

## Health Workforce Conflicts

*Robyn Fairhall, Debra Griffiths and Kim Forrester*

### Introduction

The health system exists in order to improve the health of the population and that of health consumers. Health workforce programs, in turn, exist to assist in meeting patient need. In spite of reforms over the past decade, the current health care system continues to be heavily focused around increasingly expensive and specialised acute care in Australian cities, rather than on measures to redirect resources to the provision of high quality primary care, population health initiatives and preventative care.<sup>1</sup> This is both unaffordable in terms of the escalating future cost, and contrary to the provision of optimal patient care across communities.

This chapter examines the emergent pressures between the drive for workforce change across the Australian health sector, and the regulatory and liability challenges posed by the increasingly complex team environment. The requirement for change impacts on the entire health workforce. However, the largest professional group, nurses and midwives, are significantly affected. An examination of two specific sub-groups – nurse practitioners and midwives – demonstrates the tensions when efforts for health workforce reform to meet demand, and public expectations, are operationalised. This occurs in an Australian health system which is large, complex, spread across eight separate and distinct jurisdictions and resourced through a combination of Commonwealth, State and Territory funding models.

### The impetus for workforce change

There has been substantial growth in Commonwealth funding for health workforce programs, from \$286 million in 2004-05 to a projected \$1.79 billion in 2016-17.<sup>2</sup> The distribution of the workforce, work practices and an ageing population profile, all affect the supply of health services. Several reports have identified health workforce concerns and strategies to address the provision of future Australian health care services.<sup>3</sup> Some impetus for change emerged more than a decade ago when the Productivity

1 *Review of Australian Government Health Workforce Programs* (April 2013, Mason, Chair) 5.

2 *Ibid* 7.

3 Productivity Commission, *Australia's Health Workforce Research Report* (2005); Health Workforce Australia, *Health Workforce 2025* (2012) Vols 1-3; *Review of Australian Government Health Workforce Programs*, above n 1.

This is a preview. Not all pages are shown.