

SARRAH

Services for Australian Rural and Remote Allied Health

29 September 2022

Department of Health
Victoria

WorforceStrategyReform@health.vic.gov.au

Services for Australian Rural and Remote Allied Health (SARRAH) submission: Victorian Health Workforce Strategy development

Thank you for the opportunity to contribute to the development of the Victorian Government's Health Workforce Strategy. We note the Strategy will outline the approach to long term workforce recovery, development, and growth, and identify immediate actions to support the health workforce now. We also note that the process to date has included a series of consultation forums and targeted workshops as well as an online survey, which remains open until 16 October 2022, and that draft actions and proposals will be developed for further consultation in early 2023. In addition to providing this submission, we would welcome the opportunity to be involved further as the work in developing the Strategy proceeds.

Services for Australian Rural and Remote Allied Health (SARRAH) is the peak body representing rural and remote allied health professionals (AHPs) working in the public, private and community sectors, across primary and other health settings, disability, aged care, and other service systems. SARRAH was established in 1995 by a network of rurally based allied health professionals and continues to advocate on behalf of rural and remote communities to improve access to allied health services and support equitable and sustainable health and well-being. SARRAH maintains that every Australian should have access to health services wherever they live and that allied health services are fundamental to the well-being of all Australians.

SARRAH has a diverse and growing membership, including allied health professionals, students and corporate members (which include services, universities and others). Our individual members represent over 20 distinct professions and our Victorian members include representatives of at least 10 health professions, with members working in public, private, university and other settings.

A major focus of SARRAHs work is to facilitate and support allied health service capacity and workforce development across rural and remote Australia. We are currently managing the expansion of the Allied Health Rural Generalist (AHRG) pathway into private and non-Government community-based settings, with funding support provided by the Commonwealth. The AHRG pathway was initially developed by Queensland Health and has been successfully implemented across the Queensland public health system as well as being at various states of trialling and development in several other state jurisdictions.

Together with the expansion of the AHRG pathway, SARRAH is also managing a complementary program to expand the Allied Health Assistant workforce to enable greater reach and access to allied health

services. We are engaged with developments in the AHA workforce in Victoria, through initiatives such as the [Victorian Allied Health Assistant Workforce Project](#).

We also have well established and collaborative, working relationships with health officials and agencies in Queensland, NSW and South Australia in particular. We would equally welcome opportunities for closer engagement and collaboration with the Department of Health in Victoria.

More information about SARRAH is available on our [website](#).

SARRAH strongly supports the development of a Victorian Health Workforce Strategy. Long-term and comprehensive health workforce strategies, ideally at a national as well as State and Territory level, has not received adequate attention or commitment over the past decade and contributed to severe workforce shortages and maldistribution being experienced across health, aged care and disability service systems. SARRAH along with other stakeholders have been advocating for the development of a National Allied Health Workforce Strategy for years but as yet, no such Strategy has been developed. Development of the Victorian Strategy is plan is more than welcome. As the [Victorian Healthcare Association](#) stated in April 2022:

Victoria needs a health workforce plan to overcome a dire shortage of healthcare workers to deliver care where it is needed now and in future.

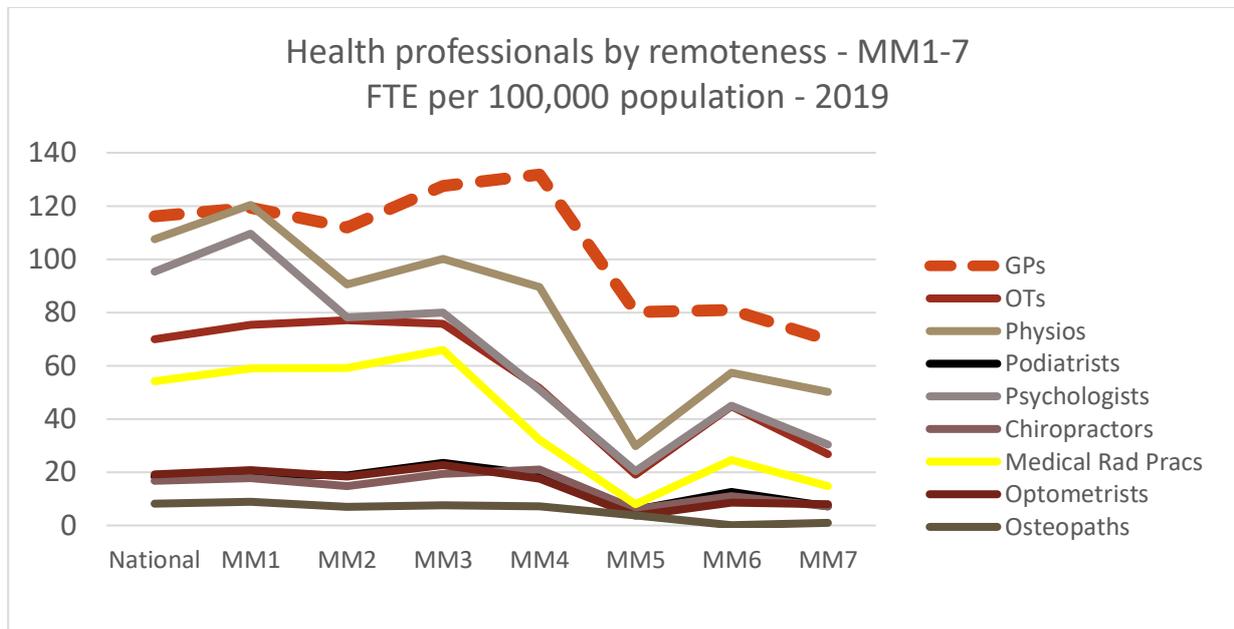
The biggest problem plaguing Victoria's health system today is a lack of qualified people including doctors, nurses, and allied health professionals to work across the state. It is compromising every layer of our health system including hospital and ambulance services, GP and community health care, and residential aged care.

We understand the *Victorian Health Workforce Strategy* could draw on, coordinate and leverage a range of positive workforce and related initiatives recently developed or underway in Victoria, including (as examples):

- [Building The Mental Health Workforce of The Future](#): The Mental Health and Wellbeing Workforce Strategy 2021-2024 will guide growth of the mental health workforce and includes a boost to workforce at existing services as well as staffing new services across the state, including extra graduate occupational therapists, social workers and psychology registrars, with 30 per cent located in regional Victoria, and support 18 new allied health clinical educator roles, ensuring graduates are supported to develop and grow as they begin their careers in mental health.
- As a party to the [National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031](#) and the [Victorian Aboriginal Workforce Strategy 2021-2026](#), where growth in allied health professionals and assistants presents a major opportunity in an area of experiencing workforce shortages and high demand.
- The commitment to provides free university and specialist training for thousands of nurses and midwives, targeting many thousands of nurses and midwives to building a home-grown workforce, which to address similar pressures in allied health services, could be extended to those professions.
- The *Pathways to Home* program which aims to enable more patients with a disability who have been medically cleared but are stuck waiting in hospital for a NDIS plan will be able to go home earlier. This program, which will “free up bed spaces for hundreds of patients, alleviate bed block will be most effective if there is a sufficient allied health workforce to enable patient’s safe discharge, not to mention the safe transition back into community settings, and the role of allied health services in preventing the need for hospitalisation among the general community, aged care recipients and people with disability.

Continuing, chronic and well-known health workforce shortages across rural and remote Australia, including Victoria, and tend to correlate closely with poorer health outcomes, which increase with remoteness. In terms of allied health rural workforce shortages are far more severe - on a per head of population basis around twice as severe as for the much more reported on maldistribution of General Practitioners.

The following graph illustrates the extent of the problem for a range of health professions.



The extent of allied health mal-distribution is also evident in information held on the Commonwealth Department of Health's [website](#) and other sources, such as the AIHW, as illustrated in the following graph.

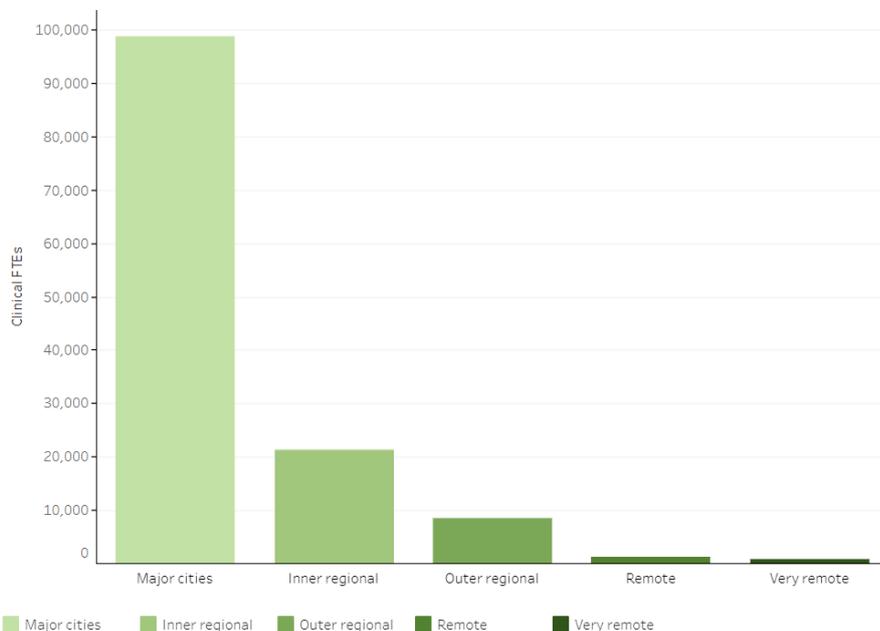
Figure | Data table

Figure 2: Total clinical FTEs and clinical FTE rate, by profession and remoteness, 2015 to 2020

Choose measure: Number of clinical FTE per 100,000 people Number of clinical FTE

Choose profession: Allied health practitioners

Choose year: 2020



Source: <https://www.aihw.gov.au/reports/workforce/health-workforce#overview>. Extracted 29 September 2022

A great deal of information has been produced about the factors that contribute to the attraction and retention of health professionals in rural and remote Australia¹. Unfortunately, despite repeated calls for a national allied health workforce plan over many years, there is none. The most comprehensive review of the situation was produced by the inaugural National Rural Health Commissioner, Professor Paul Worley, who delivered his report *Improvement of access, quality and distribution of allied health services in regional, rural and remote Australia*² in June 2020. An extensive rural and remote allied health workforce strategy is needed.

Fortunately, National Cabinet has indicated that it recognises the systemic costs and inefficiencies that are currently associated with both a) the shortage of vital health and related workforce and b) the lack of coherence and coordination between our major health and social service systems. The development of the Victorian Health Workforce Strategy in this context presents a timely opportunity to address structural problems that have contributed to increased costs across government service systems without commensurate improvements in the access, quality or outcomes of services that could have otherwise been available to many Victorians and other Australians. Addressing these fundamental issues must be a priority for all Australian governments.

If you would like to discuss issues raised in SARRAHs response or require further information, please contact me at catherine@sarrah.org.au or Allan Groth at allan@sarrah.org.au.

Yours Sincerely



Cath Maloney
Chief Executive Officer

Services for Australian Rural and Remote Allied Health (SARRAH) exists so that rural and remote Australian communities have allied health services that support equitable and sustainable health and well-being. SARRAH maintains that every Australian should have access to health services wherever they live and that allied health services are fundamental to the well-being of all Australians. SARRAH is a national, multidisciplinary member association, has been operating for 26 years and the only peak body fully focused on rural and remote allied health working across all disciplines. (More information: <http://www.sarrah.org.au/>).

¹ For instance, see <https://sarrah.org.au/our-work/policy-and-strategy/publications/138-strategies-for-increasing-allied-health-recruitment-and-retention-in-rural-australia>

² <https://www.health.gov.au/resources/publications/final-report-improvement-of-access-quality-and-distribution-of-allied-health-services-in-regional-rural-and-remote-australia>