialised and advanced clinical training

### **5. Review and refresh incentives and enablers to attract and retain professionals in rural and regional settings.**

Partner across government to explore opportunities to improve accommodation availability.

Review and refresh existing recruitment and retention incentive programs.

Promote best practice community connection and integration programs for healthcare workers new to rural and regional areas

### **6. Explore innovative funding and employment models that support flexible careers and improve access to care.**

Partner with the sector to pilot employment models that increase serviceability to rural and regional locations such as single employer and hub and spoke.

Review opportunities to increase flexibility in funding models to improve service delivery and employment arrangements.

# Improve employee experience

2024

→ 2026

## **7. Develop a state-wide value proposition for the healthcare workforce**

Provide resources and training to prevent and reduce incidents of occupational violence and aggression

Establish a health leadership framework, self-assessment tool and development pathways

Co-design an approach to refreshing rest and recovery spaces

Identify opportunities to improve flexibility and other benefits through enterprise agreement negotiations

Embed consistent approach to role redesign to reduce workload impact

## **8. Review the public sector healthcare workforce annually to continuously improve**

Implement annual review of public health workforce data and develop associated plans for continuous improvement of the health sector's employee value propositions.

## Build future roles and capabilities

2024

→ 2026

### **9. Develop targeted workforce strategies to pilot and implement new and expanded roles that support contemporary models of care**

Develop a consistent and scalable process to formalise new and expanded roles

Establish career pathways and progression models for new and expanded roles

Work with education providers to develop new or updated qualifications and pathways to new and expanded roles

Develop baseline scope of practice, qualification and credentialling requirements for each innovative role

### **10. Establish employment models that maximise the development and transferability of skills across multiple settings**

Establish innovative employment models that maximise the development and transferability of skills across multiple settings and professions.

Partner with Ahpra and professional bodies to expand skills and scopes of practice through interjurisdictional advocacy.

## Leverage digital, data and technology

2024

→ 2026

**11. Share opportunities for innovative technology to augment workforce capacity (such as robotics and artificial intelligence).**

Identify and share leading practice use of innovative technologies in the health sector

**12. Improve public sector workforce data through an uplift in data capture, sharing, integration and analytics to enable data-led workforce planning and policy.**

Complete a proof of concept for a comprehensive workforce data solution

Advance common principles for data capture, sharing, integration and analytics of health workforce data

Utilise public sector standards to improve quality and timeliness of health sector workforce data

## Appendix 3: Long-term strategy outcomes

### Increase supply of priority roles

Increase supply of priority roles and close projected workforce shortage gaps.

Increase retention of health workers in priority roles by 20% at 10 years post qualification.

Increase Aboriginal and Torres Strait Islander representation equal to the Victorian population.

Increase university places, clinical supervisory capacity, and clinical placements through a more integrated education pipeline.

### Strengthen rural and regional workforces

Improve workforce supply and distribution for equitable service delivery to rural and regional locations.

Increase clinical placements and supervision capacity in rural and regional locations by 20% for increased local talent pipelines.

Develop innovative funding and employment models that enable increased service delivery to rural and regional locations.

## Improve employee experience

Reduce the public health service staff separation rate by 10%.

Reduce public health service WorkSafe claims by 10%.

Improve public health sector employee sentiment by 20% in psychological and physical safety, wellbeing, workload, learning and development, and leadership.

## Build future roles and capabilities

Establish 9 future roles to create additional capacity in the healthcare system, support new models of care, and improve pathways.

Develop innovative education models for career agility including re-skilling pathways across professions.

Increase supply of 20 standardised advanced roles to improve the ability of existing roles to operate to the top of scope.

Increase cross-skilling programs for integrated and person-centred transdisciplinary care.

## Leverage digital, data and technology

Enable modern digitally enabled workplaces supported with guidance on digital best practice.

Increase data-led public-sector workforce planning and policy for Victoria, and contribute to improved national healthcare workforce planning.

