Queensland Health is leading the development of a rural generalist training pathway for the allied health professions. Designated rural generalist training positions were implemented and evaluated in Queensland hospital and health services between 2014 and 2016. The three-year trial in eleven rural and remote health services was funded by the Allied Health Professions’ Office of Queensland, Clinical Excellence Division.

A rural generalist provides a broad range of clinical services to their rural or remote community including working across the age spectrum, in a range of healthcare settings and across the breadth of clinical needs and presentations. Rural generalists practice under the regulatory instruments of their health profession and the policies of their employer.

The trial funded supernumerary, temporary rural generalist training positions specifically designed for early career practitioners in nominated allied health professions. Position holders were employed for a one or two year term.

**Workforce outcomes**

**Attraction:**
Recruitment pools generally out-performed regular HP3 roles.

**Rural retention:**
Training positions provided a local development pathway that supported an ‘own grown’ workforce strategy.

Retention during the 1 or 2-year temporary appointments to the rural generalist training positions was 100% for the 22 position holders in the 2014 - 2016 cohorts.

Employment destinations 6 months after separation from the temporary rural generalist training positions showed employees most commonly remained in rural or remote practice or secured a position in the regional centre nearest to their training position.

**Education**

A two-level, formal rural generalist education program for seven allied health professions was launched in May 2017 by James Cook University (JCU) in partnership with QUT. The Rural Generalist Program is supported by an agreement and collaborative work with the Allied Health Professions’ Office of Queensland.
Service outcomes

Rural generalist training position host teams implemented and evaluated service development strategies to support the skill growth of the position holder and produce tangible benefits for the local community. Outcomes from the 2014 – 2016 sites included:

- **New telepharmacy and occupational therapy telehealth clinics; paediatric rehabilitation programs, and dietetics clinics integrated into chronic disease and rural chemotherapy services.**

- **Better use of support workers**
  
  Utilisation of allied health assistants for delegated physiotherapy tasks increased by 35% between 2014 and 2016 in one rural hospital.

- **Clinically effective telehealth services**
  
  Clinical outcomes from a rural physiotherapy telehealth clinic supported by allied health assistants were at least equivalent to traditional face-to-face services.

- **Quality and governance**
  
  Improved training and support of X-ray operators in two medical imaging services supported compliance with diagnostic X-ray quality standards.

- **Reduced patient wait times**
  
  A new speech pathology telehealth clinic to a remote facility reduced average patient waiting time by over ten weeks.

- **Financial sustainability**
  
  Greater than five-fold increase in telehealth revenue over two years following implementation of scheduled dietetics telehealth clinics to remote primary healthcare centres from the rural hub site.

Health service opportunities

The three-year funded trial of allied health rural generalist training positions has demonstrated positive attraction and retention outcomes and service improvements that benefit rural and remote communities. Hospital and health services can support allied health workforce sustainability by designating existing or new HP3 roles as training positions for early career professionals. Allied health rural generalist training positions can be created in allied health teams able to meet the support requirements listed below.

<table>
<thead>
<tr>
<th>Work unit requirements</th>
<th>Role requirements</th>
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<tbody>
<tr>
<td>Profession-specific supervisor co-located for &gt;50% work hours with allocated time and responsibilities for training and support.</td>
<td>Permanent or temporary (minimum 24 month term) HP3 role.</td>
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<tr>
<td>Developing, implementing and evaluating rural generalist service delivery strategies including: • telehealth, • delegation to support workers, • extended scope including skill sharing or • partnerships including urban-rural shared care, and inter-agency service integration.</td>
<td>Professions with a clinical training stream in the Rural Generalist Program are nutrition and dietetics, medical imaging, occupational therapy, pharmacy, physiotherapy, podiatry and speech pathology. Other professions including social work and psychology may use alternative training programs.</td>
</tr>
</tbody>
</table>

Minimum 0.1FTE (4 hours per week) work hours allocated to training and development,

Education and training funding.

*Note: a limited number of scholarships for the JCU Rural Generalist Program are available for Queensland Health rural staff.***

More information


James Cook University Rural Generalist Program: [https://www.jcu.edu.au/rgp](https://www.jcu.edu.au/rgp)