## South Western Sydney Local Health District

# Education and Training Strategic Plan 2015 - 2021

Leading care, healthier communities















#### **South Western Sydney Local Health District**

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#### **Foreword**

Having a workforce that has access to good education and training is an integral part of delivering high-quality health care. Education and training opportunities not only promote excellence in service provision but also help attract and retain a sustainable health workforce and develop future leaders.

The South Western Sydney Local Health District (SWSLHD) Education and Training Strategic Plan for 2015-2021 has been developed to help achieve the District's vision of "Leading care, healthier communities."

The Plan has been developed following extensive consultation with staff, community and consumer representatives and partner organisations to develop and deliver education and training that will support staff to continue to improve skills enabling them to provide excellent patient-centred care.

South Western Sydney Local Health District has a proud history in health workforce education and training in NSW, through the Centre for Education and Workforce Development. Ongoing improvement to the education and training system, facilitated through the Plan, will positively impact more than 11,000 clinical and non-clinical staff working across the District.

A framework for the development and delivery of education and training in the District has been developed based on an understanding of the key requirements and directions of the organisation and the CORE values of the NSW Health system.

The framework identifies 16 different actions across four defined framework areas, including:

- A workforce with the knowledge and skills to deliver on organisational priorities now and in the future
- Education and training is of a high quality, innovative and accessible to all staff
- An organisation that is supportive of and responsive to the delivery of education and training
- Partnerships strengthen the skills and capacity of the health workforce

The District will work collaboratively with partners in implementing the strategic plan, and responsibility will be shared across the organisation by staff, managers and the District executive.

The Plan is an ambitious program that will encourage and facilitate ongoing and excellent training, education and research to staff working across all clinical services of the District.

The Plan represents the work of a lot of people and we would like to thank staff who have contributed. We look forward to working with you to implement the Education and Training Strategic Plan 2015-2021.

Professor Phillip Harris AM

Chair

South Western Sydney Local Health District Board

Amanda Larkin

Chief Executive

South Western Sydney Local Health District



## **Contents**

#### Foreword

1.	Intro	duction	1
2.	Policy	Context	2
	2.1	National Policy	2
	2.2	State Policy	2
	2.3	Local Policy	4
3.	Visior	n, Values and Principles	7
	3.1	Principles	7
	3.2	SWSLHD Education and Training Framework	8
4.	The P	lanning Process	9
5.	Snaps	shot of the South Western Sydney Local Health District	10
	5.1	Geography	10
	5.2	Demography and Population Health Indicators	11
	5.3	Priority Populations	12
	5.4	Workforce	12
	5.5	Unpaid Workforce	13
	5.6	Contractors and Contingent Workers	13
6.	Healt	h Education and Training Institute	14
	6.1	Mandatory Training	15
	6.2	HETI Online	15
7.	Educa	ation and Training in SWSLHD	15
	7.1	Strengths of Education and Training in SWSLHD	16
	7.2	Governance and Role Definitions	17
	7.3	South Western Sydney Centre for Education and Workforce Development	17
	7.4	SWSLHD Education and Training Infrastructure	18
	7.5	Traineeships, Apprenticeships and Cadetships	19
	7.6	Scholarship and Incentive Programs	20
	7.7	Medical and Dental Education and Training	21
	7.8	Nursing and Midwifery Education and Training	23
	7.9	Allied Health Education and Training	25





	7.10 Non-Clinical Staff	26
	7.11 Partners	27
8.	Issues	29
	Implementation and Monitoring	
10.	Action Plan	34
	pendix 1 Education and Training Infrastructure in SWSLHD (2014)	
Acro	onvms	48



#### 1. Introduction

The health education and training environment within New South Wales is highly complex and involves an interplay between the education and health sectors, along a continuum which ranges from school aged students to those who are highly specialised and undertaking higher education at the post graduate level. NSW Health Districts and the Health Education and Training Institute play a core role in supporting undergraduates through clinical placement and providing on the job training opportunities for the clinical and non-clinical workforce. South Western Sydney Local Health District (SWSLHD) works collaboratively with education providers (primarily universities), speciality colleges and a range of other organisations to ensure that the health workforce has the knowledge, skills and experience required to provide high quality, patient centred care.

SWSLHD has for many years been a leader in the development and delivery of education and training to the health workforce. The District's education and training system has recognised the need to go beyond the development and enhancement of clinical skills to provide all staff with opportunities to undertake relevant professional skills development and expand their careers through opportunities such as leadership, management and research.

The SWSLHD Education and Training Strategic Plan has been developed under the direction of the Research and Teaching Sub-Committee of the SWSLHD Board. The Board recognised the need for this plan to provide strategic direction on how education and training can assist the Local Health District (LHD) to achieve the vision of "Leading care, healthier communities" in the period 2015 - 2021. Further, development of a SWSLHD Education and Training Strategic Plan articulates a strategic direction for teaching which is linked to the broader development of services within the District.

Extensive consultation and research has been undertaken to develop the SWSLHD Education and Training Strategic Plan, involving staff, community representatives and partner organisations. The information gathered has been used to develop a framework for the delivery of education and training in SWSLHD and to describe actions which, when completed, will significantly contribute to enhanced patient care and staff satisfaction. Monitoring and review of the plan will be required to ensure the plan is implemented and remains relevant as circumstances change.





#### 2. Policy Context

#### 2.1 National Policy

#### 2.1.1 Australian Health Reform

In 2011, the Council of Australian Governments (COAG) signed the National Health Reform Agreement and introduced Activity Based Funding (ABF) as a mechanism to fund hospitals. The Independent Hospital Pricing Authority<sup>1</sup> (IHPA) is developing a plan for transitioning teaching, training and research into an ABF model by June 2018. Standard definitions and a classification tool to underpin pricing arrangements are being developed. Until alternative funding arrangements have been announced, health service education and training will continue to be provided by the NSW Government and individual grants.

#### 2.1.2 National Safety and Quality Health Service Standards

The National Safety and Quality Health Service Standards (NSQHS) have been developed by the Australian Commission on Safety and Quality in Healthcare. Education and training have been identified within many of the Standards as critical to ensuring the overall quality and safety of the health system, for patients and staff.

## 2.1.3 National Health Workforce Innovation and Reform Strategic Framework for Action 2011 - 2015

The National Health Workforce Innovation and Reform Strategic Framework for Action was developed by the former Health Workforce Australia (HWA) to identify how health and education sectors can work cooperatively to meet Australia's health needs. The Framework identifies five domains revolving around health workforce reform, capacity, planning and policy, and the need for leadership to ensure the sustainability of the sector.

#### 2.2 State Policy

The NSW Government, Ministry of Health and other NSW Health state-wide public health organisations provide policy and planning direction for the entire community, identified populations and specific health conditions or clinical services. The following policies and plans focus on the strategic direction for the entire community and education specifically.

#### 2.2.1 NSW State Plan - NSW 2021: A Plan to Make NSW Number One

The *NSW State Plan* guides the development of infrastructure and services in NSW to 2021. In relation to Health, the plan aims to keep people healthy and out of hospital; and provide world class clinical services with timely access and effective infrastructure. The plan identifies the need for person centred care delivery, improved communication and collaboration.

http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/Content/teaching-training-and-research - 18/08/14



#### 2.2.2 NSW State Health Plan: Towards 2021

The NSW State Health Plan was released in 2014 and aims to meet the goals for health outlined in the NSW 2021 Plan. The plan describes the core values which underpin the provision of health services across NSW - Collaboration, Openness, Respect and Empowerment and aims to ensure 'the right care, in the right place, at the right time.'

The plan identifies three key directions to deliver innovation - Keeping People Healthy, Providing World-Class Clinical Care and Delivering Truly Integrated Care. To make this happen, NSW Health identifies the need for Supporting and Developing our Workforce, Supporting and Harnessing Research and Innovation, Enabling eHealth and Designing and Building Future Focused Infrastructure. Education and training of the workforce are fundamental to these strategies. Specifically the plan identifies the need for innovation (characterised by learning and improvement) and fostering a learning organisation.

#### 2.2.3 NSW Health Corporate Governance and Accountability Compendium

This Compendium makes clear the LHD's responsibilities in relation to training of the workforce. These include assessing the training needs of staff, providing or facilitating access to both mandatory and skills enhancement training, assessing competency and skill and supporting staff undertaking education or training. Further, each LHD is required to ensure compliance with relevant policy and award conditions, to maintain training records and to develop a detailed plan for teaching, linked to the District's Strategic Plan.

#### 2.2.4 NSW Health Education and Training Institute Draft Strategic Plan 2015 - 2017

The NSW Health Education and Training Institute (HETI) has been established to lead the development and implementation of clinical and non-clinical education and training for NSW Health staff. Its vision is "a world class NSW Health workforce supporting excellent patient centred care."

The *draft HETI Strategic Plan* outlines how HETI will achieve this vision, through improving its approach and relationships, delivering high quality, innovative education and training and improving capability and governance.

SWSLHD works closely with HETI to identify education and training priorities, build the evidence base for quality education and deliver quality training and education programs.

#### 2.2.5 NSW Interdisciplinary Clinical Training Networks Strategic Plan 2013 - 2016

The NSW Interdisciplinary Clinical Training Networks (ICTN), primarily funded through Health Workforce Australia were established to enable the local implementation of both the National Simulated Learning Environments initiative and the national Clinical Supervision Support Program.

These networks provide a forum for education and health service providers to work collaboratively to build clinical placement capacity and to foster excellence.

ICTNs are geographically based, with SWSLHD participating in the Sydney ICTN, along with Sydney LHD and the St Vincent's Health Network.



#### 2.2.6 NSW Health Professional Workforce Plan 2012 - 2022

The NSW Health Professionals Workforce Plan identifies that the key issues for the NSW health workforce to 2021 relate to improving health outcomes, impending workforce shortages, geographical distribution of populations in NSW, the affordability of health care and the increasing specialisation of healthcare professionals.

To ensure NSW will have the "right people with the right skills in the right place", there is a need to address multiple aspects of the health system and health workforce. These include developing effective managers and leaders, upskilling the workforce and recognising the value of both generalist and specialist skills.

#### 2.2.7 NSW Health Aboriginal Workforce Strategic Framework 2011 - 2015

Implementation of the NSW Aboriginal Health Workforce Strategic Framework requires SWSLHD to increase the representation of Aboriginal employees to 2.6%, with representation across all health professions. SWSLHD must strengthen partnerships with the education sector, improve career pathways for existing staff, provide leadership and planning in Aboriginal workforce development, provide employment to Aboriginal health graduates and build a health workforce capable of closing the gap in health outcomes between Aboriginal and non-Aboriginal people.

#### 2.2.8 NSW Ministry of Health Framework for Engaging, Supporting and Managing Volunteers

The NSW Ministry of Health Framework for Engaging, Supporting and Managing Volunteers describes the way in which the Ministry of Health will engage, support and manage volunteers in the health system. It also provides guidelines for Local Health Districts to ensure a consistent approach to the effective engagement, support and management of volunteers. The training requirements of volunteers and staff working with volunteers are identified.

#### 2.2.9 A Plan for Growing Sydney

In 2014 the NSW Government released *A Plan for Growing Sydney* which describes the government's goal for Sydney as being "a strong global city, a great place to live."

Identified within this plan are many regional initiatives around four core goals related to the economy, housing, communities and the environment. In relation to health education and training in South Western Sydney, the NSW government has committed to plan for the land use and infrastructure requirements of significant metropolitan health and education precincts at Liverpool and Campbelltown-Macarthur.

#### 2.3 Local Policy

#### 2.3.1 Service Agreement between Secretary NSW Health and SWSLHD

The annual Service Agreement between the Secretary NSW Health and SWSLHD documents the strategic priorities for the District in any given year. Within the Agreement, teaching, training and research are identified as key services which the LHD provides and numerous specific actions are identified with which the District must comply. The Agreement is negotiated annually.



#### 2.3.2 SWSLHD Strategic Priorities in Health Care Delivery to 2021

This plan provides the overall plan for healthcare services development for the District to 2021. It describes how SWSLHD will implement services consistent with the CORE values of NSW Health and articulates a vision for SWSLHD in 2021 of "Leading care, healthier communities." A mission statement and set of principles detail how this vision will be achieved.

Key elements include delivering high quality health care, evidence based practice, patient centred care, equity, learning and reflection, continuous quality improvement, innovation, sustainability, excellence and accountability, valuing and supporting the workforce, leadership and teamwork.

Inherent in achieving this is providing a supportive environment for the delivery and uptake of education and training, across all facilities, clinical and non-clinical areas.

#### 2.3.3 SWSLHD Corporate Plan 2013 - 2017

The SWSLHD Corporate Plan was developed concurrently with the Strategic Priorities in Health Care Delivery to 2021 plan and articulates the same values, vision, mission and principles. This plan identifies eight areas for corporate action - Providing High Quality Health Services, Community Partnerships, Seamless Networks, Developing our Staff, Research and Innovation, Enhancing Assets and Resources, Supporting Business and Efficiency and Sustainability.

'Developing our Staff' is the most relevant of these corporate action areas in the education and teaching context. However the need to enhance the capacity and capability of all staff is evident in the way in which staff skills development is identified as essential to achieving each of the objectives of the SWSLHD Corporate Plan.

#### 2.3.4 SWSLHD Workforce Strategic Plan 2014 - 2021

The SWSLHD Workforce Strategic Plan was developed to enable SWSLHD to align its workforce with the health needs of the community, both now and in the future. It identifies a number of challenges which the LHD will face, consistent with those identified at a state and national level. These include the need to attract and retain quality staff from a limited labour pool, matching personal professional preferences with community needs, changing patterns of demography and disease and technological change.

Four workforce strategic priority areas are identified to guide action into the future. These are, Meeting Future Health Needs, Building a Sustainable and Capable Workforce, Becoming an Employer of Choice and Developing Future Leaders - Clinical and Corporate.

#### 2.3.5 SWSLHD Aboriginal Workforce Implementation Plan

This Action Plan identifies at a local level how SWSLHD will implement the *NSW Aboriginal Workforce Strategic Framework*. The plan identifies key actions to support education and training for Aboriginal staff, such as improving access to leadership training, expanding participation in existing training opportunities (including delivering targeted face to face programs) and strengthening programs such as vocational education, traineeships and cadetships.



#### 2.3.6 Consumer and Community Participation Framework 2012

The SWSLHD Consumer and Community Participation (CCP) Framework 2012 was developed collaboratively between the community, consumers and the LHD and builds upon a decade of active community engagement. The Framework documents the formal structure and processes by which health staff can facilitate meaningful participation by consumers and community representatives in

SWSLHD planning, service delivery and evaluation.

The Framework identifies that participants will be required to undertake a specific Community Representative orientation, facility orientation and mandatory training. Additional training may be required or offered through access to the District's formal training program, or support to attend conferences, where this



is identified as appropriate. The Framework also identifies a vital role for consumer and community representatives in providing staff training to build the capacity of staff in community engagement and to provide direct and unique insight into community and consumer experiences with health care.

#### 2.3.7 Research Strategy for South Western Sydney Local Health District 2012 - 2021

This Strategy describes seven key directions for health research in SWSLHD. Increasing the capacity of staff to undertake research and incorporating research into practice through effective education and training is integrated across key directions such as building research capability, building capacity to undertake health research and increasing community interest, knowledge and participation.

#### 2.3.8 SWSLHD Information and Communications Technology Strategic Plan 2014

The SWSLHD Information and Communications Technology (ICT) Strategic Plan aims to ensure that information communications and technology services are leaders in the provision of support for healthcare service delivery.

Key actions identified in this plan relate to supporting the shifting technology needs of the healthcare workforce and enabling innovative approaches to facilitate access to and connectivity with technology. Implementation of these actions will assist SWSLHD to deliver on the range of priorities identified in the *Strategic Healthcare Services Plan* and the *SWSLHD Corporate Plan*, including improving access to and functionality of education and training initiatives.



#### 3. Vision, Values and Principles

The SWSLHD vision is Leading care, healthier communities.

Implementation of the SWSLHD Education and Training Plan will contribute to the achievement of this vision, consistent with the CORE values of Collaboration, Openness, Respect and Empowerment.

#### 3.1 Principles

The following principles have been developed based on consideration of the strategic priorities of the District, the CORE values and issues identified throughout the planning process.

- 1. **Consistent with the overall strategic directions of SWSLHD -** built around the framework of the SWSLHD vision, mission, values and principles
- Nationally recognised for the quality of teaching, training and education
  opportunities provided, the quality of facilities and the use of current evidence in
  teaching
- 3. **Consumer centred** involving patients, carers and the community in developing, implementing and evaluating training to ensure health services are provided in the caring manner expected by the public
- 4. **Developing staff to meet current and future demands** identifying training needs and matching staff skills to address changing community and population health issues, patient profiles, models of care and operating environments
- Supportive of those we are training, of staff providing training and our
  education partners, whilst acknowledging that staff are jointly responsible for
  their ongoing education, training and professional development
- Equitable reducing barriers to access programs for staff and vocational/undergraduate students and addressing the needs of clinical and nonclinical staff equitably
- 7. **Interdisciplinary** providing opportunities for collaboration and innovation
- 8. **Inspiring** creating leaders of our organisation and the broader health industry for the future
- 9. **Encourages enquiry** by creating interest in research, evaluation and building the evidence base
- 10. Flexible in relation to when, where and how training is provided
- 11. **Rigorously evaluated** evidenced by behavioural change in the workplace and formal, structured evaluation
- 12. **Sustainable** by creating change from within and using existing resources where possible.



#### 3.2 SWSLHD Education and Training Framework

The SWSLHD Education and Training Framework describes the key components required for a robust, effective and responsive education and training system which is capable of meeting the requirements of the organisation, staff, health service consumers and the broader population. The Framework has been developed around four Framework Areas, as depicted in Figure 3.1.

The Action Plan provided in Section 10 has been structured around these four Framework Areas.

Figure 3.1 SWSLHD Education and Training Framework

A workforce with the knowledge and skills to deliver on organisational priorities now and in the future

- A shared organisational culture and values
- Skilled and knowledgeable staff, with opportunities for further development
- Innovation and the delivery of high quality patient centred care
- Investment in leadership
- Support and development of managers
- Continuous clinical and business improvement

Education and training is of a high quality, innovative and accessible to all staff

- Interdisciplinary learning and training is encouraged
- Broaden access to existing opportunities
- Provide diverse opportunities to respond to individual learning styles and organisational needs

An organisation that is supportive of and responsive to the delivery of education and training

- Continuous review of programs to ensure quality and consistency
- Enhance access through improved information and coordination
- Modernise physical infrastructure
- Utilise information and communication technology

Partnerships strengthen the skills and capacity of the health workforce

- Community, consumers, volunteers
- Education providers
- Other health providers and organisations



#### 4. The Planning Process

Development of an Education and Training Plan for SWSLHD is the responsibility of the Research and Teaching Sub-Committee of the SWSLHD Board. At the request of the Sub-Committee, a Reference Group was established in August 2014 to guide the development of the Education and Training Plan.

Planning occurred in late 2014 and early 2015. Initial data gathering entailed a review of the existing policy environment, with an analysis of all actions that related to education and training (E&T) with which the District was required to or had committed to undertake to 2021. This assisted in the development of the SWSLHD Education and Training Framework (see Figure 3.1).

Extensive consultation was undertaken with staff to identify current E&T infrastructure and services, understand District strengths in E&T and identify issues/opportunities within the current system and potential solutions. The consultation process involved:

- Twenty face to face interviews with key staff nominated by the Reference Group to establish direction and areas for exploration
- Sixteen small group discussions/focus groups with almost 300 clinical and non-clinical staff from across the District
- Informal interviews with staff in niche roles such as risk and complaints management
- A staff survey (electronic and hard copy) completed by 435 staff members across all facilities
- Tailored surveys of facility General Managers, Clinical Directors and graduates of the Graduate Health Management Trainee program
- Discussions with Community and Consumer representatives, facilitated by the Community Participation Manager
- An invitation to external stakeholders, including the Pillar Agencies, Specialist Networks, Universities and local partners such as the SWS Medicare Local, Tharawal Aboriginal Medical Service and Gandangara Land Council Medical Services to participate in the process.
- An opportunity for internal and external stakeholders to comment on the final draft of the Plan.





## 5. Snapshot of the South Western Sydney Local Health District

#### 5.1 Geography

As shown in Figure 5.1, SWSLHD encompasses the Local Government Areas (LGAs) of Bankstown, Fairfield, Liverpool, Campbelltown, Camden, Wollondilly and Wingecarribee.

Figure 5.1 SWSLHD location, boundaries and facilities





#### 5.2 Demography and Population Health Indicators

Significant population growth is occurring across the District, particularly in the South West Growth Centre. Projections estimate that in the twenty five year period 2013 - 2031, the estimated resident population will rise from 904,851<sup>2</sup> to over 1.25 million<sup>3</sup> (see Figure 5.2).

1,400,000 1,000,000 800,000 400,000 200,000 2013 2016 2021 2026 2031

Figure 5.2 South Western Sydney Population Growth 2013 - 2031

Source: Australian Bureau of Statistics Catalogue 3101.1 (2013) and NSW Department Planning and Environment, New South Wales State and Local Government Area Population Projections: 2014 Final

The SWSLHD Strategic & Healthcare Services Plan identifies that new facilities are required to meet the needs of this rapidly growing population.

Some key demographic and health status characteristics of the District are:

- A higher than state average fertility rate and a relatively young population in comparison to NSW, requiring maternity and paediatric services<sup>4</sup>, coupled with rates worse than the state in relation to use of antenatal care, smoking in pregnancy, preterm births and low birth weight
- High levels of socio-economic disadvantage, particularly in Fairfield and Liverpool LGAs
  resulting in higher rates of potentially avoidable deaths and hospitalisations and lower life
  expectancy than those who do not experience socio-economic disadvantage, as well as a high
  demand on public services
- Hospitalisations attributable to high body mass index, stroke, diabetes, falls and asthma at levels worse than the state<sup>5</sup>
- Rates of psychological distress, physical activity, overweight/obesity, mammogram/pap testing and smoking, new cases of lung cancer and deaths from lung cancer that are worse than the NSW State average <sup>6</sup>

<sup>&</sup>lt;sup>2</sup> Australian Bureau of Statistics (ABS) Australian Demographic Statistics, June 2013, Commonwealth of Australia, Cat.No. 3101.0: Canberra, 2013

<sup>&</sup>lt;sup>3</sup> NSW Department Planning and Environment, New South Wales State and Local Government Area Population Projections: 2014 Final

 $<sup>^{</sup>m 4}$  NSW Health Statistics and ABS Census of Population and Housing 2011

<sup>&</sup>lt;sup>5</sup> Centre for Epidemiology and Research, Health Statistics NSW, Sydney: NSW Ministry of Health

<sup>&</sup>lt;sup>6</sup> NSW Adult Population Health Survey (HOIST), Centre for Epidemiology and Evidence, NSW Ministry of Health 2008-2010



 Dementia prevalence is expected to more than double over the next forty years, with Camden, Campbelltown and Liverpool LGAs predicted to be amongst the areas with the highest prevalence<sup>7</sup>

#### **5.3** Priority Populations

SWSLHD has identified a number of priority population groups who experience health disadvantage and for whom additional services are required to address health inequity. The priority populations identified in the SWSLHD Strategic Healthcare Services Plan are:

- Aboriginal and Torres Strait Islander people (referred to as Aboriginal people)
- People with chronic mental illness and their children
- People in contact with the criminal justice system and their families
- People living in rural communities with poorer access to basic health and social infrastructure
- People living in social housing
- People with drug and alcohol issues
- People on low incomes, who are unemployed or have lower educational attainment
- People who are homeless or in insecure housing
- Children in care or from families with child protection issues
- People with a chronic illness and their carers
- Refugees and recently arrived migrants
- People with a disability
- Carers

#### 5.4 Workforce

As at December 2014, SWSLHD employed 11,745 people (equating to 9,373.37 paid Full Time Equivalents). Table 5.1 shows the Workforce Headcount by Classification Grouping.

**Table 5.1 Workforce Headcount by Classification Grouping** 

Classification Groupings	Headcount	% SWSLHD
Nursing	5,808	49.5%
Corporate	1,596	13.6%
Medical	1,463	12.5%
Allied Health	1,307	11.1%
Hotel Services	559	4.8%
Other Prof. and Para Professionals and Support Staff	404	3.4%
Scientific & Technical Clinical Support Staff	344	2.9%
Oral Health Practitioners and Support Workers	119	1.0%
Other Staff	85	0.7%
Maintenance and Trades	60	0.5%
Grand Total	11,745	100.0%

Source: NSW Health Stafflink, Dec 2014

<sup>&</sup>lt;sup>7</sup> http://www.sbs.com.au/news/article/2014/09/04/nsw-dementia-sufferers-set-double accessed 29/09/14



A relatively high percentage of the SWSLHD workforce is temporary/casual, 28% (compared to 16% across NSW Health). This presents a challenge in ensuring mandatory training is undertaken and that staff have the capacity to work appropriately in a temporary or casual role.

In 2014, 1,233 staff commenced employment with SWSLHD, with additional casual staff also commencing. New staff are required to complete orientation/induction programs and a suite of mandatory training upon commencement.

#### 5.4.1 Aboriginal Workforce

While the NSW Ministry of Health target for employment of Aboriginal people is 2.6%, Aboriginal people make up approximately 1.7% of the total SWSLHD workforce. Aboriginal employment is often in targeted positions or entry level positions within the mainstream workforce.

#### 5.5 Unpaid Workforce

The unpaid workforce in SWSLHD comprises consumer and community participation members and volunteers.

#### 5.5.1 Consumer and Community Participation Members

There are approximately 120 registered members of Community and Consumer Participation networks within SWSLHD. Consumer and community representatives work within the SWSLHD Consumer and Community Participation Framework 2012. Consumer and Community Participation network members play a formal role in the planning, implementation and evaluation of services and systems through participation on advisory committees, actively undertaking consumer focused projects and raising awareness of consumer needs. In addition, consumers and the community provide advice and feedback to SWSLHD on their experience with services and facilities through mechanisms such as patient surveys, complaints and compliments.

#### **5.5.2** Volunteers

Volunteers play an integral role in supporting service delivery and development and undertake numerous roles across the District. SWSLHD is implementing the NSW Ministry of Health Framework for Engaging, Supporting and Managing Volunteers.

#### 5.6 Contractors and Contingent Workers

SWSLHD engages a variety of contractors and contingent workers across the clinical and non-clinical workforce. Examples include visiting medical officers, agency nursing staff, engineering and maintenance workers and subject matter experts providing specific business and service development advice. Contractors and contingent workers are required to comply with organisational policy and may have mandatory training requirements, depending on their role. SWSLHD also has a legislative obligation to provide training to contractors and other staff, particularly in relation to work health and safety.



#### 6. Health Education and Training Institute

The NSW Health Education and Training Institute (HETI), was formed in response to the identified need to standardise, minimise duplication and improve the overall quality of education and training provided to the health workforce across the State.

The functions of HETI, as described in the HETI Operational Model between Local Health Districts, Specialty Networks and other Public Health Organisations (June 2013) are to:

- Pursue activities in relation to prevocational, vocational and specialist medical training
- Implement Health Workforce Australia programs
- Develop learning resources
- Implement scholarship and cadetship programs

The *HETI Operational Model* describes benefits of HETI for NSW Health as a combined power to rapidly generate new learning materials in response to identified priorities across the State, access to specialised expertise, high quality teaching resources and technology assisted learning, and systems to facilitate evaluation and research. The benefits of HETI are considerable, most especially for those Local Health Districts that have not historically had the same level of investment as SWSLHD in education and training.

For SWSLHD, as a historical leader in the development and delivery of health workforce E&T in NSW, the establishment of HETI has had significant impacts on the way in which SWSLHD E&T services operate, most particularly those of South Western Sydney Centre for Education and Workforce Development (SWSCEWD). Although there is wide recognition of the value of increasing course availability and standardising course content across the state, there have been unforseen impacts on SWSLHD services and systems. These include an increased focus on online learning which may not reflect the learning preferences of staff, emerging priorities of HETI which may differ from the District's priorities and a loss of control in content, delivery modality and course evaluation.





#### 6.1 Mandatory Training

Mandatory training for NSW Health staff underwent a comprehensive review in 2014 by HETI under the direction of the NSW Ministry of Health. This review aimed to rationalise what was mandatory, ensure consistency across the State and to establish a greater transparency of expectations. Overall there has been a reduction in the mandatory training requirements for each staff member, and a reduction in the frequency of training. Ad hoc training programs developed in response to emerging issues have been merged to create broader training programs. Under this new system, the majority of mandatory training is delivered online.

SWSLHD has until mid-2015 to ensure full compliance with mandatory training requirements. Work is currently underway to align individual facility and service policies/processes with the new mandatory training policy. Compliance is monitored and managed at the District Workforce Committee level to support accreditation processes.

Mandatory training identified at the state level is differentiated from the training and assessment requirements that staff need to undertake to perform specific clinical interventions, as defined by clinical streams/services.

#### 6.2 HETI Online

All Health Districts and Specialty Networks within NSW were transitioned to the *HETI Online* Learning Management System in 2014. *HETI Online* has superseded TotalLMS, which was previously used in SWSLHD as the Learning Management System. *HETI Online* provides access to all HETI endorsed training courses and SWSLHD online and face to face training. It enables managers and staff to view and update education and training records. The implementation of *HETI Online* across NSW Health is anticipated to resolve many issues identified in the management and reporting of training records, particularly compliance with the NSQHS Standards. However, work is ongoing to enable students, contingent workers, contractors, consumer and community participation representatives and volunteers to have access to *HETI Online* training programs.





#### 7. Education and Training in SWSLHD

This section provides a brief summary of the SWSLHD's strengths in education and training and provides information on key infrastructure, systems, programs and initiatives.

#### 7.1 Strengths of Education and Training in SWSLHD

Staff identified that SWSLHD has a strong and long-term reputation for designing and delivering a comprehensive range of high quality E&T. The South Western Sydney Centre for Education and Workforce Development (SWSCEWD) is valued by staff.

The most common responses to the question "What do you think SWSLHD does well in relation to education and training?" were:

- Education and training is recognised as a critical component in delivering quality, patient-centred care and in being an employer of choice in South Western Sydney the District's role in supporting and championing E&T for both clinical and non-clinical staff was applauded. A range of programs were cited including vocational programs, tertiary education scholarships, study leave and support to attend conferences. The District's commitment to Closing the Gap through a comprehensive approach of implementing *Respecting the Difference* was acknowledged, as was the innovative Graduate Health Management Program.
- **Committed staff** who pursue E&T opportunities and professional development both independently and with the support of the District, and who are passionate about teaching other staff, students and junior staff to increase the capability and expertise within disciplines, services and facilities.
- Offering a diversity of courses Through SWSCEWD alone, over 260 different courses are
  offered in either online, blended and or face to face formats. These range from introductory
  and information sharing courses through to nationally recognised programs offering formal
  qualifications. A multitude of other E&T is offered throughout the District through facilities,
  departments and streams, such as Grand Rounds and in-services. Mandatory training is
  centrally provided, monitored and reported.
- **Providing high quality facilities** It was recognised that the District has state of the art facilities for E&T at the Ngara Education Centre, the Thomas and Rachel Moore Education Centre and Clinical Skills and Simulation Centre in Liverpool Hospital. More information on available facilities is provided at Appendix 1.
- Relationships with education providers and research institutions The presence of strong relationships between the District and education providers in teaching and training the future health workforce were well recognised. Further, the significant advancements in research capacity and capability in the District was considered a great strength, through collaboration between the LHD and locally based research institutions, including the Ingham Institute for Applied Medical Research, various academic units and other bodies such as the Centre for Health Equity Training and Research and the Centre for Applied Nursing Research. These relationships were acknowledged for their role in attracting and retaining staff.



#### 7.2 Governance and Role Definitions

Education and training within SWSLHD does not have a single formal governance structure. Rather, E&T is determined, developed, resourced, implemented and monitored by various internal and external bodies. This creates a highly complex and inter-related environment, with multiple reporting lines. Internally, both the District Workforce Committee and Research and Teaching Sub-Committee of the SWSLHD Board are responsible for management and reporting roles across multiple sites and disciplines. These committees are supported by discipline, stream and facility specific structures. The SWSCEWD provides some coordination of organisation wide training and professional development. Other bodies which regulate education and training include the NSW Ministry of Health, the Australian Health Practitioners Regulation Agency (AHPRA), HETI, speciality colleges and universities.

Education and training infrastructure is managed differently at different sites, and may be jointly managed between facilities, the District office and education providers.

The following sections outline how E&T is managed at a corporate level and within individual disciplines.

#### 7.3 South Western Sydney Centre for Education and Workforce Development

The SWSCEWD was established to deliver education and training to staff across SWSLHD. SWSCEWD is staffed by both Nurse Educators Workforce Educators, with varying specialty skills and experience, however, as a result of historical factors clinical educators predominantly nursing focussed. In 2014, SWSCEWD delivered different courses to staff in six different "pathways" - core skills, governance, education and research, leadership and management, support services and clinical skills. These courses included online and face to



face courses, delivered in a range of settings including simulation based education.

A preliminary review of SWSCEWD programs conducted with SWSCEWD staff in 2014 determined that the previous "pathways" needed to be revised and that education and training should be delivered across six professional development categories in order to ensure the current and future SWSLHD workforce had the skills to meet existing and projected demand (Figure 7.1).





**Figure 7.1 SWSCEWD Professional Development Categories** 

#### 7.3.1 Nationally Recognised Training

SWSCEWD is a major delivery site for Nationally Recognised Training (NRT) under the auspices of the NSW Health Registered Training Organisation (RTO). It is able to award full and part qualifications ranging from Statements of Attainment to the Graduate Diploma levels, for both clinical and non-clinical courses.

Clinical programs are well regarded and have a high annual number of completions. Non-clinical courses include the Diploma of Management, Certificate IV in Frontline Management, Manage People Performance and Interpret and Apply Medical Terminology. Completion data for the non-clinical courses declined-between 2012 and 2014. Courses delivered by SWSCEWD change regularly, subject to organisational and staff needs

#### 7.4 SWSLHD Education and Training Infrastructure

Education and training facilities available to SWSLHD staff are recognised for their high quality and innovation, most particularly the Ngara Education Centre and the Clinical Skills and Simulation Centre at Liverpool Hospital. The redevelopment of Campbelltown Hospital will also incorporate a state of the art education facility. A summary of the current facilities available across SWSLHD is provided in Appendix 1.

#### 7.4.1 Ngara Education Centre

The Ngara Education Centre, primarily funded by Health Workforce Australia, with additional contributions from SWSLHD, the University of NSW Australia (UNSW) and University of Western Sydney (UWS) opened in 2014. The Centre has been purpose designed to support the provision of E&T in SWSLHD. It includes a simulation centre with two high-fidelity simulation rooms, two fully equipped four bed ward areas with a bathroom, clean and dirty utility rooms, and a debrief room.



High fidelity mannequins are used in addition to lower fidelity resources. The Centre provides two conference rooms, three tutorial rooms, a library, student common room facilities and office space for SWSCEWD staff. The Centre has fixed and portable video-conferencing capabilities, smart boards in each of the teaching rooms and is Wi-Fi enabled.

#### 7.4.2 Thomas and Rachel Moore Education Centre, Liverpool Hospital

The Thomas and Rachel Moore Education Centre (T&RMEC), located at Liverpool Hospital, is a major centre for E&T delivery in the District, given its high capacity. T&RMEC provides a 270 seat auditorium, three conference rooms, six seminar rooms (including a computer room) and two tutorial rooms.

#### 7.4.3 Clinical Skills and Simulation Centre

The Ingham Institute for Applied Medical Research's Clinical Skills and Simulation Centre (CSSC) is collocated with the T&RMEC at Liverpool Hospital. The CSSC offers five simulation spaces controlled by a single, multi-capacity control room. Facilities include two multipurpose simulation spaces which can be configured as an operating theatre (with anaesthetic and scrub simulation included), or as a resuscitation bay, eight simulated outpatient rooms, two general skills training laboratories and an anatomage digital dissection table. The CSSC has broadcast capacity and four networked viewing/debriefing spaces to allow for remote and small group learning. High fidelity mannequins are used in simulation E&T, in addition to numerous lower fidelity resources. This facility has also been funded in part by UNSW.

#### 7.4.4 Campbelltown Hospital Redevelopment

The Campbelltown Hospital redevelopment proposes a new state of the art E&T facility, developed in partnership with UWS. This will be a space for interdisciplinary teaching, learning and research. It will be designed to meet the needs of the broad health workforce. The proposal incorporates teaching spaces, library facilities, laboratories and simulation capabilities, with associated support infrastructure, including technology capable of supporting eHealth and teleconferencing.

#### 7.4.5 CLIN Library Network

Libraries across the CLIN Network provide education, training and support to staff and students through providing access to written and audio visual material, equipment and online resources. Librarians provide training to improve research and documentation skills. However, the training delivered across the District is variable, subject to local resourcing and capacity.

Whilst the libraries and access to online literature have historically been included in facility orientation programs this is now variable across the District as is the availability of library information at facility orientation.

#### 7.5 Traineeships, Apprenticeships and Cadetships

SWSLHD provides a range of traineeships, apprenticeships and cadetships to members of the local community. This builds local employment, particularly for people from identified priority populations and facilitates strengthening of the health workforce. Opportunities include:



- Aboriginal Traineeships to undertake either a Certificate III in Health Services Assistance, a
   Certificate III in Health Administration or a Certificate II in Health Support Services
- Aboriginal Cadetships to undertake Registered Nursing or Allied Health qualifications
- Trade apprenticeships.

#### 7.6 Scholarship and Incentive Programs

A number of unique opportunities for professional development are available within SWSLHD.

#### 7.6.1 Graduate Health Service Management Program

SWSLHD provides the innovative and well respected Graduate Health Management Program (GHMP) in partnership with the University of Tasmania (UTAS). This scholarship program involves a competitive application process, with a maximum annual intake of five trainees per year. Positions may be targeted to particular areas of need, such as financial management or quality and safety.

The two year program requires successful completion of a Masters in Health Service Management and a series of practical management placements, with graduates placed in operational management roles. The SWSLHD executive and senior managers actively participate in this program and provide ongoing support to participants. Participants have access to Learning Sets presented by local and external health service experts; Master Classes on curriculum areas and formal mentoring programs with Senior Managers.

#### 7.6.2 Masters in Health Services Management Scholarship

SWSLHD supports up to ten staff per year to undertake the UTAS Masters in Health Service Management course through a partial scholarship. This is a competitive process open to all staff. Staff in receipt of a scholarship are required to undertake a workplace project which will benefit the District. At present there is no centralised register of scholarship recipients, or formal processes in place to capture and utilise the knowledge and skills of these staff for the benefit of the District.

#### 7.6.3 Other Scholarships

Numerous other scholarship programs are available to staff of SWSLHD, subject to a range of eligibility criteria. Scholarship programs include:

- Clinical Excellence Commission Clinical Leadership Program
- Australian College of Nursing Clinical programs
- the Public Service Commission sponsored programs, including Public Sector Management and Executive Development
- Clinical care scholarships through NSW Ministry of Health and the Agency for Clinical Innovation
- Nursing and Midwifery Scholarships through the Office of the Chief Nurse
- Clinical scholarships through various universities
- Local, facility based scholarships
- HETI sponsored scholarships.



Staff in receipt of these scholarships receive varying levels and types of support from the District, subject to individual scholarship criteria. Greater coordination or information will promote access to the range of opportunities available.

#### 7.6.4 SWSLHD Leadership Programs

A number of leadership programs have been established in recognition of the need to build clinical and non-clinical leadership capacity in SWSLHD. These programs are usually open to applications from eligible staff. Existing programs which have been developed and delivered internally are fragmented, in that they relate to a particular facility or discipline, rather than building leadership across the organisation. Examples of current initiatives include the Transformational Leadership School and Individual coaching programs.

A SWSLHD Leadership Framework is currently being developed to provide a comprehensive structure to enable the development of leaders from across the organisation. The framework will provide support for both current and future leaders. The District model will introduce a multidisciplinary model, relevant to clinical and non-clinical staff, which will enhance networking and collaboration to support the achievement of the LHD's vision.

#### 7.6.5 Other Initiatives

Many other initiatives have been established across parts of the LHD in response to unique opportunities and needs which have arisen over time. Some initiatives are tied to Award conditions, whilst others are local policy. Although these initiatives are extremely welcome and support training needs, they have the potential to create inequity across the District and between professional groups. Some examples include the education initiative for Allied Health staff to participate in clinical practice development activities and the Liverpool Hospital Nursing and Midwifery staff funded scholarship to attend conferences.

SWSLHD facilities, disciplines and services also provide a range of ongoing E&T opportunities, including:

- Orientation programs
- Grand rounds
- Journal clubs
- Show case days and research/ topic forums.

#### 7.7 Medical and Dental Education and Training

The following sections provide a brief summary of the involvement of SWSLHD in medical and dental education and training.

#### 7.7.1 Medical Undergraduate

SWSLHD is affiliated with UNSW, the UWS and the University of Wollongong in providing undergraduate/pre-registration medical training opportunities.

The South Western Sydney Clinical School (SWSCS) of the UNSW was established in 1990 and is based at Liverpool Hospital. The UNSW has invested significantly in infrastructure within SWSLHD to





ensure high quality education and training of students. In 2014, there were 360 students across six years undertaking placement across all SWSLHD facilities, ranging from part day to full time. Students undertake placements across all SWSLHD hospital facilities.

The School of Medicine (SOM) at the UWS was established in 2008 to provide "opportunities for students in Western Sydney to study medicine and supporting the local community by providing locally trained medical professionals." The Macarthur Clinical School based at Campbelltown Hospital is the inaugural Clinical School of the SOM, with placements also provided at Liverpool, Bankstown-Lidcombe and Camden Hospitals, and Community Health. It is affiliated with other UWS Clinical Schools in Western Sydney and regional NSW. In 2014, Macarthur Clinical School supports around 300 medical students, approximately sixty students per year.

The University of Wollongong (UoW) delivers a Graduate Medical program, in which students may be placed at Bowral and District Hospital in Phase II, to gain experience in a range of medical and surgical specialties. The Hospital also supports students undertaking a twelve month Rural General Practice placement, through ongoing education and access to staff and facilities. The UoW has supported Bowral and District Hospital in the provision of education infrastructure (including a student residential block), and resources for use by both students and staff.

Medical staff and Visiting Medical Officers, provide supervision to students as part of their roles, supported by the Education Provider (EP). Student evaluations of staff providing supervision are generally favourable, although variation in the quality of supervision does exist. Opportunities for medical staff to improve their supervision skills through supervisory training are available through the universities and SWSCEWD. The uptake of this training is variable.

#### 7.7.2 Pre-Vocational Medical Education and Training

Each year, HETI allocates Post Graduate Year 1 (PGY1) doctors to LHDs for ongoing training prior to general registration. The number accepted is reviewed each year.

SWSLHD provides pre-vocational medical E&T consistent with the *Australian Curriculum Framework* for *Junior Doctors* for Post Graduate Years 1 and 2 (PGY1 and PGY2). PGY1 and PGY2 doctors are required to undertake five terms per year across medical, surgical and emergency services. These



doctors are supervised by the Directors of Prevocational Education and Training and also directly by senior medical practitioners. PGY1 and PGY2 doctors have access to a range of opportunities including lectures, tutorials, workshops, journal clubs and reflective practice sessions.

Successful completion of this program is required for entry into specialist training programs.

#### 7.7.3 Vocational Medical Education and Training

Vocational medical education programs take up to six years to complete. Trainees require ongoing supervision by the relevant Directors of Training and specialists. Ongoing assessment is undertaken to ensure trainees have expertise in all the requisite skills within their specialty. Increasingly, skills such as communication and team work are being incorporated into training and assessment processes, in response to increasing awareness of the need to improve clinician skills in these areas.

The number of training places locally should be matched against service needs for each specialty and be matched against national demands.

#### 7.7.4 Dental and Oral Health Education and Training

SWSLHD provides clinical training/placement opportunities for undergraduate and postgraduate dentistry and oral health students from the University of Sydney (USyd). This program is jointly coordinated between, SWSLHD and Sydney Dental Hospital. Students are placed at Fairfield Hospital or in a community dental clinic.

To date, student placements have led to good outcomes including improved recruitment/retention of Sydney Dentistry and Bachelor of Oral Health graduates.

#### 7.7.5 Training, Education and Study Leave

Staff specialists are entitled to Training, Education and Study Leave (TESL) as part of the *Staff Specialists Determination 2010*. TESL incorporates funding and paid leave to participate in E&T opportunities in Australia and internationally. Staff Specialists are required to provide a report to the SWSLHD Chief Executive on return from TESL outlining the benefits of the leave.

#### 7.8 Nursing and Midwifery Education and Training

This section summarises SWSLHD activities in nursing and midwifery education and training.

#### 7.8.1 Pre-employment Vocational Education and Training

SWSCEWD delivers the Vocational Education and Training (VET) in Schools program to approximately 100 students per year. Graduates receive a Certificate III in Health Services Assistance, which qualifies them to work as an Assistant in Nursing. This is consistent with the *Human Services Curriculum Framework* for the Higher School Certificate. This well-recognised and respected program demonstrates evidence of enabling local students to obtain local employment and providing building blocks to a professional health career.

#### 7.8.2 Diploma of Nursing

SWSCEWD has delivered a Diploma of Nursing program through the NSW RTO since 2010. Graduates of the VET in Schools program (described in 7.8.1) are encouraged to enrol and progress



into the Diploma of Nursing program to build career pathways within SWSLHD. Promotion of the program within the District also occurs to strengthen local employment opportunities.

Across SWSLHD and Sydney LHD, the December 2012 and May 2013 intakes of the program enrolled a combined seventy six students, of whom fifty completed the program. Of the fifty students who graduated, a third have been employed within the two health Districts and one quarter have commenced a Bachelor of Nursing degree.

A course evaluation was undertaken by SWSCEWD in 2014. Overall the program was viewed very positively by participants and ward staff involved in Student Enrolled Nurse supervision and assessment. Recommendations for improvement have been identified in relation to course content, assessment, clinical placement and supervision, and have been integrated into the 2015 commencing course.

#### 7.8.3 Nursing and Midwifery Undergraduate Education and Clinical Placement

Consistent with the goals of the Sydney Interdisciplinary Clinical Training Networks (ICTN), SWSLHD has focussed on increasing its capacity to provide a high number of clinical placements (CP) and in improving the quality of CP opportunities.

As at 2014, SWSLHD has Student Placement Agreements (SPA's) in place with fourteen tertiary institutions for nursing and three for midwifery. Nursing and Midwifery CPs are managed centrally, with places allocated across all facilities and clinical services. First priority for placement is given to students from local universities to support the growth of a local workforce.

ClinConnect data (Jan - Jun 2014) indicates SWSLHD had capacity to support almost 72,000 Nursing CP days and 1,725 midwifery CP days. High cancellation rates by education providers (EP) were reported for nursing and midwifery, making planning for student facilitation difficult. Ongoing work is being undertaken with the education providers to identify and resolve issues in relation to clinical placement.

Historically, educational providers "facilitate" clinical placements by using their staff to supervise students. Recent reviews of nursing CP's, particularly in mental health, have resulted in a trial of a new model of facilitation, where instead of EP facilitators supporting students, SWSLHD staff facilitate CPs to provide more intensive and relevant support to students. Evaluation of this model is required.

On completion of undergraduate training, students must demonstrate a number of competencies to gain registration through AHPRA.

#### 7.8.4 Nursing and Midwifery Post Graduate Education and Training and Development

The nursing and midwifery workforce within SWSLHD is highly skilled and around 25% of staff working as Registered Nurses and Midwives have post graduate qualifications in specialty areas from Graduate Certificate to Doctorate level. Whilst some staff receive specific scholarships from or through SWSLHD to undertake these courses, many staff act independently to achieve these qualifications.

Nursing and midwifery staff have access to the broad range of other programs offered within the District and a close link with SWSCEWD from its base as a provider of nursing education.



#### 7.9 Allied Health Education and Training

The Allied Health Directorate provides management, leadership and clinical governance to staff in Psychology, Occupational Therapy, Physiotherapy, Speech Pathology, Social Work, Nutrition and Dietetics, Podiatry, Orthoptics, Exercise Physiology, Audiology, Music Therapy and Diversional Therapy. It also provides limited support to clinical staff in Pharmacy, Radiography, Sonography and Radiation Medicine.

#### 7.9.1 Prevocational Education and Clinical Placement

SWSLHD has SPA's in place with seventeen education providers for the provision of Allied Health and Allied Health Assistants CP's.

ClinConnect data (January - June 2014) indicates SWSLHD provided a total of 7,136 CP days across all Allied Health disciplines (excluding radiology). with nursing and midwifery, high cancellation rates were reported across Allied Health, both from the LHD and EPs. Work has been conducted to control the contributing factors which include the long time lag between booking and utilising placements (up to seven months), high levels of maternity leave, and the restrictions within the system in terms of managing unknown supply and demand of placements and suitable students. These factors add to the challenge of planning commitments and addressing the need for skilling future employees, particularly as the bodies/professional accrediting associations dictate specific minimum requirements for student clinical practice. Training and support for staff supervising clinical placement



generally provided by the Universities directly, as well as through SWSLHD supported education programs and supported practice within the supervisors department.

Data has highlighted variable participation in student supervision between disciplines and across professions. SWSLHD has benefited from temporary Health Workforce Australia funding in some disciplines to support increased capacity for clinical supervision. These arrangements now need to be made with individual universities.

On completion of prevocational training, students in occupational therapy, psychology, physiotherapy, podiatry, pharmacy, and radiology must demonstrate a number of competencies to



gain their registration through AHPRA. Students from the remaining professionals also need to demonstrate a number of competencies prior to independent practice.

#### 7.9.2 Allied Health Professional Development and Post-Graduate Education

Allied Health staff registered by AHPRA are required to undertake annual professional development to maintain registration. Formalised systems within Allied Health exist to conduct and document clinical supervision as a component of this process.

Clinical training undertaken by Allied Health staff within SWSLHD is generally developed and delivered by senior practitioners and is designed to improve clinical practice in specific care settings. Departments/services have a range of educational programs which may include journal discussions, in-service programs and case presentations. The various disciplines also conduct a number of clinical networks/interest groups to promote shared learning across the District/profession. Over recent years, most of the disciplines have hosted Showcase Days or Topic Forums to promote the sharing of research, evidence based practice and quality initiatives. A Research Forum is held bi-annually.

Staff are encouraged to participate in the various opportunities available and to share these learnings with their colleagues. Efforts have been made to provide the senior practitioners opportunities to participate in learning activities with their peers from other sites/Districts so that they too can develop their skill set. Opportunities for Allied Health staff to participate in external training are generally supported through a small subsidy and where possible, external presenters are hosted within the District to enable a higher volume of participation across any one discipline or service.

At present there is one temporary Allied Health educator position, funded by Health Workforce Australia and auspiced by the Ingham Institute for Applied Medical Research. This funding is due to conclude shortly.

As with medical and nursing staff, Allied Health staff also participate in a range of clinical and nonclinical post graduate programs, delivered internally and externally. This has resulted in an increasing percentage of staff with post graduate qualifications over recent years.

Relationships with the various universities are actively pursued with a number of staff acting on University advisory councils, undertaking period teaching opportunities or engaging in joint initiates such as research, in-services or workshops.

#### 7.9.3 Allied Health Vocational Program

The Allied Health workforce includes a small but growing number of allied health assistants. Recent years have seen a number of initiatives to assist these staff to develop their skill sets. These have included the sponsoring and support of staff to gain their Certificate IV in Allied Health Assistance and the development of a network to deliver a regular specifically targeted education. This program is supported by a part time Allied Health Workforce Officer.

#### 7.10 Non-Clinical Staff

As noted in Table 5.1, approximately 24% of the staff employed by SWSLHD work in non-clinical or support roles. Non-clinical staff provide essential roles within the health service in diverse areas as



administration, engineering/maintenance, finance, housekeeping, human resources, information technology, libraries, management, research, training, quality and safety.

The qualifications and skills required to work in these roles are as variable as the roles themselves. Many non-clinical staff are highly qualified to perform specialised functions, whilst others have no formal qualifications.

Staff working in non-clinical roles have access to a range of generic education and training opportunities, primarily provided through SWSCEWD, as well as a range of scholarship programs. However, specific training/skill development in more specialised roles or skills (such as advanced computer skills) is not currently available.

#### 7.11 Partners

Various partners support SWSLHD in delivering E&T to staff and also receive training and supervision from the District's specialised and highly experienced staff.

#### 7.11.1 NSW Ministry of Health and Pillar Agencies

The NSW Ministry of Health provides policy direction in relation to staff education and training. In addition to the Ministry of Health, the Pillar Agencies - the Health Education and Training Institute (HETI), the Agency for Clinical Innovation (ACI), the Clinical Excellence (CEC) and NSW Kids and Families determine NSW Health strategic priorities for models of care and patient safety initiatives as well as the provision of education and training programs that interface with the SWSLHD education and training priorities and delivery of education and training for staff. Training programs provided by these organisations include Between the Flags, Antimicrobial Stewardship and Top 5.

## 7.11.2 South Western Sydney Medicare Local and South Western Sydney Primary Health Network

One of the key roles of the former South Western Sydney Medicare Local (SWSML) has been to coordinate and deliver E&T to local primary care providers, including medical, nursing and allied health practitioners. With the establishment of the SWS Primary Health Network, SWSML will cease operation. Opportunities are available for SWSLHD to partner with the South Western Sydney Primary Health Network to assist in meeting the E&T needs of the local health workforce.

#### 7.11.3 Third Schedule Facilities

Third Schedule Facilities within SWSLHD include Braeside Hospital, Carrington Centennial Care, Karitane, the NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors and the South West Sydney Scarba Service. These unique facilities also provide a range of local and state-wide education to health professionals in specialist areas, such as child and family health and working with survivors of torture and trauma.

#### 7.11.4 Education Providers

Agreements are in place with more than twenty education providers, including universities, private colleges, medical specialist colleges and vocational education providers to support the delivery of clinical placements within SWSLHD. Significant work is undertaken to maintain these collaborative partnerships and to provide high quality, practical, education and training opportunities to students.



SWSLHD also works with education providers through collocation and/or joint management of clinical schools, provision of education and training infrastructure, provision of teaching services and supporting research arrangements for staff and students.

#### 7.11.5 Regulation/Registration Agencies Specialty Colleges

SWSLHD works closely with agencies and organisations which regulate and register clinical staff as part of ensuring the safety of patients and the quality of patient care. AHPRA requires all medical, dental, nursing, midwifery and some allied health professionals to be registered prior to undertaking clinical work. Registration requires proof of qualifications and competencies relevant to the discipline. Annual registration is dependent on continuing professional development (CPD), with CPD points attached to much of the education and training available in the health system. Specialty colleges are responsible for setting the standard of training required for medical staff to be admitted into any given specialty. Health facilities are accredited with training positions in accordance with specialty college requirements.

#### 7.11.6 Other Providers of Health and Social Services

There are numerous private organisations providing health and social services across South Western Sydney. These organisations include private hospitals, medical and allied health private practices, residential aged care facilities and non-government agencies. As with staff from the LHD, staff working in these services require ongoing access to E&T to maintain and enhance their skills. SWSLHD clinicians provide a significant amount of E&T to representatives of these organisations in relation to particular clinical areas, and on an ad-hoc basis.





### 8. Issues

The following table provides a brief summary of the key issues identified in the planning process and identifies where they will be addressed.

Table 8.1 Summary of key issues

Issue	Description	Response in Action Plan
Common vision and values	- Some facilities display outdated or locally developed vision/values statements which cause confusion	1.1
Governance	<ul> <li>There is no clear, district-wide governance structure for E&amp;T across all disciplines and facilities</li> <li>There is no District wide process for identifying and prioritising organisational level training needs</li> <li>There is no District wide process for determining how course content is developed and reviewed</li> </ul>	10.1
Organisational policy	<ul> <li>E&amp;T Policy across the organisation is variable and reliant on a combination of Award conditions, managers priorities, individual interests and financial budgets</li> </ul>	10.4
Coordination and information	<ul> <li>SWSCEWD is perceived as primarily nursing focussed</li> <li>Information on E&amp;T is not centralised</li> <li>Career pathways are not defined</li> <li>There are no medical or allied health educator positions within SWSCEWD</li> </ul>	11.1 - 11.4
Performance management processes	<ul> <li>The SWSLHD Managing for Performance process requires annual performance reviews, collaborative identification of training needs and individual Learning &amp; Development Plans</li> <li>A coordinated system to aggregate and report on training needs is lacking</li> </ul>	SWSLHD Workforce Strategic Plan
Risk management	<ul> <li>The introduction of new NSW mandatory training and orientation systems has resulted in some key standardised training becoming "optional" e.g. Public Interest Disclosure, Use of Interpreters</li> </ul>	6.5
Accessibility	<ul> <li>Some staff experience SWSCEWD training being cancelled on the day, or with short notice, impacting on rostering and staff ability to undertake relevant development</li> <li>Staff often cancel training attendance at short notice due to operational demands</li> </ul>	11.5
Consumer and community involvement	<ul> <li>NSQHS Standards requires each LHD to provide orientation to CCP representatives, for staff to access training on patient centred care and consumer engagement and for consumers to be involved in training the clinical workforce</li> </ul>	14.1 - 14.3



Volunteers	- Volunteers are required to undertake mandatory training but	14.1 - 14.3
	are unable to access HETI Online	
	- Information on volunteers across the District is inconsistent	
	and difficult to access	
Physical	- Demand for meeting/tutorial rooms outstrips supply	12.1 - 12.2
infrastructure	<ul> <li>Computer training rooms are underutilised</li> </ul>	
Information	- Insufficient/out dated computer hardware and software limits	13.1 - 13.4
and	accessibility and usability of online content	SWSLHD ICT
communication	- Changing technology offers new opportunities for education	Strategic
technology	and training using emerging learning platforms	Plan
	- Increasingly staff and students bring their own smart devices	
	to work and wish to access E&T material via these devices.	
	IM&TD is not sufficiently resources to support this access	
Ability of staff	- The SWSLHD Workforce Plan identifies workforce shortages in	2.1 - 2.5
to meet current	a number of areas including: critical care, mental health,	
and future	maternity, community/child family/ theatre nursing, podiatry,	
health service	sonography, pharmacy and aged/dementia care	
demands	- Skills gaps in non-clinical areas include oral and written	
	communication, business processes, financial management,	
	data management/analysis and time management	
Policy	- District and facility policies have not been reviewed to reflect	2.2, 6.6, 6.8
alignment and	new NSW Health mandatory training requirements	
competence	- Key competencies across clinical streams do not consistently	
mapping	exist, resulting in variability of E&T/competency requirements	
_	across facilities for staff performing the same role	
Talent	- Is required in the clinical and non-clinical workforce	SWSLHD
identification	- Is essential to provide a pipeline of suitable staff into the	Workforce
and succession	future. These processes are variable	Plan
planning		4.0
Communication	- Complaints data indicates communication as a key area for	1.2
	organisational improvement	
	- Multiple E&T courses/programs, managed by various parts of	
	<ul><li>the organisation exist to improve staff communication skills</li><li>Despite significant investment, problems persist</li></ul>	
Interdisciplinary	- Staff value opportunities for interdisciplinary E&T	7.1 - 7.2
learning and	<ul> <li>Undergraduate models of interdisciplinary learning have been</li> </ul>	7.1 - 7.2
training	trialled but are difficult to implement	
Aboriginal	- There are low numbers of Aboriginal staff beyond entry level	1.3 / 2.4 /
health	- There are untapped opportunities for Aboriginal staff to work	4.2 / 4.3 /
workforce	in mainstream positions	5.2 / 9.8/ 9.9
	- Some Aboriginal health staff experience barriers to	,,
	participation in mainstream E&T opportunities	



Recruitment processes	<ul> <li>Many staff act in positions temporarily, but do not receive training required for the role</li> <li>New staff do not always have all the competencies required to undertake the role</li> </ul>	SWSLHD Workforce Plan
Clinical placements	<ul> <li>There are high cancellation rates (most notably in particular disciplines or from particular providers)</li> <li>University based Nursing and Midwifery Facilitators are limited in their scope and can have out dated experience</li> <li>49% of respondents to the staff survey believed that better support from educational providers would enhance the quality of student supervision</li> <li>More accessible training on student supervision is required, including teaching a multidisciplinary group</li> </ul>	15.1 - 15.5
Non-clinical professional student placements	- There are no formal LHD structures to identify and enable non-clinical professional placement opportunities	15.6 - 15.7
Graduate Health Management Program	<ul> <li>The value of unique experiences provided for a small number of participants could be expanded to enable more staff to benefit from some aspects of this program</li> </ul>	8.1 / 9.10
Blended learning	<ul><li>Is a proven and preferred model of E&amp;T</li><li>Is not used sufficiently due to increase in online content</li></ul>	9.2 - 9.3
Online training	<ul> <li>Low levels of motivation, engagement with content and interest in online training</li> <li>Lack of evidence of the effectiveness of online training in changing behaviours/improving skills</li> <li>Inappropriate delivery method for some courses e.g. communication</li> <li>Difficulties accessing computers in private areas</li> <li>Some online content cannot be delivered due to proxy access/firewalls</li> </ul>	9.1 - 9.3
Simulation based training	<ul> <li>Some facilities are underutilised</li> <li>Lack of consistency across facilities resulting in limited capacity to share resources</li> <li>Insufficient staff trained to deliver simulation based training</li> </ul>	9.4
Experienced and senior clinical positions	<ul> <li>Limited opportunities exist within the LHD for highly experienced staff to further develop clinical skills</li> <li>Cost, variable access to funding and time are barriers to accessing external E&amp;T</li> <li>Variability exists in the way information gained from external training e.g. conferences is shared</li> </ul>	2.3 / 8.1 / 8.2
Management	<ul> <li>Numerous programs, developed by the LHD and other agencies enhance and support managers</li> <li>There is a need to improve people management skills</li> </ul>	5.1 - 5.2



Leadership	<ul> <li>Numerous programs, developed within the LHD and through other agencies exist to enhance and support leadership</li> <li>There is no consistent approach to leadership development or a Leadership Framework program across the District</li> </ul>	
Research	<ul> <li>There are insufficient staff skilled in research and translational research</li> <li>There are insufficient Academic Units to grow research and develop organisation wide expertise</li> </ul>	SWSLHD Research Strategy and 3.1
Nationally recognised training	<ul> <li>A significant administrative investment is required</li> <li>Participation in many courses is low, with numbers declining over 2011 - 2014</li> </ul>	9.6
Quality of education and training content and delivery	<ul> <li>Course content does not always reflect current legislation, policy, evidence, organisational priorities or messages</li> <li>Courses are not rigorously evaluated to determine if they result in changed behaviours</li> <li>Some staff delivering courses are not subject matter experts and are unable to answer questions accurately</li> </ul>	10.2 - 10.3
Partnerships	<ul> <li>Are required with other government agencies, non-government organisations, the private sector and EPs to improve health workforce E&amp;T</li> <li>There are high costs associated with bringing experts into the District to provide E&amp;T</li> <li>SWSLHD can support the broader sector by providing access to internal opportunities, facilities and infrastructure</li> </ul>	14.1-16.5





### 9. Implementation and Monitoring

Implementation of the SWSLHD Education and Training Strategic Plan will require active participation and leadership across the organisation over the coming years. Implementation will be led by the proposed multidisciplinary Education and Training committee, reporting to the Workforce Committee, the Chief Executive and ultimately the Research and Teaching Sub-Committee of the SWSLHD Board.

The Action Plan, provided in Section 10, identifies specific actions, performance indicators, responsibilities and timeframes, mapped to the SWSLHD Education and Training Framework and other key District strategies. Implementation of the Plan will be essential to ensuring the District is able to achieve the vision of *Leading care*, *healthier communities*. Regular monitoring and reporting on actions and outcomes will be required to facilitate this process.

As each action is completed and the operating environment within NSW Health changes, this plan will need to be reviewed and updated to maintain relevancy.





## 10. Action Plan

FRAM	IEWORK AREA 1: A WORKFORCE WITH THE K			N	
ID	Action	Performance Indicator	Responsible	Timeframe	
1.	<ol> <li>Building a skilled and committed workforce with a shared organisational culture and values         Maps to: SWSLHD Strategic &amp; Healthcare Services Plan CA1 (p81) / SWSLHD Corporate Plan 1.2.1 /         SWSLHD Clinical Governance Framework 13.5 / SWSLHD Workforce Strategic Plan 2.4.2</li> </ol>				
1.1	Review all promotional and policy materials to ensure consistency with SWSLHD Corporate vision, mission and value	Facilities display only current LHD vision and values statements		2015	
1.2	The key elements of Communicating with Purpose (ComPurs) will be systematically rolled out and extended to underpin all communication initiatives, including education and training, within SWSLHD	SWSCEWD courses reflect ComPurs content Improved performance in relation to patient and staff feedback in Your Say survey, Patient Journey interviews, Patient surveys and complaints data	Chief Executive/ Director Clinical Governance / Manager SWSCEWD	2016	
1.3	Expand capacity of Aboriginal Health staff to deliver <i>Respecting the Difference Part II</i> to enable more staff to be trained annually	Increased number of staff able to deliver Respecting the Difference Part II	Director Aboriginal Health	2015	
2.	SWSLHD Staff have the skills they require to perf their knowledge and skills Maps to: SWSLHD Strategic Healthcare Services Pl 4.1.6 / SWSLHD Clinical Governance Framework 8 Sector Capability Framework / SWSLHD Aborigina Strategic Plan 2.2.2 & 3.6.2	an CA1 (p81) / SWSLHD Corpo .1.5 & 13.5/ Performance Agr	orate Plan 1.2. eement S7 / N	1, 4.1.3 & SW Public	
2.1	Participate in the development of the HETI Graduate Transition Framework and associated Clinical Foundation Skills modules	HETI Frameworks and training modules include SWSLHD priorities	Manager SWSCEWD	2016 and ongoing	
2.2	Develop systems and processes for identifying the skill mix and training required for successfully managing new and emerging models of care and for implementing new National, State and District requirements/initiatives for all the workforce	Workforce Capability Skills Program developed and implemented	Director Operations	2016	



ID	Action	Performance Indicator	Responsible	Timeframe
2.3	Investigate and pursue opportunities to deliver highly specialised E&T locally through hosting visiting experts in SWSLHD, potentially in partnership with other LHD's and the private sector e.g. Advanced Clinical Skills Practice Workshops	Number of visiting experts hosted annually Number of people participating in workshops Number of national and international experts delivering E&T through shared funding arrangements	Chief Executive	2016 and ongoing
2.4	Support Aboriginal staff to further develop their qualifications and skills through:  - undertaking consultation to identify generic training needs  - access to Aboriginal staff specific training as appropriate  - access to Certificate III in Aboriginal Primary Health Care qualifications  - expansion of the Aboriginal Learning Groups program	Number of Aboriginal staff with a minimum of Certificate III qualifications Four Aboriginal Learning Groups sessions conducted annually	Director Aboriginal Health/ Manager SWSCEWD	Ongoing
2.5	In collaboration with HETI, develop processes to enable community and consumer representatives, volunteers, students, contractors and contingent workers to have access to education and training programs managed by SWSLHD and HETI	Community and consumer representatives, volunteers, students, contractors and contingent workers have access to relevant education and training programs	Manager SWSCEWD	2016
3.	Education and research drive innovation and the Maps to: SWSLHD Research Strategy 4.1.3, 5.1.1	e delivery of high quality pati		are
3.1	Implement E&T components of the Research Strategy for South Western Sydney Local Health District 2012-2021	Relevant actions	Director Research	Ongoing
3.2	Investigate opportunities to support research and education in non-clinical health roles	Investigation complete and approved strategies implemented	Chief Executive	2018 and ongoing
3.3	Develop a standardised District program to recognise and acknowledge staff who receive scholarships or complete higher degrees, commencing with PhD and Masters qualifications, which is implemented by each facility	Relevant staff receive formal, public acknowledgement	General Managers	2018
3.4	Develop strategic Level 5 and 6 Allied Health positions to support transition of evidence into practice and support/provide staff education and training to improve clinical practice	Number of Level 5 and 6 Allied Health positions Educational needs of Allied Health professionals identified and strategies developed to address	SWSLHD Director Allied Health	Ongoing



ID	Action	Performance Indicator	Responsible	Timeframe
3.5	Identify and develop core competencies for staff delivering education and training	Core competencies developed and relevant E&T programs available	Manager SWSCEWD	2016 and ongoing
3.6	Expand capacity of SWSLHD staff to develop and deliver simulation based education	Increase in number of staff trained to deliver simulation based education	Manager SWSCEWD	Ongoing
3.7	Define the role of Clinical Nurse Educators and develop career pathways and opportunities for Clinical Nurse Educators to become Nurse Educators, including opportunities to cofacilitate and be mentored by more experienced staff	Clinical Nurse Educator roles and relationships defined Pathways defined and utilised	Manager SWSCEWD	2017
3.8	Develop core competencies for staff providing point of care clinical supervision	Core competencies developed and education programs available	Manager SWSCEWD	2015 and ongoing
3.9	In collaboration with education providers, evaluate the effectiveness of the pilot Staff Facilitation model within Nursing Clinical Placements (CP) and expand if successful	Nursing Staff Facilitation program evaluated and implemented as appropriate	SWSLHD Director Nursing and Midwifery	2015
3.10	In collaboration with education providers:  - obtain feedback on individual supervisors to assist the LHD to strengthen supervision and teaching skills  - develop, implement and evaluate a multidisciplinary SWSLHD Clinical Placement Supervisor Award Program to recognise and promote excellence in student supervision and foster a work culture which is supportive of CP	Improved feedback from education providers in relation to supervision provided by SWSLHD staff SWSLHD Clinical Placement Supervisor Award Program established and implemented annually	Director Workforce	2018
4.	Investment in leadership occurs across SWSLHI			
4.1	Maps to: SWSLHD Workforce Strategic Plan 4.1.  Establish, implement and evaluate a SWSLHD Leadership Framework aligned to the NSW Health Leadership Framework, which:  - Includes clinical and non-clinical staff - Addresses the needs of staff from entry level to executive level - Maps existing leadership initiatives and programs to identify gaps - Delivers a complete suite of initiatives and programs across all Leadership Framework areas	SWSLHD Leadership Framework established Existing leadership initiatives and programs mapped to the SWSLHD Leadership Framework Leadership initiatives and programs delivered and evaluated consistent with the SWSLHD Leadership Framework	Manager SWSCEWD	2015 and ongoing
4.2	Formalise an Aboriginal Health Leadership Group and provide relevant E&T giving consideration to HETI and SWSLHD Leadership Frameworks and member needs	Aboriginal Health Leadership Program formalised	Director Aboriginal Health	2016



ID	Action	Performance Indicator	Responsible	Timeframe
4.3	Establish and implement a SWSLHD Mentoring Program to:	SWSLHD Mentoring Program established	Director Workforce	2017 and ongoing
	<ul> <li>support staff at all levels through access to experienced staff to assist them in developing in their roles</li> <li>incorporate a specific mentoring program for Aboriginal staff, linking with non-Aboriginal staff as appropriate</li> </ul>	Number of people trained as mentors		
5.	Managers are supported to undertake their cur and future managers build their careers Maps to: SWSLHD Workforce Strategic Plan 4.1.		defined to sup	port curren
5.1	Develop a SWSLHD Management Framework/Pathway incorporating HETI programs such as Financial Management Education, People Management Skills and Enterprise Wide Risk Management and SWSLHD priority areas such as communication, business processes, financial and performance management	SWSLHD Management Framework/Pathway defined and implemented	Manager SWSCEWD	2016
5.2	Establish a management training program for Aboriginal staff to provide opportunities to experience management roles through placements and access to specific training courses	Aboriginal Health staff Management Training Program established Number of participants in program	Director Aboriginal Health	2016
6.	Staff are skilled in and supported to undertake Maps to: EQuIP National Standard 13, SWSLHD CPlan 4.2.1		-	
6.1	Redesign and implement the Service Improvement Project Framework for SWSLHD and establish a Skills Set Register for these projects to strengthen the identification of staff with the skills to undertake or support new projects, including staff in receipt of SWSLHD funded scholarships	Service Improvement Project Framework available Skills Set Register established and maintained	Associate Director, Strategic Projects	2015 and ongoing
6.2	Implement Communities of Practice and Train the Trainer models to support, train and mentor staff in undertaking projects	Models implemented	Associate Director, Strategic Projects	2015 and ongoing
6.3	Facilitate access to and promote the use of the Business Process Management Package	All managers provided with the package	Associate Director, Strategic Projects	2015



ID	Action	Performance Indicator	Responsible	Timeframe
6.4	Build quality improvement capacity through the provision of increased access to formal education, mentoring and coaching	Number of staff supported Number of clinical quality improvement projects supported	Associate Director, Strategic Projects Director Clinical Governance	2015 and ongoing
6.5	Ensure staff participation in relevant core risk management and risk mitigation training	Number of participants in relevant training	General Managers	Ongoing
6.6	Review and revise all District and facility policies in line with NSW Health Mandatory Training Policy	Review complete  Mandatory training requirements are standardised	Executive/ General Managers	2015
6.7	Review and ensure time is available during rostered hours for staff to undertake mandatory or other requisite training as appropriate	100% of staff complete mandatory training as required Number of training issues identified in Accreditation reports	General Managers/ Directors Nursing and Midwifery	Ongoing
6.8	Implement processes for establishing competencies across clinical streams/services and disciplines where practical, to ensure consistency between facilities e.g. Cancer stream model	Clinical streams/services and disciplines determine core competencies for staff across the District	Clinical Directors/ Clinical Managers	2016





FRAME	EWORK AREA 2: EDUCATION AND TRAINING I	IS OF A HIGH QUALITY, I	INNOVATIVE A	ND
ID	Action	Performance Indicator	Responsible	Timeframe
7.	Delivery of and participation in interdisciplinary Maps to: SWSLHD Corporate Plan 4.1.4	learning and training is en	couraged	
7.1	Undertake a review to identify evidence based programs which strengthen interdisciplinary learning and foster improved communication and patient outcomes	Review completed and disseminated Number and representation of staff participating in interdisciplinary education and training	Manager SWSCEWD	2016 and ongoing
7.2	Work with education providers to provide interdisciplinary training opportunities during clinical placements	Number of students participating in interdisciplinary training opportunities	Director Workforce	2016 and ongoing
8.	Broaden the audience for individual lectures and Maps to: SWSLHD Strategic Healthcare Services P	•	ın	
8.1	Expand the UNSW model of live streaming/recording/podcasting presentations and lectures to enable access across multiple sites, e.g Grand rounds presentations - Graduate Health Management Program Learning Sets	Web based access to didactic E&T content is available	Director IM&TD/Direct or Media	2015
8.2	Develop and implement a process for medical staff utilising Training, Education and Study Leave to facilitate access to new research for more junior staff and staff from other disciplines	Process developed and implemented Number of reports disseminated	SWSLHD Director Medical Services	2017
8.3	Consistent with the SWSLHD Information and Communications Technology Strategic Plan, better utilise teleconferencing, videoconferencing at fixed sites and also internet based videoconferencing to improve access to E&T	Increased teleconferencing and videoconferencing capacity	Director IM&TD	2016
9.	Provide a diverse range of education and training organisational needs and deliver best practice  Maps to: SWSLHD Strategic Healthcare Services P			
9.1	Upgrade computer hardware and software to enable the delivery of online training using video, podcasts etc.	Computers able to support online E&T content	Director IM&TD	2015 and ongoing
9.2	Provide group online learning sessions facilitated by educators e.g. for staff with low mandatory training compliance, low levels of English literacy	Supported online learning sessions trialled and evaluated	Manager SWSCEWD	2015 and ongoing
9.3	Where required, build blended learning programs by developing face to face modules to support and strengthen <i>HETI Online</i> content	Increase in the number of blended learning courses available	Manager SWSCEWD	2016 and ongoing



ID	Action	Performance Indicator	Responsible	Timeframe
9.4	Identify opportunities to expand simulation based education in the clinical and non-clinical environment	Increased number of simulation based education programs conducted annually	Manager SWSCEWD	2016 and ongoing
9.5	Provide mentor facilitated "quick bites" or "master classes" at lunchtimes (or similar) to enable staff to improve or practice specific skills, such as:  - business writing skills - analysing and presenting data - computer programs, including Microsoft Office	"Quick bites" program established and evaluated	Manager SWSCEWD	2017
9.6	Review the way in which SWSCEWD delivers Nationally Recognised Qualifications (NRQ), including: - evaluating participation in and satisfaction with NRQ - mapping of available courses to HETI Frameworks - developing and promoting a policy on staff access to SWSCEWD delivered NRQ	Review complete and recommendations implemented Number of staff completing NRQ Policy developed and implemented	Manager SWSCEWD	2016
9.7	Identify potential areas of future workforce shortage and investigate opportunities to develop/provide VET programs and/or clinical placements to assist in meeting workforce demands e.g. financial/ business services or at risk clinical services	New programs developed New placements accessed	Director Workforce	2018
9.8	Review the District's Traineeship programs to identify opportunities for more programs to target schools, young people, mature workers and Aboriginal people in clinical and non-clinical areas	Opportunities identified and implemented	Director Workforce	2018
9.9	Evaluate the success of the Trades Apprenticeship program to determine potential for future participation and expansion	Trades Apprenticeship program evaluated and recommendations implemented	Director Operations	2017
9.10	Review the range of scholarship programs to identify gaps and develop coordinated scholarship programs to equitably meet organisational needs. This should include:  - Consideration of an executive/senior managers scholarship  - Retraining of existing staff to address critical workforce shortages  - Options for staff funded programs	Scholarship opportunities reviewed and information coordinated in a single site New programs developed in response to identified needs	Director Workforce	2017
9.11	Expand medical specialist training opportunities in line with current and future service requirements	Number of specialist training opportunities	SWSLHD Director Medical Services	Ongoing



ID	Action	Performance Indicator	Responsible	Timeframe
10.	Education and training programs and opportunitie consistence  Maps to: The Governance Guide A best practice governance, 2014	vernance framework for all	ied health educ	ation and
10.1	Establish a multidisciplinary Education and Training Committee to:  - provide oversight across E&T (clinical and non-clinical)  - implement a robust process for identifying changing education and training needs taking into account legislative and policy requirements, SWSLHD plans and strategic directions, changing models of care, ICT initiatives, quality and safety reviews, workforce and community needs  - develop relevant performance indicators and data management systems  - monitor implementation of the Education and Training Strategic Plan, with reporting to the District Workforce Committee, Chief Executive and the Research and Teaching Sub-Committee of the SWSLHD Board  Develop and implement a formalised Course	A multidisciplinary SWSLHD Education and Training Committee established Training needs identification process developed and implemented Performance indicators established and report on  Course Review process	Director Workforce	2015 and ongoing
10.2	Review process, commencing with SWSCEWD courses, which incorporates:  - Purpose - Target audience (including opportunities for interdisciplinary participation) - Course design and delivery - Legislative and policy compliance - Priority population groups - Risk management - CORE values and the principles of Communicating with Purpose - Impacts on patient care and safety - Appropriate data collection and analysis	established and implemented % SWSCEWD courses reviewed annually	Manager SWSCEWD	ongoing 2016 and ongoing
.0.3	Develop a Course Review template to support staff providing E&T outside of SWSCEWD	Course Review template completed	Manager SWSCEWD	2017
0.4	Develop a District wide Staff Development Policy which reflects Award conditions and organisational goals and provides clarity for managers and staff in relation to:  - Use of LHD funding - Use of work time/dedicated time for teaching and learning - Personal responsibility for professional development	Policy developed Key Performance Indicators measured, analysed and used to improve practice	Director Workforce	2020



ID	Action	Performance Indicator	Responsible	Timeframe
11.	Improved access to education and training oppor	rtunities through information	and coordina	tion
	Maps to: SWSLHD Strategic Healthcare Services	Plan / SWSLHD Corporate P	lan / SWSLHD	Information
	Communications and Technology Strategic Plan	Т .		
11.1	Promote SWSCEWD as a comprehensive	Regular segments in	Manager	2016
	educational service addressing E&T needs of all	SWSLHD Newsletter	SWSCEWD	
	employees	Bi-annual course calendar		
		available		
		Website to include broader		
		E&T content than just SWSCEWD e.g. Grand		
		rounds, CSSC, CLIN Network		
		Biennial SWSCEWD		
		roadshow program in every		
		facility to promote courses,		
		demonstrate HETI Online		
		functions and assist staff in		
		identifying potential		
		learning pathways		
		Promotion through		
		SWSLHD Intranet Bulletin		
		Board		
		Increased annual number of		
		staff completing SWSCEWD		
		managed courses	_	
11.2	Expand the capacity of SWSCEWD to cater for	Additional Permanent Allied	Chief	2015 and
	the E&T needs of the broader health workforce,	Health educator position	Executive/	ongoing
	including Allied Health & Medical staff	within SWSCEWD established	SWSLHD Director	
		Flexible positions	Allied	
		established to allow for	Health	
		multidisciplinary applicants	ricareri	
		Allied Health and Medical		
		education and training		
		needs identified and a plan		
		established to address		
		needs		
11.3	Strengthen SWSCEWD capacity to manage	Increase in number of non-	Manager	2016 and
	information about E&T courses being run across	SWSCEWD training courses	SWSCEWD	ongoing
	the District	captured on SWSCEWD		
		website		
11.4	Investigate opportunities to host paid	Investigation complete and	Manager	2019
	advertising of external courses on the SWSCEWD	options considered	SWSCEWD	
	website			



ID	Action	Performance Indicator	Responsible	Timeframe
11.5	Develop and implement a SWSCEWD Course Cancellations policy	Course cancellation policy developed Monitor cancellation data and trends to enable continuous improvement	Manager SWSCEWD	2015
12.	Modernised physical infrastructure which is able to Maps to: SWSLHD Corporate Plan 5.1.7 & 6.1.3	o cater for current and fut	ure demand	
12.1	Incorporate education and training infrastructure into all facility developments or redevelopments	All facility developments/ redevelopment plans incorporate evidence of education and training infrastructure consideration Additional E&T infrastructure included in facility redevelopments	Chief Executive / General Managers	Ongoing
12.2	Implement strategies to improve utilisation of computer training rooms/CLIN network facilities for mandatory and online training, including out of hours	Improved accessibility of existing facilities and computers for completing mandatory training	General Managers	2016
13.	Information and communication technology is use experiences  Maps to: SWSLHD Information Communications and			essibility and
13.1	Establish Wi-Fi network in all facilities to enable access internet based education and training resources	Wi-Fi connectivity at all SWSLHD facilities	Director IM&TD	2017
13.2	Review and improve proxy access to external Internet resources to support staff and students to access E&T materials e.g. YouTube, webinars, podcasts, University websites	Secure access to external E&T content available	Director IM&TD	2016
13.3	Audit ICT capability in each E&T room, including internet connectivity, projectors/smart boards and invest in new technology/upgrades to increase responsiveness and access	ICT capability reviewed and upgrade program developed and implemented	General Managers	2016 and ongoing
13.4	Establish Audio Visual Unit at Liverpool Hospital to support District wide E&T initiatives, including the Thomas & Rachel Moore Education Centre, Ngara Centre and Clinical Skills and Simulation Centre	Audio Visual Unit operational	Chief Executive	2017



FRAMEWORK AREA 4: PARTNERSHIPS STRENGTHEN THE SKILLS AND CAPACITY OF THE HEALTH WORKFORCE									
ID	Action	Performance Indicator	Responsible	Timeframe					
14.	Strengthen the skills of community and consumer representatives and volunteers through undertaking and delivering education and training  Maps to: NSQHSS Standard 2 / SWSLHD Strategic Healthcare Services Plan 8.4 / SWSLHD Research Strategy Strategic Area 6								
14.1	Implement processes to ensure Consumer and Community Representatives education and training needs are met e.g. reviewing the Consumer and Community Representative Orientation program and developing Learning and Development Plans for members as required	CCP Orientation Program reviewed periodically % of CCP members with a Learning and Development Plan	Manager Community and Consumer Participatio n	Ongoing					
14.2	Develop a Volunteer Training Program consistent with the NSW Ministry of Health Framework for Engaging, Supporting and Managing Volunteers	Volunteer Training Program developed and implemented % of volunteers trained	Manager SWSCEWD	2015					
14.3	Develop a process which enables CCP members to participate in delivery and review of locally developed courses and to strengthen the way in which training responds to community and consumer needs	Process developed and implemented	Manager SWSCEWD	2016					
15.	Partnerships with Education Providers are strengthened to improve the number and quality of clinical and non-clinical placements  Maps to: SWSLHD Strategic Healthcare Services Plan CA4 and 8.4 / SWSLHD Corporate Plan 4.3.1 /  SWSLHD Workforce Strategic Plan 2.3.4 / The Governance Guide A best practice governance framework for allied health education and training, 2014								
15.1	Host an annual Education Providers (EP) Forum to enable SWSLHD and EPs to have an open dialogue	Annual EP Forum held	Director Workforce	Ongoing					
15.2	Develop and implement a process to manage demand for Clinical Placements (CP) giving consideration to areas of growth, unused placement capacity, placement cancellations emerging workforce needs and curriculum requirements	Process developed and implemented Reduction in placement cancellations by EPs and SWSLHD	Director Workforce	2015 and ongoing					
15.3	Incorporate planning for CP into Departmental/facility Business Planning and budget allocation processes	CP requirements incorporated into Business Planning processes	General Managers	2015					



ID	Action	Performance Indicator	Timeframe							
15.4	In collaboration with EPs develop, implement and evaluate a Facility Based Student Recognition Program to recognise the value of students as team members in patient care delivery and encourage high performing students to seek employment within the District	SWSLHD Student Recognition Program established and undertaken annually	General Managers	2017						
15.5	Develop innovative, sustainable student supervision models in partnership with education providers	Increase in number of students undertaking clinical placements	Directors of Nursing and Midwifery, Medical Services and Allied Health	2017						
15.6	Establish Non-Clinical Professional Placement Partnerships with tertiary facilities to identify high calibre students and attract students to niche roles or roles with potential shortages e.g. Biomedical Engineering, Adult Education, Health Services Planning, Law, eHealth	Number of Professional Placement Partnerships established in areas of critical workforce shortage	Director Workforce	2018						
15.7	Identify potential research projects for non- clinical students in health support roles e.g. ehealth; quality and safety	Program established Number of participants annually	Associate Director Strategic Projects	2018						
16.	Building capacity and partnerships with the private and non-government health sector, the NSW  Ministry of Health, Pillar Agencies and other Local Health Districts  Maps to: Strategic Healthcare Services Plan / Corporate Plan									
16.1	Work with the SWS Primary Health Network, the Ministry of Health and Pillar Agencies to identify opportunities and priorities for collaborative E&T, integrated care and multidisciplinary teamwork including HealthPathways	Number of collaborative initiatives	Manager SWSCEWD	2015 and ongoing						
16.2	Collaborate with the Clinical Skills and Simulation Centre and inter-District simulation facilities to share programs and strengthen the skills of simulation educators	Number and success of joint initiatives annually	Manager SWSCEWD	2015 and ongoing						
16.3	Define the role for SWSLHD in providing E&T for the private and non-government sector including an access policy which articulates opportunities available and cost	SWSLHD Policy Statement on External Access to SWSCEWD courses developed and implemented Revenue from external organisations	Manager SWSCEWD	2016 and ongoing						



ID	Action	Performance Indicator	Responsible	Timeframe
16.4	Investigate opportunities to implement and undertake "work exchange" programs with the Ministry of Health, Pillar Agencies, other LHDs and NGOs to strengthen SWSLHD capacity to work with priority population groups and clinical specialties e.g. Aboriginal people, refugees, children in out of home care and people who are homeless	Number of staff participating in "work exchanges" to improve care provided to people from priority populations	Director Workforce	2017 and ongoing
16.5	Develop and strengthen partnerships with other LHDs particularly in rural and regional NSW to provide access to SWSLHD E&T opportunities	Number of partnerships established Number of staff participating in partnership programs	Manager SWSCEWD	2018 and ongoing





# Appendix 1 Education and Training Infrastructure in SWSLHD (2014)

	Bankstown-Lidcombe Hospital	Liverpool Hospital	Fairfield Hospital	Campbelltown Hospital#	Camden Hospita#	Bowral and District Hospital	Community Health	Mental Health	Oral Health	Drug Health	Population Health
Hospital Role Delineation	5	6	3-4	4	3	3	NA	NA	NA	NA	NA
Simulation Facility	<b>√</b>	✓	×	<b>√</b> *	*	*	*	×	×	*	*
Mannequins	✓	✓	✓	✓	✓	✓	*	*	×	×	×
Auditorium/ Lecture Theatre	<b>√</b>	✓	<b>✓</b>	<b>✓</b>	✓	<b>√</b>	*	<b>✓</b>	×	*	*
Conference / Meeting / Tutorial Rooms	<b>√</b>	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	*	<b>✓</b>	<b>√</b>
Video- conferencing Facilities	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	*	*	<b>√</b>
Library	✓	✓	✓	√*	*	✓	*	*	*	*	*
Computer Training Rooms	✓	✓	<b>√</b>	✓	*	✓	*	*	×	*	*
Web Accessible Computers	✓	<b>√</b>	<b>✓</b>	✓	<b>✓</b>	✓	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>✓</b>	✓
Student Common Room	✓	✓	<b>√</b>	√ Etho Com	×	×	×	×	×	×	×

- \* Will be upgraded or provided as part of the Campbelltown Hospital redevelopment, in conjunction with the UWS Macarthur Clinical School
- # Campbelltown and Camden Hospitals are managed as a single facility







### **Acronyms**

ABF Activity Based Funding

AHPRA Australian Health Practitioner Regulation Agency

BYOD Bring Your Own Device

CP Clinical Placement

CCP Consumer and Community Participation
CPD Continuing professional development
COAG Council of Australian Governments
CSSC Clinical Skills and Simulation Centre

E&T Education and Training
EP Education Provider

GHMP Graduate Health Management Program
HETI Health Education and Training Institute

HWA Health Workforce Australia

ICT Information and Communication Technology
ICTN Interdisciplinary Clinical Training Network
IHPA Independent Hospital Pricing Authority

IM&TD Information Management and Technology Division

LGA Local Government Area
LHD Local Health District
MoH Ministry of Health

NRQ Nationally Recognised Qualification

NRT Nationally Recognised Training

NSQHS National Safety and Quality Health Service

RTO Registered Training Organisation

SOM School of Medicine

SPA Student Placement Agreement

SWSCS South Western Sydney Clinical School

SWSCEWD South Western Sydney Centre for Education and Workforce Development

SWSLHD South Western Sydney Local Health District

TESL Training, Education and Study Leave

T&RMEC Thomas and Rachel Moore Education Centre

UNSW University of New South Wales

UoW University of Wollongong

USyd University of Sydney
UTAS University of Tasmania

UWS University of Western Sydney

VET Vocational Education and Training







#### **South Western Sydney Local Health District**

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