



Workforce Innovation - Allied Health Assistants

Supporting the
development of Allied
Health Assistant
(AHA) roles



Context

A recent scoping project found a key barrier to the use of AHAs was that:

AHPs often have a poor understanding of the roles, skills and contribution AHAs can make to client outcomes and service design

“New grads come out of university never having heard of an AHA –let alone knowing how to work with us”



Purpose of the Framework

The *AHA Supervision and Delegation Framework* seeks to be an **enabling tool to support AHPs** across a range of allied health disciplines:

- **better understand the range of roles AHAs can play in patient care**
- **better understand the supervision and delegation responsibilities of an AHP working with an AHA**
- **feel confident in working safely with AHAs**

“The framework seeks to support service innovation in developing new models of care to meet patient need”



Supporting AHAs

The framework seeks to support AHAs gain a greater appreciation of:

- the expected knowledge and skill levels of AHAs with a Certificate III or IV in AH Assistance
- the respective roles and responsibilities of both AHPs and AHAs supporting effective team work

“New roles emerge as a result of creative individuals and teams identifying new ways



Setting organisational expectations

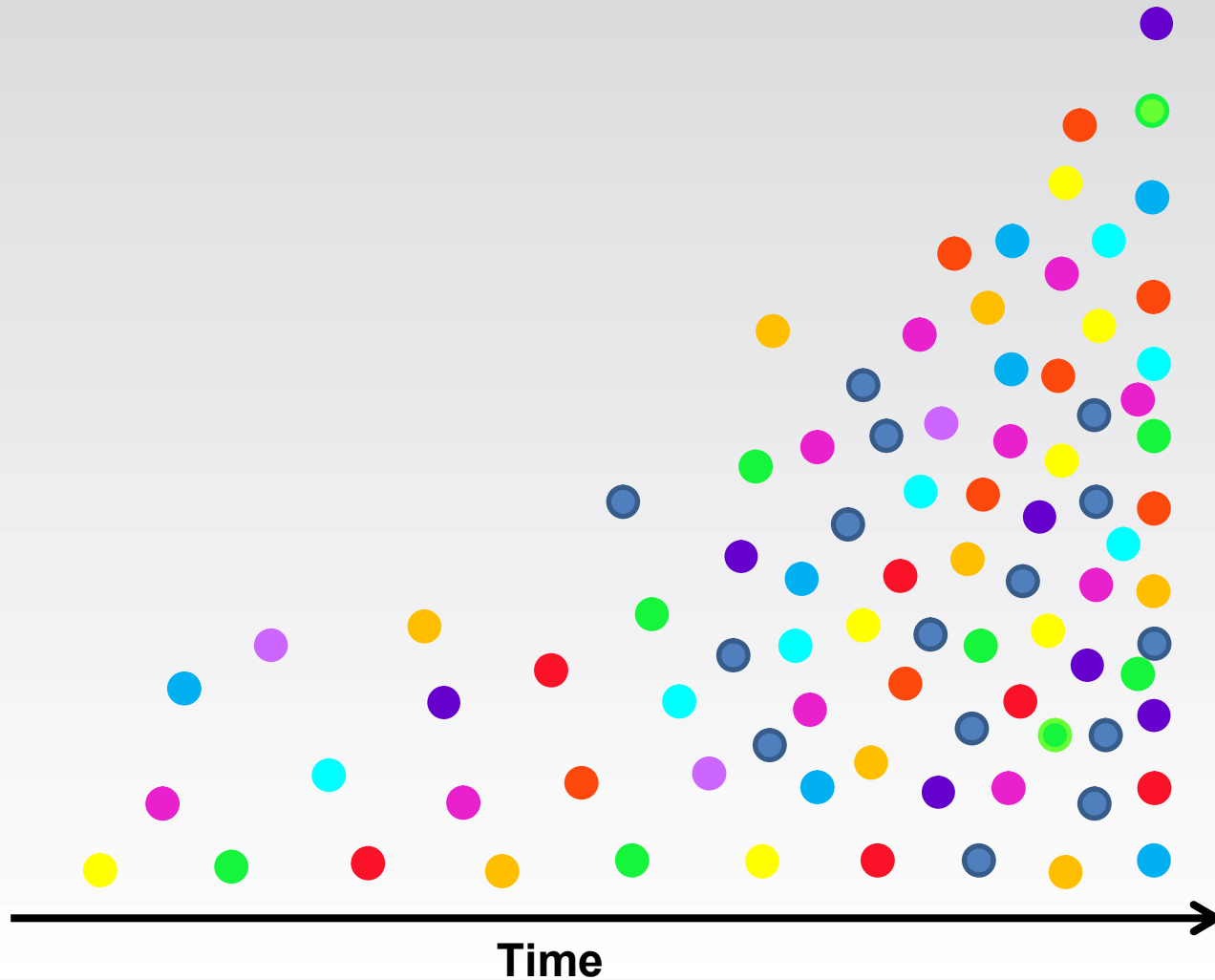
The framework also supports AH managers:

- **identify policies and professional development programs required at a systems level** to support AHPs and AHAs work effectively together in teams
- **develop role statements for new AHA positions** and defining the competencies of required.

“Its important for AHAs to have access to appropriate levels of supervision and



Historically the role has varied





New industrial structure

Education level entry criteria:
No formal qualifications required.

Grade 1 AHA

Supervision and nature of work:

- Will be required to perform work of a general nature under the direct supervision of an AHP.

Education needs:

- AHP or organisation needs to provide training and support to enable the AHA to perform their duties.

Duties:

- May include collection and preparation of equipment, maintaining client contact details, monitoring clients to ensure they follow their program.

Education level entry criteria:

Formal qualification of at least Certificate III level from RTO, or its equivalent.

Grade 2 AHA

Supervision and nature of work:

- will be required to perform work of a general nature under the supervision of an AHP.

Education needs:

- AHP or organisation needs to provide training and support to enable the AHA to perform their duties.

Duties:

- Perform the full range of duties of a Grade 1
- Work directly with an AHP; work alone or in teams under supervision following a prescribed program of activity.
- Use communication and interpersonal skills to assist in meeting the needs of clients.
- Accurately document client progress and maintain documents as required.
- Demonstrate a capacity to work flexibly across a broad range of therapeutic and program related activities.
- Identify client circumstances that need additional input from the AHP.
- Prioritise work and accept responsibility for outcomes within the limit of their accountabilities.

Education level entry criteria:

Formal qualifications of at least Certificate IV level from RTO, or its equivalent.

Grade 3 AHA

Supervision and nature of work:

- Will be required to perform work of a general nature under the supervision of an AHP.

Education needs:

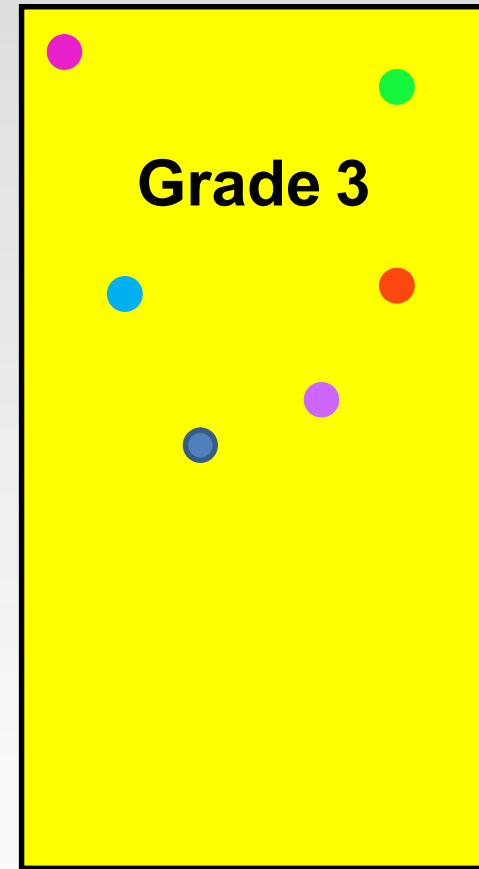
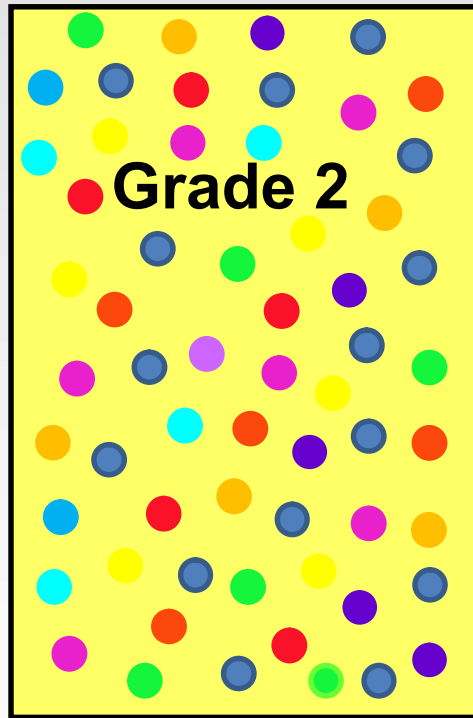
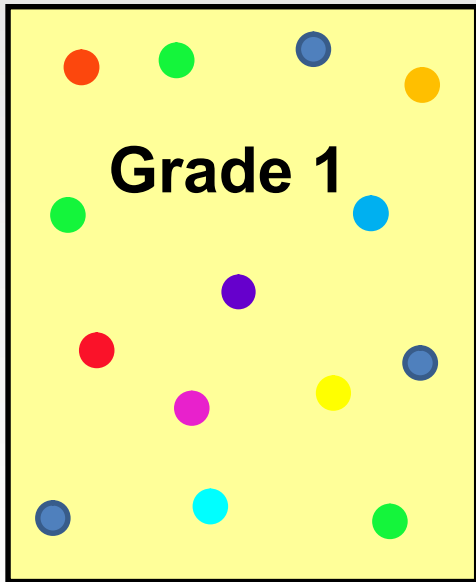
- AHP or organisation needs to provide training and support to enable the AHA to perform their duties.

Duties:

- Perform the full range of duties of a Grade 1 and Grade 2.
- Understand the basic theoretical principles of the work undertaken by the AHP whom they are employed to support.
- Work with minimum supervision to implement therapeutic and related activities, including maintenance of appropriate documentation.
- Identify client circumstances that need additional input from the AHP, including suggestions as to appropriate interventions.
- Demonstrate very good communication and interpersonal skills.
- Organise their own workload and set work priorities within the program established by the AHP.
- If required, assist in the supervision of the work being performed by Grade 1 and 2 AHAs and those in training.



Profile of the sector





Roles of AHAs

- Knowledge and skill base of AHAs with a Cert. III & IV in AH Assistance – core units and areas of specialisation Dietetics, Physiotherapy, Podiatry, Occupational Therapy, Speech Pathology,
- Importance of continuing professional development in acquiring skills to meet emerging needs.
- Importance of documenting competencies acquired.

“Developing a shared understanding of the knowledge and skill base of AHAs enables people to identify possible roles for the



The Allied Health Team

- Essential team members understand their roles, responsibilities and scope of practice.
- As service delivery models embrace multidisciplinary- interdisciplinary care, roles for AHAs to work across disciplines will increase – important workloads have regard to complexity and need for maintenance of skills across the disciplines

“We support patients with complex care needs along the patient journey –working with AHPs across the disciplines ”



The Allied Health Team

- **Guide managers developing position descriptions and recruiting AHAs** – assist them identify the skill sets needed for the roles they want to develop
- Importance of **orientating new AHAs and AHPs** to the workplace
- Importance of **support systems for AHAs working in a rural context**

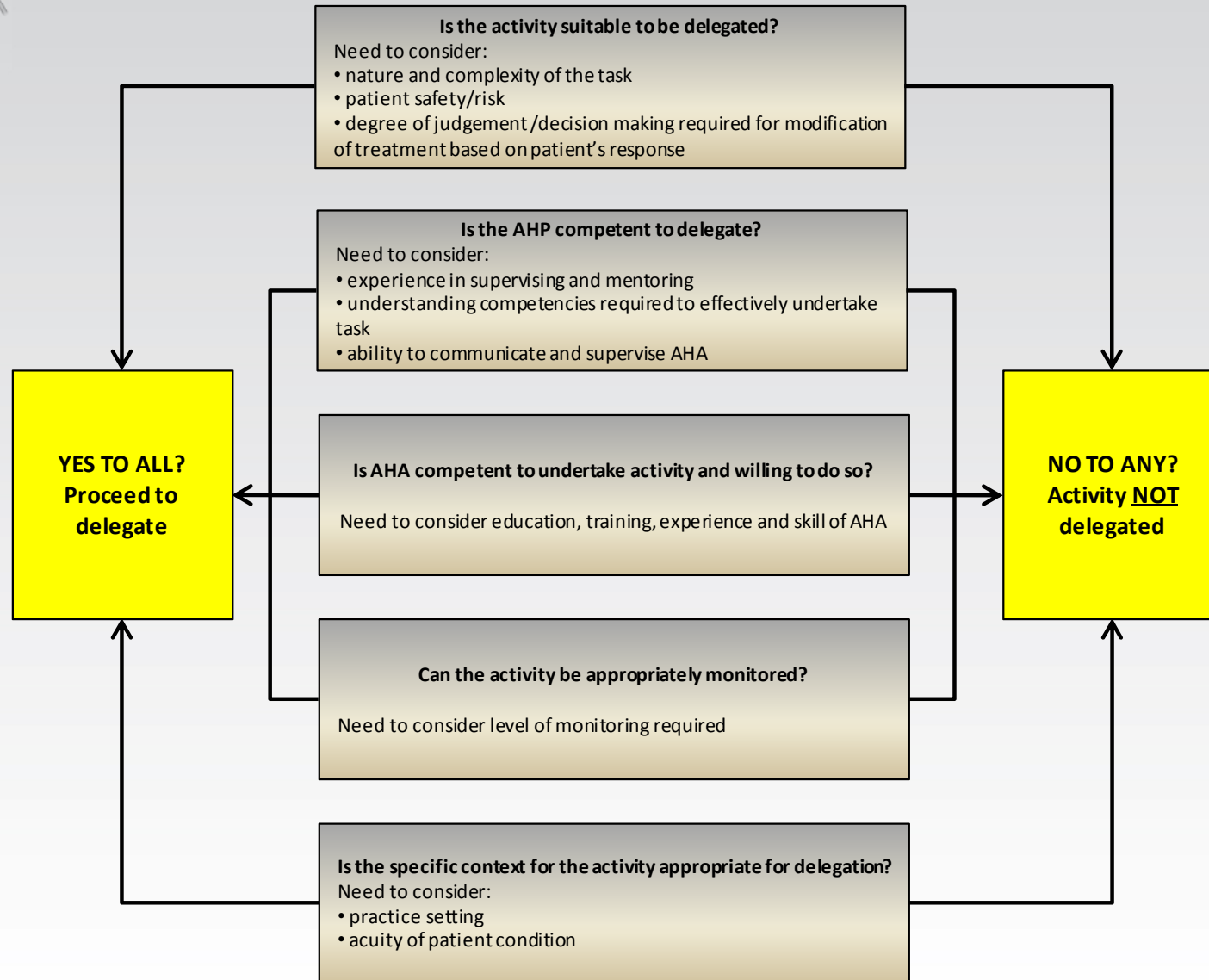


Supporting effective delegation

- What is delegation?
- When is it appropriate to delegate?
- When is it appropriate to assign responsibility?
- When is it appropriate for an AHA to refuse to accept a delegation?
- Principles of effective delegation
- Accountability



Supporting effective delegation





Supervision

- The role of the supervisor
- Opportunities for grade 3 AHAs to assist the AHPs supervise work performed by Grade 1 and 2 AHAs and students: - *peer support, mentoring.*
- Supervision in a multidisciplinary/interdisciplinary context;
- Importance of structural approaches in a rural context



Supervision

Task Complexity / Delegation	Simple, routine task Recurrent delegation	Simple non-routine task New delegation	Complex, routine task Recurrent delegation	Complex task, non-routine task New delegation.
Client Condition	Stable and simple condition	Stable and more complex condition	Fluctuating and more complex	Highly fluctuating and complex condition
Skills and Competencies	Advanced competency, recent experience and frequently conducted.	Advanced competency, experience and occasionally	Basic competency, experience and occasionally conducted	Basic experience, no experience and never undertaken
Impact on service	Minimal	Some impact on quality	Moderate impact on quality	Significant impact on quality
Adverse Risk	Minimal	Mildly attributable to performance	Moderately attributable to performance	Directly attributable to performance
Timeframe	Significant time before impact	Some time before impact	Short time before impact	Immediate impact
FREQUENCY OF MONITORING	<i>Intermittent monitoring</i>	<i>Regular monitoring</i>	<i>Frequent monitoring</i>	<i>Frequent continuous monitoring</i>
TYPE OF MONITORING	<i>Indirect monitoring</i>	<i>Direct & indirect monitoring and some supervision</i>	<i>Direct & indirect monitoring and some frequent supervision</i>	<i>Direct monitoring and supervision at all times</i>



Next steps with the framework

- Final draft to be circulated this week to range of stakeholders including Professional Associations, AHAs, AHPs, Training Providers, and Unions seeking feedback.
- Document to be refined based on feedback.
- Document to be distributed.



AHAs supporting effective health care into the future

