

## USING COMPETENCY-BASED EDUCATION TO EQUIP THE PRIMARY HEALTH CARE WORKFORCE TO MANAGE CHRONIC DISEASE

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### POLICY CONTEXT

Australia's health system is under pressure from challenges posed by an ageing population, the increasing prevalence of chronic disease, increasing consumerism and new technologies. The health workforce itself compounds these challenges as it ages, and there remain shortages in key disciplines. Education and training are key components of strategies to address workforce shortages and to equip it to meet future needs of chronic disease management in general practice.

### KEY FINDINGS

- Competency-based education (CBE) is attractive because it emphasises defining educational outcomes and assessing attainment of outcomes. This can reduce training times as trainees progress once competence is shown, rather than because a fixed training time has elapsed
- CBE can assess health professionals' skills in chronic disease management, certify attainment of those skills and allow extended roles. Extended roles may require changes to regulations and legislation
- CBE could be part of an educational program designed to create new kinds of health workers. This would require new standards, accreditation systems and appropriate regulations and legislation
- An increased emphasis on interdisciplinary learning is appropriate, particularly in vocational training/postgraduate nursing and medical courses
- Clinical practice guidelines and clinical pathways, disease registers, informatics and computer knowledge, and team work are candidates for interdisciplinary learning
- CBE programs are resource intensive and require careful planning to successfully implement. The cost benefit of these approaches is not known. They should be piloted and evaluated before extensive role out
- There is little empirical evidence regarding the effectiveness of CBE in any setting

For more details, go to the [three page report](#)

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