



HOSPITAL AND HEALTH SERVICES

-WORKPLACE INSTRUCTION- FOR ALLIED HEALTH PROFESSIONALS IN

TITLE	WPI 1: Guidelines for allied health professionals developing delegation skills
DESCRIPTION	This workplace instruction (WPI) supports the process of delegating tasks to allied health assistant (003 and 004) staff
TARGET AUDIENCE	<ul style="list-style-type: none"> Allied health professionals, managers, supervisors and other members of inter-professional health teams who partner with the

© State of Queensland (Queensland Health) 2013



<http://creativecommons.org/licenses/by-nc/3.0/au/deed.en>

Document Details:

- This WPI has been developed to support delegation of tasks to allied health assistants within the local work unit. A framework is available at: <http://qheps.health.qld.gov.au/ahwac/content/modcareresources6.htm>
- The practice parameters detailed in this WPI are consistent with statewide industry training standards as developed by the Allied Health Professions Office of Queensland (AHPOQ) and integrated into the Queensland Health Operational Services Manual.¹
- AHAs abide by the [Code of Conduct for the Queensland Public Service](#).²

Version No.:	Approval date:	Approved by:
Author:	Review Date:	Review Officer:
Document Custodian:		

1. Guidelines for developing delegation skills³

- An individual allied health professional's (AHP's) readiness to delegate will be assessed according to a number of prerequisites related to clinical competency that include the ability to:
 - demonstrate organised and effective time and caseload management skills
 - demonstrate effective practice in their work area
 - assess and plan treatment within the client conditions they will delegate
 - undertake realistic goal-setting with their clients (e.g. SMART goals)
 - identify when a client is ready/appropriate for delegation
 - be proactive in requesting supervision
 - accurately identify their own learning needs.

¹Queensland Health 2012, *Operational Services Manual*, Queensland Government, Brisbane.

²www.psc.qld.gov.au/library/document/catalogue/equity-ethics-grievance/gps-code-conduct.pdf

³Smith R, Duffy J 2011, *Effective Workforce Programme Facilitators Manual*, Effective Workforce Solutions Ltd.

- Training in delegation and supervision will support AHP delegation skills and practice and should ideally be undertaken by a senior or other experienced AHP within the team.
- All AHPs new to the clinical service area must undertake induction in order to:
 - Increase their knowledge and understanding of the Skill-sharing and Delegation Practice framework in use.
 - Familiarise themselves with the clinical task instruction (CTI) workbook/s relevant to their clinical setting, and the communication systems in place to support delegation practice.

2. Learning to delegate³

- The novice delegator:
 - highlights potentially delegable clients to their clinical supervisor
 - selects appropriate tasks to delegate in practice
 - plans a treatment program and delegates to the AHA ensuring method and frequency of post-task feedback is agreed.
- The recommended maximum number of clients that can be delegated will be discussed and decided as part of supervision between the delegating AHP and the AHA and the delegating AHP and their supervisor.
- Once the novice delegator is confident and able to delegate competently, they can delegate without initial reference to their supervisor.
- The delegating member of staff will seek post-task feedback from the AHAs on an ongoing basis to ascertain how well clients are progressing and how the AHA perceives the delegation process to be working.
- It is expected that the novice delegator will keep reflective accounts to form part of their continuing professional development and clinical (i.e. professional) supervision.
- All AHPs, including new graduates (i.e. AHPs with less than one calendar year of experience), can delegate to and/or supervise AHAs.⁴

The general principles of delegation have been summarised in Appendix 1.

3. Allied Health Delegation Training

All AHPs who delegate to AHAs should receive appropriate training in delegation. The University of Queensland Centre for Innovation in Professional Learning has produced an education resource for the Department of Health to support delegation practices for AHPs.

Through this program, AHPs will gain a better understanding of models of care incorporating assistants, and of their own roles, responsibilities and relationships with these models.

⁴ Speech Pathology Australia 2007, *Parameters of Practice: Guidelines for delegation, collaboration and teamwork in speech pathology practice*.

The program (*Training in delegation practices: A guide for allied health professionals and allied health assistants*), which seeks to provide a solid basis for effective teamwork focussed on ensuring quality care and client safety comprises two resources:

- Local work team training package
 - designed to enhance the effectiveness of delegation practices between AHPs and AHAs working together in teams
 - includes self-directed workbook and voice-over PowerPoint presentations
 - available at <http://gheps.health.qld.gov.au/ahwac/content/modcareprojects3.htm>
- Half-day workshop on delegation practices
 - suitable for delivery across professions and work units
 - includes facilitator manual, participant workbook and voice-over PowerPoint presentation for the facilitator-led training
 - comes on a CD that allows for all resources to be accessed via computer through an easy-to-follow menu
 - a copy of the CD resource is held by the Workforce Development Officer and/or Calderdale Framework Facilitator in each Hospital and Health Service.

Appendix 1: Principles of Delegation⁵

Delegating AHP	AHA	AHP and AHA
<ul style="list-style-type: none"> • Establishes diagnosis, clinical management and treatment plans • Should not delegate tasks beyond <u>their</u> level of skill and experience. • Should determine whether it is appropriate to delegate a task to an AHA and only delegate if it is appropriate. 	<p>Must have the level of experience and skills to carry out the task.</p>	<p>The primary motivation for delegation should be to serve the interests of the client.</p>
<ul style="list-style-type: none"> • Should provide the following when delegating a task: <ul style="list-style-type: none"> – clear instructions on the outcomes to be achieved – clear processes to be followed in undertaking the task – guidance on how to manage any perceived risks – alternative strategies to be utilised if modification is required – clear guidance on when further advice or direction should be sought from the AHP. 	<p>Has responsibility for raising any issues related to undertaking the delegated task, and should request additional information and/or support as required.</p>	<p>The task being delegated should always be discussed and, if both the AHP and AHA feel confident, then the AHA can carry out the delegated task. If the AHA does not feel confident undertaking the task, then the appropriate knowledge, skills and confidence should be acquired before the task is delegated.</p>
<p>Effective delegation is a skill that needs to be mastered. It is important that AHPs have access to support to develop skills in effective delegation</p>	<p>Should be aware of the extent of their expertise at all times and seek support from AHPs as required.</p>	<p>The level of supervision and feedback provided to an AHA should be appropriate, having regard for the knowledge and skill level of the AHA, the needs of the client, the service setting and the task assigned.</p>

⁵ Adapted from Department of Health 2012, *Supervision and delegation framework for allied health assistants*, Workforce Leadership and Development Branch, Victorian Government.