



More doctors and nurses for Emergency Departments

Julia Gillard and Labor
Let's move Australia forward



MORE DOCTORS AND NURSES IN EMERGENCY DEPARTMENTS

A Gillard Labor Government will train more emergency doctors and nurses, so hospitals have the frontline staff they need to ensure that every Australian gets emergency treatment within the four hour national target.

Federal Labor will invest \$96 million in a comprehensive package to deliver more and better qualified emergency doctors, nurses and support staff. This package will:

1. Deliver 270 more specialist doctors that are trained in emergency medicine over the next decade.
2. Support up to 2,000 more emergency nurses and nurse practitioners over the next decade.
3. Support 1,000 student nurses over the next decade to gain experience in Emergency Departments as part of their education.
4. Support supervisors to train and up skill GPs and other doctors in outer suburban and rural areas, where specialist emergency doctors aren't always available.
5. Provide training to improve the skills of support staff in Emergency Departments – so that specialist emergency doctors and nurses can focus on their job.

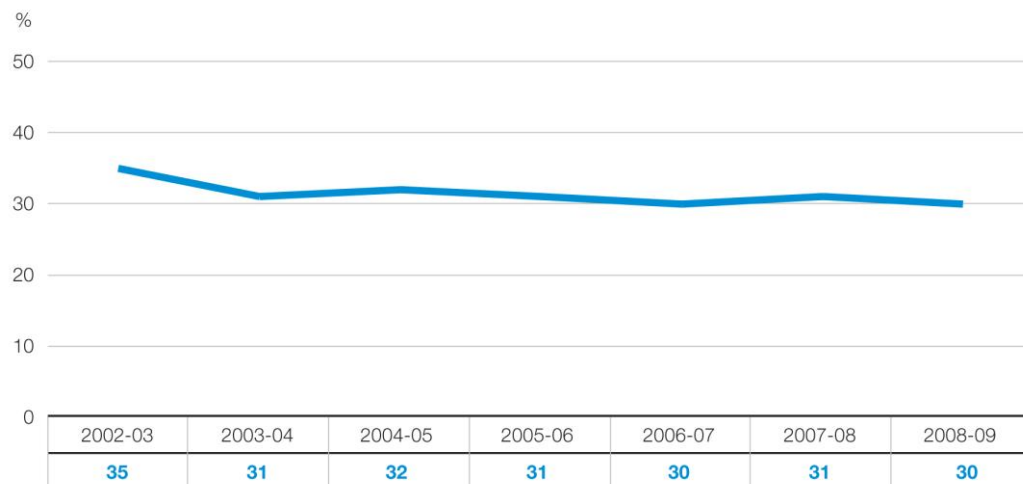
Why we need to act

For more than a decade, Australians have suffered as public hospital Emergency Departments have struggled to cope with two million extra presentations and less support from the former Coalition Government.

1. Long waiting times

In 2008-09, there were 7.2 million accident and emergency presentations in public hospitals¹. As shown on the following page, almost one in three Australians presenting at Emergency Departments across the country waited longer than clinically recommended. This has not changed for some time.

Emergency Department patients not seen within clinically recommended times



2. Access block in Emergency Departments

Nearly a third of patients admitted to hospital from an Emergency Department - estimated to number about 600,000 Australians - currently wait more than 8 hours between the time they arrive and when they are finally transferred to a bed in a ward.

3. A shortage of emergency doctors

The last detailed study into the specialist emergency medical workforce (undertaken in 2002) concluded that *“the emergency medicine workforce is currently undersupplied, based on a range of indicators”*. The report also found that: *“Access block affects on the functioning of emergency departments and may act as possible deterrent to trainees choosing emergency medicine as a career.”*ⁱⁱ

4. A lack of access to care in the community

In 2007-08, around 1.5 million patients with GP type needs attended an Emergency Department after hours and on weekends (accounting for 22 per cent of all Emergency Department patients).

How will this work?

1. Emergency doctors

To train more emergency doctors, the Gillard Labor Government will provide \$56 million to support the cost of training places for 22 emergency doctors and five international medical graduates per year. Funding will also support the cost of supervision time for around two specialists each at 129 Emergency Departments across the country and support to the Australasian College for Emergency Medicine to administer these additional places.

These training places include financial support so that 50 per cent of emergency doctor training can occur in rural and regional hospitals. This will help Emergency Departments which are under pressure in busy base hospitals like Townsville, Bathurst and Alice Springs.

The new training places would support junior doctors to become Fellows of the Australasian College of Emergency Medicine (ACEM). In total, this would support training for up to 270 more doctors to become specialists in emergency medicine over the next decade. These new places and supervisors will be implemented from 1 January 2011.

2. *Emergency nurses and nurse practitioners*

To train more emergency nurses, the Gillard Labor Government will provide \$15 million to support:

- About 100 additional postgraduate scholarships in emergency nursing per year.
- About 100 additional continuing professional development places per year for nurses to specialise in emergency medicine or critical care.
- About 100 additional scholarships for nurse practitioners to specialise in emergency nursing per year.

The scholarships would be administered through the Nursing and Allied Health Scholarship Support Scheme, working closely with the Australian College of Emergency Nursing. In total, the scholarships would deliver up to 2,000 nurses and nurse practitioners practising or in training in emergency nursing over the next decade. This initiative would be implemented from 1 January 2011.

3. *Supporting student nurses with experience in Emergency Departments*

To provide student nurses with clinical training experience in Emergency Departments, Federal Labor will provide \$5 million to support:

- Supervisors so that 50 undergraduate nurses per year can do a placement in an Emergency Department.
- Funding for universities so they can provide around 50 clinical placements per year for postgraduate nursing students in Emergency Departments.

This initiative would be implemented from 1 January 2011.

4. *Supporting supervisors*

Often doctors working in Emergency Departments do not have specialist skills in emergency medicine. This is particularly the case in outer suburban and rural hospitals, which are often supported by local GPs and other specialists who provide emergency services on call.

To ensure that high standards of emergency care can be delivered in hospitals across the country, the Gillard Labor Government will support up to 20 new Emergency Medicine Education Officers in outer metropolitan and regional hospitals. These Officers will help roll out a new Australasian College for Emergency Medicine developed course in emergency medicine, and provide capacity to up-skill around 400 people per year. Participants in this course would be able to qualify for a certificate or diploma in Emergency Medicine.

In addition, Federal Labor will support an expansion of training places in private sector Emergency Departments, working with the Australian Private Hospitals Association and Catholic Health Australia. Funding has been provided for up to 10 positions per year to supervise training in the private sector Emergency Departments.

Together, the Gillard Labor Government will invest \$19 million for these initiatives.

5. Improving the skills of support staff

To allow specialist emergency doctors and nurses to focus on their jobs, Federal Labor will provide \$0.6 million to fund about 100 scholarships per year for clerical and non-clinical support staff. The scholarships would enable support staff to enhance their role and improve their skills, which will help deliver improvements to the performance of Emergency Departments.

This initiative would be implemented from 1 January 2011.

Federal Labor's record

Julia Gillard and Federal Labor have already invested \$1.5 billion to expand capacity and deliver faster Emergency Department treatment right across the country.


Expanding capacity


In 2008-09, the Federal Labor delivered its first \$750 million investment in Emergency Departments – to immediately inject more funds and turn around a decade of neglect. This has delivered upgrades or expansions to 37 emergency departments across the country (indicated on the map below).

Emergency Department upgrades from COAG 2008 (\$750 million)



Key:

 Hospital which has received an upgrade to its emergency department

 Several hospitals that have received upgrades to emergency departments

Tough national access targets under the National Health and Hospitals Network

As part of the National Health and Hospitals Network, the Gillard Labor Government has committed over \$750 million to roll out a four hour national access target and upgrade capacity in Emergency Departments through expansions, new equipment and additional treatment bays. This investment would fund the equivalent of 1.2 million Emergency Department services.

Taking pressure off Emergency Departments

The Gillard Labor Government is also improving care in the community and reducing pressure on Emergency Departments through:

- *Improving access to after-hours GP services* – through a \$417 million investment to provide a 24 hours GP helpline that can provide advice over the phone and link Australians needing urgent attention to services in the community. This is expected to provide around 760,000 services across the country over the next four years.
- *Providing more health care services in one convenient location* – through a \$355 million investment to build around 23 new GP Super Clinics and provide upgrades to up to 425 GP practices across the country.
- *Better coordinated care for diabetics* – through a \$449 million investment to provide patients diagnosed with diabetes with the option of enrolling with a GP practice of their choice and receiving additional services.

Major reform so that the Commonwealth Government has a stake in reducing unnecessary visits to Emergency Departments

Too many Australians end up in hospital when better treatment in the community could keep them healthy, out of hospital, and in many cases in the workforce. This also comes at a cost for taxpayers, who end up funding these highly expensive hospital services.

By becoming the majority funder for public hospitals, the Commonwealth will have a strong structural incentive to keep people healthy and out of hospital, otherwise it will foot the majority of the hospital bill. Already, the Gillard Labor Government has announced more than \$2.2 billion in improving GP and primary care services as part of the National Health and Hospitals Network reforms.

THE COALITION'S RECORD

As Minister for Health under the former Coalition Government, Tony Abbott:

- ✘ Saw \$1 billion cut from public hospitals around the country.
- ✘ Never contributed to a single cent in specific money for Emergency Departments.
- ✘ Capped GP training places at 600 per year since 2004 – while a shortage of GPs placed additional pressure on Emergency Departments.
- ✘ Saw 2,300 older Australians stuck in hospital beds every night when they should have had access to aged care – leaving fewer beds free for people presenting at emergency.

If he is elected Prime Minister, Mr Abbott has already made clear that he would further cut services at our hospitals and their Emergency Departments:

- ✘ **More families will have to turn to an Emergency Department as they can't get help close to home:** Scrapping GP Super Clinics will mean that 23 communities miss out on one stop shops and up to 425 communities miss out on upgrades to their GP practices.
- ✘ **Australians will not get access to a 24 hour After Hours GP Helpline that is linked to follow up services in the community:** This helpline is expected to provide around 760,000 services across the country over the next four years. Without these services, more Australians would have to turn to an Emergency Department when their child is sick at night.

COSTINGS (\$m)

	2010-11	2011-12	2012-13	2013-14	TOTAL
Emergency Doctors	\$ 6.5	\$ 13.9	\$ 16.4	\$ 19.3	\$ 56.1
Nurses	\$ 2.3	\$ 3.4	\$ 4.3	\$ 4.9	\$ 14.9
Student nurses	\$ 1.3	\$ 1.3	\$ 1.3	\$ 1.4	\$ 5.3
Support for supervisors	\$ 3.1	\$ 5.1	\$ 5.2	\$ 5.3	\$ 18.7
Support staff	\$ 0.2	\$ 0.2	\$ 0.2	\$ 0.2	\$ 0.6

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ⁱ Department of Health and Ageing, *The State of Our Hospitals*, 2010

ⁱⁱ Specialist Emergency Medicine Workforce in Australia, Australian Medical Workforce Advisory Committee, 2003