

# Survey Submission to Queensland Health: HealthQ32, Workforce Action Plan – Horizon 1

29 September 2023

## **Focus area 1: Supporting and retaining the current workforce**

Speech Pathology Australia supports a statewide approach to reducing 'red tape' and other barriers to employment. The digital passport to support employment mobility by having human resources, credentialing and mandatory training information in one place is one such initiative that will reduce the time to recruit. There are several other areas that require specific attention to create sustainable access to speech pathology services across hospital and health services.

### **Flexible work solutions to support women returning to workforce**

The speech pathology workforce profile - predominantly female and part time – requires consideration of practical implementation of flexible work solutions that support women to return to the workforce and support local community needs such as after-hours services, weekend services and opportunities to engage in private practice (as per Visiting Medical Officer models).

### **Consistent working conditions to reduce employee turnover**

Consistent approaches to human resource policies and processes across hospital and health services and workstreams are needed to maintain good will and effective work practices. This includes access to professional development leave, access to other leave types, appropriate backfill to support ongoing clinical care and succession planning and improved opportunities /less red tape to represent Queensland Health nationally and internationally. Speech pathology budgets should include education and training considerations as well as travel for key positions (e.g. conjoint academic appointments) to present nationally and internationally (in line with professions such as medicine).

There is also a need to ensure positions are established consistently across all professions and districts to support maintenance of clinical care/ programs during periods of planned and emergent leave.

### **Increasing capacity and capability**

With the ageing workforce, there is a need to gather knowledge and expertise from experienced speech pathologists before retirement. There is a need to consider creative ways to leverage this workforce for teaching and training.

There is also a need to use the student workforce for additional capacity through the funding of Allied Health Assistants or students employed pre-entry in assistant roles who work in an allocated rather than delegated model. These resources could be used across the continuum of care, including into areas of practice not currently supported such as Child Development Services. There should also be support for workplaces to accept work experience placements/school-based traineeships. For example, through Certificate 3 Allied Health Assistants.

## **Focus Area 2: Building new pipelines of talent**

### **Collaborative recruitment and retention**

Local and statewide strategies are needed to support effective collaborative recruitment and retention strategies including timely access to human resource and recruitment experts to support novel recruitment approaches. For example, opportunities for supporting shared or collaborative recruitment processes/transfer/secondments between organisations that don't rely on personal networks.

### **Support for student placements and early career graduates to maintain workforce pipeline**

There needs to be adequate resources to support student placements, early career supervision and workforce education post entry to the profession. There is an increasingly stretched clinical workforce with no increase in clinical education positions since 2012 despite increasing demands for student placements (there has been a 35% growth in student placement provision in speech pathology from 2012 to 2022 with no increase in resourcing). Critical to this support is the Clinical Practice Educator positions. There needs to be equity of the number of these roles consistent with those provided in nursing and medicine. There are opportunities to consider partnership models with university and community sector to promote Queensland Health services in non- Queensland Health facilities.

Increasing clinical placements requires appropriate space (worksite accommodation), and patient flow mechanisms to support safe allocation to student workforces. We are aware that the Queensland Speech Pathology Practice Education Collaborative currently support a whole of state perspective of student placement needs. Awareness of the practice needs of different professional groups needs to be considered.

Speech Pathology Australia has consistent feedback that early career graduates are experiencing burnout due to high and complex caseloads and little supervision. This results in reducing work hours or leaving the profession completely. Sufficient staffing levels to support students and early career speech pathologists are critical to maintain adequate numbers of speech pathologists in the workforce.

### **Incentivising rural workforce**

Rural and remote workforce incentives, especially accommodation needs expansion to recruit and retain skilled workforce and this could be supported across government departments. There is a need to consider support for student placements (as per nursing workforce) and strategies such as bonded programs.

### **Building workforce capability**

Grow capability (2.2) should be multi-directional. For example, exploring capability of hospital workforce to work across continuum to support patient flow and improve referral pathways in and out of hospitals.

There are also opportunities for workforce exchange programs broader than current Allied health Professional Enhancement Program. The current focus maintains an 'acute admitted' focus on health rather than attempting to avoid admission where safe to do so.

### **Focus Area 3: Adapting and innovating new ways to deliver**

Speech Pathology Australia supports the continued development of technology to support virtual care. This could be enhanced through streamlining processes across Queensland Health and local hospital and health services regarding access to health records, consent forms, permissions and other systems to support mobile workforce and mobile patients.

The implementation of a statewide system to access real time workforce data is commended.