



# Gold Coast Hospital and Health Service Workforce Strategy

2024-2028

---

## Gold Coast Hospital and Health Service Strategic Workforce Plan 2024-2028

Published by the State of Queensland (Queensland Health), 2024  
IBNN or ISBN if needed



This document is licensed under a Creative Commons Attribution 3.0 Australia licence. To view a copy of this licence, visit [creativecommons.org/licenses/by/3.0/au](https://creativecommons.org/licenses/by/3.0/au)

© State of Queensland (Queensland Health) **2024**

You are free to copy, communicate and adapt the work, as long as you attribute the State of Queensland (Queensland Health).

For more information contact:

Organisational Capability, Department of Health, GPO Box 48, Brisbane QLD 4001,  
[GCH.WorkforceStrategy@health.qld.gov.au](mailto:GCH.WorkforceStrategy@health.qld.gov.au).

An electronic version of this document is available at [www.health.qld.gov.au](http://www.health.qld.gov.au)

### **Disclaimer:**

The content presented in this publication is distributed by the Queensland Government as an information source only. The State of Queensland makes no statements, representations or warranties about the accuracy, completeness or reliability of any information contained in this publication. The State of Queensland disclaims all responsibility and all liability (including without limitation for liability in negligence) for all expenses, losses, damages and costs you might incur as a result of the information being inaccurate or incomplete in any way, and for any reason reliance was placed on such information.

### **Artwork Acknowledgment**

We would like to acknowledge artwork produced for Gold Coast Health by Riki Salam, We are 27 Creative, used throughout this document.

---


# Contents

Acknowledgement of Country	4
Message from the Executive Director People and Operations	5
Executive Summary	6
First Nations Workforce	7
Design Principles	8
Operating Environment Complexity	9
Workforce Profile	10
Workforce Focus Areas	11
Best use of resources (efficiency)	11
Secure, sustainable, talent pipeline	12
Transforming leadership and development	13
Culture built on inclusion and wellbeing	14
Measures, Strategic Risk and Engagement	15
Implementation Plan	16
References	23



## Acknowledgement of Country

Gold Coast Health acknowledges Country, the lands, waters, and sky of the Yugambeh language region and pays respect to past, present and future Yugambeh Traditional Custodians and Elders. We acknowledge, respect and celebrate the continuing cultural practices of all Aboriginal and Torres Strait Islander peoples.





# A message from the Executive Director People and Operations

The **Gold Coast Hospital and Health Service Workforce Strategy 2024-2028** signals a new direction for how we attract, engage, and empower the health service's most valuable resource – its people.

**Importantly, we continue our commitment to working with the First Nations workforce** to further advance opportunities and a sense of connectedness and belonging by embedding the strategies within the Health Equity Framework, the Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016–2026 and the Gold Coast Hospital and Health Service Health Equity Strategy 2022-2025.

Reflecting on our journey since 2019, including the impact of COVID-19 and the growth of our services, the Board and Executive team are confident we can draw on the lessons and achievements during this time to deliver excellence in our care to the community.

The next five years will be a period of significant change as we navigate a new era of work. **We need to transform our thinking to meet the upcoming challenges and build upon the strong foundations laid by the previous Gold Coast Hospital and Health Service Workforce Strategy 2019-2024.**

Gold Coast Health will achieve this by redefining existing partnerships and creating opportunity for new ones, focusing efforts on optimising existing talent, exploring alternative talent pipelines, and enhancing leadership integrity and individual capability through learning and development.

We must meet the health needs of our community first. We respect, celebrate and drive inclusivity across the diverse workforce and remain committed to the wellbeing and development of the workforce, at all stages of life.



**“I look forward to working with employees, and community members to enable the achievement of the Gold Coast Hospital and Health Service Workforce Strategy 2024-2028.”**

Grant Brown  
**Executive Director People & Operations**

# Executive Summary

The *Gold Coast Hospital and Health Service Workforce Strategy 2024-2028* (the Strategy) represents a commitment to excellent care delivered by the workforce, accomplished in the next five years.

The Strategy aligns to and enables the achievement of the *Gold Coast Health Strategic Plan 2024-2028* (G28) and supports the actions to deliver on the *Health Equity Strategy 2022-2025* and *Diversity and Inclusion Strategy 2023-2028*.

The Strategy is ambitious, and requires a system wide call to action, led by Gold Coast Health, to meet community needs, and address significant workforce challenges impacting health and every other industry.

We commit to working with strategic partners and other health services to drive changes in response to challenges across the state of Queensland.



These challenges include chronic undersupply, skills shortages, increased labour market competition, leaps in technology advancement and a generational shift in individual, intrinsic work motivators.

To continue to bring the Strategy to life across the next five years (and beyond), **four workforce focus areas** have been identified. Each **Focus Area** has a clear objective and targeted actions, which will guide cascading operational and tactical workforce activity through the organisation.

The **Focus Areas** reflect the needs of the community and the workforce, gathered through engagement opportunities with consumers, staff and clinicians.

Implementation of the Strategy will be the responsibility of leaders and system partners. Delivery of activities have been identified across horizons, delivered by workforce functions across the organisation. Monitoring will be ongoing with formal reporting occurring at 12-month intervals.

**Focus Area 1**  
Best use of Resources (Efficiency)



**Focus Area 2**  
A secure, sustainable talent pipeline

**Focus Area 3**  
Transforming leadership and development



**Focus Area 4**  
A culture built on inclusion and wellbeing

# First Nations Workforce

A First Nations health equity-centred approach aims to address factors that lead to poorer health outcomes, specifically addressing barriers to accessing care, including systemic and institutionalised racism.

The Strategy aligns to and embeds the identified priorities within the Health Equity Legislation, the [Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016-2026](#) and the [Gold Coast Health Health Equity Strategy 2022-2025](#) through further targeted workforce actions that bring this commitment to life.

Gold Coast Health continues to increase opportunities for First Nations workforce participation ensuring that the experiences of First Nations people are inclusive, positive and drive equity through opportunity.

Investment in the size, capacity, skills, and leadership of the First Nations workforce will improve the experience, and health outcomes of the community served and create sustainable health careers for Aboriginal and Torres Strait Islander young people.

Regular engagement with the First Nations workforce will be prioritised to evaluate whether implementation of the strategic actions is successful and identify where opportunities for improvement exist.

Open, respectful and safe dialogue with the First Nations community will continue throughout the life of the Strategy to ensure that their experiences with our health services is culturally safe, inclusive, responsive, and creates equity of health outcomes.



# Design Principles

The development of the Strategy has been guided by the following design principles which ensure consistency in decision making and provides a compass for all strategy development activity.

- 1 Align to activities and focuses of the Gold Coast Hospital and Health Service Strategic Plan 2024-2028
- 2 Remain cognisant of system-level workforce priorities, adopting and adapting as relevant for the Gold Coast Health workforce
- 3 Build to blue sky future state for workforce, starting with a strong foundation
- 4 Engage to validate and minimise disruption, duplication, and consultation fatigue
- 5 Ensure outcomes are simple and effective.

## Aligning to existing Strategies and Priorities

System-level strategies such as *HEALTHQ32: A Vision for Queensland's Health System* and the *Health Workforce Strategy for Queensland to 2023* (Consultation Paper) underpin the Strategy, allowing alignment with system-level priorities for health and the workforce.

At a health service level, the Strategy has been built to align with the Gold Coast Hospital and Health Service *Strategic Plan 2024-2028* (G28), *First Nations Health Equity Strategy 2022* and *Diversity and Inclusion Strategy 2023-2028*.

G28 is defined by its 'Four Futures': Future Care, Future Growth, Future System and Future Value, individually driving activity that collectively achieves excellent care for the community. Identifying workforce enablers for each Future drove the development of the Strategy and was achieved using the below inputs.



- **Research** - extensive literature review on contemporary (post-covid-19) workforce priorities in health environments both nationally and globally.
- **Thought Leadership** - leveraging 'workforce' and 'future of work' articles from leaders such as the World Health Organisation, McKinsey, Bain & Company, Deloitte Gartner, Australian Human Resource Institute and PwC.
- **Engagement Data** - consulting with consumers and the workforce to validate the Strategy focus areas, maximising engagement opportunities and discussion.
- **Environmental Scan** - desktop analysis of other similar organisations (health, first responders, education) to identify system level priorities and ensure a point of difference.



# Operating Environment Complexity

The World Health Organisation (WHO) estimates a projected global shortfall of 10 million health workers by 2030. Nationally, demand for healthcare will place unprecedented pressure on supply given the projected deficit of 110,000 nurses and 2,700 doctors by 2025 alone.

New models of care and worker types such as Nurse Practitioners, Nurse Colposcopists and Allied Health professionals with advanced clinical practice exist and are a step towards addressing undersupply, but more is required.

The issue of supply becomes further compounded by complexities such as:

1. **Non-clinical workforce skills shortages**, especially for workers in professions such as information and communications technology, and business; skills that health services require to manage and optimise operations.
2. **An ageing population**, impacts include a loss of skilled and highly experienced workforce, a much bigger issue in highly specialised or sub-specialised areas.
3. **Housing affordability**: in early 2024 the ABC reported that the *median* Gold Coast rental price was \$850 per week, making it Queensland's most expensive place to rent.
4. **Leaps in technology advancement** (creating adoption lags) and online entrepreneurship offer alternative income streams and roles that can be worked anywhere any time, attractive to people seeking flexibility.
5. **Generative artificial intelligence** will reshape roles, render some tasks obsolete, and create demand for new skills, and the pace, timing and degree of impact will vary. Navigating employee sentiment and change acceptance amid the mix of certainty and uncertainty will be challenging.
6. **Expectations of culture and wellbeing at work**; in a recent study of 1,800 Australian workers, wellbeing was ranked as the second highest expectation workers have from their workplace, after recognition.

Even before the pandemic, nearly half of Australians were experiencing mental health issues. Subsequent studies have shown alarming rates of anxiety (59.8%), burnout (70.9%) and depression (57.3%) among health workers.

Lockdown measures further exacerbated these issues, with a majority reporting a decline in wellbeing (85%), while a global study (Coursera) cited worker burnout as the number-one reason for resignation.

In response, Gold Coast Health implemented innovative approaches (tele and virtual health) while swiftly responding to community needs with initiatives such as public health advice, vaccine administration, covid-19 testing clinics and purpose-built wards.

Care for the community is our core business, and the needs of the community are evolving. The Gold Coast Hospital and Health Service Local Area Needs Assessment 2022-2025 (LANA) reports a higher than state average population growth in the Gold Coast region.

In addition, increased homelessness of older people caused by rental unaffordability, prevalence of socioeconomic disadvantage (Northern Gold Coast residents being most impacted) and increasing domestic and family violence.

The Gold Coast is also home to a growing First Nations population and a large culturally and linguistically diverse population, with close to 30% of people born overseas and 14% of people coming from non-English speaking background countries.

The complexity of the operating environment has been carefully considered when developing the Strategy Focus Areas. Gold Coast Health needs to be able to compete in a constrained labour market, within fiscal restraints, take care of the workforce and adequately provide care for a community that has diverse and varying needs.

Achieving this requires the health service to position itself as a system-leader, calling system players to action and drawing collective investment in the activities that will create workforce sustainability into the future.

# 2024 Workforce Profile as at April 2024

## Workforce Growth (MOHRI)

Minimum Obligatory Human Resource Information

10,080  12,198



Approved FTE **9545**  
Occupied FTE **9817**  
Unfilled FTE **271.82**

Average length of service is

**7.73** years



**43**

Average age



**74.6%**



**25.3%**

Other **0.2%**

**Gen Z** (1996-2010) **12.16%**

**Gen Y** (1981-1995) **42.76%**

**Gen X** (1966-1980) **30.75%**

**Boomers** (1946-1965) **14.26%**

**Interwar** (1945 or earlier) **0.04%**



**Roles**  
in the workforce:



**Nursing**  
**48.6%** 5,930.51



**Medical VMOs**  
**13.6%** 1,652.84



**Professional & Technical**  
**12.7%** 1,545.04



**Operational**  
**10.1%** 1,235.07



**Managerial and clerical**  
**14.8%** 1,802.41



**A&TSI Health Workforce**  
**0.1%** 11.00



**Trades**  
**0.2%** 21.00

**9.7%**  
turnover

**9.51%**

Of employees are eligible to retire now or within the next seven years



**6.38%**

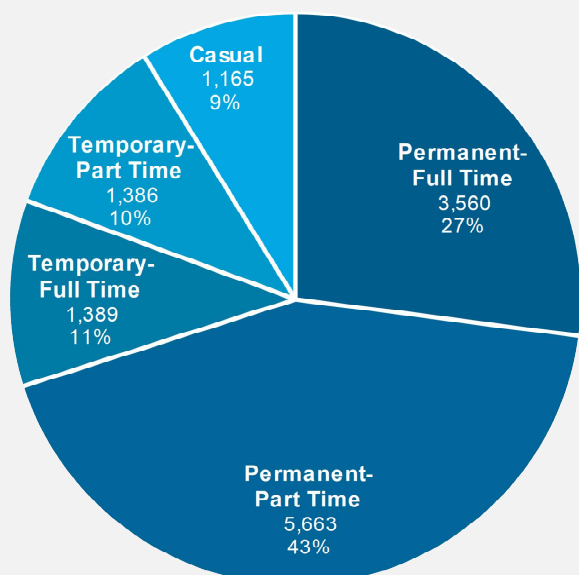
Permanent employees separated in last 12 months, vs previous 12 month average

**6.97%**

**862**

**Staff Appointments**

in past 12 months  
with 78.66 average days to fill a role.



# Workforce Focus Areas



## Focus Area 1 Best Use of Resources (Efficiency)

The International Workforce Planning Standard (ISO 30409) defines workforce planning as the *repeated, systematic and cyclical identification, analysis and planning of organisational needs in terms of people*. Organisations that implement effective workforce planning practices can better anticipate and plan for future impacts.

This focus area makes planning for workforce a priority when developing new models of care and forces Gold Coast Health to be truly innovative by thinking about the scope of roles both point in time, and pre-empting how these same roles may change as community need evolves.

Population needs-based, interprofessional workforce planning is one way Gold Coast Health can effectively deploy and retrain the existing workforce, moving away from silo-based workforce projection models toward methodologies that recognise the potential of professions' overlapping scopes of practice.

The achievement of this focus area will be enabled by investment in workforce planning skills, functions and access to system-wide data.

### Our Objectives

Making the best use of resources requires the health service to identify, diagnose and create efficiencies in the current workforce. This includes critically assessing the effectiveness of existing workforce models to ensure maximum return on investment.

Driving efficiency will enable sustainability for the long term, ensure Gold Coast Health is able to provide exemplary care into the future and support the workforce. Efficiency is a whole of organisation call to action and is achieved through collaboration across teams.

### Strategies

- 1.1 Enable existing resources to achieve optimal workforce efficiency, investing in robust workforce planning to identify the ideal workforce composition for the future.
- 1.2 Establish a strong, skilled and balanced workforce to enable service delivery.
- 1.3 Enable all roles to work at top of scope and invest in advance practice roles to deliver care to our community.



# Workforce Focus Areas



## Focus Area 2 Secure, Sustainable Talent Pipeline

To sustain the talent pipeline in a multi-generational workplace, a revamped approach to attraction and retention is crucial. This starts with a robust employee value proposition (EVP) that emphasises human value, caters to individual preferences, and offers an authentic and distinct perspective.

Efforts are underway to cultivate new talent pipelines. Gold Coast Health pioneered a state-wide non-clinical School-Based Traineeship Program in 2023, following the success of its Distinct Pathways initiative.

This program targets high school students in years 10, 11 and 12, providing work placement opportunities aligned with VET certification. Additionally, the Deadly Start School-Based Traineeship Program promotes employment opportunities for First Nations young people.

Consultation data highlights the urgent need to optimise partnerships with tertiary providers to enhance graduate readiness. Bridging the gap between classroom learning and real-world applications is crucial for workforce preparation.

Strengthening ties with tertiary institutions allows the health service the ability to influence training programs for mutually beneficial outcomes for the workforce and community.

Finally, identifying the link between talent and value will provide a competitive advantage; the best talent should be deployed into critical value-driving roles, so they are contributing to where the greatest outcomes are.

### Our Objectives

Craft an employee value proposition (EVP) tailored to workforce preferences to maintain our status as the employer of choice, attracting and retaining top talent.

Optimise partnerships with tertiary providers to result in a 'work-ready' graduate workforce.

Seek alternative talent pipelines to meet community needs and combat supply and skills shortages, while retaining the current workforce; knowledge, skills and expertise.

### Strategies

**2.1** Embed alternative pipelines of talent, innovative workforce models and invest in the First Nations workforce to secure the workforce pipeline and improve outcomes.

**2.2** Optimise education partnerships to ensure a work-ready graduate workforce.

**2.3** Establish a competitive EVP and transform the candidate experience to attract and retain the best and brightest.



# Workforce Focus Areas



## Focus Area 3 Transforming Leadership and Development

G28 sets an ambitious agenda for the future, demanding adaptable and resilient leadership to manage rapid workplace changes.

Leaders must promote continuous learning and innovation, encouraging teams to upskill and reskill to stay relevant.

Emotional and cultural intelligence becomes crucial for understanding diverse multi-generational team needs and expectations, particularly in remote or hybrid environments.

Embracing diversity and inclusion will optimise leader decision-making, and while artificial intelligence and automation advance, leaders must also prioritise leveraging new technologies while emphasising uniquely human skills like empathy, creativity, and critical thinking.

While consistency in leadership, especially in roles such as Nurse Unit Managers, is vital across the health service, development of leaders and robust succession planning will also create service-wide sustainability.

Consultation confirmed the health workforce's motivation for learning, development and research opportunities, which attract talent, enhance knowledge, and broaden scope of practice. Consumers also rely on clinicians for education, necessitating their development as educators with essential social, emotional and interpersonal skills.

Workforce development extends beyond Gold Coast Health's responsibility, requiring immediate access to development networks, learning and research, interdisciplinary collaboration enabled by technology, and responsible knowledge sharing across the system.

### Our Objectives

The leaders of the future are highly relational, empathetic and culturally intelligent. They can successfully lead dispersed, diverse teams in a high-change environment. Leaders are supported to achieve this through ongoing training, education and support.

The workforce is provided with ample opportunity to invest in its own development through improved access to training and education that fosters professional fulfilment.

### Strategies

**3.1** Develop both the professional and interpersonal capabilities of the workforce to successfully engage with each other and the community in an evolving health landscape.

**3.2** Empower leaders, invest in First Nations leaders, and optimise capability to lead diverse, intergenerational teams in demanding, high-change environments.

**3.3** Invest in education and research, through partnerships across the system to drive professional fulfilment for the workforce.



# Workforce Focus Areas



## Focus Area 4 A Culture Built on Inclusion and Wellbeing

This focus area aims to foster a sense of belonging and support the wellbeing of every employee throughout their career. Prioritising workforce wellbeing isn't just a compliance activity; it's a strategic move that helps attract top talent and establish us as an employer of choice across an individuals' lifetime.

Inclusive workplaces which respect diverse perspectives and needs and earn deeper trust and commitment from employees, lead to increased job satisfaction, better mental health, and lower turnover rates. Inclusive teams are significantly more innovative and effective, providing superior service and contributing to team success.

As a health service, it's crucial to have a diverse workforce reflecting the Gold Coast community's richness in First Nations people and culture.

We also aim to reflect our community in race, gender, sexual orientation, immigration status, disability status, neurodiversity, and socioeconomic background to deliver the best possible care.

Prioritising lifelong wellbeing supports current and future workforce health. Flexibility may be limited in frontline roles but adopting an employee lifecycle approach and recognising staff diversity can enhance wellbeing, safety, and cultural benefits.

Career planning that acknowledges roles with limited flexibility and high psychosocial risks allows individuals to plan their careers proactively, supporting their wellbeing and enabling effective pre-emptive workforce strategies to plan for roles that may only be able to be sustained for a defined period.

### Our Objectives

Collectively, the workforce cares for the health and wellbeing of the community.

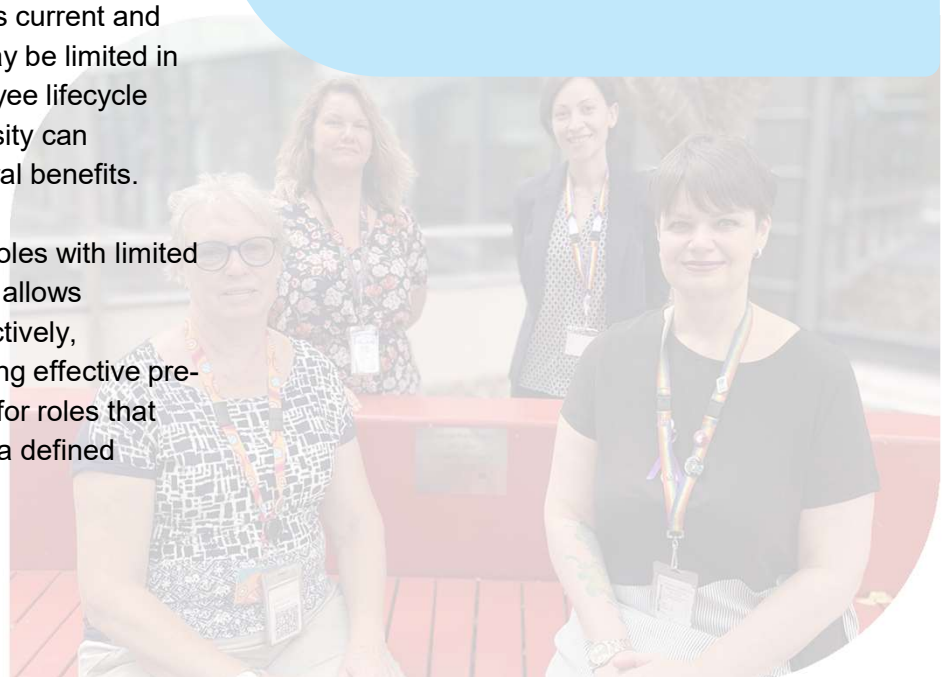
The demand for person-centred care will continue to place pressure on the workforce who deserve to work in an environment that is inclusive and promotes their wellbeing. Put simply, we need a vibrant and healthy workforce to support a vibrant and healthy community.

### Strategies

**4.1** Create a safe and healthy environment through proactive, life-cycle approaches to psychosocial wellbeing.

**4.2** Change the way we work to enable flexible work for current and future generations and be a system leader.

**4.3** Create a truly inclusive workplace to enhance and promote diversity and improve connectedness for everyone.



# Measures, Strategic Risks and Engagement



## Measures

**Success** will be measured during the term of the Strategy at the formal evaluation stages.

This Strategy has identified **four primary measures of success** indicated below.

- Increase in the **right workforce** (numbers, composition and skill-mix) and a reduction in time-to-hire and time-to-fill Key Performance Indicators.
- Increase in employee reported **satisfaction and engagement**.
- Increased proportion of **Aboriginal and Torres Strait Islander staff**.
- Reduced **turnover** and increased reported capability across leadership positions.

## Engagement

**Engaging with workforce and community** is crucial for an effective Strategy.

Throughout the life of this Strategy **organisation-wide engagement** opportunities will be used.

These actions measure the **effectiveness of strategic** actions and positive improvements across all measures of success.

Engagement and workforce consultation data used to inform the Strategy included:

- Staff engagement survey data.
- Engagement data from Clinical Council Congresses focused on Workforce and Culture.
- Strategic workforce planning data.
- Consumer and community consultation data obtained in partnership with the Gold Coast Primary Health Network.



## Strategic Risks

**Managing key workforce** risks will form a critical part of monitoring and implementing this Strategy.

- **Workforce supply** continues to fall behind service demand. Talent pipeline avenues are essential to continue to provide care.
- **Poor organisational culture** which leads to disengagement, distrust, turnover and impacts to care delivery. Culture must be prioritised to create a safe, inclusive workplace where people are engaged, productive and committed.
- **Misaligned leadership** impacts the ability to achieve priorities, coach and lead with empathy, deliver services during change and use drive efficient decision making. Gold Coast Health must grow leadership capability to ensure future direction can be achieved
- **Skills shortages** impact the ability to deliver safe, quality care. Gold Coast Health needs to identify and fill skill shortages.
- **Technology will disrupt operations** if adoption is not planned for nor education prioritised, as the workforce will not be skilled or supported to deliver care. Gold Coast Health needs a tech adoption culture that plans for and invests in skills to navigate new technology that supports growth and service delivery.

# Implementation Plan

The Strategy will come into effect on 1 July 2024 and will be implemented over five horizons, indicated below. The priorities for Horizon 1 (not to the exclusion of all priorities) are highlighted on subsequent pages.

While activities will commence in a defined horizon, they may conclude across any number of the subsequent horizons.

Horizon	Timeframe	Formal Evaluation Period
H1	1 July 2024 – 30 June 2025	1 May 2025 – 30 June 2025
H2	1 July 2025 – 30 June 2026	1 May 2026 – 30 June 2026
H3	1 July 2026 – 30 June 2027	1 May 2027 – 30 June 2027
H4	1 July 2027 – 30 June 2028	1 May 2028 – 30 June 2028
H5	1 July 2028 – 30 June 2029	1 May 2029 – 30 June 2029





# Focus Area 1: Best Use of Resources (Efficiency)

Strategies	Actions	Lead	Horizon
1.1 Enable existing resources to achieve optimal workforce efficiency, investing in robust workforce planning to identify the ideal workforce composition for the future	1.1.1 Establish Workforce Planning Specialist Roles to support Infrastructure programs and develop ideal workforce profiles and models.	• Organisational Capability	H1
	1.1.2 Develop and establish a State-leading workforce planning function.	• Organisational Capability	H3
	1.1.3 Develop a suite of workplace planning tools that provide end-to-end workforce efficiency planning for leaders. Achieve this in partnership with relevant teams across Gold Coast Health and the Department of Health (DoH).	• Organisational Capability	H2
1.2 Establish a strong, skilled and balanced workforce to enable service delivery	1.2.1 Support co-design of medical officer career pathways in partnership with DoH, universities and professional bodies and champion implementation of initiatives across Gold Coast Health.	• Medical Professional Executive	H2
	1.2.2 Invest in both specialist and generalist roles and career pathways, aligning to service and community need.	• Professional Executives	H2
	1.2.3 Centralise staff availability and flexibility to work across services through staff mobility initiatives.	• Human Resource Services	H1
1.3 Enable all roles to work at top of scope and invest in advance practice roles to deliver care to our community	1.3.1 Invest in Advanced Practitioner, Nurse Practitioner, Joint Appointment and hybrid roles (i.e. clinician/research).	• Professional Executives	H1
	1.3.2 Recognise and realise alternative models to optimise top of scope across all clinical streams by enhancing supporting roles and functions (e.g., Physician Assistant, administration support, AIN, USIN, Clinical Assistant etc).	• Professional Executives	H1



## Focus Area 2: Secure, Sustainable Talent Pipeline

Strategies	Actions	Lead	Horizon
2.1 Embed alternative pipelines of talent, innovative workforce models and invest in our First Nations workforce to secure our pipeline and improve outcomes	2.1.1 Grow the opportunities for school-based trainees.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
	2.1.2 Embed strategies within the Health Equity Framework and the Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016–2026 and the Gold Coast Health First Nation Equity Strategy 2022 to increase First Nations workforce participation.	<ul style="list-style-type: none"> <li>Aboriginal and Torres Strait Islander Health Service</li> </ul>	H1
	2.1.3 Explore ability to enable career-shifts within the existing workforce to secure supply and retain staff (e.g., Administration shift to Nursing).	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2
	2.1.4 Explore system-level workforce mobility to create lasting careers in health including: <ol style="list-style-type: none"> <li>portfolio employment opportunities</li> <li>cross-agency employment</li> <li>cross-care setting employment</li> <li>increased number of rotational arrangements.</li> </ol>	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2
	2.1.5 Partner with tertiary institutes to develop mentorship and work experience programs, including tailored programs for First Nations Students and Management Graduate programs.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2
	2.1.6 Embed successful succession planning and structured career pathways across the health service.	<ul style="list-style-type: none"> <li>Organisational Capability</li> <li>Professional Executives</li> </ul>	H1
2.2 Optimise education partnerships to ensure a work-ready graduate workforce	2.2.1 Influence the tertiary sector to review established learning objectives and amend to ensure 'job readiness' on graduation.	<ul style="list-style-type: none"> <li>Professional Executives</li> </ul>	H1
	2.2.2 Co-design future curriculums with tertiary bodies that enable service delivery objectives.	<ul style="list-style-type: none"> <li>Professional Executives</li> </ul>	H1



## Focus Area 2: Secure, Sustainable Talent Pipeline

Strategies	Actions	Lead	Horizon
2.3 Establish a competitive Employee Value Proposition and transform the candidate experience to attract and retain the best and brightest	2.3.1 Explore opportunities to capture real-time EVP data and create opportunities for ongoing workforce engagement aimed at continuously improving Gold Coast Health's Employee Value Proposition.	<ul style="list-style-type: none"> <li>Human Resource Services</li> </ul>	H1
	2.3.2 Invest in candidate care across the recruitment lifecycle (including inclusive and equitable strategies for diverse populations and First Nations people).	<ul style="list-style-type: none"> <li>Human Resource Services</li> <li>Aboriginal and Torres Strait Islander Health Service</li> </ul>	H1
	2.3.3 Establish flexible, engaging recruitment processes.	<ul style="list-style-type: none"> <li>Human Resource Services</li> <li>Aboriginal and Torres Strait Health Service</li> </ul>	H1
	2.3.4 Identify and adopt sustainable technology and AI solutions that create efficiencies in the recruitment process.	<ul style="list-style-type: none"> <li>Human Resource Services</li> </ul>	H2
	2.3.5 Explore dedicated recruitment business partners, including identified business partners for current and future First Nations workforce.	<ul style="list-style-type: none"> <li>Human Resource Services</li> <li>Aboriginal and Torres Strait Islander Health Service</li> </ul>	H1



## Focus Area 3: Transforming Leadership and Development

Strategies	Actions	Lead	Horizon
3.1 Develop both the professional and interpersonal capabilities of the workforce to successfully engage with each other and the community in an evolving health landscape	3.1.1 Create micro-learning opportunities to enable 'self-learning' anytime, anywhere.	<ul style="list-style-type: none"> <li>Organisational Capability</li> <li>Professional Executives</li> </ul>	H1
	3.1.2 Embed a technology champions workforce.	<ul style="list-style-type: none"> <li>Professional Executives</li> </ul>	H1
	3.1.3 Enable Intergenerational skills transference across the organisation through initiatives such as Alumni Networks that retain knowledge in the organisation.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
	3.1.4 Explore opportunities for remunerated work experience placements and scholarships, including targeted opportunities for First Nations people and embed where feasible.	<ul style="list-style-type: none"> <li>Organisational Capability</li> <li>Aboriginal and Torres Strait Islander Health Service</li> </ul>	H1
	3.1.5 Transform the way we work by investing in the development of: <ol style="list-style-type: none"> <li>social and emotional skills (empathy, self-awareness, socio-cultural sensitivity)</li> <li>interpersonal skills, such as person-centred communication, relational coordination and interprofessional teamwork</li> <li>Analytical skills such as adaptive problem solving to devise customised care for individuals, system level thinking</li> <li>Digital skills to support the rapid adoption of new and emerging technologies such as AI.</li> <li>Skills to drive a staff as educator model</li> </ol>	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
3.2 Empower leaders, invest in First Nations leaders, and optimise capability to lead diverse, intergenerational teams in demanding, high-change environments	3.2.1 Revitalise the role of leadership at Gold Coast Health focusing on leader as coach. Identify and embed distinct leadership capabilities needed at the various leadership levels to successfully lead diverse teams.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2
	3.2.2 Create a robust framework to improve the PDP process for leaders with high headcount.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
	3.2.3 Provide access to leadership tools (e.g., 360 feedback, mentorship and career coaching, mental health first aid training).	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2



## Focus Area 3: Transforming Leadership and Development

Strategies	Actions	Lead	Horizon	
	3.2.4	Promote and improve diversity at the leadership level, including development and opportunities for First Nations workforce.	<ul style="list-style-type: none"> <li>Organisational Capability</li> <li>Aboriginal and Torres Strait Islander Health Service</li> </ul>	H1
	3.2.5	Promote greater collaboration within and across the leadership levels to foster consistency, support and wellbeing.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
	3.2.6	Provide mentorship to leaders in middle-management enabling leadership consistency and best practice across Gold Coast Health.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H1
	3.2.7	Leverage technology to create opportunities that streamline workforce processes and systems, and enhance existing supports (Human Resources, Finance, Procurement, Data) to support decision making (including rapid decision making).	<ul style="list-style-type: none"> <li>Digital Technology</li> </ul>	H2
	3.2.8	Promote, reward and recognise exemplary, values-based leadership that empowers individuals, improves wellbeing and creates cultures of success across Gold Coast Health.	<ul style="list-style-type: none"> <li>Organisational Capability</li> </ul>	H2
3.3 Invest in education and research, through partnerships across the system to drive professional fulfilment for the workforce	3.3.1	Partner with tertiary centres to enable bi-directional learning opportunities. This includes opportunities for staff to teach future students and opportunities for staff to access emerging training and education.	<ul style="list-style-type: none"> <li>Profession Education Leads</li> </ul>	H2
	3.3.2	Partner with private providers (e.g., private hospitals, National Disability Insurance Scheme) to enable system-wide knowledge sharing across the care journey (i.e. preventative and promotional health).	<ul style="list-style-type: none"> <li>Profession Education Leads</li> </ul>	H2
	3.3.3	Embed more clinician researchers for all disciplines (also a strategy to attract and retain staff).	<ul style="list-style-type: none"> <li>Profession Education Leads</li> <li>Research</li> </ul>	H2
	3.3.4	Build KPIs for research and training into relevant positions.	<ul style="list-style-type: none"> <li>Profession Education Leads</li> <li>Research</li> </ul>	H2
	3.3.5	Uplift reasearch capability (adopting various research methodologies) across clinical and non-clinical settings [a learn fast, fail fast approach] supported through a Business Partnering style research model.	<ul style="list-style-type: none"> <li>Profession Education Leads</li> <li>Research</li> </ul>	H3



## Focus Area 4: A Culture Built on Inclusion and Wellbeing

Strategies	Actions	Lead	Horizon
4.1 Create a safe and healthy environment through proactive, life-cycle approaches to psychosocial wellbeing	4.1.1 Explore preventative health and wellbeing solutions for the workforce that prevent burnout and fatigue.	• Human Resource Services	H1
	4.1.2 Explore enhancements to physical workplaces/spaces (e.g., Occupational Violence prevention as a design factor for new infrastructure, end of trip facilities).	• Human Resource Services	H1
4.2 Change the way we work to enable flexible work for current and future generations and be a system leader	4.2.1 Embed innovative workforce models that create a culture that supports flexible working. Initiatives include job-sharing, challenging minimum FTE need for roles, multi-site rostering (both short and long-term) and new work patterns to enable service delivery and work to be performed outside of standard hours (e.g., later clinic times).	• Organisational Capability • Professional Executives	H1
	4.2.2 Explore opportunities that encourage and enable flexibility in leadership and critical positions.	• Organisational Capability	H1
	4.2.3 Encourage and trial job rotation across the service of both clinical and non-clinical roles.	• Organisational Capability	H2
	4.2.4 Embed a state-leading transition to retirement program.	• Human Resource Services	H2
4.3 Create a truly inclusive workplace to enhance and promote diversity and improve connectedness for everyone	4.3.1 Increase visible representation to meet diversity targets, particularly in leadership and critical roles.	• Executive Director People and operations	H1
	4.3.2 Strengthening leadership accountability for delivering diversity, inclusion and wellbeing activities, incorporating into Executive and Senior Leader Key Performance Indicators and Professional Development Plans	• Organisational Capability	H1
	4.3.3 Embed strategies within the Gold Coast Health First Nation Equity Strategy 2022 to enhance First Nations workforce employee engagement and satisfaction.	• Executive Leadership Team • Aboriginal and Torres Strait Islander Health Service	H1

# References

- Anderson, M., O'Neill, C., Macleod Clark, J., Street, A., Woods, M., Johnston-Webber, C., Charlesworth, A., Whyte, M., Foster, M., Majeed, A., Pitchforth, E., Mossialos, E., Asaria, M., & McGuire, A. (2021). Securing a sustainable and fit-for-purpose UK health and care workforce. *Lancet (London, England)*, 397(10288). [https://doi.org/10.1016/S0140-6736\(21\)00231-2](https://doi.org/10.1016/S0140-6736(21)00231-2)
- Angel, Y., & Fire, G. (2023). Healthcare policy changes in an era of health workforce shortage. *Israel journal of health policy research*, 12(1). <https://doi.org/10.1186/s13584-023-00576-7>
- Australian Institute of Health and Welfare. (2022). *Health workforce*. Retrieved from <https://www.aihw.gov.au/reports/workforce/health-workforce>
- Azzopardi-Muscat, N. (2020). A public health approach to health workforce policy development in Europe. *European journal of public health*, 30(Suppl\_4). <https://doi.org/10.1093/eurpub/ckaa123>
- Balasubramanian, M., & Short, S. (2021). The Future Health Workforce: Integrated Solutions and Models of Care. *International Journal of Environmental Research and Public Health*, 18(6). <https://doi.org/10.3390/ijerph18062849>
- Barakovic Husic, J., Melero, F. J., Barakovic, S., Lameski, P., Zdravovski, E., Maresova, P., Krejcar, O., Chorbev, I., Garcia, N. M., & Trajkovic, V. (2020). Aging at Work: A Review of Recent Trends and Future Directions. *International journal of environmental research and public health*, 17(20), 7659. <https://doi.org/10.3390/ijerph17207659>
- Bashkin, O., Dopelt, K., Mor, Z., Leighton, L., Otok, R., Duplaga, M., Macleod, F., De Nooijer, J., Neumark, Y., Paillard-Borg, S., Tulchinsky, T., Zelber-Sagi, S., & Davidovitch, N. (2021). The future public health workforce in a changing world: A conceptual framework for a european-israeli knowledge transfer project. *International Journal of Environmental Research and Public Health*, 18(17). <https://doi.org/10.3390/ijerph18179265>
- Bogaert, K., Castrucci, B. C., Gould, E., Rider, N., Whang, C., & Corcoran, E. (2019). Top Training Needs of the Governmental Public Health Workforce. *J Public Health Manag Pract*, 25 Suppl 2, *Public Health Workforce Interests and Needs Survey 2017*(2 Suppl). <https://doi.org/10.1097/phh.0000000000000936>
- Bowen, C. N., Haverkamp, S. M., Karpiak Bowen, S., & Nye, G. (2020). A call to action: Preparing a disability-competent health care workforce. *Disability and Health Journal*, 13(4). <https://doi.org/10.1016/j.dhjo.2020.100941>
- Bürkin, B. M., Venticich, P. M., Adongo, P. B., De Almeida-Filho, N., Magaña, L., Middleton, J., Souza, L. E., & Czabanowska, K. (2023). Revolutionizing the Public Health Workforce—A Policy Brief in Retrospect of the World Congress on Public Health Rome 2020. *Public Health Reviews*, 44. <https://doi.org/10.3389/phrs.2023.1604807>
- [Case study: Hiring outside the box works for Lamberts Fresh Produce | Department of Employment, Small Business and Training \(desbt.qld.gov.au\)](#)
- Cometto, G., Assegid, S., Abiyu, G., Kifle, M., Tunçalp, Ö., Syed, S., Kleine Bingham, M., Nyoni, J., & Ajuebor, O. K. (2022). Health workforce governance for compassionate and respectful care: a framework for research, policy and practice. *BMJ global health*, 7(3). <https://doi.org/10.1136/bmjgh-2021-008007>
- Cometto, G., Buchan, J., & Dussault, G. (2020). Developing the health workforce for universal health coverage. *Bull World Health Organ*, 98(2). <https://doi.org/10.2471/blt.19.234138>
- De Kock, J. H., Latham, H. A., & Cowden, R. G. (2022). The mental health of healthcare workers during the COVID-19 pandemic: a narrative review. *Current Opinion in Psychiatry*, 35(5). <https://doi.org/10.1097/YCO.0000000000000805>
- Fraher, E., & Brandt, B. (2019). Toward a system where workforce planning and interprofessional practice and education are designed around patients and populations not professions. *Journal of interprofessional care*, 33(4). <https://doi.org/10.1080/13561820.2018.1564252>
- [Gary S. Kaplan, MD, Christoph A. Meier, MD, Eyal Zimlichman, MD, MSc, Charles N. Kahn, III, MPH, and Claudia A. Salzberg, PhD, MSE Gary S. Kaplan, MD. \(2022\). Designing the Healthcare Workforce of the Future. Retrieved from: Designing the Health Care Workforce of the Future | NEJM Catalyst](#)
- Goldsack, J. C., & Zanetti, C. A. (2020). Defining and Developing the Workforce Needed for Success in the Digital Era of Medicine. *Digit Biomark*, 4(Suppl 1). <https://doi.org/10.1159/000512382>
- Guilfoyle, C & Harmer B. (2023). Planning for the Healthcare Workforce of the Future. PwC. [Planning for the healthcare workforce of the future \(pwc.com.au\)](#)
- Heroux, D. (2022). *Caring for healthcare workers - KPMG Global*. KPMG. <https://kpmg.com/xx/en/home/insights/2022/01/caring-for-healthcare-workers.html>
- Jackson, Shane & Martin, Grant & Bergin, Jennifer & Clark, Bronwyn & Stupans, Ieva & Yeates, Gilbert & Nissen, Lisa & Marty, Stephen & Gysslink, Paul & Matthews, Andrew & Kirsas, Sue & Deans, Kerry & Sorimachi, Kay. (2015). *Understanding advanced and extended professional practice*. Australian Pharmacist. 34. 76.
- Krasna, H., Kulik, P. K. G., Karnik, H., & Leider, J. P. (2023). Recruiting New Talent for Public Health Jobs With Evidence-Based Job Descriptions and Attractive Job Postings. *Journal of public health management and practice : JPHMP*, 29(5). <https://doi.org/10.1097/PHH.0000000000001776>
- Komm, A. (2021). The new possible: How HR can help build the organisation of the future. McKinsey. [The new possible: How HR can help build the organization of the future | McKinsey](#).
- Maeda, A. and K. Socha-Dietrich (2021), "Skills for the future health workforce: Preparing health professionals for people-centred care", OECD Health Working Papers, No. 124, OECD Publishing, Paris, <https://doi.org/10.1787/68fb5f08-en>. Nazeha, N., Pavagadhi, D., Kyaw, B. M., Car, J., Jimenez, G., & Tudor Car, L. (2020). A Digitally Competent Health Workforce: Scoping Review of Educational Frameworks. *J Med Internet Res*, 22(11). <https://doi.org/10.2196/22706>
- OECD Future of Education and Skills 2030.
- Roseby, R., Adams, K., Leech, M., Taylor, K., & Campbell, D. (2019). Not just a policy; this is for real. An affirmative action policy to encourage Aboriginal and Torres Strait Islander peoples to seek employment in the health workforce. *Internal medicine journal*, 49(7). <https://doi.org/10.1111/imj.14345>

- Smallwood, N., Karimi, L., Bismark, M., Putland, M., Johnson, D., Dharmage, S. C., Barson, E., Atkin, N., Long, C., Ng, I., Holland, A., Munro, J. E., Thevarajan, I., Moore, C., McGillion, A., Sandford, D., & Willis, K. (2021). High levels of psychosocial distress among Australian frontline healthcare workers during the COVID-19 pandemic: a cross-sectional survey. *General Psychiatry*, 34(5), e100577. <https://doi.org/10.1136/gpsych-2021-100577>.
- Stanford, F. C. (2020). The Importance of Diversity and Inclusion in the Healthcare Workforce. *Journal of the National Medical Association*, 112(3). <https://doi.org/10.1016/j.jnma.2020.03.014>
- Turner, J. (2019). *6 Ways the Workplace Will Change in the Next 10 Years*. <https://www.gartner.com/smarterwithgartner/6-ways-the-workplace-will-change-in-the-next-10-years>
- The Future of the Healthcare Workforce: 5 Predictions For 2022. (2022). <https://www.gehealthcare.com.au/insights/article/the-future-of-the-healthcare-workforce-5-predictions-for-2022>
- Watts, R. D., Bowles, D. C., Fisher, C., & Li, I. W. (2021). What do public health graduates do and where do they go? An analysis of job destinations and mismatch in Australian public health graduates. *International Journal of Environmental Research and Public Health*, 18(14). <https://doi.org/10.3390/ijerph18147504>

### Secondary Sources

- Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016–2026
- Department of Health National Preventative Health Strategy 2021–2030
- Gold Coast Health Health Equity Strategy 2022
- Gold Coast Health Diversity & Inclusion Strategy 2023–2025
- HEALTHQ32: A Vision for Queensland's Health System
- Health Workforce Strategy for Queensland to 2023 Consultation Paper
- Queensland Police Service Strategic Workforce Plan 2023–2027
- Queensland Ambulance Service Strategy 2022–2027
- Ramsay Cares Strategy & Caring for Our People 2022

### Hospital and Health Service strategic plans

- Cairns and Hinterland Hospital and Health Service Strategic Plan 2018–2023
- Central Queensland Hospital and Health Service Strategic Plan 2018–2023
- Central West Hospital and Health Service Strategic Plan 2021–2025
- Children's Health Queensland Hospital and Health Service Strategic Plan 2020–2024
- Darling Downs Health Strategic Plan 2020–2024
- Gold Coast Hospital and Health Service Strategic Plan 2020–2024
- Mackay Hospital and Health Service Strategic Plan 2020–2024
- Metro North Hospital and Health Service Strategic Plan 2020–2024
- Metro South Hospital and Health Service Strategic Plan 2021–2025
- Northwest Hospital and Health Service Strategic Plan 2021–2025
- Southwest Hospital and Health Service Strategic Plan 2022–2026
- Sunshine Coast Hospital and Health Service Strategic Plan 2022–2026
- Torres and Cape Hospital and Health Service Strategic Plan 2023–2027
- Townsville Hospital and Health Service Strategic Plan 2022–2026
- West Moreton Health Strategic Plan 2021–2025
- Wide Bay Hospital and Health Service Strategic Plan 2018–2022.