

# Addressing Health Inequalities Through Workforce Planning and Development

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# Planning for Future Workforce Needs

- Around the provider?

*Or*

- Around the patient and community?

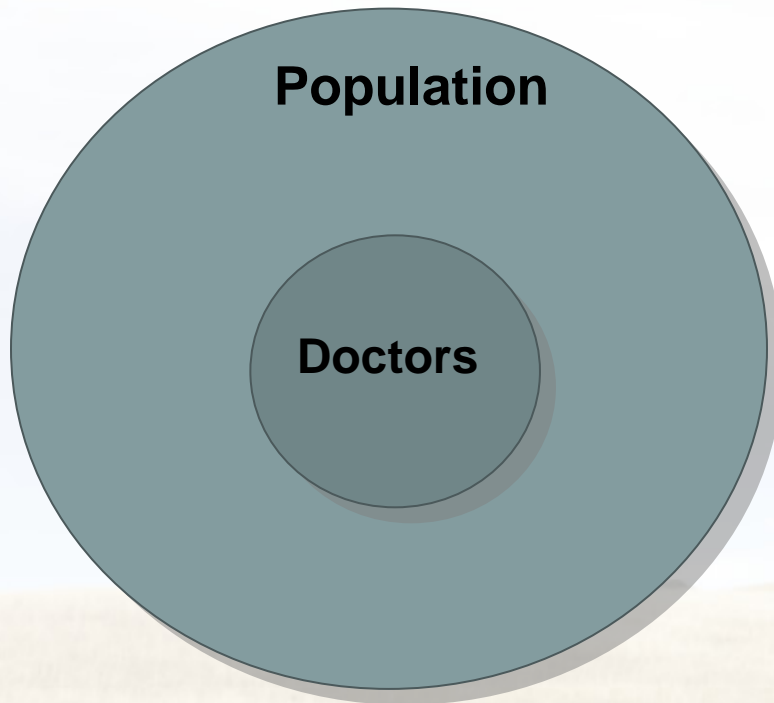
# Planning around the Provider

- Subject to administrative and political interference
- Attracts inter-professional tensions, patch-protection
- Can focus upon who provides care, rather than what's needed
- Can perpetuate practices that don't work for the professions (may not be sustainable)

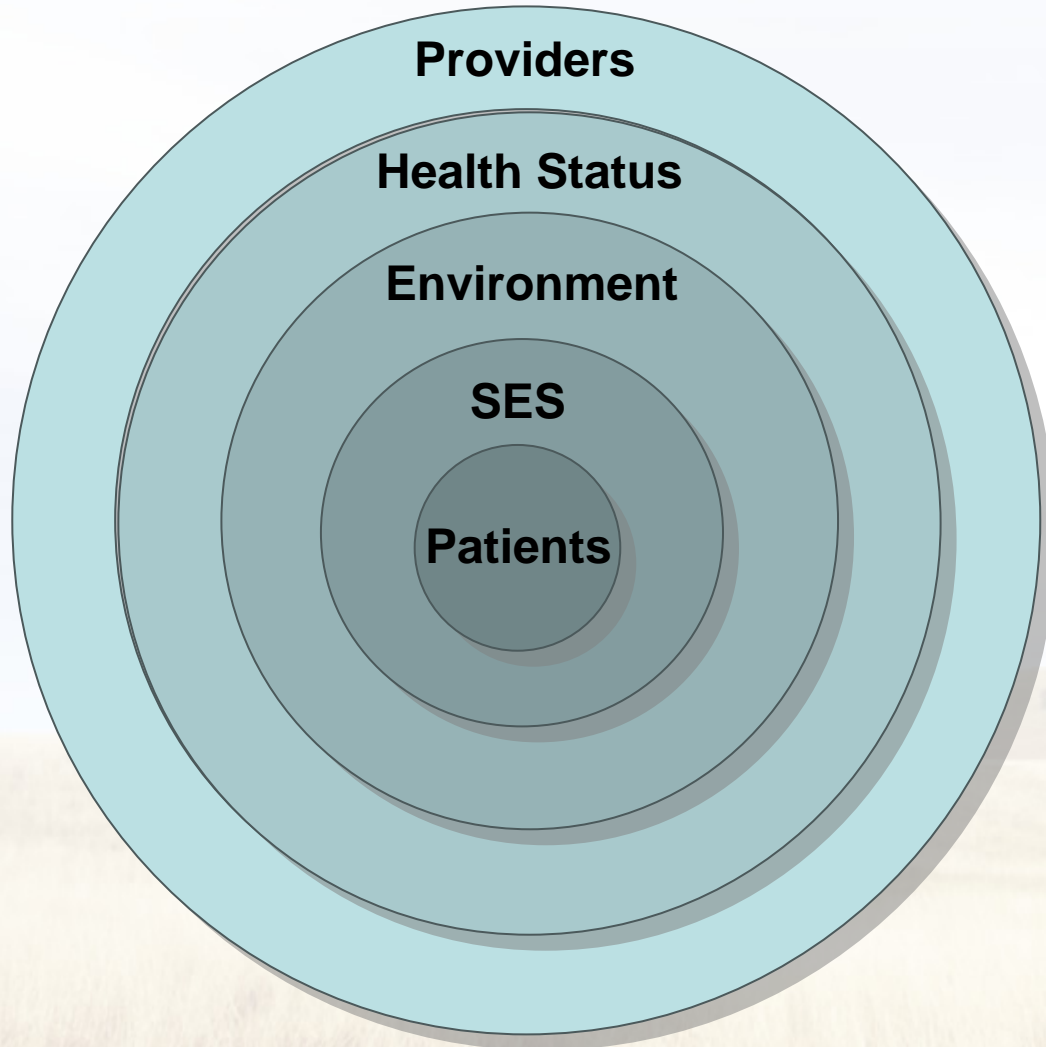
# Planning Workforce Needs Around the Patient

- Look at socio-economic, health profiles, population needs
- Skill mix needed
- Based on evidence
- Patients & communities can become strongest advocates

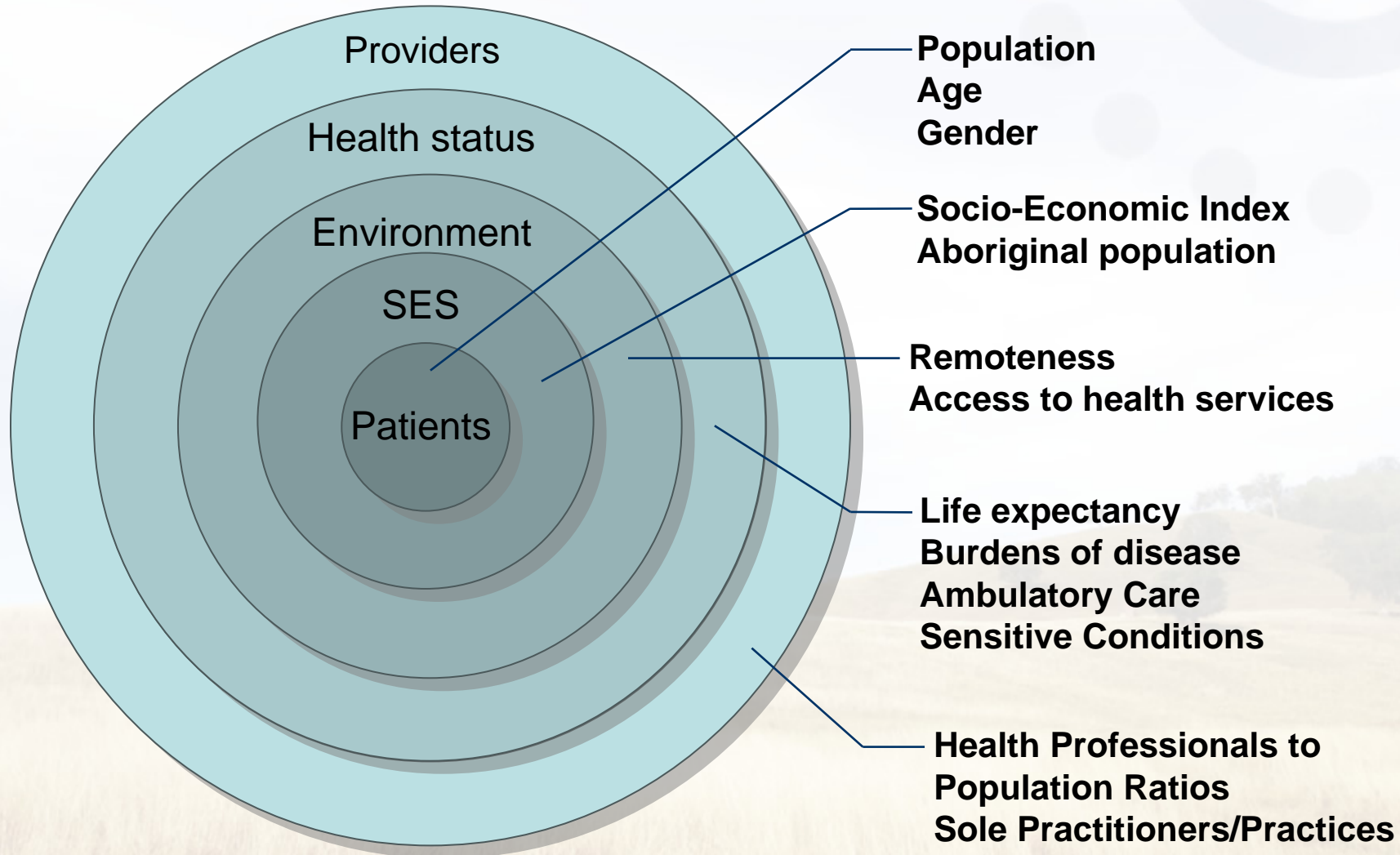
# Traditional Approaches to Workforce Planning



# Taking a Fresh Approach



# Examples of Measures



# Applying the Index of Need

- Working with communities for local workforce planning
- Managing change: applying workforce planning to health need and new models of service delivery
- Succession planning
- Prioritisation of resources, recruitment and support programs
- Identification and monitoring of need and at risk practices and towns
- Input into national planning and advocacy for communities of need



# Workshops and Consultations

- Bring together stakeholders
- Put the community in the centre of planning
- Build on existing initiatives
- Foster innovation
- Identify ongoing issues to be overcome
- Find sustainable solutions
- Examine ways how all can work together to address health workforce and service needs

# Further information

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