



Allied Health
**Clinical Education and
Workforce Training Plan**
2020-2029



Allied Health Clinical Education and Workforce Training Plan 2020-2029

Published by the State of Queensland (Queensland Health), September 2020



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
© State of Queensland (Queensland Health) 2019

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:

Allied Health Professions' Office of Queensland, Department of Health, PO Box 2368, Fortitude Valley BC Qld 4006, email allied_health_advisory@health.qld.gov.au, phone 07 3328 9298.

An electronic version of this document is available at <https://www.health.qld.gov.au/ahwac/>

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.

Background

Allied health is committed to Queensland Health's vision that 'By 2026 Queenslanders will be among the healthiest people in the world'⁽¹⁾. Clinical education and training is a critical enabler of contemporary health care delivery as it ensures that the current and future workforce has the capacity and capability to provide effective and safe health services.

The Ministerial Taskforce on Clinical Education and Training was established in 2006 to review and make recommendations on issues related to clinical education and training across medical, nursing and midwifery, allied health and oral health professions⁽²⁾. Since the Ministerial Taskforce, consistent investments in allied health education and training initiatives have ensured that health services meet rising demands for pre-entry placements and new graduate support, as well as provide the training required by allied health professionals to work in contemporary and innovative models of care.

Key achievements include:

- Investment provided for education and training initiatives by the *Health Practitioners (Queensland Health) Certified Agreement (No. 1) 2007*, has ensured that health services have been able to maintain support for and meet rising demands associated with pre-entry education and new graduate support. This investment has also enabled the provision of targeted training programs for the allied health workforce.
- The development, implementation and evaluation of a training pathway for rural generalists in nine professions including a two-level, post-graduate education program. The education program provides early career allied health professionals with the clinical and non-clinical skills required to work as a rural generalist in their profession.
- Investment provided for education and training initiatives for the support workforce. This included support for 299 Queensland Health allied health assistants to undertake a Certificate IV in Allied Health Assistance. A series of contextualised learning modules were also designed to assist the rapid on-boarding of new allied health assistants in a number of clinical areas. Additionally, a training package was developed to enhance the effectiveness of delegation practices.

The next 10 years will see unique challenges and changes for the delivery of allied health education and training, including increasing demand for clinical placements and for workforce, and the rapidly expanding integration of digital technology into clinical services.

Pre-entry student placements need to be aligned with future areas of need for Queensland communities, including chronic disease, aged care, mental health, Aboriginal and Torres Strait Islander health and rural and remote health⁽¹⁾.

To derive maximum benefit from new and emerging roles for allied health professionals in the health system, post-entry training pathways are required that are sustainable, service-integrated and reflect contemporary health care models. In this context, all training programs should integrate core learning outcomes in communication and collaborative practice, education, research, management and leadership, along with profession-specific clinical care components required to support advancing practice.

Clinical education also has the potential to drive and enable inter-professional practice within identified clinical settings to provide high-quality, accessible and efficient health care.

This 10-year plan provides direction for the allied health workforce to work collaboratively and invest in education and training initiatives to build workforce capacity and capability across the continuum, from pre-entry and new graduate support to the establishment of sustainable service-integrated training pathways for current and future models of care.



Introduction

The Queensland Allied Health Clinical Education and Workforce Training Plan underpins the clinical education and training enabler in the Optimising the allied health workforce for best value and best care: A 10-year Strategy 2019-2029 ⁽³⁾. The plan will guide the development of allied health clinical education and training in Queensland over this decade, further building the capacity and capability of the allied health workforce.

Consultation was undertaken with Queensland Health groups and external partners in the development of this plan. Queensland Health stakeholders included directors of allied health, representatives from the Cunningham Centre, statewide clinical education and training program managers, profession-specific leaders. Education and training providers in Queensland who were consulted include universities that deliver entry-level education in allied health professions, the University Departments of Rural Health and providers of vocational education and training (VET).

Vision

Build the capability and capacity of our emerging, new and existing professional and support workforces to effectively meet the healthcare demands of the future.

Guiding principles



Providing and participating in clinical education and training is core business for all allied health professionals and allied health assistants.



Holistic and person-centered care is central to providing clinical education and training.



Clinical education models are innovative, contemporary, evidenced-based, efficient and aligned to current and future priorities and areas of need for Queensland communities.



Collaboration and partnerships are central to the delivery of clinical education and training.

Strategic priorities

Strengthen connections between healthcare and education sector partners, to ensure the workforce is able to respond to changing community healthcare needs and service requirements.

Develop and implement sustainable training pathways from early career to advanced roles for allied health professionals and support staff.

Adopt inter-professional education and learning approaches that build collaborative practice approaches and support integrated person-centred care.

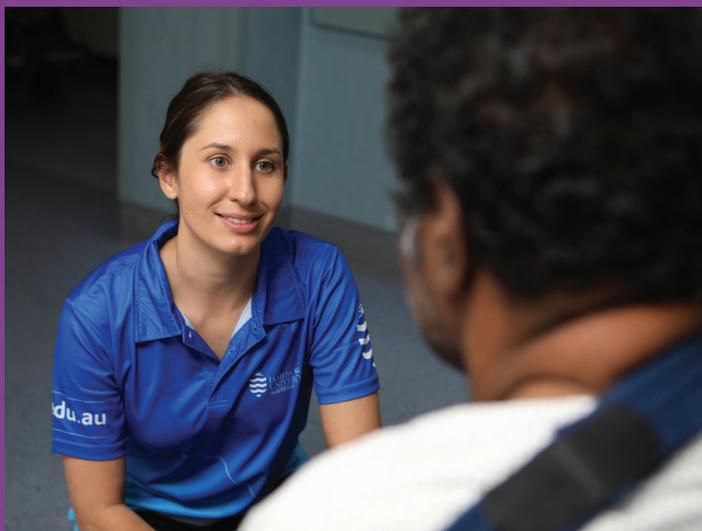
Priority 1: Partnerships and collaboration

Strengthen connections between healthcare and education sector partners, to ensure the workforce is able to respond to changing community healthcare needs and service requirements.



Key initiatives

- Advocate for and support the development of allied health clinical education and new graduate capacity through retention of clinical educator positions provided through relevant industrial agreements (funding for the Clinical Education Workload Management Initiative) and investment in new clinical education positions in health settings and services aligned to Queensland Health priorities.
- Establish collaborative partnerships between education and health sectors to develop, implement and evaluate a range of innovative and flexible clinical education models to ensure sufficient numbers of high-quality student placements are offered and utilised in settings that meet workforce demands and community needs.
- Work with key partners to ensure that the allocation and management of clinical placements is efficient, transparent and maximises pre-entry clinical placement capacity within the healthcare system.
- Work with education partners, including University Departments of Rural Health and accreditation bodies, to increase clinical education capacity and activity in regional and rural areas.
- Work with university and VET sector partners to support students from groups that are underrepresented within the Queensland Health allied health workforce, including students from Aboriginal and Torres Strait Islander backgrounds, to complete training requirements and transition to allied health roles.
- Showcase evidence-informed clinical education approaches and examples of innovation and excellence.
- Develop and implement student experience surveys for all allied health professions. All surveys will assess the same core set of experience measures, including a measure of placement quality.
- Work with other jurisdictions and with the Commonwealth to develop a national pre-entry clinical placement dataset that may be used for benchmarking quality and activity and for system level workforce planning.



Indicators of success

- There is a 5% increase in identified clinical educator positions in Queensland hospital and health services, distributed across metropolitan, regional and rural areas.
- 85% of clinical placements for allied health professions and the support workforce are offered in areas that meet current and emerging areas of identified workforce need.
- 10% of Queensland pre-entry allied health students (from the nine allied health professions relevant to the Allied Health Rural Generalist Pathway) are on a rural training track and access all clinical placements in regional, rural and remote locations.
- 100% of students from groups who are underrepresented in the allied health workforce, including students from Aboriginal and Torres Strait Islander backgrounds, can access individualised support to assist participation in education and training and the transition to allied health professional and assistant roles.
- Student experience data is collated and reported at profession and hospital and health service levels annually and is used to support planning and quality improvement initiatives.
- Timely and consistent clinical placement data is available across all jurisdictions.

Priority 2: Sustainable workforce training pathways

Develop and implement sustainable training pathways, from early career to advanced roles for allied health professionals and support staff.



Key initiatives

- Implement training and support programs that focus on key career transitions including the graduate / early career stage, progression from clinician to clinical lead, and from clinical roles into research, education, management and executive positions.
- Work in partnership with the education sector to develop, implement and evaluate sustainable training pathways, that commence at HP3 level and are based on identified health service priorities. All training pathways will have shared non-clinical components for professional and collaborative practice, communication, education, research, service development, management and leadership.
- Support access to and provide targeted training as required for contemporary models of care that meet community and service needs and assist health services to meet performance targets.
- Ensure sustainable rural generalist education programs, aligned to an established accreditation system, are available and embedded in the Allied Health Rural Generalist Pathway.
- Support and facilitate allied health professionals and allied health assistants working in regional, rural and remote areas to access clinical placement opportunities in relevant clinical practice areas.
- Collaborate with other jurisdictions and provide input into workforce training initiatives to improve the availability of high-quality, evidenced-based education and training for the allied health workforce.



Indicators of success

- Designated, service-integrated training pathways, with appropriate supervision models are developed and embedded for five proven allied health models of care, aligned to workforce and health service requirements.
- The education and training model for allied health rural generalist positions is embedded and sustainable.
- At least 80% of HP3 allied health professionals in rural or remote areas are undertaking or have completed the Allied Health Rural Generalist Pathway.

Priority 3: Inter-professional education and practice

Adopt inter-professional education and learning approaches that build collaborative practice approaches and support integrated person-centred care.



Key initiatives

- Work collaboratively across health services and with education providers to implement inter-professional education models in allied health student placements where they are appropriate and add value. This will include influencing the interpretation and implementation of accreditation standards, and addressing barriers posed by existing systems, convention and capabilities.
- Drive and facilitate inter-professional education and learning approaches in early career programs, training pathways and priority clinical areas to support the delivery of integrated and coordinated care.
- Showcase innovative inter-professional models of care and inter-professional education approaches and examples.
- Establish and embed productive partnerships across health and education sectors and across allied health, medicine and nursing professions to support a consistent and collaborative approach to inter-professional education and practice.



Indicators of success

- Inter-professional education is embedded and supports inter-professional practice in five priority clinical areas to underpin continuing improvements to integrated and person-centred care.
- All designated, service-integrated training pathways include inter-professional education and support inter-professional practice.



Implementation

This plan outlines the strategic priorities, key initiatives and indicators of success for the delivery of clinical education and workforce training over the next 10 years.

As we progress to implementation, there will be a continued focus on collaboration, innovation and the use of new technology. Governance and review mechanisms will be established to ensure that the initiatives and indicators in this plan reflect contemporary, best practice solutions. This will include measures to monitor progress and measure success at regular intervals over the 10-year period.

Queensland Health is committed to working in collaboration with key partners to implement this plan and invest in clinical education and training initiatives across the continuum, from pre-entry and new graduate support, to establishing sustainable service-integrated training pathways for contemporary allied health models of care.

References

1. Queensland Health. My health, Queensland's future: Advancing health 2026. Brisbane: The State of Queensland (Queensland Health); 2016.
2. Workforce Planning and Coordination Branch. Ministerial Taskforce on Clinical Education and Training Final Report - March 2007. Brisbane: The State of Queensland (Queensland Health); 2007.
3. Clinical Excellence Queensland. Optimising the allied health workforce for best care and best value: A 10-year Strategy 2019-2029. Brisbane: The State of Queensland (Queensland Health); 2019.



