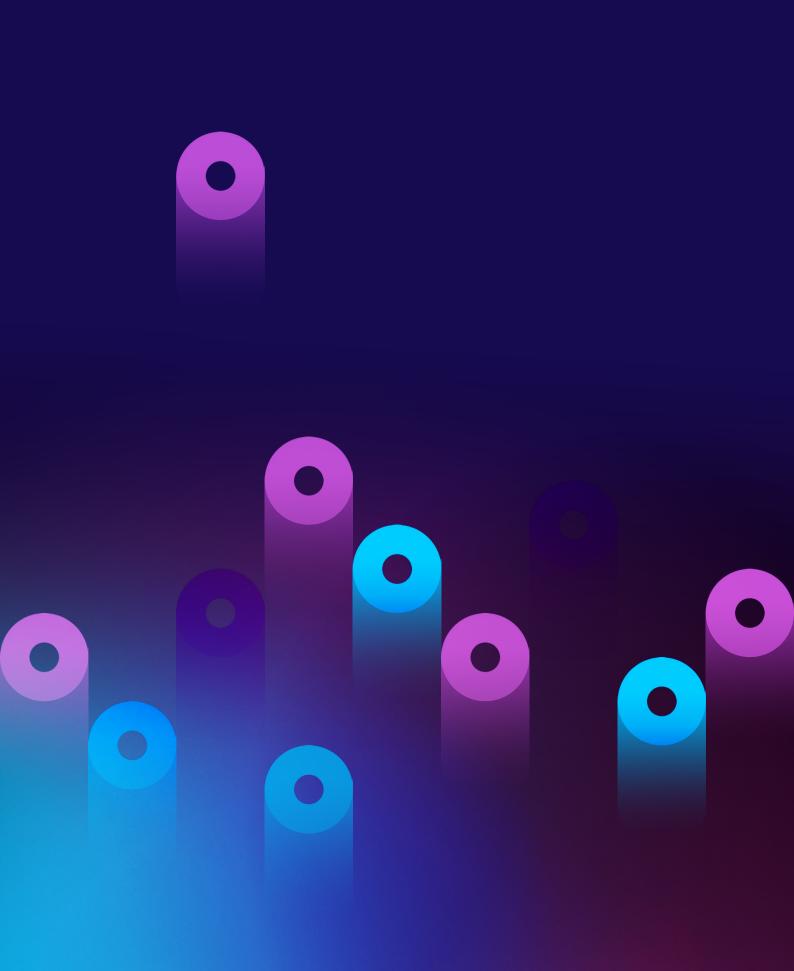


## Workforce Plan 2022-26







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## Foreword



Adj/Prof Shane Crowe Executive Director Nursing & Midwifery

An engaged, committed, robust and skilled workforce is the key to any successful organisation. Western Health is an organisation of people that provide healthcare to people, so to achieve our Purpose the effective management of our workforce is integral. There are many factors, both internally and externally, that impact on workforce management – so an informed, strategic and multi-facetted plan is essential.

As the largest workforce group, which is uniquely involved in all aspects of healthcare and the patient journey, our nurses and midwives have a critical role to play in shaping the future of Western Health. I acknowledge the amazing contribution that our nurses and midwives make to Western Health and those in our care on a daily basis.

There is no doubt that the current local, national and international nursing and midwifery workforce challenges are greater now than any other time in our careers. After years of having projected a shortage of nurses and midwives, as the COVID-19 pandemic has globally impacted on all elements of healthcare the demand for healthcare professionals exceeded the available supply. The last couple of years has seen the predicted shortages become a reality. The reasons for the shortages are varied and include fatigue and the direct impact of the pandemic on the workforce, an ageing workforce, and a growing preference for part-time work.

Western Health has not been immune to the effects of this shortage of nurses and midwives, however our planning has placed us in an enviable position. Western Health's Nursing & Midwifery Workforce Plan 2019-21 has been instrumental in placing the health service in a strong workforce position, which has allowed us to continue to grow and be responsive to meet the healthcare needs of Melbourne's west.

The evolution in health care delivery has not only continued, but it has been fast-tracked due to the pandemic spurring on innovation like no other time seen in recent history. This has resulted in new models of care, new roles, increases in community- based healthcare and the increased use of technology. These evolutions in care has seen an increase in the complexity of care and a greater requirement for clinicians to have highly developed skills in supervision and delegation.

On top of these currently challenges, Western Health is a rapidly growing health service. Over the next 6 years we will almost double in size, with the new Footscray Hospital, Melton Hospital, mental health services and community hospitals coming on line. It is therefore vital that we have a robust Nursing & Midwifery Workforce Plan for the upcoming 5 years to ensure that we build upon the successful initiatives of the past, to include actions that strategically meet the current and future requirements.



I am delighted to present to you Western Health's Nursing & Midwifery Workforce Plan 2022-26 (the Plan). Extensive analysis of our data and consultation has been undertaken to inform this important plan. I sincerely appreciate the insights, ideas and feedback of everyone involved. I believe that the valued input of our nurses, midwives and leaders has resulted in a robust, ambitious yet achievable plan.

The Plan is based around 3 core objectives:

- 1. Attract and retain the best nurses and midwives for our growing health service
- 2. Empowering Best Care, exploring alternate models of care and building expertise
- 3. Enhancing clinical and professional leadership and management

The Plan sits underneath Western Health's overarching Workforce Strategy, with targeted strategic actions to ensure that our nursing and midwifery workforce is well positioned to go from strength to strength.

We know that the Plan will need to be dynamic and fluid, to ensure that it meets the needs of a rapidly growing and evolving health service in an environment where unprecedented sector-wide workforce issues exist. To be successful, all levels of the organisation will need to work together collaboratively – therefore the implementation will be led by Nursing & Midwifery Advisory Committee, with the oversight of Western Health's peak People & Culture Committee.

## Our strategic workforce model

The key elements of the workforce model utilised to inform our inaugural Nursing and Midwifery Workforce Plan 2019-21 continues to be a foundation for our 2022-26 plan. The continuous nature of undertaking workforce analysis and forecasting future needs, analysing current and future gaps, developing and implementing strategies and monitoring and evaluating have facilitated our achievements and will support our ongoing plans.

The key elements of the Plan are:

### Workforce Analysis and Forecast Future Needs

This involves establishing a clear understanding of the requirements of the nursing and midwifery workforce at Western Health, examining its strengths and weaknesses and the internal and external factors that influence the current and future nursing demands. This involves identifying changes to service delivery and service demands.

### **Analyse gaps**

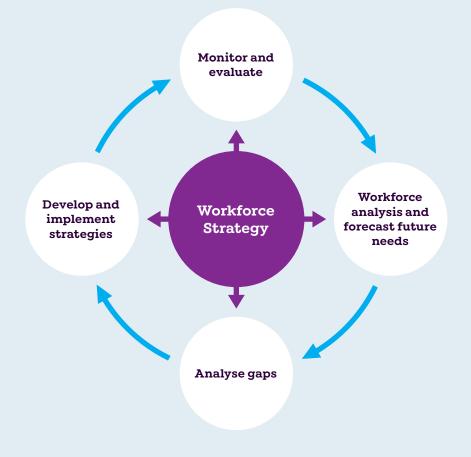
A key component of this aspect is the assessment of the characteristics, capacity and capability of the workforce. Access to workforce data and the capacity to predict nursing full-time equivalent (FTE) shortfalls and trends over time is a vital component.

### **Develop and Implement strategies**

In developing strategies, the planning and design of specific programs and projects that enable the development and maintenance of a capable workforce is crucial. The implementation of strategies is a task for all stakeholders and requires significant organisational support as an enabler.

#### **Monitor and Evaluate**

When implementing any Plan, there is a requirement to both monitor, evaluate and adjust when necessary. Overall measures of success for the nursing and midwifery workforce plan include employee engagement, attraction and recruitment, retention, FTE shortfall, supplementary staff utilisation and participation in ongoing learning.



## **Building the foundation**

The inaugural Nursing & Midwifery Strategic Workforce Plan 2019-21 was released in May 2019 and has provided a framework to enable the implementation and sustainability of strategies to meet current and future nursing and midwifery workforce demands.

The Nursing & Midwifery Strategic Workforce Plan 2019-21 had 3 overarching priorities, under which the accomplishment of 27 of the 29 priority actions, despite the many challenges of the pandemic, have created a sound platform for Western Health to continue to progress initiatives to enable a growing, sustainable nursing and midwifery workforce into the future.

## PRIORITY 1: ATTRACTING AND RETAINING THE BEST NURSES AND MIDWIVES

- **Recruitment branding:** Introduced contemporary nursing and midwifery recruitment branding, with specific marketing materials developed and utilised since April 2019. Development of nursing and midwifery specific brand and microsite was released in June 2021.
- **Centralised recruitment:** Centralised recruitment for Grade 2 Registered Nurses/Midwives (RN/ RM) and Enrolled Nurses (EN) was implemented and embedded into usual practice with targeted recruitment campaigns for specialty areas. Recruitment to meet pandemic workforce demands was facilitated through 'surge' recruitment models including recruitment of specific workforces to meet COVID related programs, as well as facilitating ongoing unit based recruitment to meet activity changes.
- Overseas recruitment incentive program: Development of incentive programs to attract overseas and interstate candidates in specialty areas of high need has occurred with the aim to supplement our workforce with experienced nursing and midwifery staff.
- **Refresher programs:** Nursing and midwifery refresher programs were introduced with Department of Health funding during 2020. Midwifery refresher programs have expanded to support re-entry of midwives into the workforce.
- **Graduate program review:** Revision of Graduate RN and RM programs with inclusion of in-time learning, skill stations, pre-program learning and additional clinical support. Intake numbers have increased with 307 new graduates commencing in 2022 compared to 173 planned in 2021. Pandemic workforce demands have facilitated the implementation of the West Metro graduate program in partnership with other health services, enabling 270 early career RNs & ENs employed in COVID response roles to complete a formal graduate program with clinical rotations within an acute area, with the aim to transition to permanent employment during the expected decrease in COVID response demand in 2022.
- **Grad+ program:** Development and implementation of a 2 year Grad+ program has occurred enabling graduates to continue to expand their clinical expertise through an additional 2 rotations and credit for 2 Western Health taught post graduate

subjects focusing on advanced clinical assessment, pathophysiology and clinical leadership.

- Enrolled Nurse early career program: Increasing EN employment models has been achieved with an EN early career program implemented in 2020, which expanded to facilitate 20 positions (I0 x 6 month rotations) in 2021 across more wards. In addition, pandemic workforce demands enabled the implementation of the West Metro graduate program, the 'surge' recruitment models for COVID related roles as well as the introduction of ENs to work in our renal dialysis teams.
- **Discovery program review:** Discovery programs have been reviewed, and aligned with centralised recruitment process and ongoing permanent positions (in place of fixed term). The programs will continue alongside the second year of the Grad+ program enabling other staff not within the graduate program and external candidates to join our workforce through these learning programs providing an effective pipeline to our specialty areas.
- **Reward and recognition program:** Expansion to the reward and recognition program implementation of regular communication forums, expansion of newsletter content, individualised person and unit reward and recognition activities have been implemented, complemented by organisation-wide distribution of COVID related donations and recognition programs implemented through Western Health wellness strategies.

- Advanced and extended scope of practice: Optimised models of care through advanced and extended scope of practice nurses and midwives with oversight by Nursing & Midwifery Scope of Practice and Credentialing Committee has continued, with review of current advanced scope of practice roles and implementation of Nurse Practitioner and candidate roles.
- Third tier workforce: Development of a Registered Undergraduate Student of Nursing/Midwifery (RUSON/M) model of care pilot program commenced in November 2020 in 8 clinical areas. Western Health was the first health service in Victoria to introduce the RUSOM model, and during 2021 the program was expanded from being only in postnatal to supporting our midwives within other areas of maternity. The pandemic workforce demands expanded the employment of this workforce more broadly than originally intended with roles working very successfully in all wards and supporting COVID specific activities - including vaccination, contact tracing, PPE Spotting, COVID testing and Rapid Antigen Testing. The employed RUSON/Ms that have not yet graduated have been retained, and additional RUSON/Ms are being recruited to ensure that all wards and departments are supported by this role into the future. This new program has been confirmed until the end of December 2022. and funding options to embed beyond this date are being investigated.
- **Contemporary rostering practices:** A review was completed with recommendations all actioned. Enhanced flexible work arrangements have been enabled where appropriate and a supplementary roster model implemented using Health-e Workforce software platform.

## PRIORITY 2: EMPOWERING THE PROVISION OF BEST CARE

- Redesign of Clinical Education model: Introduction of a clinical education model that aligned resources with wards / divisions and a preceptor based undergraduate model to enhance bed-side clinical teaching opportunities and life-long learning model was implemented. Fellowship models for undergraduate student placements with two universities are underway and increasing the numbers of students completing placements has been facilitated each year.
- Team-based models of care: Implementation of team based models of care across all inpatient areas has been achieved and was integral to providing best care during the pandemic, particularly when extended team based models were enacted during COVID peak. With the changes to workforce demographics, skill mix and experience, team-based models of care have facilitated the experienced nursing staff to work at their full scope of practice, with the less experienced or qualified staff within the team allocation providing nursing care under their supervision and guidance.
- **Optimisation of delegation and supervision:** Enhancing knowledge of best practice delegation and supervision requirements has been achieved with development and rollout of delegation and supervision education programs. This knowledge has been further reinforced with the implementation of team-based nursing models across all inpatient areas.
- Working Together: Implementation and evaluation of 'working together' pilot completed with evaluation submitted to Department of Health. Successful use of a co-design approach has provided other project managers with a new framework which is actively being utilised across the organisation.
- **Review of 'specialling' utilisation:** A co-designed review was undertaken to enhance efficiency and sustainability has occurred. The updated procedure was endorsed with implementation and communication plans developed for rollout, however this is yet to be implemented due to the decision to minimise changes during COVID peaks.
- **Optimise EMR to enhance Best Care:** A number of changes and enhancements to the EMR have been made to improve nursing utilisation and patient safety. This is an iterative process and is led by the Nursing & Midwifery Optimisation Group. Phase 2 of EMR project is underway.

## PRIORITY 3: ENHANCING CLINICAL AND PROFESSIONAL LEADERSHIP

- Nursing & Midwifery Professional Framework: Developing a Western Health nursing and midwifery professional framework had progressed to the final stages of stakeholder consultation in mid-2021, however was not progressed further due to COVID related demands – this will be achieved by mid-2022.
- Leadership programs: The Transforming Leadership Capability (TLC) program introduced for Unit Managers complemented by Managerial Masterclasses offering 1 session every 5 weeks was implemented, and is being refined in 2022. The Advancing Frontline Leadership program was introduced specifically focused at enhancing ANUM / AMUM capability.
- Enhanced CNS / CMS leadership: Occurred through increased engagement in clinical portfolios has been achieved.
- Formalised clinical supervision program: Implemented for Clinical Nurse Consultants and Clinical Midwife Consultants.
- **Chair in Midwifery:** Appointment of a Chair in Midwifery with research and publications outcomes achieved
- Increase post graduate courses offered: Formal collaborative meetings occur with 5 universities on a quarterly basis. Exploration of opportunities and collaboration with university partners for facilitation of ongoing learning and post graduate courses occurred. Formalising of partnerships for post graduate certificates in new clinical areas for 2021 and beyond continue. A significant increase in subsidised post graduate courses for Critical Care and Emergency in 2022 has increased participation rates.
- Optimising benefits from strategic workforce **software:** Ongoing utilisation of strategic workforce software, inclusive of real-time detailed workforce reporting and supplementary staffing management. Development and review of workforce FTE profiles for all clinical nursing and midwifery departments to inform budget build and proactive workforce planning. Utilising real-time vacancy data to drive proactive discussions with key stakeholders prompting timely recruitment. Pandemic workforce demands supported the expansion of the capability of the software to assist with point in time 'surge' workforce predictions, including mapping the needs for differing models of care delivery and the impact of increasing personal leave rates. Prediction tools for longitudinal future workforce needs have been enabled supporting timely recruitment and leave planning. Data integration with rosters from RosterOn has also occurred enabling a centralised and transparent view of our workforce demographics, skill mix and ability to meet Safe Patient Care Act 2015 ratio requirements.

## OPPORTUNITIES CREATED BY THE PANDEMIC

Alongside the planned actions, the environment created by the pandemic has provided opportunities to enable the growth and development of our workforce that were unforeseen.

Pandemic workforce demands:

- enabled a 'surge' workforce to be recruited and trained;
- led to multiple employment pathways and education opportunities across differing expertise levels that had not previously been explored;
- facilitated an expansion of our current workforce capabilities;
- embedded team-based models of care, and
- facilitated learning pathways previously not available.

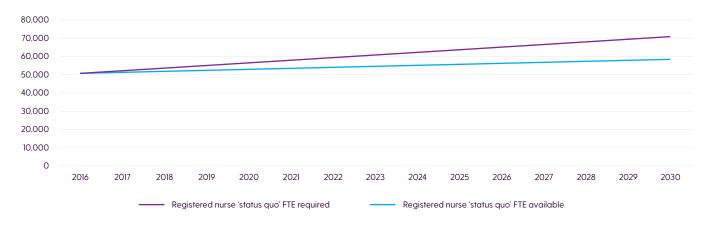
This has supported significant expansion and capability of our nursing and midwifery workforce in a very short period of time.

# External influencing factors

## WORKFORCE DEMAND AND SUPPLY

With the recent pandemic and the current shortage of nurses and midwives faced across Australia, both urban and rural settings in Victoria are experiencing an increase in demand for nurses and midwives which is far exceeding the supply. We are faced with the highest imbalance in workforce availability that the nursing and midwifery profession has seen for many decades. In 2016 the Department of Health Victoria released workforce projections (pictured below) on the projected supply and demand curve for Registered Nurses in Victoria.

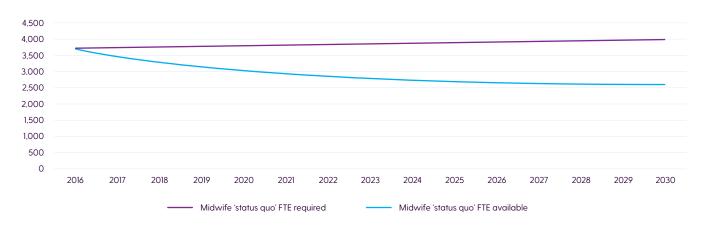
The projections graphed were undertaken based on the data available at that time. They do not account for changes in supply and demand that have occurred since that time.



Graph 1: Projected supply and demand curve for Registered Nurses in Victoria (Department of Health 2016)

Similarly the 2016 Department of Health data showed that the workforce projections for midwives looked even more concerning, with the demand for midwives expected to increase slightly, with the supply of available midwives expected to drop over time to create a significant deficit.

Over 2021 and 2022 health services across Victoria have started to see shortages within maternity areas. Western Health has not been immune from this, with some shortages experienced in mid-2022.



Graph 2: Projected supply and demand curve for Registered Midwives in Victoria (Department of Health 201

The nursing and midwifery data recently release by the Australian Government Department of Health (June 2022) reflects that the demographics of the Australian nursing and midwifery workforce over the past seven years has not significantly changed despite awareness of the long predicted workforce shortage.

### Table 3: Nurses and midwives by division

	2020	2021
Registered Nurses	271,009	286,149
Enrolled Nurses	52,342	54,193
Dual Registration	21,256	20,990
Registered Midwives	4,982	5,364
Total	349,589	366,696

The data comparison for 2020 to 2021 in Table 3 reflects an increase in the number employed across both genders and all age groups with an overall increase of 17,107 individuals.

However this increase across the Australian workforce has not decreased the supply vs demand gap.

The latest data is reflecting:

- A slight reduction in the average age of registered nurse and midwives from 44.4 years in 2015 to 43 years in 2021;
- Average hours worked per week has remained consistent at 33.5 from 2015 with a slight reduction in 2020 and an increase to 33.9 in 2021;
- Nurses and midwives born in Australia has reduced from 64.9% in 2015 to 60.6% in 2021, reflecting the steady increase in overseas born nurses joining our workforce during the past 7 years.

The breakdown of nurses and midwives by division data for 2020 and 2021 reflects an increase of 16,991 Registered and Enrolled Nurses and 116 midwives. Table 4: Age and gender – nurses and midwives

	2015		2	021
	Female	Male	Female	Male
Under 30	46,420	5,259	60,166	6,951
30-39	53,501	7,986	81,965	13,784
40-49	67,835	8,892	68,343	9,661
50-59	76,264	7,454	69,656	7,898
60 or over	32,812	3,064	43,855	4,404
Total	273,832	32,655	323,985	42,698

https://hwd.health.gov.au/nrmw-dashboards/index.html (accessed July 2022)

A detailed breakdown of age groups of employed nurses and midwives in 2015 compared to 2021 in Table 4 reflects the greatest increase in the under 30 age group, a reduction in the 50–59 female age group and an increase in the 60 or over age group.

In summary, Australia continues to be faced with a widening and significant gap between workforce supply and the known increasing demand.

## **A GROWING AND DIVERSE WEST**

In 2022 within our catchment Western Health serves l million people, which is 15% of Victoria's total population. The population of the west is growing at a rate of 2.5% per year, compared to a growth rate of 1.7% for Victoria. This will see the population in our catchment reach 1.5 million around 2036.

The population we serve comes from a wide range of cultural diversity and socioeconomic circumstances. There is comparatively more disadvantage in Brimbank, Hume and Melton, these are also areas with the highest growth.

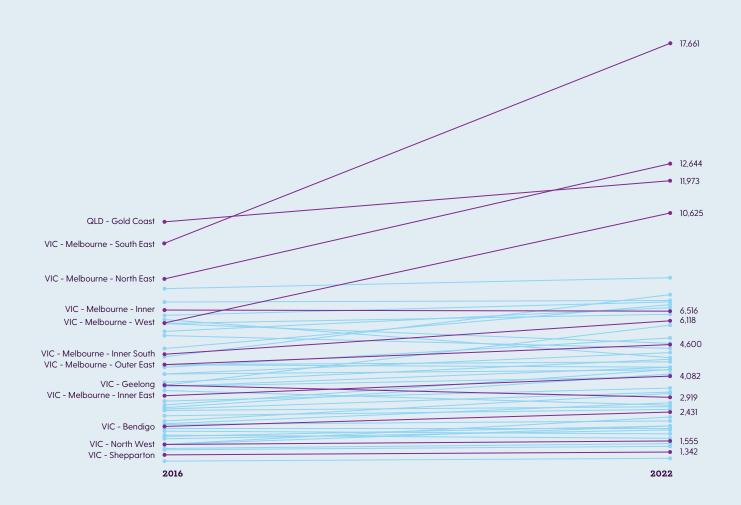
Unfortunately our community has a higher prevalence of diabetes, heart disease and obesity when compared to other regions.

To meet the needs of our community, there are numerous funded capital projects to grow Western Health's capacity to keep up with demand. We will grow from 9 sites in 2020 to 15-20 over the coming years covering a large geographical area. In 2023 Western Health will become a designated mental health service, with 52 new mental health beds being constructed at Sunshine Hospital scheduled to open in the same year. The opening of the extended Sunbury Community Hospital and Point Cook Community Hospital will occur over the coming years, with the new Footscray Hospital scheduled to open in 2025 and the new Melton Hospital is planned to open in 2027.

Recent data from the National Skills Commission shows that the western metropolitan region of Melbourne is currently the fourth largest employment region for Registered Nurses in Australia, and the third fastest-growing. These projects will most definitely change both the size and rate of growth.

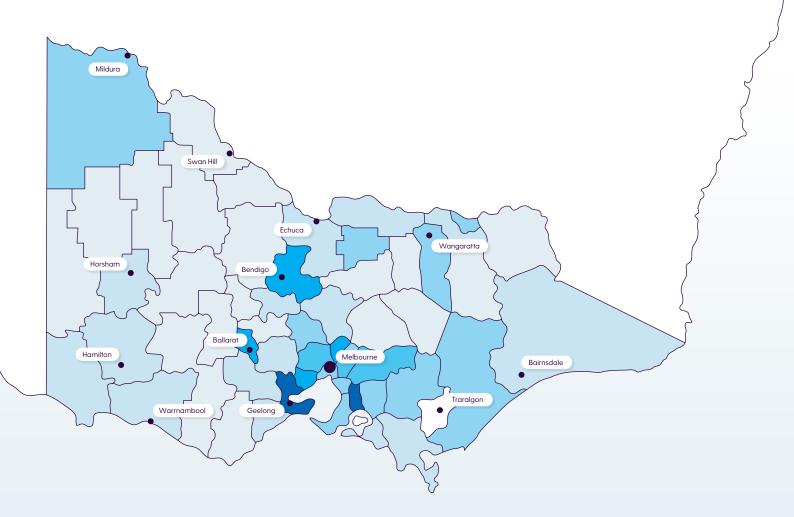
Western Health's future size and scale enables further specialisation and planned clustering of patient cohorts. There may potentially be an increased breadth of services, with Western Health becoming a comprehensive care provider. Supporting our nurses to further refine and develop expertise will be important to harness staff specialist skills and improve efficiency and quality of care.

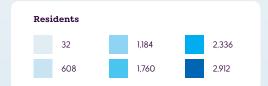
Innovative ways of working with universities, both in terms of research and in planning for our future workforce and building capability will be an important enabler.



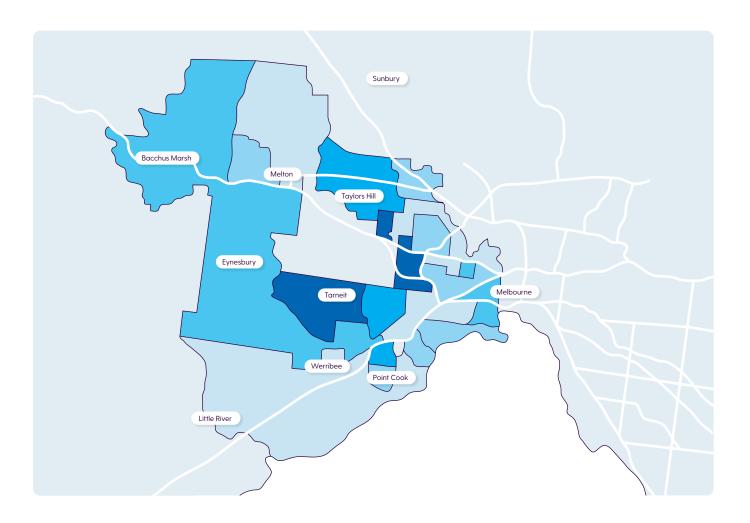
## WHERE NURSES AND MIDWIVES LIVE

Working close to home is a key driver for many people. Data from the Australian Census 2016 shows that within metropolitan Melbourne a higher proportion of nurses and midwives live in the south-eastern suburbs, northern corridor and north-east. The western metropolitan region of Melbourne has a lower proportion of nurses and midwives than most other areas. Of interest is the higher proportion of nurses and midwives living in Geelong. Bendigo and Ballarat.





When looking in more detail at the western metropolitan region, the suburbs of Tarneit, Caroline Springs, Deer Park and Point Cook North have a higher proportion of nurses and midwives.



Altona	105
Altona Meadows	149
Altona North	67
Ardeer - Albion	56
Bacchus Marsh	165
Braybrook	142
Burnside	56
Burnside Heights	79
Cairnlea	101
Caroline Springs	258
Deer Park - Derrimut	279
Delahey	57

Footscray	121
Hillside	191
Hoppers Crossing - North	134
Hoppers Crossing - South	148
Keilor Downs	69
Kings Park (Vic.)	71
Laverton	63
Maribyrnong	106
Melton	80
Melton South	176
Melton West	116
Newport	158

Point Cook - East	88
Point Cook - North	227
Point Cook - South	118
Rockbank - Mount Cottrell	0
Seabrook	42
Seddon - Kingsville	91
St Albans - North	88
St Albans - South	89
Sunshine	63
Sunshine - North	67
Sunshine - South	89
Sydenham	89

Total	5,655
Yarraville	121
Wyndham Vale	176
Williamstown	123
West Footscray - Tottenham	93
Werribee - West	92
Werribee - South	84
Werribee - East	112
Truganina	229
Taylors Lakes	118
Taylors Hill	162
Tarneit	342

## **Our situation**

Since our previous workforce plan, a number of reliable data source platforms have been implemented providing the organisation with a robust, centralised information source for nursing and midwifery workforce data.

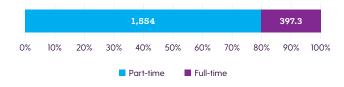
## **CURRENT WORKFORCE STATUS**

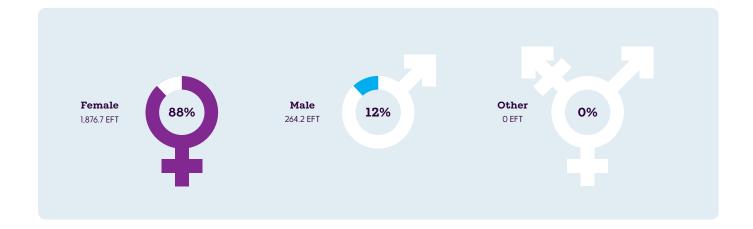
Nursing and midwifery at Western Health has a total staff headcount of 4,885 employees. For the past 12 months, total commencements were 1,225 with 548 terminations resulting in an increase in employed staff by 677 individuals.

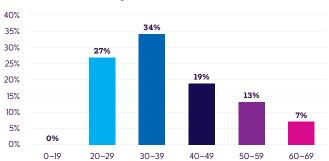
79% of our permanent staff are employed in a parttime capacity, this is an increase of 2% since 2019.

88% of the nursing and midwifery workforce identify as female, with 12% identifying as male.

#### Part-time / Full-time EFT mix







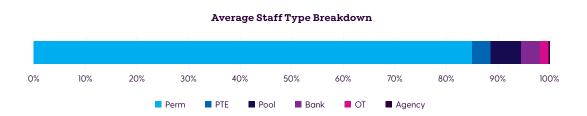
#### Age Breakdown EFT

Western Health has a young workforce, with:

- 34% of our nurses and midwives are aged 30–39 years, which is higher than the Australian rate of 26%.
- 27% of our nurses and midwives are aged 20-29 years, which is higher than the Australian rate of 18.3%
- The aged demographics between 40-69 years are all well under the Australian rates.

The shift towards a younger workforce has seen an increase of 10% of nurses and midwives in the age range 20-39 years compared to 2019. This is due to the influx of COVID related recruitment.

There has also been a reduced length of tenure with 76% staff having worked at Western Health for less than 10 years, compared to 68% in 2019. This reflects the high number of early career nurses recruited during the pandemic and some of our senior workforce retiring, as well as the growth the organisation has experienced.



Our total nursing and midwifery workforce is comprised of:

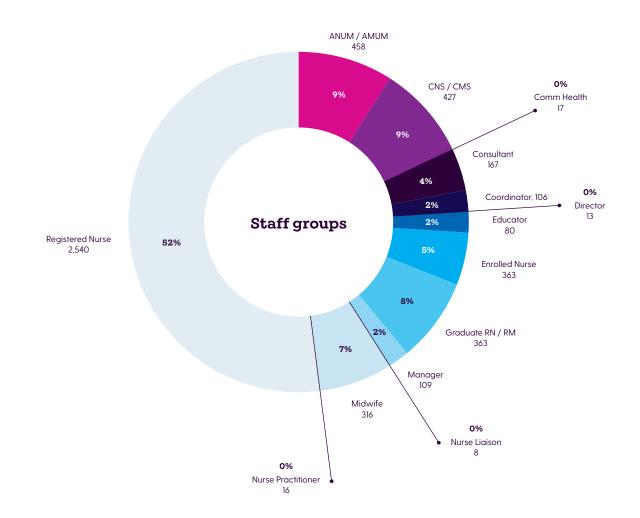
- 86% permanent staff (down from 87.1% in 2019)
- 14% supplementary workforce (including Pool, casual bank, part-time staff working additional shifts above contracted hours, permanent staff working overtime shifts and agency staff).

There has been an increase in Pool workforce bridging the gap, going from 2.5% in 2019 to over 6% in 2022.

Despite growth and significant demand for nurses over the COVID period, there has been a significant reduction in the use of agency nurses and midwives, going from 1.1% in 2019 to 0.07% in 2022. The staff role demographics appear to have slightly changed from 2019 however the data collection breakdown is not a direct comparison. The data is suggestive of 88% Registered Nurses and senior roles (includes Registered Nurses and Midwives), 7% midwives and 5% Enrolled Nurses.

Enrolled Nurse percentage is low when compared to peer organisations and has reduced by 2% compared to 2019.

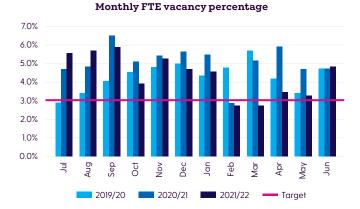
Graduate nurse and midwifery program participants have increased to 363 participants in 2022. When compared to previous years. This is a significant increase and they now make up 8% of the workforce compared to 5.4% in 2018.



## **KEY DRIVERS FOR CURRENT STAFFING**

### **Workforce deficits**

In 2019, the Nursing and Midwifery Workforce Unit implemented centralised recruitment for Grade 2 Registered Nurse, Registered Midwife and Enrolled Nurse positions – with the aim to reduce the recruitment burden for Unit Managers facilitating more timely recruitment into vacancies and improving the candidate experience. This initiative has provided an excellent platform for meeting recruitment needs during the pandemic with the ability to recruit significant numbers of 'surge' staff to support our nursing and midwifery workforce during this time.



Along with the implementation of the workforce planning platform (Health-e Workforce Solutions) enabling real-time workforce data and scenario forecasting, the Nursing and Midwifery directorate were well placed to understand the demand and supply needed to meet differing surge scenarios and proactively implement strategies to increase staff supply. New initiatives implemented included the West Metro graduate program (providing staff to vaccination hubs and acute care settings), recruitment for COVID specific roles, ongoing recruitment of Registered Undergraduate Students of Nursing (RUSON) and expansion of this program to include midwifery students (RUSOM).

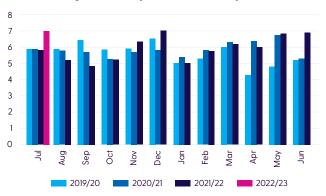
In a time when experienced Registered Nurses, Midwives and Enrolled Nurses were in short supply and the ability to maintain usual staffing levels was compromised. Providing a 'support' workforce, of which many transitioned into ongoing roles after their 'surge' roles were completed, enabled a safer and more supportive work environment for our staff than they would have experienced without these roles in place.

Providing our workforce with post graduate study scholarships, increasing our nurse and midwifery graduate program intakes and expanding the program to include non-PMCV matched graduates has facilitated meeting or remaining close to percentage targets in early 2022.

### **Personal leave rates**

Nursing and midwifery personal leave rates expressed as a percentage of ordinary hours have fluctuated over the past two years in response to the pandemic, illness and changes in activity and demand across the organisation.

Nursing & Midwifery PL as a % ordinary hours

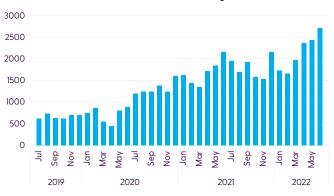


In early 2020 rates significantly reduced with closure of bed activity in the first wave of the pandemic and the pattern for the next two years has aligned with further outbreaks, winter months and bed activity changes.

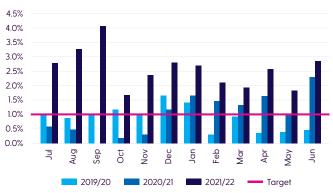
### Additional care resources

With the increasing complexity and acuity of patients admitted to the service, the demand for additional care resources to support care delivery has increased significantly over the past three years. In 2019, the average per week was approximately 700 shifts per week, which has risen to 2,130 shifts per week in the past 6 months.

A review of the staffing requirements and procedures related to utilising these resources has identified a number of initiatives which have been implemented to support best patient care.



Additional care resource shifts per month



Monthly Agency as a percentage of Ordinary Hours

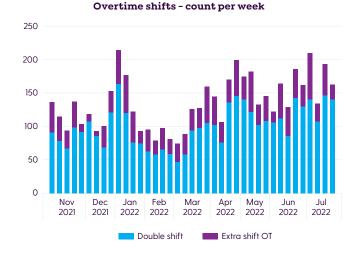
Providing a more robust and clear framework for the clinicians to refer to has differentiated when using Health Care Workers (HCW / PCA), security staff or nursing is most appropriate, along with improved communication processes and tools has been the aim to support the best outcomes for the patients.

Approval for utilisation of these resources remains the responsibility of the Operations Manager or Division Director and is based on clinical requirements and safety.

With reliance on agency staff to cover the majority of the non-nursing additional resource requests, the utilisation has consistently been above target over the past 12 months.

### Overtime

In 2019 the nursing and midwifery overtime utilisation averaged 22 FTE per week. This accounts for approximately 2% of the nursing and midwifery salary and wages expenditure.



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Due predominantly to the increase in the number of staff furloughed and heightened personal leave rates, this has increased over the periods of COVID surge. In July 2022 there was an averaged utilisation of 8.4 FTE of overtime and 29.6 FTE of double-shift overtime per week (total of 38 FTE).

However given the growth of Western Health and the nursing and midwifery workforce, this is actually a decrease to 1.25% of the nursing and midwifery salary and wages expenditure.

Most nursing and midwifery overtime occurs at the Sunshine Hospital Emergency Department and our maternity services in Joan Kirner Women's & Children's.

Ongoing recruitment to fill budgeted FTE and upskilling of early career nurses continues to be a priority to keep overtime rates and the use of double-shifts to a minimum for staff wellbeing.

### Wellness and Work-Life balance

During the pandemic, the majority of the nursing and midwifery workforce did not utilise their annual leave entitlements in support of their colleagues and community. As a result, an accumulation of leave entitlements has occurred that staff are now ready to utilise. Supporting our valuable staff to take their leave to allow them to rest, recover and maintain wellness is an important component for retaining them in our workforce. Strategies to facilitate approval of leave must be enabled. Ongoing recruitment to fill budgeted FTE and upskilling of early career nurses to build their capability will support increasing the supply of appropriately skilled staff and the ability to release others to take leave.



## Strategic alignment

The Nursing & Midwifery Strategic Workforce Plan has been informed by and aligns with Western Health's Vision, Purpose, Guiding Principles, Values and the Strategic Direction 2021-2023.

With this in mind, the key stakeholders reviewed workforce data, planned and projected service delivery changes and the constraints in the system while considering the feedback received from our nursing and midwifery workforce, and presented ideas for consideration and prioritisation.

## **OUR STRATEGY**

## Vision

Together, we deliver the healthcare of the future.

## Purpose

Providing the Best Care for the people of the West, in the right place and at the right time.

Guiding Principles
Simple
Sustainable

Connected

## Values

Compassion Accountability Respect Excellence Safety

## **Strategic Direction**

01



## We partner with patients and families

Our patients and families are actively involved in their care and connected to the right services.



## We care for our people

Our staff and volunteers are supported, engaged and equipped to embrace a dynamic future.



## 03

02

We deliver services for the future

Our services are expanding within and beyond hospital walls, advancing high-quality and connected care.



## 04

05

We are better together

Our respectful relationships with our community, system-wide partners and each other drive collaboration and better outcomes.



## We discover and learn

Our innovation, research and education inspires and benefits our patients, staff and communities, to deliver a better future.

## Our way forward

### Growth, growth, growth

With the exciting major projects Western Health is undertaking over the next few years, engaging with a growing workforce to provide delivery of care in these new facilities needs to be undertaken with a planned approach. Initial recruitment, ongoing retention and replacement of attrition for our current and predicted future demand in an environment of undersupply requires a considered approach and innovative strategies.

We know that we will need to source at a minimum 1,600 FTE of nurses and midwives (2,300-4,000 individuals) in the next 6 years to meet the demands of new and expanded services opening. In addition, replacement of attrition (8% over past 3 years) equates to a total of 2,000 FTE overall. This is double our current workforce and will lead to around 9,500 individuals working in the nursing and midwifery workforce across Western Health by 2028.

Areas of growth we have and will need to focus on are:

- The recently completed Sunshine Hospital Emergency Department redevelopment adding extra treatment spaces which are opening with recruitment of new staff.
- Expansion and opening of additional beds across current sites in support of recovery initiatives post COVID-19 with ongoing growth in elective surgery and increasing services in the community.
- In 2023, the disaggregation of mental health services in the western metropolitan region with Western Health becoming a designated mental health and wellness service. This includes the opening of a new 52 bed mental health inpatient facility. The expansion of Sunbury Day Hospital to include an Urgent Care Centre and diagnostic services to become a Community Hospital will also occur in 2023.
- In 2024, opening of the new Point Cook Community Hospital on a green-field site.
- In 2025, the opening of the new Footscray Hospital, increasing capacity by nearly 200 beds.
- In 2027 & 2028, a phased opening of planned Melton Hospital – a new tertiary hospital which will include a 24-hour emergency department, more than 100 medical and surgical beds, an intensive care unit, maternity and neonatal services, more mental health services, interventional services and ambulatory care.

## Workforce capability

Sourcing individuals to work with us is one component of supplying an appropriately qualified and sustainable workforce.

From our early career nurses and midwives to our senior staff and executive team, facilitating the professional, leadership and management growth of our workforce is imperative to recruitment and retention of our workforce. Developing the capacity and capability of our workforce, preparing them to be leaders of the future and ensuring a workplace that promotes and supports lifelong learning will have a significant influence on the shape of our future workforce.

In addition, review of the 'way we work' will be needed to ensure we have the right person delivering care, at the right time, to our patients in the right place. With the supply and demand gap we are experiencing now and expecting to continue in the next few years, answering the question of which person with which skills are best to provide the care to our patients should be considered, and appropriate actions taken to facilitate and ensure staff are working at their most appropriate capabilities. By actioning this, the expected outcome will be provision of best patient care while creating an environment where staff will feel accomplished and rewarded.

## Developing our plan

## Extensive consultation has been undertaken to inform this important plan.



We had dedicated workshops and have consulted with our senior leaders and our Unit Managers, and we engaged directly with our nurses and midwives to ensure that their views and feedback influenced the priorities and actions to shape our future.

Consultation focused in getting feedback on the key actions that would attract and retain our staff, would empower Best Care and build expertise, and to enhance clinical and professional leadership over the next few years.

The key themes that emerged for attracting staff to Western Health were to improve the recruitment and on boarding experience and marketing strategies, along with expanding Graduate program options to specialty areas and offering transition to acute practice programs. For retaining staff, responses reflected that improving rostering practice to support wellness and work life balance and supporting flexible work arrangements as the most important actions to implement. Night duty incentives, onsite services and safe access to public transport were the next actions identified as a priority for retaining our workforce.

The top actions to empower Best Care and build expertise were to enhance the alignment of educators and clinical support nurses to wards, to explore utilising support staff roles to assist nurses and midwives to work at full scope of practice and have flexibility of positions with pathways to move across areas. A clear framework for progression into specialty and advanced practice along with post graduate scholarships were also identified as key actions to facilitate this. The responses reflected the actions of increasing access to clinical leadership activities along with a framework and pathway for progression into management and leadership roles would enable enhancement of clinical and professional leadership. Other actions identified as a high priority are to improve access to leadership and management resources, offer rotating Associate Unit Manager positions and to increase formal leadership and management learning opportunities.

Our nurses and midwives also commented on strategies or programs they felt should not continue or should be considered for the future. The 'not to continue' themes that emerged were related to practices that were seen as unfair and inconsistent which included rostering and staff allocation. Further strategies to be considered included expansion of education, career and leadership programs, education support on wards, flexible rostering practices, retention of experienced staff and workload protection. Other suggestions and comments noted included incentives such as pay increases, car parking, breaks, patient ratios, child care and vouchers / rewards.

We appreciate the effort taken by all those involved in the development of this Plan and value their input.

## **Objectives and actions**

The Nursing and Midwifery directorate is committed to working with all stakeholders to implement the following objectives in line with the actions that focus on meeting our workforce growth and development in the coming years.

### **Objective 1**

Attract and retain the best nurses and midwives for our growing health service

### **Objective 2**

Empowering Best Care, exploring alternate models of care and building expertise

## **Objective 3**

Enhancing clinical and professional leadership and management

## **OBJECTIVE 1: ATTRACTING AND RETAINING THE BEST NURSES AND MIDWIVES FOR OUR GROWING HEALTH SERVICE**

	Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
1	Develop and implement International and National recruitment relocation package	People and Culture	2022	Streamlined process and resources easily accessible and implemented by recruiting managers	Nursing and Midwifery Workforce Unit
2	Evaluate, enhance and embed Registered Undergraduate Students of Nursing (RUSON) and Midwifery (RUSOM) programs	Education and Learning team	2022	Increase in numbers employed as RUSON/ Ms and retention into graduate employment	Director of Nursing & Midwifery (DoNM), Inspiring Innovation
3	In collaboration with university partners, investigate and facilitate an increase in undergraduate student placement opportunities	University partners	2022	Increase in student numbers and fellowship program participants	Education and Learning Team
4	Explore and implement a Transition to Acute Care, refresher and re-entry programs for qualified staff with limited recent acute hospital experience	Education and Learning team	2022 - 2024	Twice yearly programs delivered	Director, Education and Learning
5	Investigate opportunities and implement actions to improve recruitment experience for candidate and manager from initial contact to on boarding	People & Culture; Nursing and Midwifery employees	2022 - 2024	Streamlined process with minimal delays with positive candidate and manager feedback	DoNM, Workforce
6	Explore and implement expansion of graduate employment models including registered nurses & midwives and enrolled nurses	Nursing and Midwifery Workforce Unit	2022 - 2026	Increase in graduate program participant numbers	Education and Learning Team
7	Determine workforce recruitment targets for new activity by utilising workforce planning tools	Divisional Directors; Project development teams	2022 - 2026	Workforce profiles built in Health-e Workforce Solutions platform for all new growth informing recruitment needs	DoNM, Workforce
8	Optimising roster practices to meet care delivery needs, support wellbeing and improve job satisfaction	Directors of Nursing and Midwifery (DoNMs)	2023	Embed audit for best practice and supplementary roster process	DoNM, Transformational Projects
9	Explore traineeships including Enrolled Nurses and health care worker programs	Education and Learning team	2023	Implementation of traineeships	Director, Education and Learning

	Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
10	Enhance secondary school relationships and explore pathways and employment models	People and Culture; Education and Learning team; Nursing and Midwifery Workforce Unit	2023	Sustainable relationships maintained and employment opportunities promoted and utilised	Director, Education and Learning, Nursing and Midwifery Workforce Unit
<sup>11</sup>	Explore workplace cultures experienced by point of care nurses & midwives and Unit Managers, develop and implement strategies to retain positive workplace cultures and facilitate transition into our growth areas	Workplace strategy and wellbeing team	2023 - 2025	People matter survey results reflecting positive workplace culture	DoNM, Inspiring Innovation
12	Review Nursing and Midwifery marketing strategies to facilitate meeting demographic needs	Public Affairs	2023 - 2025	Increased applications for advertised positions	DoNMs - site, divisions and Workforce
13	Westwards – develop and implement enhanced Pool employment model and grow program to meet workforce needs	Nursing and Midwifery Workforce Unit	2023 - 2026	Sustainable self-sufficient employment model	DoNM, Workforce
14	Explore and implement sustainable retention incentives including flexible working arrangements, alternate roster shifts, wellbeing and safety strategies	People and Culture; Workplace Strategy and Wellbeing team	2023 - 2026	Reduction in personal leave, turnover and vacancy rates	DoNMs - site, divisions and Workforce
15	Develop and implement recruitment campaign for new Footscray Hospital	Divisional Directors; People and Culture, Public Affairs	2024	Timely recruitment to meet staffing needs	DONMs - site, divisions and Workforce
16	Develop and implement recruitment campaign for Melton Hospital	Divisional Directors; People and Culture; Public Affairs	2026	Timely recruitment to meet staffing needs	DONMs - site, divisions and Workforce

## **OBJECTIVE 2: EMPOWERING BEST CARE, EXPLORING ALTERNATE MODELS OF CARE AND BUILDING EXPERTISE**

	Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
17	Review and clarify Clinical Nurse Specialist / Clinical Midwife Specialist application process	Directors of Nursing & Midwifery	2022	Reviewed documents published with clearly defined application process	DONMs - site, divisions and Workforce
18	Increase Post graduate scholarships offered – across all areas including ED/ICU/other specialties	Divisional Directors; Directors of Nursing & Midwifery; Education and Learning Team	2022	Increased number of scholarships offered	Director, Education and Learning
19	Expand clinical assessment learning opportunities	Education and Learning Team	2022	Increase learning programs focussed on clinical assessment	Director, Education and Learning
20	Improve access to quality care provision resources	Director, Best Care Operations	2022	Ongoing PPG review, access to Lippincott library	DoNM, Inspiring Innovation
21	Utilisation of additional care resources model and staffing reviewed	Divisional Directors	2022 - 2024	Reduced 'missed' care events through use of appropriate staffing resources	DoNM, Inspiring Innovation
22 ())	Grad+ program for Registered Nurses and Midwives embedded	Divisional Directors	2022 - 2024	Rotation options increased	Director, Education and Learning
23	Explore utilising support roles to facilitate nurses and midwives to work at full scope of practice	Divisional Directors; Craft group leads	2022 - 2025	Nurses and midwives scope of practice optimised in all settings. Team based models of care embedded	DONMs - site, divisions and Workforce
24	Optimise EMR to enhance Best Care	Divisional Directors; Directors of Nursing & Midwifery; Education and Learning Team	2022-2026	Implement Phase 2; supply devices to facilitate timely EMR access and utilisation; develop programs to support future service delivery changes	DoNM, Informatics
25	Enhance alignment of educators and clinical support nurses to wards / departments	Unit Managers; Education and Learning Team	2023	Ward / department based educational needs met	Director, Education and Learning
26	Explore and develop framework for nursing and midwifery progression into specialties and advanced practice (pathways)	Divisional Directors; Directors of Nursing & Midwifery; Education and Learning Team	2023	Published framework and associated Pathways	Director, Education and Learning

	Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
27	Explore and develop education framework to facilitate career progression for qualified staff, as well as certificate- prepared worker transition to qualified positions, enrolled nurse to registered nurse / midwife	Directors of Nursing & Midwifery; Education and Learning Team	2023	Published framework and associated Pathways	Director, Education and Learning
28	Develop communities of practice for early career nurses	Education and Learning Team	2023	Established communities	Director, Education and Learning
29	Enhance relationships with University partners to expand access to learning opportunities	Education and Learning Team	2023	Increased access to learning opportunities	Director, Education and Learning
30	Explore supporting flexibility of movement across clinical areas and sites expanding clinical exposure	Directors of Nursing & Midwifery; Education and Learning Team	2023 - 2025	Develop and present proposal and implement approved recommendations	Director, Education and Learning; DoNM, Workforce
31	Using co-design, investigate work practices to identify opportunities for improvement and efficiency of time utilisation for best outcomes	Unit Managers and teams	2023 - 2025	Reduced 'missed' care events and increased staff satisfaction	DoNM, Inspiring Innovation
32	Explore and facilitate access to opportunities for Enrolled Nurse Advanced Diplomas	Education and Learning Team	2023 - 2025	Increase Enrolled Nurse completion of Advanced Diploma programs	Director, Education and Learning
33	Develop and optimise models of care at all sites	Divisional Directors; Project development teams	2023 - 2026	Current models of care evaluated and developed for new activity. Increases in Enrolled Nurse numbers and Advanced Practice and Nurse Practitioner positions	DONMs - site, divisions and workforce

## OJECTIVE 3: ENHANCING CLINICAL AND PROFESSIONAL LEADERSHIP AND MANAGEMENT

	Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
34	Development and implementation of meaningful Data Dashboards for all stakeholders	WH Dashboard project leads	2022-2023	Dashboards with meaningful data collated in one central location	Executive Director of Nursing & Midwifery (EDONM)
35 ම	Expand and review leadership and management learning programs offered with consideration for continuity, sustainability and a targeted approach for different leadership levels	Education & Learning Team; External education providers; Workplace strategy and wellbeing team; Best care operations	2023	Variety of programs offered to extend staff capability aligned with Education framework for career progression. Recognition of Western Health leadership programs by university partners.	DoNM, Inspiring Innovation; Director, Education and Learning
36	Develop and implement workforce planning program that supports in- time learning	Nursing & Midwifery Workforce Unit	2023	Easily accessible in- time learning programs available	DoNM, Workforce
37	Reinforce utilisation of workforce data for recruitment and staffing	Nursing & Midwifery Workforce Unit; Operations Managers	2023	Operations teams utilising HeWS reporting to support decision making	DoNM, Workforce
38	Improve Nursing & Midwifery engagement with business case development	Divisional Directors	2023	Decisions for Nursing & Midwifery staff increases included DoNM input to allow for optimised planning	EDONM; DoNMs
39 (@)	Improve access to leadership and management resources	Education & Learning team; Unit Managers; DoNMs	2023-2024	On-line contemporary resources easily accessible - learning programs, resource tools; Peer networking program established	Director, Education & Learning; DoNM, Inspiring Innovation
40	Clarify expectations of senior clinical roles - CNC, CMC, NP	Divisional Directors; Directors of Nursing & Midwifery	2023-2024	Standardised expectations set for clinical senior roles	DONMs - site, divisions
41	Early identification of future leaders, with expanded clinical leadership learning opportunities	Divisional Directors; Directors of Nursing & Midwifery; Education and Learning Team; Workplace Strategy and Wellbeing team	2023 - 2025	Rotating ANUM roster lines established; Talent identification program, with fellowship / internship program developed	DONMs - site, divisions and workforce
42	Establish supervision programs to support CNC and Research roles	DoNMs	2024	Formal supervision programs established	DoNM, Inspiring Innovation

## **Outcomes and success**

## EVALUATE AND REPORT ON THE NURSING & MIDWIFERY WORKFORCE PLAN 2022-2026

Actions to be implemented	Resources	Timelines	Success Indicators	Responsibility
The Western Health Board is updated on the progress of the Plan, including achievements, opportunities and challenges	Time is allocated to collate data & other relevant information	Every 2 years	The Board are informed of progress, opportunities and challenges	Executive Director of Nursing & Midwifery (EDONM)
Nursing & Midwifery directorate provide 6-monthly reports to the Western Health Executive	Time is allocated to collate data & other relevant information	Every 6 months	Nursing & Midwifery strategic workforce plan is implemented and reported	Executive Director of Nursing & Midwifery (EDONM) Director of Nursing & Midwifery, Workforce
Nursing & Midwifery directorate provide monthly workforce utilisation reports to the Operations Steering Committee	Time is allocated to collate data & other relevant information	Monthly	Senior Operations leaders and Directors of Nursing & Midwifery are informed of progress, opportunities and challenges	Executive Director of Nursing & Midwifery (EDONM) Director of Nursing & Midwifery, Workforce
Updates on progress of workforce plan are shared with Nursing and Midwifery staff through communication forums	Time is allocated to collate data & other relevant information	Monthly	Information is shared in monthly Nursing & Midwifery News as appropriate Report provided to Nursing & Midwifery Advisory Council at scheduled meetings	Executive Director of Nursing & Midwifery (EDONM) Director of Nursing & Midwifery, Workforce
Updates on progress entered into Business Plan and Risk Register	Time is allocated to collate data & other relevant information	Monthly	Business Plan and Risk Register remains updated	Director of Nursing & Midwifery, Workforce

## **References and resources**

- Australian Government Department of Health, Nursing and Midwifery data https://hwd.health.gov.au/nrmw- dashboards/index.html (accessed July 2022)
- Health-e Workforce Solutions platform
- MAP 2.0 reporting tools





