

SUBMISSION TO THE MEDICAL RESEARCH FUTURE FUND

August 2018

[COPY OF ONLINE SUBMISSION]

- 1. What is your name? Rachel Yates
- 2. Are you affiliated with an organisation? Yes
- **3. What kind of organisation do you work for? (drop down box selection)** Other
- 4. Are you representing your organisation in making this submission? Yes
- 5. What state or territory do you live in? ACT
- 6. Which 2016–2018 MRFF priorities do you think need further focus? (Please select a maximum of three priorities)

Targeted health system and community organisation research; avoidable hospitalisations, preventive health research, building evidence in primary care.

- 7. How can the 2016–2018 MRFF Priorities you identified in Question 6 be extended or reemphasised in the 2018–2020 MRFF Priorities? (Required)
 - How can the most important Priority identified in Question 6 be extended or reemphasised? (max 500 words)

Universities Australia supports further health services and translation research that, whilst building on some of the work already undertaken in the 2016 – 2018 priority areas, would be a research area in its own right. This is detailed further in UA's response to questions eight and nine below.

- 8. What unaddressed gaps in knowledge, capacity and effort across the healthcare system and research pipeline need to be addressed in the 2018–2020 MRFF Priorities?
 - Most important gap identified that needs to be addressed in the 2018-2020 MRFF Priorities (max 500 words) (Required)

A major gap that needs to be addressed in the 2018 to 2020 MRFF priorities is health services research that looks, from a national systems perspective, at future health workforce needs and its associated health professional education requirements. This research would



need to be linked to robust health workforce planning – an area of work in its own right. However, it would also go beyond workforce planning to examine:

- the skills, knowledge and competencies required of future health professionals and others in the health workforce; and
- the education and training approaches required to promote uptake of these in all health professionals across the training pipeline from entry-level education to continuing professional development.

Such research is fundamentally aligned with the MRFF's strategic objectives especially those concerned with positioning the research sector and health system to tackle future challenges; and embedding research evidence in healthcare policy and practice improvement.

The types of questions that such health services research could address include:

- What skills knowledge and competencies will the future health workforce require?
- What new, emerging and expanded health workforce roles and scopes of practice will we need to optimise health care delivery into the future across the range of health professional disciplines?
- How will digital disruption, AI, big data and consumer-driven mobile applications impact on health care delivery, health professional workforce and health professional education?
 - How can we best equip our existing and future health workforce to use these new technologies? How can the health workforce better use data and technology to predict and prevent disease before it has clinical expression?
- What is the role of virtual reality and other forms of simulation in clinical education? How can it be harnessed and used effectively?
- What combinations of e-learning, traditional teaching and blended models optimise health professional learning and care outcomes?
- How do we educate and prepare health professionals to collaborate across professional boundaries and adapt rapidly to technological and other change?
- Which health professional and workforce education models support effective preventative, restorative and team-based models of health care?
- What policy and funding is needed to build on and translate what is already known about the role of clinical placements in promoting health workforce distribution to the geographic areas and service settings of identified need?
- How do we expedite the uptake of evidence into professional accreditation processes and practice?

Very little, if any, of this type of health services research is currently undertaken at a national, systems level. Yet changes in demography, epidemiology, socioeconomics and technology are already introducing change to the way care is - and needs to be - delivered and the workforce required to deliver it, with indications that further change is to come. A need for increased workforce, particularly allied health and nursing, has also been identified in key growth sectors such as aged care and disability. Associated research on health professional education approaches, policy and funding will support the implementation of these changes.



• If you identified a second gap, please explain how it needs to be addressed in the 2018-2020 MRFF Priorities (max 500 words)

Within the health professional education and workforce priority area outlined above, a specific focus and priority in its own right is research relevant to the aged care workforce. Australia's older population is growing rapidly and the need for workforce growth and change has been clearly identified, most recently through Australia's recent Aged Care Workforce Strategy Taskforce (ACWST). Keeping older people well while also providing appropriate age-related care for those experiencing ill-health is increasingly important. However, working with older Australians, especially in the aged care sector and particularly in residential aged care, is not seen as a first choice for many healthcare professionals and associated workers. Aged care workforce, education and technology will need to develop jointly to address this growing need.

The MRFF could support this important health services research area through the development of a national aged care industry-growth research translation centre. Such a centre could operate as a collaborative, multicentre, national aged care workforce research and education network, underpinned by industry and stakeholder partnerships. The primary goal of the centre would be to build a comprehensive, connected national aged care workforce innovation, research and education base. Local university-aged care partnerships would be critical elements of the centre. They would act as national research development and translation arms to implement innovation and new technology and build aged care workforce capacity and education. The type of work such a centre's research could target would include:

- growing health professional and other student placements in aged care. Such placements bring benefits to workforce capacity and client outcomes;
- greater national spread of research and teaching cultures in aged care to add vitality to the sector, develop and promote technology assisted approaches and increase the likelihood of aged care providers becoming employers of choice;
- development and implementation of sustainable workforce approaches embedded into aged care service provider business models;
- articulation of Australia's short, medium and longer-term aged care workforce requirements and the education/training transition needs to support these;
- broader implementation models of aged care delivery to promote healthy ageing, extend functional independence and support "ageing in place";
- cost savings from the implementation of lower-cost community and technology-based approaches rather than more expensive hospital based, aged care crisis intervention and extended care management.

The Centre would work closely with the new Aged Services Industry Reference Committee (IRC) which has been established to consider educational pathways and qualifications in relation to aged care health professional and other workforce requirements.



9. What specific priority or initiative can address the above gaps?

• What specific priority or initiative can address the first gap identified in Question 8? None of the existing 2016-2018 priorities or initiatives directly address the above gaps, although the proposed area of work can build on some current initiatives. Instead, it is proposed that a new broad "health professional education and workforce" priority research area be developed under the MRFF's existing Health Services and Systems Strategic Platform. The aged care industry research translation centre would be a second specific propriety within this.

• What specific priority or initiative can address the second gap identified in Question 8?

As outlined in our response to Q8, priority two, a specific initiative to address aged care workforce and education innovation is the development of an aged care industry growth and research translation centre, based on university-aged care partnerships.

10. What Strategic Platforms (identified in the MRFF Strategy document) would the Priority/ies you identified in Question 8 fall under? (Required)

The suggested priorities would primarily fall under the MRFF's Health Services and Systems Strategic Research Platform with secondary platforms relevant to data and infrastructure, capacity and collaboration and trials and translation.

11. How can current research capacity, production and use within the health system be further strengthened through the MRFF? (max 500 words)

Supporting the proposed priorities outlined above would go a long way to ensuring that MRFF research is used to fortify our current health and aged care system in areas of identified need.

To strengthen and further build relevant health services research capacity, UA also recommends that in addition to existing clinical research fellowships, relevant non-clinical health services research fellowships are also available. These could include fellowships in disciplines such as clinical pedagogy, health economics, public health, big data, AI, demography and health service planning and policy. All of these areas have relevance to current and future models of care and the workforce and education required to implement them effectively. However, there are few, if any non-clinical research fellowships currently funded – and none at all available through the MRFF.

12. Do you have any additional comments on the Discussion Paper? (max 250 words)

This submission is provided in the context of health professional education and has been informed by Universities Australia's (UA's) Health Professions Education Standing Group (HPESG). HPESG comprises senior university representatives from all health professional disciplines and each jurisdiction.

There is a critical need for health services research that links future health workforce requirements with their associated health professional education needs. The lack of a sustained, national approach to such research is a major gap in Australia. This type of research is relevant to all universities: every university delivers health professional education courses and the majority of graduates from these courses go on to work as health professionals in Australia. Delivering health professional education that is aligned with future health workforce capacity and capability – skills/skill-mix, volume, roles, models of care, use



of technology - is therefore key to the university sector as well as to the many other stakeholders that play a part in health workforce development. This is particularly so in an environment of predicted increased, yet changing, health workforce need – across health, aged-care and disability services. Filling this research gap is essential – and from that perspective this is a sector submission.

In terms of research platforms, every university is an autonomous institution with its own specific areas of research interest and expertise. From that perspective, we refer the Australian Medical Research Advisory Board (AMRAB) to each university's individual submission to the MRFF for views on recommended research priorities for 2018-2020.

13. Do you consent to this submission being made public on the MRFF website? Yes