



Local Government Association
of South Australia

Regional Health

WORKFORCE TOOLKIT



Overview

The Local Government Association of SA's Regional Health Workforce Toolkit has been developed to assist the local government sector attract health workers to regional South Australia.

The issue of health worker shortages in regional areas is complex and requires collaboration across all tiers of government to achieve best outcomes, along with increased federal and state funding.

While the direct provision of health services is largely outside the scope of local government, councils often play a supporting role given these services are essential to the wellbeing of communities. They also make a significant contribution to local economies and support population growth.

This toolkit is not intended to be a silver bullet to address health worker shortages in our state. However, it gives councils guidance and steps to follow to create attractive, supportive environments for GPs, nurses and other health workers considering moving to regional areas.

There is plenty councils can do to prepare for and support health workers, and to advocate for better funding and support systems which make regional jobs more appealing and rewarding.

In developing this toolkit, we have considered successful models and methods, had discussions with regions that are doing it well, and tested the draft toolkit with councils in regional SA.

How the toolkit works

This toolkit identifies where:

- direct action falls within the scope of local government activity, such as infrastructure
- local government can facilitate action, such as establishing or maintaining support networks
- regions of councils and the LGA can have a role in advocating for better outcomes.

Even when council is the driver, successful workforce attraction and retention needs support from the community, employers, real estate agents, childcare providers and schools.

This toolkit has been developed as a community resource as well as a guide for councils.

We recognise there are some very small councils in South Australia, which may also be experiencing the most critical health workforce challenges and lack the resources for ambitious programs; as well as comparatively large councils – particularly the rural cities.

While not all actions in the toolkit will be suitable for all situations, it outlines guidance and opportunities which can be applied to suit different location and workforce challenges.



The challenge of regional health

There are several issues impacting regional health in South Australia:

- towns without doctors
- hospitals without nurses
- burnt out General Practitioners with no replacements
- understaffed aged care facilities
- poor access to allied health
- limited career prospects
- cultural barriers.

When combined with distance to specialist services, cost of transport and risk factors, it's not surprising that life expectancy in the country is lower than the city.

GPs are the entry point to the health system as specialists, allied health and hospital visits are often dependent upon referrals, health care plans and ongoing continuity of care.

Many small communities are struggling to retain or attract a resident GP, especially when existing GPs retire or move back to the city.

Some towns resort to locums, but they are expensive and don't know patient histories as closely as local doctors.

As GPs leave, there is even more work for those who remain – or in the worst case, no GP at all.

What's stopping regional communities from attracting more doctors?

There are many factors. Individually they may not account for much, but together they create significant barriers, and the situation is getting worse.

Factors include:

- Lack of suitable accommodation
- Lack of professional support
- Lack of childcare
- No backup (no time off)
- Limited access to training and professional development
- Lower earning capacity
- Poor career prospects
- No jobs for partners
- Lack of community support for migrants
- Growing competition among a smaller pool of GPs

Regional South Australia is home to 27% of the state's total population. It is well established Australians living in regional and remote areas face a unique set of challenges accessing adequate health care in comparison to metropolitan areas. Two key health challenges are the significantly shorter life expectancy (on average 11 to 16 years less) and illness and injury resulting from health conditions that go untreated or receive delayed treatment due to a lack of local health services.

- LGA Regional Health Workforce Literature Review, 2022



Health care is everyone's business

Changes in the economy have accelerated labour shortages, exacerbated a housing crisis, stretched health care budgets and generated an out-flow of people from cities to regional areas. This has put even more pressure on the health system.

At the same time, the ability to attract health workers – which was already strained – is reaching breaking point.

When we consider the barriers to relocating to smaller, isolated communities against the opportunities in large cities, the question becomes: 'what's in it for them'?

Those of us who live in regional South Australia know the benefits, but it is a big leap for someone who has only ever lived in the city to move to the country, especially if they have no local connections.

We hear stories of doctors resettling in rural communities in sub-standard housing, where their partners can't get jobs, the doctor can't get time off because there's no backup and the community makes an initial effort but then it's not their problem.

If we are going to be successful in attracting and retaining health workers – whether it's doctors, nurses, aged care workers or allied health professionals – we need to make it an easy choice, and we need to include and support these essential newcomers.

A growing aged care sector

Our health sector is not just about doctors.

The ageing population has created a significant care industry, including in-home support, retirement and independent living and residential care.

It is estimated the number of Australians aged 85 years and over will increase from 515,700 in 2018-19 (2.0% of the Australian population) to more than 1.5 million by 2058 (3.7% of the population), according to the Royal Commission into Aged Care Quality and Safety, 2021.

People want to age in place.

That means more aged care services in our towns, and more doctors, nurses, allied health and care workers who need accommodation, childcare, schools, social connection, shopping facilities and other services.

This is great for the growth of regional populations and the revitalisation of our communities, but only if we can provide the social infrastructure new residents need.

The role of pharmacists

As with other health professionals, the pharmacy sector regularly report the difficulty attracting qualified workers to rural communities. This places a strain on those who are already working in these areas.

One of the issues is the growth of chains and franchises that are generally not managed by the owner, which means that the pharmacist is working long hours in someone else's business.

There can be little incentive for pharmacists to join regional and rural areas when considering career opportunities against metropolitan locations.

Irrespective of the role, we're likely to see more overseas workers in our regions. While this has worked very well in many locations, it can be confronting for communities that are traditionally inward-looking. It's also confronting for overseas-trained health workers who may have limited understanding of the climate, landscape, culture and social connections in their new community. Ensuring effective and happy settlement of overseas workers is our responsibility. Regional Australia Institute's 'Steps to Settlement Success' is a useful guide to planning, welcoming, settling and fostering community cohesion for migrant workers.



Plan

Prepare

Promote

Settle

Support

Advocate

Using the toolkit

To support councils and communities, a six-step workforce development pathway has been developed to address regional health workforce gaps.

1. **Plan** what needs to be done
2. **Prepare** the groundwork
3. **Promote** your offer
4. **Settle** new residents
5. **Support** on an ongoing basis
6. **Advocate** for solutions that can't be delivered locally

As you go through the workforce development pathway on the following pages, consider the unique features and advantages of your district and play to your strengths.

At each step, keep a focus on how to address possible new resident barriers - even if they lie outside your council area.

After all, it is rare people live, work and play entirely within one council area. Regional partnerships and collaboration can be a significant advantage as new residents will interact with towns and services across the region.

Plan

Outcome

A plan to address the gaps and ensure all stakeholders are engaged to deliver it.

Why it is important

Good planning involves making the most impact with the time and resources you have available.

Start by identifying exactly what you want to achieve and devising a plan. Develop your plan with health and community stakeholders and make it clear where the focus should be, how much time and effort you need to invest and keep all parties accountable.

Get the best information you can in the available time and then plan your program around realistic timeframes.

If you are seeking doctors on three-year contracts, tailor your plan to suit. Be specific.

Steps you can take

- 1 Ask yourself: what health services do we need? Be realistic about what's possible. Write aims.
- 2 Gap analysis: what is stopping health workers from relocating to our area? Do your research, don't assume.
- 3 Who is responsible for addressing the barriers? Think laterally, the traditional solutions are not necessarily the best ones.
- 4 Co-create an action plan with your business, government and community partners – include the 'movers and shakers', they are the ones who will keep the passion going. Leverage the benefits of solving other people's problems.
- 5 Ask yourself: who is driving this? Make sure you address governance, deadlines and reporting – including what happens if someone doesn't deliver on agreed key actions
- 6 Note structural issues you cannot solve locally and manage up. Engage stakeholders in the space who have the expertise.

Tips

- You can't do it all. Identify the core tasks with the biggest impact and focus on these.
- Your first plan does not have to get you all the way there. Set realistic goals and revise your plan as you reach them.
- Use data to make evidence-based decisions. This will give you a baseline against which you can measure progress.
- If no data is being collected, take a lead role in collating evidence to build a strong case. Or engage someone to do this for you.

Prepare

Outcome

A unique, genuine and attractive offer with all the boxes ticked.

Why it is important

There is little margin for error. Even with the best workforce attraction strategy, you are competing for a scarce resource. The trick to getting it right is preparation.

The preparation stage is about identifying what your potential audience needs and wants. Don't guess. Do your research and if the answer isn't what you expect, use this as an opportunity to do things differently.

Think outside the square to craft an offer that genuinely meets your target audience's needs.

Steps you can take

- 1 Housing is one of the biggest barriers and local government can make a difference. Councils can consider supplying residences or accommodation for health workers as part of relocation remuneration packages.
- 2 Partners need jobs. Help local businesses to understand the importance of hiring partners – councils can lead by example.
- 3 Host business and community networking events to make introductions.
- 4 Childcare is a barrier. Councils can identify potential sites, source grants to build day care facilities, facilitate training for new Family Day Care providers, and disseminate information about innovative solutions.
- 5 Burnout is a real issue. Develop or support professional and social networks and make connections across professions.
- 6 Develop medical facilities which don't require a big upfront investment by new doctors.
- 7 Local government can influence community attitudes. Show leadership – especially to educate about different cultures.
- 8 Don't forget to do a marketing plan, including website and social media – you are appealing to educated, media-savvy people and they need to see themselves (and their lifestyle) in your marketing content.

Tips

- Do the preparation properly – an unplanned solution won't yield results.
- Placement is competitive. So, make sure your offer is better than your competitors.
- Consider a local incentives package. It doesn't need to be expensive. Sometimes it's the little things that show how much your community cares.

CASE STUDY:

Wudinna District Council

Eyre Peninsula was significantly challenged by a reduction in health services and has been proactive in seeking ways to address this issue.

Wudinna District Council is an example of the ways in which councils can act – although the council recognises that even good solutions do not necessarily address health workforce shortages.

Health Centre facilities

With land alongside the hospital donated by a local family, Wudinna District Council contributed funds in addition to a Federal Government grant to build a multi-purpose health centre.

Space within the centre was leased to the town's new young GP.

The process of securing the GP began when he was a Registrar on placement at Wudinna and the relationship was maintained throughout his final years of training.

The centre facilitated Community Health and Dental Services, as well as consulting rooms for visiting health practitioners and specialists. This worked well for many years.

The GP had a plan to recruit his successor, but despite the attractive facilities, bonus conditions and support offered, a two-year search did not result in a replacement.

Housing

Many years ago, the Wudinna community via Mid West Health Inc purchased a well-built home for a doctor's residence.

The property was taken over by SA Health and the lack of maintenance led to a significant decline in amenity.

Traditionally, the community held great pride in its health assets and considers that good quality health worker housing is key to recruiting and retaining health professionals.

A return to community ownership of these assets would improve the standard of health worker housing.

Transport

Council invested in a 12-seater bus and offered subsidised travel to health services in regional centres, but they found it difficult to access drivers with appropriate qualifications.



A strategic approach to GP relief

All levels of government need to strengthen advocacy for a return to full-service GPs who have been the mainstay of country life for so long.

The resourcing of Locums should focus on covering a resident GP for their professional development, annual leave and unexpected events rather than obscuring the real issue: a lack of rural GPs.

Placement of two GPs in a practice would also assist rotations, reduce local burnout and support skill sharing – potentially in a trial with neighbouring councils.

Ensuring adequate regional GP cover

The pool of available GPs and other professionals is decreasing, especially for single practice locations.

Compounding this is the issue that state-based health networks are unable to provide medical services across their zones.

Overseas trained doctors had been a solution for many communities, despite the difficulty of navigating visas, migration and resettlement.

However, a culture of competitiveness has developed with spiralling packages resulting in significant costs to communities, councils and interest groups as they try to outbid each other.

It is disappointing that we are not able to train enough GPs to cover our needs. A cohesive national approach is needed to resolve regional GP shortages.

Promote

Outcome

Create a complete marketing and promotions strategy with consistent and appealing messaging and collateral. Focus on using communication channels which your target audience are using.

Why it is important

With planning and preparation completed, it is time to start promoting your offer.

Getting your message heard isn't always easy in a world saturated with information and advertising.

In this phase you're not informing, you're promoting the value of regional work and lifestyle.

Marketing needs to be targeted. In the planning and preparation phases, you should have identified your target cohort (e.g. establishers, young families, empty nesters) and designed your marketing material to appeal to them.

Before you release any information, start any advertising or activate networks, you must have in place customer service systems ready to manage enquiries and coordinate timely and accurate responses.

Steps you can take

- 1 Employ or designate someone who can respond quickly and 'case manage' enquiries, including after hours, and make them the contact person – you don't want to lose the first enquiry.
- 2 Word of mouth is the most powerful medium – consider how to activate professional networks.
- 3 Consider a separate website, ideally one with testimonials from and connections to local health professionals.
- 4 Provide 'real life' connections to locals, services and networks, people who can talk about what it is like to live in your region and provide a tour and friendly face if prospective workers come to visit.
- 5 Tell the full story – potential workers need to be convinced of the complete lifestyle picture, not just a career opportunity. Short videos can be a powerful tool to help convey the message.
- 6 If you want to be part of the solution, you must:
 - Make sure you have a clear and competitive offer that addresses the interests and concerns of potential residents.
 - Make it easy, spell out earning capacity, service costs, career benefits, scope of practice, professional support – the things that early career health workers worry about.

Tips

- Keep it real – if you cannot deliver, do not promise. Be honest about any limitations.
- Test your marketing with your target audience before you launch. Rework it until it is right.
- If you're not experienced in designing effective marketing and communications campaigns, seek out professionals.
- Identify any other workforce attraction programs running in your area. You don't want to confuse the message. It might be better to team up with an existing program than create a new one.

Settle

Outcome

To have your new health workers settled in, happy and delivering quality health services.

Why it is important

Once you've attracted health workers to your region, you must ensure they are settled and comfortable. This is true if they have relocated solo, or with family.

Moving to a new area and possibly a new culture is a big step with big stresses. This step is about facilitating a smooth transition in all aspects of their life.

We all know if things aren't good at home, our work suffers. We can expect the health workplace to take care of the work side of things, but it's the community that needs to help workers (and their family, where applicable) settle in.

Steps you can take

- 1 Find people within your community who are best placed and a good fit to 'case manage' the settling in process, providing links to services, advice and practical assistance (e.g. have young families introduce themselves to other young families or make connections with community groups).
- 2 The community must be educated that new residents need help beyond the first few weeks of the move.
- 3 It's likely new residents have moved away from friends and family, and if they have children, away from babysitting and childcare arrangements. Offer to help out so they can unpack, settle and get a break from the pressures of the move.
- 4 Keep them informed about events, markets, festivals and opportunities to connect with the community. Often these are learned about through networks, so newcomers may find out when it's too late. You may even consider holding a welcome event to help your new health workers settle in and meet the locals.
- 5 If the health worker has a partner, try assist with job seeking. Most regional jobs are found through networks – activate yours on their behalf.
- 6 Be there for the little things. It's the close, informal networks that are most satisfying. Help people to make these connections.

Tips

- Workers who have relocated from the city are often surprised at country opening hours – and where everyone disappears to on a Saturday afternoon (sport, of course). Help them to understand the rhythms of regional life and how to get things done.
- Ask, ask, ask. Your new residents may have moved from overseas, interstate or a bigger city. There is a myriad of things that are different, from postal services and rubbish collection, to getting involved in sporting clubs. Keep communications open to help them settle into the community with ease.

CASE STUDY:

District Council of Kimba

Potential new residents don't think like tourists, so the advice from the District Council of Kimba was not to fill workforce attraction marketing with images targeting tourists.

When people are considering relocation, they want to know what it's actually like to live there: whether the community, services and facilities meet their needs; whether their children will be accepted; how the school bus system works; whether they can break into the social circles.

Images need to show what the community looks like on a day-to-day basis.

Leverage the power of smartphones to take videos of people describing their involvement in clubs and sport and community groups, or video a walking tour of the town showing the shops, cafes and pharmacies.

Demonstrate your town is welcoming of strangers, particularly people from other cultures.

Creativity used to stand out

The District Council of Kimba engaged creative agency Welbourn O'Brien to develop the 'That's our Kimba' campaign to attract medical professionals, tradies and visitors to the rural destination.

The agency spent time with locals and learned of their good nature and volunteering spirit, and it became apparent there was no better way to promote the town than letting the community get behind it and be involved themselves.

[Watch the video](#)



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That's our Kimba, and you should come on over!

If you like to know more about Kimba or register your interest in making our Kimba your Kimba, visit

<http://thatourkimba.com.au/>



Support

Advocate

Outcome

To retain health workers in your community for years and establish clear succession plans for if/when they move on.

Why it is important

We should be realistic about how long people will stay in our communities and be ready to activate attraction plans for the next transition.

The aim should be to make the experience so good that health workers stay longer than they expected.

The biggest influence on health worker retention – apart from workloads, access to time-off and professional support – is the strength of connection to the local community.

Steps you can take

- 1 If you treat people as temporary residents, that's what you'll get. Help the community to engage and involve health workers in their own networks and social groups.
- 2 Keep dialogue open. If people need a break, activate your plan to bring in relief staff who also get a taste of your town, and might consider a more permanent move in future.
- 3 It's the little things that cause irritation. Ask: is accommodation being maintained properly? Childcare working out? Partner's job satisfying? It takes a long time to properly settle into a community and the support phase goes beyond the first few months.
- 4 Identify local support services (e.g. bookkeepers, human resource specialists) who can relieve the administrative burden from private practitioners.
- 5 Encourage providers to collaborate to facilitate local career progression – things like secondments and rotation between sites.
- 6 Watch out for scope creep. If the workload increases because others have left, don't let this drive the remaining workers away.

Tips

- Study and mirror models that work. For example, some regional medical centres have a sister practice in the city, and rotate health professionals between city and country practices as their life situations change. Don't assume busy professionals have time to investigate these options.

- Workers from overseas need special attention. We need to be sensitive to culture, and to celebrate the new food, beliefs and experiences these people bring.
- Once you have a GP in place, consider whether a physiotherapist or podiatrist could join the practice – even if part time – to provide professional support and another service to the community.

Outcome

Any barriers that can't be solved at a local level can be addressed by those who are able to influence better outcomes.

Why it is important

Councils can advocate directly (e.g. with their local Member of Parliament) or leverage their region of councils, the LGA or RDA to get the attention of policy makers.

What makes advocacy more powerful? Two things: data and stories.

Councils need to collect, analyse and present data that provides evidence of the issues in their region and to complement this with stories that illustrate the impact.

Steps you can take

The actions in this section are tagged 'local, regional, LGA' to demonstrate who's best placed to drive the advocacy.

Local

- Include data and evidence collection in workforce planning – you will have a stronger case if you can show change over time.

Regional

- Work with peak bodies to deliver professional development, mentoring and support in-region.
- Ensure your region's needs are reflected in Regional Health Plans and government workforce development plans.
- Communities that have lost health services often lack public/passenger transport to larger centres. Advocacy for access to health care services should also consider transport arrangements, including FIFO costs for specialist services.

LGA

- Highlight opportunities for greater government investment in rural training programs and rural attraction incentives.
- Advocate for more appropriate models and funding for regional areas. It's not just the delivery of medical services – accommodation, childcare and internet are significant barriers.

Tip

- There are several rural health workforce attraction initiatives already in place – make sure you include these in your planning, preparation and promotion.

CASE STUDY: The Grampians

In 2019, four councils in the Grampians region realised they were facing a significant economic and social challenge: poor retention and lack of growth in new residents and workers.

They developed a marketing plan to address this.

The COVID-19 pandemic helped to drive interest in regional living, particularly in areas with good internet that supported remote working.

The region took advantage of the change in mindset of many city residents, which made regions more attractive – in particular, living space, lifestyle reset, affordability and job opportunities.

Marketing focus

While the Grampians example is broader than health workers, the core elements of the marketing campaign apply to any sector:

- understand the needs of the community (e.g. employment vacancies, more families, business diversity) and determine target audiences to address gaps
- include 'live, work and invest' messaging in regional tourism branding
- develop an integrated response platform that captures and responds to every enquiry and connects jobs, property, education and lifestyle needs
- provide a concierge service that moves an enquiry toward a decision to relocate
- develop partnerships with employers, real estate agents and property developers to build a self-sustaining business model for ongoing marketing of the region. Identify funding to ensure the advertising can be sustained in target markets for twelve months
- launch advertising campaigns in response to topical issues and opportunities. Use digital, radio, PR, direct marketing and events.

Understanding motivation

Good marketing campaigns respond to two factors:

- what problem you're trying to solve
- what motivates the target audience.

The Grampians region identified workforce shortages, housing and 'things to do' as the problems they wanted to solve.

Research found that lifestyle, jobs and the range and availability of shops were the prime motivators.

They also found that metro dwellers tend to have limited knowledge of regional areas and place greatest emphasis on available career opportunities, as opposed to comparing each city/town's features.

This influenced the design of the marketing response and led to the development of the 'regional integrated response platform', now known as grampiansjobs.com.au

LIVE
THE
Grampians
Way

CASE STUDY: Forbes Shire Council

Forbes Council in central New South Wales was concerned about the declining number of GPs and Registrars in their region – and they decided to do something about it.

The CEO of the Rural Doctors Network, Richard Colbran, recognised that the days of a doctor settling into a town for 40 years are gone.

The aim with the new model was to get doctors to stay for at least five years to allow patients to build a relationship with their GP.

Forbes Shire Council, recognising the link between essential medical services and economic prosperity and decided a "walk-in, walk-out" medical facility would deliver long-term sustainability for medical services.

The "walk-in, walk-out" concept provides doctors with the opportunity to come to Forbes and practise medicine without start-up costs or having to buy into a practice.

The facility, which opened in 2009, co-located two medical practices on a greenfield site adjacent to the Forbes Hospital – beginning the Forbes Medical Precinct – with \$1.7m contributed by council (road works, kerbing, footpaths, parking, helipad) and a \$500,000 from a Federal Government grant.

The design of the facility was developed by a working group comprising the Division of General Practice, local doctors, architects and council after a period of extensive planning and consultation.

Prior to the development of the medical centre, Forbes had six GPs and two Registrars. Within five years, that number had increased to ten GPs and three Registrars.

Subsidised short-term accommodation is available at the Jemalong Regional Education Centre for healthcare and education professionals looking to relocate.





Local Government Association
of South Australia

148 Frome St
Adelaide SA 5000

GPO Box 2693
Adelaide SA 5001

(08) 8224 2000

lgasa@lga.sa.gov.au

www.lga.sa.gov.au



The voice of local government.