



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

Federation Chamber

BILLS

Appropriation Bill (No. 1) 2014-2015

Consideration in Detail

SPEECH

Tuesday, 17 June 2014

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

SPEECH

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Questioner
Speaker Rishworth, Amanda, MP

Source House
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Responder
Question No.

Ms RISHWORTH (Kingston) (19:48): My questions are around the future of Australia's work health workforce. Health Workforce Australia successfully undertook health workforce planning on a national level and produced the first ever long-term national projections for doctors, nurses and midwives in its report, *Health workforce 2025*. That report found there will be a significant shortage of nurses and a less significant shortfall of doctors by 2025. Now that Health Workforce Australia is being abolished by the government, can the minister guarantee that national health workforce planning will happen and Australia will have enough nurses and doctors to meet future demands? In addition, Health Workforce Australia's Clinical Training Funding Program funded 8,400 quality clinical places for students across 22 individual disciplines in metropolitan, regional and rural Australia, as well as building the clinical training infrastructure across the nation. But we have heard in Senate estimates on 3 June 2014 that there will be no funding for this program past 31 December. My question to the minister is: does the government have a plan for clinical training for the future of our health workforce needs after 31 December and, if so, what is that plan?

Health Workforce Australia's Simulated Learning Environments Program provided a realistic, cost-effective and flexible alternative to clinical training. This program supported a 115 per cent increase in simulated hours in 2012 and particularly supports clinical training in rural and regional Australia. But again we know from a Senate estimates hearing on 3 June 2014 that there will be no guarantee that the government will continue funding this successful program after 31 December. Once again, my question to the minister is: what is the government's plan for simulated learning in a clinical setting after December?

Health Workforce Australia is an independent body. I am sure the minister is aware that it worked collaboratively with key stakeholders and representatives from Commonwealth, state and territory training facilities and universities to build a sustainable health workforce, but now these collaborative relationships will be lost once Health Workforce Australia is abolished and the work becomes the work of the department. What assurances can the minister give that this collaborative approach to building a sustainable health workforce will continue once Health Workforce Australia is abolished?

Since 2001—indeed under the previous government—General Practice Education and Training Ltd has provided general practice training for doctors who are seeking to achieve specialist registration as GPs. GPET reported in its 2012-13 annual report that it had met the Commonwealth target of more than 50 per cent of all training for vocational and prevocational training in regional, rural and remote locations, but now the government is abolishing GPET by 1 January 2015 to reduce, as they quote it, administration costs and overheads. I ask the minister: what guarantees can the government give that this highly successful, high-quality GP training will continue to occur once GPET is abolished?

As I mentioned, GPET runs the very highly successful Prevocational General Practice Placements Program, which gives young doctors exposure to work as a general practitioner. We heard a lot from the previous member about how important that is, particularly in rural and regional areas. Last year, 918 12-week equivalent places were delivered. GPET expects to deliver 975 places this year. This program will end because the government has decided not to fund this initiative past 30 June 2014. What assurances can the government give, and can the minister give, in ensuring that the same number of young doctors will be able to undertake placements, particularly in rural and regional areas, once this program ends?