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Clinical Education and Training **Queensland**

## ***Preliminary evaluation of the Clinical Education and Training for Allied Health Assistants in Queensland Health Project***

Siggins Miller Consultants in partnership with ClinEdQ, Queensland Health  
11 July 2011

Research and Publication Initiative 2011

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## Further information

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# Preliminary evaluation of the Clinical Education and Training for Allied Health Assistants in Queensland Health Project

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## Introduction

The Australian Workforce Advisory Committee review identified several factors that were likely to increase the demand for allied health services.<sup>1</sup> Queensland Health initiated workforce redesign to enable the allied health workforce to meet this increased demand. One component of this response was the Clinical Education and Training for Allied Health Assistants in Queensland Health Project (the Project) that was undertaken by the Allied Health Clinical Education and Training Unit (AHCETU). Siggins Miller was contracted by Queensland Health from April 2011 until June 2011 to conduct a preliminary evaluation of the Project's interventions to date. The evaluation included document analysis, online surveys and consultations. This document contains a brief description of the project and the evaluation methods and results. It concludes with a discussion of the evaluation results.

## Background

The Australian Workforce Advisory Committee report on workforce planning issues identified several factors that were likely to increase the demand for allied health services in the future.<sup>1</sup> These included:

- An ageing population;
- Increasing incidences of chronic diseases;
- An increasing focus on prevention, rehabilitation medicine and the provision of primary health care; and
- Increasing consumer knowledge and expectations of allied health services.

New models of care which include increased use of an assistant level workforce with well defined roles were proposed as one strategy to respond to the predicted escalating demands on the allied health services and tightening of skills supply in the years ahead.<sup>2</sup> In the consultation for the Primary Care Modernisation Strategy,<sup>3</sup> patients and the broader community indicated that they would be happy to be seen by any appropriate member of the primary healthcare team, provided that the individual had the necessary skills and training to meet their needs and they were referred quickly and appropriately to other members of the team when this was appropriate and possible.

In considering potential workforce structural responses, the Queensland Health Systems Review recommended exploring opportunities to provide a more flexible and adaptable workforce by training multi-skilled health workers in a range of competencies available within the Vocational Education and Training Sector.<sup>2</sup> One recommendation was that allied health workforce roles be redesigned to better align skill level with task complexity. Along with increasing opportunities for advanced allied health roles, it was recommended that Queensland Health increase the use of assistant allied health positions to take on lower order tasks that may previously have been performed by allied health professionals. This was formalised in the Operational Stream Employees (Queensland Health) Certified Agreement 2006.<sup>4</sup> This agreement included a decision to plan and implement an "Allied Health Assistant Project" that would develop and trial the role of an allied health assistant. This project, titled the "Allied Health Assistant Project Phase I" was sponsored by the Allied Health Workforce Advice and Coordination Unit (AHWACU) and was concluded in August 2008.

In January 2008, Queensland Health employed over 500 workers in allied health support roles in a variety of settings.<sup>3</sup> The scoping phase of the 2008 Allied Health Assistant Project Phase I identified that the roles, duties and scope of practice of assistants had been poorly defined and were inconsistent across districts, with assistants undertaking a variety of clinical, operational and administrative tasks with varying degrees of supervision. With poorly defined roles and responsibilities, it was considered likely that some allied health assistants were not employed to their full potential.

In addition, the project identified inconsistencies in the training and utilisation of allied health assistants across the state. Little uptake of available formal qualifications available through the Vocational Education and Training (VET) Sector was evident, apparently because they were perceived as too generic and as 'lacking relevance' to the Queensland Health context. As the qualifications were not mandatory for allied health assistants there was little incentive for Queensland Health staff to acquire the formal qualifications.

Implementation of the recommendations from the Allied Health Assistant Project Phase 1 was divided between the Allied Health Workforce Advice and Coordination Unit (AHWACU) and AHCETU. Two separate projects were undertaken to progress the recommendations namely the Allied Health Assistant Project Phase II undertaken by AHWACU and later incorporated into the Assistant Models of Care projects and the Clinical Education and Training for Allied Health Assistants undertaken by AHCETU. Though the projects are linked and the actions are complementary, the projects have separate governance and reporting structures.

This preliminary evaluation only reviews the Clinical Education and Training for Allied Health Assistants project undertaken by AHCETU.

### ***The Clinical Education and Training for Allied Health Assistants Project (AHCETU/ClinEdQ)***

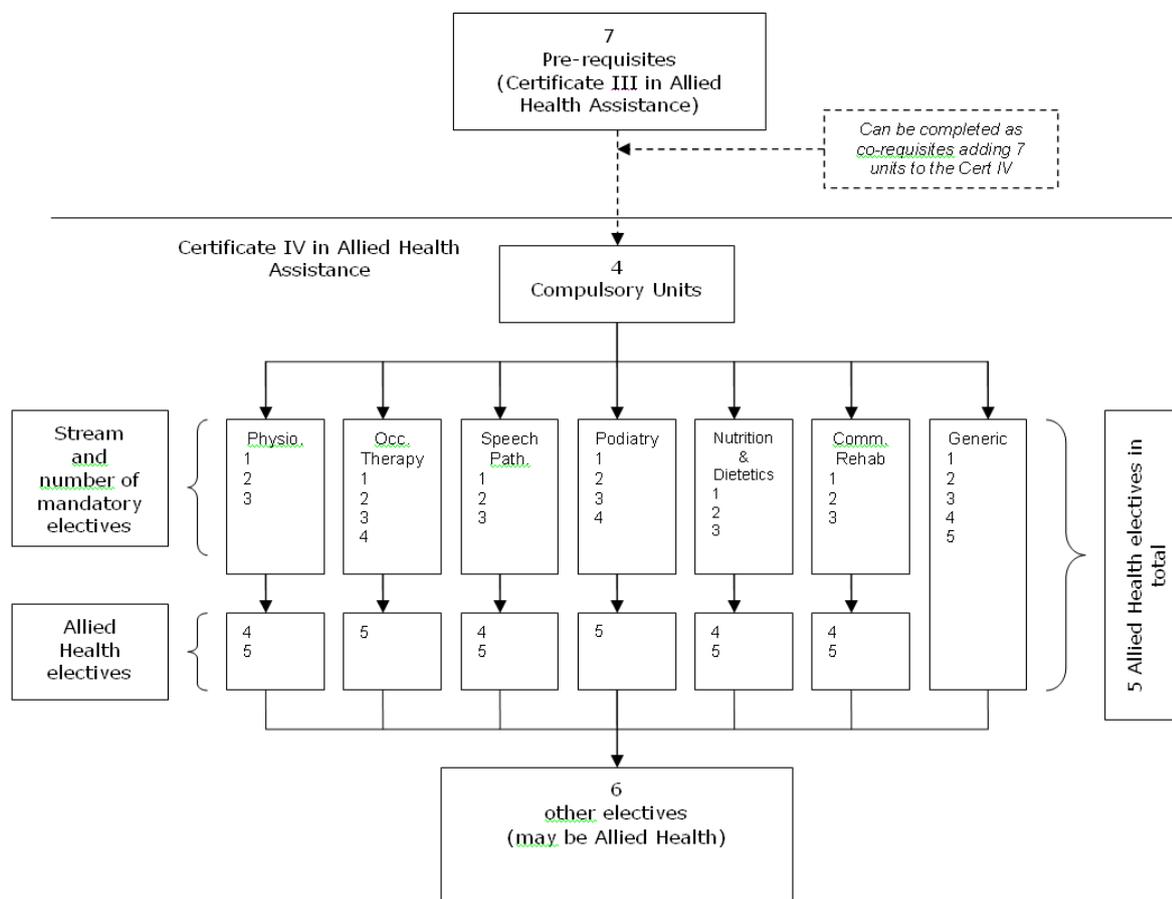
Queensland Health has always provided training to the assistant workforce. This training has usually been 'in-house' and has not given assistants any formal qualifications. To support the increased delegation of some clinical service provision to the assistant level workforce, it was necessary to ensure that this level of workforce has the appropriate competencies to perform new roles. With a more clinical role comes the need for training to ensure safety and quality for patients and clients. Appropriate and timely education will be an essential enabling tool to support current and future role development associated with workforce redesign and models of care strategies to address increasing demand on allied health services.

In addition, Queensland Health has committed in the Operational Stream Employees (Queensland Health) Certified Agreement 2006<sup>4</sup> to the development of articulated pathways into the allied health professions. The provision of training was therefore essential and standardised training resulting in recognised formal qualifications seemed the logical response.

In 2009, the Allied Health Clinical Education and Training Unit (AHCETU) commenced work on developing training and career pathways to support allied health workforce development. This included formation of a Vocational Education and Training Sector Steering Committee (the Committee). This Committee included representation from Queensland Health districts, clinical education units, delivery agencies and the Allied Health Workforce Coordination Unit and external representation from Health and Community Services Workforce Council, Department of Education and Training (DETA) and non government organisations (NGOs). The Committee provided oversight on a range of initiatives including allied health school based traineeships, VET in schools and University articulation. A major initiative was the progression of formal qualifications for the Queensland Health assistant workforce.

A subgroup of the Committee, the Allied Health Assistants Working Group (the Working Group) was formed to progress identification and delivery of a formal qualification for Queensland Health allied health assistant staff. The Working Group included representatives from discipline streams, the Metro South Institute of TAFE, and Sunshine Coast Institute of TAFE. The Working Group in consultation with stakeholders identified the Certificate IV in Allied Health Assistance as the as the VET qualification best aligned to the roles of allied health assistants working at full scope within Queensland Health. It also made recommendations on the process required for the development of learning support materials that would enable contextualisation in the delivery of the Cert IV AHA qualification to Queensland Health employees. This body of work became the ClinEdQ Clinical Education for Allied Health Assistants Project.

The Cert IV AHA qualification is formally structured with seven pre-requisites (which could be obtained during completion of a Certificate III qualification, through recognition of prior learning processes or completed as co-requisites adding seven units to the Cert IV), four compulsory units, five mandatory allied health electives and six 'other' electives as shown in Figure 1 below.



**Figure 1 Certificate IV in Allied Health Assistance**

The key activities of the Project were:

1. Packaging of units of competency of the Cert IV AHA to increase its relevance to Queensland Health roles thereby providing training that was specific to assistant work units and work roles;
2. Packaging of units of competency of the Cert IV AHA to enable assistants to obtain qualifications in more than one stream thereby contributing to development of a multi-skilled workforce;
3. Contextualised learning support materials for allied health units of competency to Queensland Health influencing the content of training and assessment materials and therefore equipping assistants to perform core Queensland Health job requirements;
4. Partner with Queensland Institutes of TAFE to deliver Cert IV AHA using Queensland Health work contextualised unit of competency packages and learning support materials;
5. Trial and modify delivery of allied health electives for Cert IV AHA in partnership with Queensland Institutes of TAFE.

Further details of these steps are provided below.

### **Packaging of units of competency for increased relevance**

To increase the relevance of the Cert IV AHA qualification to Queensland Health work roles, packaging of units of competency of the Cert IV AHA was undertaken. The Working Group assessed the Cert IV AHA against Queensland Health work roles and modified the selection of units so that the six 'other' electives offered by the partnering TAFEs for the Cert IV AHA were either:

- Allied Health units; or
- Other units from the Health or Community Services Training Packages that supported clinical work e.g. The Chronic Disease Management skill set.

This supported allied health assistants to acquire clinical training specific to their work units and work roles rather than a generic qualification that had been previously offered. In addition the modification of the pathway enabled assistants to obtain qualifications in more than one stream thereby contributing to development of a multi-skilled assistant workforce.

### ***Development of contextualised learning support materials***

In order to adequately equip allied health assistants to perform core job requirements that were relevant to Queensland Health clinical requirements, the Clinical Education for Allied Health Assistants project developed Queensland Health contextualised learning support materials. Templates for each of the allied health units of competence were developed by an external education consultancy and were populated by Queensland Health discipline content experts. This process produced the following range of contextualised learning support materials for each allied health unit of competence:

- Learner guides (for allied health assistants and workplace supervisors) to enable self directed work based learning for assistants, and to enable workplace supervisors to support assistants undertaking the Cert IV AHA qualification;
- Power point presentations (for workplace supervisors) to assist workplace supervisors in face to face teaching to support the learner guide materials;
- An assessment guide (for allied health assistants) to outline the assessment requirements for the unit to determine competency;
- An assessment answer guide (for workplace supervisors and assessors) to enable workplace supervisors to support assistants and to assist TAFEs to assess assistants utilising the Queensland Health learning support materials; and
- A recognition toolkit to enable TAFEs to undertake and document assessment and recognition of existing skills of Queensland Health allied health assistants.

### ***Contracts with TAFE for the delivery of Cert IV AHA qualification using desired unit of competency packages and QH developed learning support materials Delivery of the Certificate IV in Allied Health Assistance***

Partnerships with Queensland Institutes of TAFE to deliver Queensland Health work contextualised Cert IV AHA qualification including use of the contextualised learning support materials were established with two Queensland Institutes of TAFE. Between 2009 and 2011, four successive cohorts of students were enrolled, all of whom received funding support and completed the Cert IV AHA using the Queensland Health contextualised packaging of units. The Queensland Health contextualised learning support materials and workplace supervisor were introduced successively with new cohorts, as depicted in [Table 1](#).

**Table 1 Details of successive student cohorts**

<b>Cohort</b>	<b>Enrolment date</b>	<b>Number of students</b>	<b>Funding support</b>	<b>Packaging of units of competency for QH context</b>	<b>Use of QH contextualised learning support materials</b>	<b>Dedicated local workplace supervisor support</b>
1	March 2009	120	✓	✓		
2	Feb 2010	79	✓	✓	✓	
3	Oct 2010	46	✓	✓	✓	✓
4	Feb 2011	40	✓	✓	✓	✓

Specific arrangements for co-delivery and assessment of allied health electives varied between the different cohorts and the different TAFEs. After exploring options for shared assessment it was determined that the assessment of all units of competency was best placed with the TAFEs. Co-delivery models included use of VET Liaison Project Officers to deliver content to students and liaise with TAFE on student assessment, involvement of dedicated local workplace supervisors in delivery of content and contribution to assessment

processes and a combined model where VET Liaison Project Officers supported local workplace supervisors and students and provided link between workplace and TAFEs.

## Preliminary evaluation of the Project: Scope and method

Queensland Health commissioned Siggins Miller to conduct a preliminary evaluation of the Project's interventions. The activities for conducting the evaluation were expected to include:

1. An analysis of program documentation;
2. Stakeholder engagement activities such as surveys and focus groups
3. Provision of a description and analysis of elements, successful or otherwise which acted to influence the Project since the instigation of specific initiatives beginning in 2008; and
4. Provision of a detailed evaluation of the interventions:
  - Effectiveness of achieving Project outcomes including identification of factors acting as barriers and enablers to the project outcomes; and
  - View of stakeholders including but not limited to AHCETU, AHWACU, students (allied health assistants), supervisors (AHPs), educators and TAFE.

During the project start up phase, early discussions with ClinEdQ indicated that, due to the short time frame available to conduct the impact study, the Certificate IV Training and Assessment (Cert IV TAA) component of the project would be removed from the scope of the evaluation.

Concurrently with the development and conduct of this preliminary evaluation, an evaluation framework for the Project was being developed.<sup>5</sup> This preliminary evaluation does not address all of the evaluation needs articulated in that framework. Rather, it provides early data on:

1. Perceptions and experiences of the Cert IV AHA qualification of allied health assistants and workplace supervisors
2. Perceptions and experiences of Queensland Health and TAFEs in the co-delivery of the qualification.

Document analysis was conducted to inform the evaluation method and interpretation of evaluation data. The list of documents reviewed is presented in Appendix 1. The next section of this report provides a brief description of the methods used for the evaluation of the project.

### *The mixed-method approach*

The evaluation of the Project used a mixed-method approach that included a variety of qualitative and quantitative data sources, including online surveys (with telephone discussions with survey participants) and consultations with stakeholders. Each of these key data sources is described below. Mixed-method evaluations have been shown to provide additional detail to enhance the utility and validity of evaluation findings.<sup>6</sup>

### *Online surveys*

#### **Purpose**

The purpose of the online survey was to describe:

1. The perceptions, experiences, and satisfaction with the Cert IV AHA qualification by allied health assistants In particular, issues surrounding:
  - Assistants' expectations on the requirements for undertaking the qualification;
  - Access to support from TAFE, VET liaison officer and their Queensland Health workplace supervisor;
  - The relevance of the qualification competencies to workplace requirements;
  - Overall satisfaction and experience of the qualification; and
  - Translation and application of the knowledge and skills gained from the qualification to the workplace.

2. The perceptions and experiences of Queensland Health workplace supervisors of allied health assistants undertaking the Cert IV AHA in relation to:
  - Workload requirements in supervision of an assistant undertaking the qualification;
  - Access to support from TAFE, VET liaison officer and Queensland Health;
  - Perceived relevance of the qualification to workplace requirements; and
  - Perceptions on the added value of the Cert IV AHA qualification to the allied health workforce.

### Study population, recruitment and final sample

The study population was defined as including:

1. Allied health assistants who had previously, or were in the process of undertaking the Cert IV AHA qualification (i.e. The first three cohorts of students undertaking the Cert IV AHA qualification) and who had been funded by ClinEdQ (N=245); and
2. The nominated allied health professional who was the workplace supervisor for the Cert IV AHA (hence involved in the Cert IV AHA delivery and assessment) (N=82).

Cohort 4 was not included in the evaluation as they had only just commenced study at the time of the evaluation.

A tailored strategy was developed to engage the two groups in the survey. An information sheet was emailed to all eligible participants by ClinEdQ outlining the rationale for the survey, and inviting and encouraging eligible candidates to participate in the survey (see Appendix 2). In order to ensure that data collection was non-disruptive to work schedules, questionnaires were kept concise and made available through an online survey platform. For those participants who were not able to access the online survey, printed versions of the survey were made available and distributed by ClinEdQ upon request. Weekly reminder emails were sent to all eligible participants by ClinEdQ. In addition, workplace supervisors of allied health assistants were encouraged to provide adequate time and computer access to facilitate the participation of their workplace assistants in the survey. The survey closed on 3 June 2011.

Of the 184 participants who started the allied health assistant survey, 102 completed it. Of the 89 participants who did not complete the survey, 25% dropped out at the first question and 76% stopped at question 14 (demographic section). As there were 245 eligible allied health assistants, the 102 completed surveys represent a 42% response rate.

Of the 82 participants who started the allied health professional survey, 47 completed the survey. Of the 35 participants who dropped out, 60% stopped after question 3 (demographics section), and an additional six participants progressed past the demographic section of the survey but were not eligible for participation as they had never supervised an allied health assistant undertaking the Cert IV AHA qualification. As there were 82 eligible allied health professionals, the 47 completed surveys represent a 57% response rate.

Every effort was made to ensure that there were no technical difficulties associated with the online survey. The reasons that participants dropped out of the survey are not known. It is anticipated that they ran out of time, had other tasks to complete, or had for other reasons decided to withdraw their participation.

### Questionnaires

A self-completion questionnaire was designed in collaboration with ClinEdQ to explore the perceptions, experiences, and satisfaction of the Cert IV AHA qualification by allied health assistants (see Appendix 3). The average time taken to complete this survey by those who completed it was 23 minutes.

A self-completion questionnaire was also designed in collaboration with ClinEdQ for the Queensland Health workplace supervisors of allied health assistants undertaking the Cert IV AHA (see Appendix 4).

### Data analyses and presentation of results

Descriptive analyses of the data were conducted to provide frequencies of responses. Due to rounding of data to the closest percentage, a total of 100% may not always be noted. When a question was answered by less than 20 participants (as when a question was only applicable to a subset of participants), the responses for that question were not reported because the sample size was too small for us to have confidence in the results. Unless otherwise stated, the denominator for percentages is the total sample who completed the survey.

## **Consultations with stakeholders**

The final data source for the evaluation involved stakeholder consultations via focus group discussions and telephone interviews. The objectives of the stakeholder consultations were to explore issues relating to:

- The delivery of the qualification i.e. What worked, what did not work, mitigation strategies;
- Student participation and progress in the qualification; and
- Workplace support.

The list of key stakeholders was refined in consultation with ClinEdQ. The final list of 17 stakeholders included project, administration and teaching staff:

- Five stakeholders from ClinEdQ;
- Five stakeholders from Sunshine Coast Institute of TAFE (SCIT); and
- Three stakeholders from Southern Queensland Institute of TAFE (SQIT)
- Four VET Liaison Officers (Queensland Health funded positions).

For the full list of stakeholders and their positions, please refer to Appendix 5.

Three focus groups were conducted on site by Siggins Miller using a protocol developed in collaboration with ClinEdQ (Appendix 6). The three sites for the focus groups were:

- ClinEdQ (Brisbane)
- Sunshine Institute of TAFE (Mooloolaba campus)
- Southern Queensland Institute of TAFE (Toowoomba campus)

Telephone interviews were conducted with key participants who were not able to attend the focus groups.

A thematic analysis was conducted following the consultations and key issues are summarised in the results section below. This report does not include a detailed account of all that was said in the discussions as the consultations only allowed for issues to be raised, but not fully explored. Furthermore, given the small number of stakeholders involved in the consultations, there can be problems with confidentiality as specific issues could be sourced to individuals, as a result the TAFEs are referred to as TAFE 1 and TAFE 2 for the remainder of this document. Additionally, a higher-order analysis of the consultations is presented.

## **Summary of results of the allied health assistant (student) survey**

Around half of the students thought that the requirements for the qualification were not well explained by TAFE, 41% found the level of difficulty high and three-quarters required support while studying the qualification. Queensland Health supervisors were rated as the main support mechanism and were considered helpful by nearly all students.

In relation to relevance of the qualification to the workplace, about three-quarters of the students rated the mandatory elective units of competency as relevant to workplace requirements while two-thirds rated the 'other' elective units as relevant to workplace requirements. Three-quarters of the students agreed that the knowledge gained in the Cert IV AHA would be applied to their work, but only 42% thought their work duties would change as a result of having attended the training.

Overall, half of the students were satisfied with the qualification. This increased from 38% for cohort 1 to 65% for cohort 3. Two-thirds would recommend the qualification to others. This increased from 69% for cohort 1 to 88% for cohort 3.

Survey results are provided in brief below and detailed results are presented in Appendix 7.

### **Participant backgrounds**

- 43% worked in metropolitan Brisbane
- 73% aged over 40 years
- 83% female
- 72% worked in a hospital setting
- 59% worked as an Allied Health Assistant for between 2 and 10 years
- 29% work in physiotherapy, 23% in occupational therapy, 20% nutrition and dietetics, 15% speech pathology, 2% podiatry and 11% other

- The highest level of qualification received included: 27% Certificate IV, 22% Certificate III, 16% high school grade 10, 15% diploma, 8% Bachelor degree and 8% high school grade 12.

### **Cert IV AHA Qualification**

- 81% attended TAFE 2 to complete their qualification
- 42% commenced their Cert IV AHA qualification in February 2010, 31% in March 2009 and 27% in October 2010
- 64% had completed their qualification at the time of the survey
- 74% took between 10 to 18 months to complete the qualification
- 85% indicated they received recognition of prior learning (RPL)
- 55% were satisfied with the RPL process used by their TAFE
- 33% completed their Cert III AHA qualification prior to commencing the Cert IV AHA qualification
- 26% have completed or are currently enrolled in the following streams: a) 26% physiotherapy, 20% occupational therapy, 19% generic, 17% nutrition and dietetics, 10% community rehabilitation, 7% speech pathology, 1% other.
- The top three reasons for enrolling in the Cert IV AHA qualification included: 1) refresher training; 2) program content; and 3) other.

### **Assistants' expectations on the requirements for undertaking the qualification**

- 55% agreed that TAFE provided clear explanation on the Cert IV requirements
- 51% agreed that the TAFE provided clear explanation on what would be required as a student completing the qualification (ie time constraints required for study and assessment requirements)
- 50% agreed that the TAFE provided clear explanation on the roles and responsibilities of the TAFE teaching staff
- 46% agreed that the TAFE provided clear explanation on the roles and responsibilities of the Queensland Health workplace supervisors, while 35% disagreed and 17% neither agreed nor disagreed
- 41% indicated that the level of difficulty of the qualification was high, 16% found it easy and 42% neither agreed nor disagreed.

### **Access to support from TAFE, VET liaison officer and Queensland Health workplace supervisors**

- 71% indicated that they *did* require support during the Cert IV AHA qualification
- 41% found it easy to access support, while 37% found it difficult and 22% neither found it difficult or easy. Of these participants, 79% found the support they received as helpful.
- The top three support mechanisms included: 1) Queensland Health work supervisor; 2) colleagues; and 3) TAFE teacher
- 52% indicated satisfaction with access to TAFE
- 58% indicated satisfaction with access to Queensland Health workplace supervisors.

### **Support provided from TAFE**

- 42% indicated they had minimal or no contact with their TAFE teacher over the course of the qualification, 34% had some contact and 24% had regular contact
- 84% of contact was through email and the majority (77%) on an infrequent or on a needs basis
- 66% found the support from their TAFE teachers helpful.

### **Support provided from Queensland Health workplace supervisors**

- 65% had a designated Queensland Health workplace supervisor
- 74% indicated they had regular contact with their Queensland Health workplace supervisor
- 93% of contact was face-to-face and the majority (52%) on a weekly basis
- 91% found the support from their Queensland Health workplace supervisor helpful.

### **Support from VET Liaison officer**

- 77% indicated they received minimal or no support from the VET Liaison officer over the course of the qualification
- 52% indicated that the reason they had not received support from the VET Liaison officer was because they were not aware support was available
- 80% of contact was through email and the majority (91%) on an infrequent or on a needs basis

- 40% found the support from the VET Liaison officer helpful, 47% neither unhelpful nor helpful and 13% unhelpful.

### **Work-load requirements for undertaking the qualification**

- 44% indicated they spend greater than five hours per week studying for the Cert IV AHA qualification
- 55% indicated that the workload for the Cert IV AHA was too much.

### **Relevance of the qualification competencies to workplace requirements**

- 66% indicated that content from HTLHIR 402B (Contribute to organisational effectiveness in the health industry) was relevant to their workplace requirements, 70% indicated that content from HLTHIR 506B (Implement and monitor compliance with legal and ethical requirements) was relevant to their workplace requirements, 81% indicated that the content from HLTOHS 300A (Contribute to OHS processes) was relevant to their workplace requirements and 80% indicated that content from HLTIN 403B (Implement and monitor infection control policy and procedures) was relevant to their workplace requirements
- 73% agreed that the mandatory elective units of competency were relevant to workplace requirements
- 62% agreed that the 'other' elective units of competency were relevant to workplace requirements
- 67% indicated that the assessment tasks were a fair indication of the knowledge they were acquiring as a result of the Cert IV AHA qualification.

### **Translation and application of the knowledge and skills gained from the qualification to the workplace**

- 74% agreed that they would apply the knowledge gained from the Cert IV AHA qualification in their work
- 42% indicated that their work tasks/duties are likely to change as a result of the knowledge and skills gained from the qualification
- 66% agreed that they are likely to attend further formal training to gain knowledge and skills for their work role
- 42% agreed that they are likely to undertake further independent study to learn more about the topics covered by the qualification
- 63% agreed that they are likely to share the skills and knowledge gained with their peers.

### **Overall satisfaction and experience of the qualification**

- 49% indicated an overall level of satisfaction with the qualification:
  - cohort 1: 38%
  - cohort 2: 48%
  - cohort 3: 65%
- 62% indicated they would recommend the Cert IV AHA qualification to other allied health assistants:
  - cohort 1: 69%
  - cohort 2: 68%
  - cohort 3: 88%.

## **Summary of results of the allied health professional (supervisor) survey**

Two-thirds of the supervisors noted that supervising a student significantly increased their workload, but less than a fifth suggested that the workload of supervision to be inappropriate. Only one-fifth of the supervisors wanted supported from TAFE, but less than half of those who received support were satisfied with the support provided.

Two-thirds of the supervisors indicated that the practical assessment tasks were aligned with workplace requirements and that the improved understanding of allied health assistant competencies would influence the tasks and duties they delegated to an assistant.

The supervisors were split 50-50 as to whether the qualification added value to the allied health workforce. However, three-quarters of the supervisors said that they would recommend the qualification to other allied health assistants.

Ambivalence was evident in the supervisors' perception of whether or not supervising an allied health assistant undertaking the Cert IV AHA qualification had increased their understanding of the role of an allied health assistant. However three-quarters of the study participants agreed that supervising an allied health assistant undertaking the Cert IV AHA qualification had improved their understanding of the competencies gained by completing the qualification.

Survey results are provided in brief below and detailed results are presented in Appendix 8.

### **Participant backgrounds**

- 34% worked in metropolitan Brisbane
- 83% aged over 30
- 85% female
- 64% have worked as an allied health professional for greater than 10 years
- 20% have a higher education related qualification, 30% have completed the Cert IV TAA qualification and 44% don't have a Cert IV TAA
- 36% work in physiotherapy, 30% in occupational therapy, 13% nutrition and dietetics, 5% speech pathology, 3% podiatry and 13% other.

### **Supervising allied health assistants**

- 90% had previously and/or currently are supervising an allied health assistant undertaking a Cert IV AHA qualification
- 79% of supervisors were satisfied with the allied health assistants enrolled in the qualification.

### **Access to support from TAFE and VET liaison officer**

- 20% indicated that they *did* require support from the TAFE with over half (60%) indicating that they were *dissatisfied* with the level of support provided
- 60% found it difficult to access support from the TAFE
- 17% indicated that they *did* require support from the VET Liaison officer with over half (63%) indicating that they were *satisfied* with the level of support provided
- 50% found it easy to access support from the VET Liaison officer, 38% found it neither difficult nor easy and 13% found it difficult.

### **Focus of supervision**

- 57% agreed that they spent less than 1 hour per week assisting their allied health assistant with the theoretical course material, 53% spent less than 1 hour per week assisting their allied health assistant with the practical skill development and 51% spent less than 1 hour per week on assessment activities specific to the Cert IV AHA qualification.

### **Workload requirements in supervision of an assistant undertaking the qualification**

- 58% of the participants were in agreement that the workload of supervising a student was appropriate
- 63% agreed that there was a significantly greater workload associated with supervising an allied health assistant undertaking the qualification compared to one not undertaking it.

### **Perceived relevance of the qualification to workplace requirements**

- 64% of the participants were in agreement that the practical assessment tasks were aligned with workplace requirements
- 67% of the participants were in agreement that the improved understanding of allied health assistant competencies will influence the tasks and duties delegated to an assistant.

### **Perceptions on the added value of the Cert IV AHA qualification to the allied health workforce**

Before becoming a workplace supervisor for an allied health assistant:

- 49% of the participants indicated that the qualification added value to the allied health workforce, while 51% indicated that it added little or no value.

After becoming a workplace supervisor for an allied health assistant:

- 49% of the participants indicated that the qualification added value to the allied health workforce, while 51% indicated that it added little or no value
- 74% of the participants indicated that they would recommend the qualification to other allied health assistants.

### **Understanding of the allied health assistant role**

- 37% of supervisors agreed that supervising an allied health assistant undertaking the Cert IV AHA qualification had increased their understanding of the role of an allied health assistant, while 38% neither agreed or disagreed and 25% disagreed that their understanding of the role increased

- 73% agreed that supervising an allied health assistant undertaking the Cert IV AHA qualification had improved their understanding of the competencies gained by completing the qualification.

## Results of stakeholder consultations

The consultations included discussion on:

- Delivery of the Cert IV AHA qualification;
- Student progress; and
- Workplace support.

Issues raised within each of these areas are summarised below, followed by a presentation of higher-order issues that were evident.

### *Delivery of the Cert IV AHA qualification*

As delivery of the qualification was different for each cohort, the following sections provide the main points made by the stakeholders in relation to each separate cohort.

#### *Cohort one*

The initial mode of delivery for the Cert IV AHA qualification was for Queensland Health to deliver and assess the qualification, with TAFE 2 monitoring compliance of the assessment as the registered training organisation. TAFE 2 participants reported that there was frequent communication and variations to contracts between TAFE 2 and Queensland Health during this time, and that there had been delays in receiving the assessment results from Queensland Health which resulted in TAFE 2 being pressured by students for their results. In addition, Queensland Health learning resources were not developed in time for cohort one.

The initial arrangements were modified so that Queensland Health delivered the training and TAFE 2 conducted the assessments. TAFE 2 reported that this change alleviated pressure on them. As the learning resources were not yet developed, TAFE 2 reported that they were happy to use their own resources.

#### *Cohort two*

Both Queensland Health and TAFE 2 stakeholders reported that the delayed delivery of the Queensland Health learning resources caused problems for students. When the units of competency were made available, students had to rush through them to complete the qualification in line with PPP funding requirements. Furthermore, TAFE 2 reported that there was confusion among students in regard to the assessment requirements. TAFE 2 asserted that completion of the assessment activities alone was not sufficient to meet assessment criteria. Students were advised that to fully comply with assessment criteria, they had to complete the learning guide and the assessment activities. TAFE 2 believed that this caused many allied health assistants to form the view that the process was unfair to them and they had the perception that they were required to do extra work.

#### *Cohort three*

To avoid the confusion that occurred with cohort 2, Queensland Health distributed the learning resources to TAFE 1, who then distributed them to students in cohort 3. However, TAFE 1 reported that there were substantial delays in the delivery of the Queensland Health learning materials for nutrition and dietetics. As a result, TAFE 1 delayed the delivery of the six Cert III pre requisite units, which meant that nutrition and dietetic students in this cohort fell behind in their progress through the qualification.

### *Overall issues relating to delivery*

There was no preference articulated by either TAFE 1 or TAFE 2 as to the preferred mode of delivery of the Cert IV AHA qualification. That is, whether TAFEs are responsible for training and assessment, or just for assessment. TAFE 2 participants noted that all partners brought particular expertise and skills, and that as TAFE had expertise in training and delivery, and had a good network of trainers, it would seem sensible to use their expertise in delivering training to allied health assistants. However, regardless of the mode of delivery of the qualification, TAFE 2 believed that a seamless model for the delivery of the qualification should be developed with clear roles and responsibilities of TAFE and Queensland Health in the delivery of the qualification. Furthermore, they argued that clear roles and responsibilities as well as funding expectations should be articulated for both parties reflected in contracting agreements.

There was consensus among all stakeholders that the issues and difficulties associated with distance education, such as varying levels of student self-motivation, self-direction and lack of face-to-face contact have been significant challenges to some students successfully completing the qualification. Participants postulated that the distance and self-directed mode of delivery would have been particularly difficult for allied

health assistants, who might not have had recent exposure to study. In addition, the varying access to facilities (i.e. computer access, teleconference facilities) and access to support (i.e. workplace supervisor, TAFE teaching staff, VET liaison officer) were reported to be challenges for the delivery of the qualification.

Queensland Health indicated that a major limiter of the process has been the human and other resource availability internally within Queensland Health. The administrative burden of managing the project has been greater than the capacity of the existing staff levels within Queensland Health.

### **Student progress**

From a Queensland Health perspective, there is a need to develop more robust student tracking systems to aid in the early identification of students who are struggling. As study is a self-directed activity, there are no clear 'deadlines' for when units of competency have to be completed. While suggested timeframes are relayed to students, there are no set dates for students to submit their assessments. Both TAFE 1 and TAFE 2 reported having spreadsheets that tracked timeframes of when students were sent various units and the submission of the assessment for each unit. Though it is a standing agenda item on the regular progress meetings between Queensland Health and TAFEs, Queensland Health said that there were inconsistencies in updates from TAFEs regarding the monitoring of student progress. To continue facilitating the flexible arrangements, there was consensus that improvements to mechanisms and systems to track student progress should be supported.

As a result of the concern about students who might be experiencing difficulties in completing the qualification, Queensland Health reinstated the VET liaison officer position to provide additional support to struggling students, and act as an intermediary between Queensland Health and TAFEs. The role of the VET liaison officer was expanded to provide support for workplace supervisors. There was general consensus among Queensland Health and TAFEs that the VET liaison officer position was beneficial to both students and supervisors.

As student selection was an internal process within Queensland Health, TAFE 2 and the VET liaison officers suggested that a more rigorous selection process should be in place. Although many of the students expressed interest in completing the Cert IV AHA qualification, according to TAFE 2, they did not fully understand what they were signing up for. In addition, Queensland Health maintained that the selection process should ensure that all students undertaking the Cert IV AHA qualification work in allied health assistant roles.

There was consensus among TAFEs and Queensland Health that FAQs and an orientation briefing with students would be helpful in outlining the requirements and expectations of the qualification, such as study times, time frames for completion, and assessment tasks. Regular face-to-face contact with students throughout the duration of the qualification via teleconference/videoconference and workshops were suggested to assist tracking student progress. It was noted that Queensland Health was also providing orientation briefings for workplace supervisors to better inform them of the roles and responsibilities of supervising a student.

### **Workplace support**

All groups noted that there was variation in the workplace support for students such as access to facilities (telephone, computer, video conferencing etcetera) as well workplace and supervisor support, particularly for students in rural and remote areas.

As the qualification is work-based training, it was often difficult to arrange times for students, teaching staff and workplace supervisors to meet and discuss student progress or issues. In addition, there was varying levels of support provided to students across workplaces. A major barrier identified by Queensland Health, TAFEs and the VET liaison officers was the lack of support and availability of appropriate workplace supervisors for students in remote and rural areas.

The VET liaison officers indicated that barriers for allied health professionals to participate as a workplace supervisor were: a lack of incentives (financial and non-financial) to participate, onerous workloads and lack of time to supervise a student; insufficient understanding of the VET sector and the requirements of providing supervision; and limited value associated with the provision of supervision to an assistant who will not be working in their discipline.

An online training package and a toolkit that contained resource materials for supervisors (i.e. governance guidelines for allied health support staff, a power point presentation on supervision and delegation of tasks to allied health assistants, supervision agreement and orientation guide) were available to workplace supervisors. However, the uptake was reportedly low. One possible reason that was suggested was that it was not a compulsory requirement for supervisors to use these resources. Queensland Health also suggested that there was little knowledge among the allied health workforce of where to access the information.

To help address these issues, Queensland Health had initiated an orientation process for both students and their nominated workplace supervisors to outline the requirements and expectations of undertaking the qualification. In addition, FAQ sheets are being developed.

### ***Higher-order issues***

Stakeholders expressed concerns regarding multiple issues, including:

- The selection process for students
- The process of recognising prior learning (RPL)
- The appropriateness of Queensland Health workplace supervisors conducting workplace assessment
- The use of external consultants to develop learning resources
- The content of the learning resources.

However, the nature of the discussions suggested that the real issue for the project was the level of communication and the quality of the relationship between the providers: TAFEs and Queensland Health. It was apparent that there was not a sense of a single team. The discussions were characterised by a tendency to make non-constructive criticisms and to apportion blame for problems to others rather than focusing on how they can contribute to the partnership to improve the delivery of the qualification. In addition, some comments were clearly based upon misinformation, suggesting that some members of the partnership were not fully informed.

## Discussion

This evaluation study aimed to assess the effectiveness of the Project in achieving project outcomes to date and to identify factors that acted as barriers and enablers to the project outcomes. As identified above, the project operational objectives were (in short):

1. Packaging units of competency of the Cert IV AHA
2. Developing contextualised learning support materials
3. Partnering with TAFE to deliver the Cert IV AHA
4. Trialling and modifying delivery of the allied health electives for Cert IV AHA.

At the time of the evaluation, each of these operational objectives had been achieved and progress had been made on the outcome objective of increasing the number of allied health assistants holding a formal qualification in Queensland Health. At the time of writing this report, over 300 students were enrolled in or had graduated from the Cert IV AHA. This number is over half the number of allied health assistants estimated to work in Queensland Health.<sup>3</sup>

This preliminary evaluation has provided information on the activities and outputs of the Project to date from the perspective of allied health assistance students, allied health professional supervisors and Project Partners (Queensland Health and TAFE). From the survey results, there is room for improvement in preparing students, providing support and improving satisfaction with the course. However, the fact that student satisfaction with the qualification increased from 38% for cohort 1 to 65% for cohort 3, and the percentage who would recommend the qualification to others increased from 69% for cohort 1 to 88% for cohort 3 suggests that the qualification has been improving steadily with each delivery.

Two main barriers/enablers were identified via the evaluation. The first relates to partnering with TAFE. There has clearly been value in working together to deliver the course as each partner has unique resources and expertise to contribute. However, the tone of the focus group discussions indicated that the relationship between partners needs to be developed; communication needs to be increased and shared problem solving needs to be enhanced. Such problems are common in partnerships,<sup>7</sup> so this finding is not surprising.

The second barrier relates to resources. Again, this is a common problem with new initiatives. The time and human resources needed to implement activities is often greater than anticipated and limitations in resources can cause stress and delays. Resources were not only limited for the implementing partners, but also variable for students who had variable access to resources at work such as computers. Resources are always limited. However, it is anticipated that with each new cohort, processes can be streamlined.

In summary, the Project has achieved its operational objectives and is on track to achieve desired outcomes. A range of problems were identified with the course delivery, as would be expected with any new initiatives. There is a process of continual monitoring and making changes to address the problems so that the program is likely to continue to improve over time. As for whether the project results in an increased capacity for the allied health workforce, this remains a question for longer term evaluation.

It is recommended that the partners delivering the qualification workshop the multiple problems that had been raised within the course of this evaluation. One approach could be to conduct a workshop with an external facilitator. The problems were not insurmountable but communication and a sense of partnership is needed to move forward and achieve the project outcomes.

## Appendices

### *Appendix 1: List of project documents reviewed*

Allied Health Workforce Advice and Coordination Unit (AHWACU) AHA discussion paper August 2008

Allied Health Workforce Advice and Coordination Unit (AHWACU) Project Completion Report AHA Phase 1

Allied Health Workforce Advice and Coordination Unit (AHWACU) Endorsed Project Plan - Phase II

Ipsos-Eureka Social Research Institute. Delphi Survey On Role And Scope of Practice of Allied Health Assistants. Queensland Health, Brisbane. 2009

Allied Health Clinical Education and Training Unit (AHCETU) VET Program Progress Report March 2011

Operational Services Training and Development Education Incentive Fund: Implementation Guide March 2009

Productivity Placements Program (PPP) Information

Certificate IV in Allied Health Assistance (AHA) info: HLT07 Health Training Package Volume 2 of 7: Qualification Framework

Contact List

Terms of Reference Allied Health Assistant Steering Committee Queensland Health 2008/2009

Allied Health Workforce Advice and Coordination Unit (AHWACU) AHA Role Guide

Allied Health Workforce Advice and Coordination Unit (AHWACU) AHA Demo Roles 003

Allied Health Workforce Advice and Coordination Unit (AHWACU) Models of Care AHA Orientation Workbook

Allied Health Workforce Advice and Coordination Unit (AHWACU) Models of Care Governance Guidelines for allied health support staff



### Assessing Clinical Education and Training for Allied Health Assistants (AHA) in Queensland Health Project

#### INFORMATION SHEET

#### Siggins Miller Consultants

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#### Why is the evaluation being conducted?

ClinEdQ, with the assistance of Siggins Miller consultants is conducting an initial evaluation of the delivery of the Certificate IV in Allied Health Assistance (Cert IV AHA) program by Queensland Health in partnership with a number of Queensland Institutes of TAFE.

As part of this process, the views of allied health assistants enrolled in the Cert IV AHA program, AHA supervisors, Queensland Health staff, and Queensland Institute of TAFE staff involved in the program will be elicited. The result of this project will help to evaluate the program to date and develop a framework for evaluation and assessing the impact of interventions on project drivers and planned outcomes.

#### If you proceed, you may be asked to do one or more of the following:

- a) Fill out an online survey where you will be asked to provide your opinions and feedback on multiple aspects of the Cert IV AHA program.
- b) Engage in a focus group session where you will be asked to provide your opinions and feedback on multiple aspects of the Cert IV AHA program.
- c) Participate in a telephone interview where you will be asked to provide your opinions and feedback on multiple aspects of the Cert IV AHA program.

#### The expected benefits of the evaluation

The result of this assessment will help to evaluate the program to date and develop a framework for evaluation and assessing the impact of interventions on project drivers and planned outcomes.

#### Risks to you

As this is a non-clinical low risk evaluation project, we do not anticipate that you will experience any discomfort.

#### Your confidentiality

The responses you make are completely confidential unless required by the law or appropriate body or with your consent. The data will be securely stored and the access to the data is restricted to the evaluating team members only.

#### Your participation is voluntary

Your participation is entirely voluntary and you can refuse to participate without penalty or loss of benefits to which you are otherwise entitled. You are free to withdraw from the session at any time without any prejudice.

#### Questions / further information

If you have any questions or would like some further information following your participation, please contact Jason Lee (email: [Jason.lee@sigginsmiller.com.au](mailto:Jason.lee@sigginsmiller.com.au)) or phone (02) 9368 1977

#### The ethical conduct of this evaluation

Queensland Health conducts evaluations in accordance with the Health and Medical Research Human Research Ethics Committee. If potential participants have any concerns or complaints about the ethical conduct of the project they should contact the Committee on (07) 3234 0034, or by email: [regu@health.qld.gov.au](mailto:regu@health.qld.gov.au).

#### Feedback to you

If you would like information about the results of evaluation, please contact Dr Sharon Brownie (Senior director of Clinical Education and Training Queensland) on (07) 3131 6988, or by email: [Sharon.brownie@health.qld.gov.au](mailto:Sharon.brownie@health.qld.gov.au) and she will advise you if/when a summary of the results is available.

## **Appendix 3: Allied Health Assistant Survey**

### **Allied Health Assistants (AHA) Survey**

You are invited to participate in our survey: Assessing Clinical Education and Training for Allied Health Assistants (AHA) in Queensland Health. The purpose of this survey is to assist ClinEdQ and Siggins Miller consultants to conduct an initial evaluation of the delivery of the Certificate IV in Allied Health Assistance (Cert IV AHA) program by Queensland Health in partnership with a number of Queensland Institutes of TAFE.

The result of this project will help to evaluate the program to date and develop a framework for evaluation and assessing the impact of interventions on project drivers and planned outcomes. The questionnaire will take approximately 15 minutes to complete.

Your participation is completely voluntary. There are no foreseeable risks associated with this project. However, if you feel uncomfortable answering any questions, you can withdraw from the survey at any point. It is very important for us to learn your opinions. Your survey responses will be strictly confidential and data from this research will not be reported from any individual survey. Only the collected group results of the survey will be reported. Your information will be coded and will remain confidential.

If you have questions at any time about the survey or the procedures, you may contact **Jason Lee** on **(02) 9368 1977** or by email at [jason.lee@sigginsmiller.com.au](mailto:jason.lee@sigginsmiller.com.au)

Please initial and date below to indicate your agreement to participate in this study.

Thank you very much for your time and support.

**Initials:**

**Date:**

## Section A: Demographics

### 1. In which district/s do you work? Please select all that apply (multiple responses possible).

1. Cairns and Hinterland	2. Metro North
3. Cape York	4. Metro South
5. Central Queensland	6. Mt Isa
7. Central West	8. Sunshine Coast
9. Children's Health Services	10. South West
11. Darling Downs - West Moreton	12. Torres Strait - Northern Peninsula
13. Gold Coast	14. Townsville
15. Mackay	16. Wide Bay
17. Other (please specify)	

### 2. To which age range do you belong?

1. <20
2. 21-30
3. 31-40
4. 41-50
5. >50

### 3. What is your gender?

1. Male
2. Female

### 4. What is your job title? (i.e. What does it say on your employee ID badge)

1. Allied Health Assistant/Aide
2. Therapy Assistant//Aide
3. Dietetic Assistant/ Nutrition Assistant/Aide
4. Occupational Therapy Assistant/Aide
5. Podiatry Assistant/Aide
6. Physiotherapy Assistant/Aide
7. Speech Pathology Assistant
8. Other (please specify)

### 5. Which of the following best describes your current role?

1. Assisting a single allied health department in a hospital setting
2. Assisting across several allied health departments in a hospital setting
3. Assisting in a multidisciplinary team in a hospital setting
4. Assisting a single allied health department in a community setting
5. Assisting across several allied health departments in a community setting
6. Assisting in a multidisciplinary team within a community setting
7. Other (please specify)

**6. With which of the allied health disciplines do you work? Please select all that apply (multiple responses possible).**

- |                                      |
|--------------------------------------|
| 1. Dietetics/Nutrition/Food Services |
| 2. Occupational Therapy              |
| 3. Podiatry                          |
| 4. Physiotherapy                     |
| 5. Speech Pathology                  |
| 6. Other (please specify)            |

**7. How many years experience do you have working in your current role or a similar AHA role?**

- |                       |
|-----------------------|
| 1. Less than 1 year   |
| 2. >1-2 years         |
| 3. >2-5 years         |
| 4. >5-10 years        |
| 5. More than 10 years |

**8. With which TAFE did you complete, or are currently enrolled in the Cert IV AHA qualification?**

- |   |
|---|
| 1. Sunshine Coast Institute of TAFE (SCIT)      |
| 2. Southern Queensland Institute of TAFE (SQIT) |

**9. Which stream/s have you completed, or are currently enrolled in for the Cert IV AHA qualification? You may select more than one stream but only select those streams in which you completed ALL the compulsory units (of competency).**

- |                            |
|----------------------------|
| 1. Community Rehab         |
| 2. Generic                 |
| 3. Nutrition and Dietetics |
| 4. Occupational Therapy    |
| 5. Physiotherapy           |
| 6. Podiatry                |
| 7. Speech Pathology        |
| 8. Other (please specify)  |

**10. When did you commence your Cert IV AHA qualification? (Please select the closest date)**

- |                  |
|------------------|
| 1. March 2009    |
| 2. February 2010 |
| 3. October 2010  |

**11. Have you completed your Cert IV AHA qualification?**

- |  |
|--|
| 1. Yes → continue to Q12                                       |
| 2. No → skip to Q14  |
| 3. I withdrew from the Cert IV AHA qualification → skip to Q16 |

**12. How many units (of competency) did you complete to receive the Cert IV AHA qualification?**

--

**13. How long did it take you to complete the qualification?**

1. < 6 months → skip to Q19
2. >6-9 months → skip to Q19
3. >10-12 months → skip to Q19
4. >13-18 months → skip to Q19
5. > 18 months → skip to Q19

**14. How many units (of competency) have you completed?**

--

**15. How many units (of competency) do you need to finish before completing the Cert IV AHA qualification?**

→ skip to Q19
---------------

**16. What factors contributed to your decision to withdraw? (multiple responses possible)**

1. Not relevant to my work
2. Change in personal circumstances (i.e. increased family commitments)
3. Change of job
4. Not enough time to complete the Cert IV AHA qualification
5. Cost
6. The Cert IV AHA qualification was too difficult
7. The Cert IV AHA did not meet my expectations
8. Lack of support from workplace
9. Lack of support from TAFE
10. Other (please specify)

**17. Would you consider doing the Cert IV AHA qualification in the future?**

1. Yes → skip to Q19
2. No → continue to Q18

**18. Please explain why you would not consider doing the Cert IV AHA qualification in the future:**

--

**19. Did you receive any recognition of prior learning (RPL) for any of your units of competency?**

1. Yes → continue to Q20
2. No → continue to Q22

**20. How many units did you obtain RPL's for?**

--

**21. How satisfied were you with the RPL process used by your TAFE?**

Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**22. Did you complete the Cert III AHA qualification prior to commencing the Cert IV AHA qualification?**

1. Yes
2. No

**23. What was your reason for enrolling in the Cert IV AHA qualification? Please rank your top three choices.**

1. Program content
2. To update my skills
3. To re-enter into the workforce
4. To gain new/additional skills
5. To gain recognition of existing skills
6. To gain formal qualifications
7. As a requirement of my current role
8. As a refresher training
9. Out of personal interest
10. Other (please specify)

**24. What is your highest level of qualification received?**

1. High school grade 10
2. High school grade 12
3. Certificate III
4. Certificate IV
5. Diploma
6. Bachelor degree
7. Other (please specify)

**Section B: Learning Experience and Expectations**

**25. What is your overall level of satisfaction with the Cert IV AHA qualification? (consider the relevance of the course content to your work, support provided by TAFE teachers, VET liaison project officers, local workplace supervisors and AH CETU)**

Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**26. What is your overall level of satisfaction with the support provided to you during your Cert IV AHA qualification for the following:**

	Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
Access to TAFE teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to Queensland Health workplace supervisors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timeliness of responses to your questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Usefulness of responses to your questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**27. On average how many hours per week did/do you spend on your study for the Cert IV AHA qualification?**

1. Less than one hour/week
2. >1-2 hours/week
3. >2-5 hours/week
4. >5-10 hours/week
5. More than 10 hours/week

**28. Overall, how do you find the workload of the Cert IV AHA qualification?**

Overwhelming workload	Too much work	Right amount of work	Too little work	No work
<input type="checkbox"/>				

**29. Have you required support during the Cert IV AHA qualification?**

1. Yes → continue to Q30
2. No → continue to Q33

**30. How easy was it to access support?**

Very difficult	Somewhat difficult	Neither difficult nor easy	Somewhat easy	Very easy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**31. From whom did you seek support? (multiple responses possible).**

1. Your Queensland Health work supervisor
2. Your TAFE teacher
3. Queensland Health Vocational Education and Training (VET) Liaison Project Officers
4. Other TAFE staff
5. AHCETU/ClinEdQ
6. A colleague
7. A friend
8. Other (please specify)

**32. How would you rate the support that you received?**

Very Unhelpful	Somewhat unhelpful	Neither unhelpful nor helpful	Somewhat helpful	Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**33. How do you find the level of difficulty of the Cert IV AHA qualification?**

Very difficult	Somewhat difficult	Neither difficult nor easy	Somewhat easy	Very easy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**For each item below, please read the statement and indicate how strongly you agree or disagree with the following statements:**

**34. I was given clear explanation by the TAFE on the Cert IV AHA qualification requirements.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**35. I was given clear explanation by the TAFE on what would be required of me as a student during the Cert IV AHA qualification (i.e. time commitments required for study and assessment requirements).**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**36. I was given clear explanation by the TAFE on the roles and responsibilities of the TAFE teaching staff.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**37. I was given clear explanation by the TAFE on the role and responsibilities of my Queensland Health workplace supervisor.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**38. How much contact have you had with your TAFE teacher over the course of the Cert IV AHA qualification? (Contact can be defined as email, phone calls, face-to-face communication regarding your individual enrolment, progress or completion of the Cert IV AHA qualification)**

No contact at all	Minimal contact	Some contact	Somewhat regular contact	Regular contact
<input type="checkbox"/>				
→ continue to Q39	→ skip to Q40			

**39. Why have you not had contact with your TAFE teacher over the course of your Cert IV AHA qualification?**

1. It was not necessary → skip to Q43
2. I did not know that I could → skip to Q43
3. TAFE did not arrange it → skip to Q43
4. Other (please specify) → skip to Q43

**40. What is the main mode of contact with your TAFE teacher?**

1. Over the phone
2. Through email
3. Face to face

**41. How often are you in contact with your TAFE teacher?**

1. Weekly
2. Fortnightly
3. Monthly
4. Infrequent or on a needs basis

**42. How would you rate the contact that you have received from your TAFE teacher?**

Very Unhelpful	Somewhat unhelpful	Neither unhelpful nor helpful	Somewhat helpful	Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**43. Did/do you have a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification?**

1. Yes → continue to Q44
2. No → continue to Q49

**44. How much contact have you had with your Queensland Health workplace supervisor over the course of the Cert IV AHA qualification? (Contact can be defined as email, phone calls, face-to-face communication regarding your individual enrolment, progress or completion of the Cert IV AHA qualification)**

No contact at all	Minimal contact	Some contact	Somewhat regular contact	Regular contact
<input type="checkbox"/>				
→ continue to Q45	→ continue to Q46			

**45. Why have you not had contact with your Queensland Health workplace supervisor over the course of the Cert IV AHA qualification?**

1. It was not necessary → continue to Q51
2. I did not know that I could → continue to Q51
3. TAFE did not arrange it → continue to Q51
4. Other (please specify) → continue to Q51

**46. What is the main mode of contact with your Queensland Health workplace supervisor?**

1. Over the phone
2. Through email
3. Face to face

**47. How often are or were you in contact with your Queensland Health workplace supervisor?**

1. Weekly
2. Fortnightly
3. Monthly
4. Infrequent or on a needs basis

**48. How would you rate the contact that you have received from your Queensland Health workplace supervisor?**

Very Unhelpful	Somewhat unhelpful	Neither unhelpful nor helpful	Somewhat helpful	Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
→ continue to Q51	→ continue to Q51	→ continue to Q51	→ continue to Q51	→ continue to Q51

**49. Did you receive any other type of support from your workplace for the practical component of the Cert IV AHA qualification?**

1. Yes → continue to Q50
2. No → continue to Q51

**50. How would you rate the support that you received?**

Very Unhelpful	Somewhat unhelpful	Neither unhelpful nor helpful	Somewhat helpful	Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**51. How much support have you received from the Queensland Health VET liaison project officer over the course of the Cert IV AHA qualification?**

No support at all	Minimal support	Some support	Somewhat frequent support	Regular support
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
→ continue to Q52	→ continue to Q53	→ continue to Q53	→ continue to Q53	→ continue to Q53

**52. Why have you not received any support from the Queensland Health VET liaison project officer over the course of the Cert IV AHA qualification?**

1. It wasn't necessary → continue to Q56
2. I did not know that I could → continue to Q56
3. TAFE/Queensland Health did not arrange it → continue to Q56
4. Other (please specify) → continue to Q56

**53. What is the main mode of contact with the Queensland Health VET liaison project officer?**

1. Over the phone
2. Through email
3. Face to face

**54. How often are you in contact with the Queensland Health VET liaison project officer?**

1. Weekly
2. Fortnightly
3. Monthly
4. Infrequent or on a needs basis

**55. How would you rate the support that you receive from the Queensland Health VET liaison project officer?**

Very Unhelpful	Somewhat unhelpful	Neither unhelpful nor helpful	Somewhat helpful	Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For each item below, please read the statement and indicate how relevant you found the Cert IV AHA core unit of competency to your workplace requirements.

**56. HTLHIR 402B – Contribute to organizational effectiveness in the health industry.**

Very irrelevant	Somewhat irrelevant	Neither irrelevant nor relevant	Somewhat relevant	Very relevant	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**57. HLTHIR 506B – Implement and monitor compliance with legal and ethical requirements.**

Very irrelevant	Somewhat irrelevant	Neither irrelevant nor relevant	Somewhat relevant	Very relevant	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**58. HLTOHS 300A – Contribute to OHS processes.**

Very irrelevant	Somewhat irrelevant	Neither irrelevant nor relevant	Somewhat relevant	Very relevant	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**59. HLTIN 403B – Implement and monitor infection control policy and procedures.**

Very irrelevant	Somewhat irrelevant	Neither irrelevant nor relevant	Somewhat relevant	Very relevant	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please read the statement below and indicate how strongly you agree or disagree with the following statement:

**60. Overall, I have found the mandatory elective units of competency (i.e. the allied health electives from my stream/s) to be relevant to my workplace requirements.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**61. Overall, I have found the “other” elective units of competency to be relevant to my workplace requirements.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**62. Overall, the assessment tasks are a fair indication of the knowledge I am acquiring as a result of the Cert IV AHA qualification.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
→ continue to Q63	→ continue to Q63	→ continue to Q64	→ continue to Q64	→ continue to Q64	→ continue to Q64

**63. How can the assessments be a more accurate reflection of the knowledge you are acquiring?**

### Section C: Workplace

For each item below, please read the statement and indicate how strongly you agree or disagree with the following statements:

**64. I will apply the knowledge I have gained from the Cert IV AHA qualification in my work.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**65. I am likely to share the knowledge and skills gained from the Cert IV AHA qualification with my peers.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**66. I am likely to undertake further independent study to learn more about the topics covered by the Cert IV AHA qualification.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**67. I am likely to attend further formal training to gain knowledge and skills for my work role.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**68. The work tasks/duties I undertake are likely to change as a result of the knowledge and skills I have gained from the Cert IV AHA qualification.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**69. I would recommend doing the Cert IV AHA qualification to other allied health assistants.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
→ continue to Q70	→ continue to Q70	→ continue to Q70	→ continue to Q71	→ continue to Q71

**70. Why wouldn't you recommend the Cert IV AHA qualification to other allied health assistants? (multiple responses possible)**

1. Not relevant to work
2. Not enough time to complete the Cert IV AHA qualification
3. Cost
4. The Cert IV AHA qualification was too difficult
5. The Cert IV AHA did not meet my expectations
6. Lack of support from workplace
7. Lack of support from TAFE
8. Other (please specify)

**71. Can you suggest improvements that could be made to the experience of the Cert IV AHA qualification?**

--

**72. Are you willing to be contacted for further discussions regarding your experience of the Cert IV AHA qualification?**

1. Yes → continue to Q73
2. No → continue to Q75

**73. Please select the type of follow-up interview you are willing to participate in: (multiple responses possible)**

1. Telephone interview
2. Focus group discussion

**74. Please provide your contact details for us to arrange a convenient time to interview you (In order to ensure your anonymity and confidentiality, your contact details will not be linked with this questionnaire):**

**75. Please provide any additional comments or suggestions that you may have.**

**Thank you for participating in the AHA survey**

## ***Appendix 4: Allied Health Professional (workplace supervisor) Survey***

### **Allied Health Assistants (AHP) Survey**

You are invited to participate in our survey: Assessing Clinical Education and Training for Allied Health Assistants (AHA) in Queensland Health. The purpose of this survey is to assist ClinEdQ and Siggins Miller consultants to conduct an initial evaluation of the delivery of the Certificate IV in Allied Health Assistance (Cert IV AHA) program by Queensland Health in partnership with a number of Queensland Institutes of TAFE.

The result of this project will help to evaluate the program to date and develop a framework for evaluation and assessing the impact of interventions on project drivers and planned outcomes. The questionnaire will take approximately 15 minutes to complete.

Your participation is completely voluntary. There are no foreseeable risks associated with this project. However, if you feel uncomfortable answering any questions, you can withdraw from the survey at any point. It is very important for us to learn your opinions. Your survey responses will be strictly confidential and data from this research will not be reported from any individual survey. Only the collected group results of the survey will be reported. Your information will be coded and will remain confidential.

If you have questions at any time about the survey or the procedures, you may contact **Jason Lee** on **(02) 9368 1977** or by email at [jason.lee@sigginsmiller.com.au](mailto:jason.lee@sigginsmiller.com.au)

Please initial and date below to indicate your agreement to participate in this study.

Thank you very much for your time and support.

**Initials:**

**Date:**

## Section A: Demographics

### 1. In which district/s do you work? Please select all that apply (multiple responses possible).

1. Cairns and Hinterland	2. Metro North
3. Cape York	4. Metro South
5. Central Queensland	6. Mt Isa
7. Central West	8. Sunshine Coast
9. Children's Health Services	10. South West
11. Darling Downs - West Moreton	12. Torres Strait - Northern Peninsula
13. Gold Coast	14. Townsville
15. Mackay	16. Wide Bay
17. Other (please specify)	

### 2. To which age range do you belong?

1. <20
2. 21-30
3. 31-40
4. 41-50
5. >50

### 3. What is your gender?

1. Male
2. Female

### 4. How many years experience do you have working as an Allied Health Professional?

1. Less than 1 year
2. Greater than 1 year to 2 years
3. Greater than 2 years to 5 years
4. Greater than 5 years to 10 years
5. Greater than 10 years

### 5. Do you hold a Certificate IV in Training and Assessment (Cert IV TAA) or an equivalent or higher education related qualification?

1. I have completed the Cert IV TAA qualification
2. I am currently undertaking the Cert IV TAA qualification
3. I don't have a Cert IV TAA
4. I don't have a Cert IV TAA but have plans to enroll in the qualification
5. I don't know about the Cert IV TAA qualification
6. I have an equivalent qualification
7. I have a higher education related qualification
8. Other (please specify)

**6. In which discipline do you work?**

1. Nutrition and Dietetics
2. Occupational Therapy
3. Physiotherapy
4. Podiatry
5. Speech Pathology
6. Other (please specify)

**Section B: Cert IV AHA Qualification**

**7. Have you previously, or are currently supervising an allied health assistant undertaking the Cert IV AHA qualification?**

1. Yes
2. No

**8. How many allied health assistants undertaking the Cert IV AHA qualification are you currently supervising?**

--

**9. How many allied health assistants undertaking the Cert IV AHA qualification have you previously supervised?**

--

**Please think of the allied health assistants undertaking the Cert IV AHA qualification that you have previously, or are currently supervising. On average, how much time do you spend on the following areas:**

**10. Assisting the allied health assistant with the theoretical course material specific to the Cert IV AHA qualification. For example teaching the material or answering questions related to it.**

1. Less than one hour per week
2. Greater than 1 hour to 3 hours per week
3. Greater than 3 hours to 5 hours per week
4. Greater than 5 hours to 10 hours per week
5. More than 10 hours per week

**11. Assisting the allied health assistant with practical skill development in the workplace specific to the Cert IV AHA qualification. For example teaching a specific practical competency. (Note: this does not include observations related to assessment).**

1. Less than one hour per week
2. Greater than 1 hour to 3 hours per week
3. Greater than 3 hours to 5 hours per week
4. Greater than 5 hours to 10 hours per week
5. More than 10 hours per week

**12. Assisting activities to the Cert IV AHA qualification. For example completion of third party observation reports, marking or providing formal feedback on formative assessment tasks from the learner guides.**

1. Less than one hour per week
2. Greater than 1 hour to 3 hours per week
3. Greater than 3 hours to 5 hours per week
4. Greater than 5 hours to 10 hours per week
5. More than 10 hours per week

**13. What is your overall level of satisfaction with allied health assistants enrolled in the Cert IV AHA qualification? (please consider level of knowledge, competencies demonstrated and overall workplace performance).**

Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**14. As the workplace supervisor of an allied health assistant undertaking the Cert IV AHA qualification, have you required support from the TAFE?**

1. Yes
2. No

**15. What is your overall level of satisfaction with the support provided to you by the TAFE?**

Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**16. How easy was it to access support from the TAFE?**

Very difficult	Somewhat difficult	Neither difficult nor easy	Somewhat easy	Very easy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**17. As the workplace supervisor of an allied health assistant undertaking the Cert IV AHA qualification, have you required support from the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ?**

1. Yes
2. No

**18. What is your overall level of satisfaction with the support provided to you by the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ?**

Very dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**19. How easy was it to access support from the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ??**

Very difficult	Somewhat difficult	Neither difficult nor easy	Somewhat easy	Very easy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**For each item below, please indicate how strongly you agree or disagree with the following statements:**

**20. The workload of supervising an allied health assistant undertaking the Cert IV AHA qualification is appropriate.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**21. There is a significant greater workload associated with supervising an allied health assistant undertaking the Cert IV AHA qualification in comparison to an allied health assistant NOT undertaking the Cert IV AHA qualification.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**22. Please provide details:**

**23. Overall, the practical assessment tasks required for Cert IV AHA qualification are closely aligned with the workplace tasks and duties that assistants undertake.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. How can the practical assessment tasks for the Cert IV AHA qualification be more closely aligned with workplace tasks and duties?

--

25. Supervising an allied health assistant undertaking the Cert IV AHA qualification has increased my understanding of the role of an allied health assistant.

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. Supervising an allied health assistant undertaking the Cert IV AHA qualification has improved my understanding of the competencies gained by assistants completing the Cert IV AHA qualification.

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. My improved understanding of the competencies gained by completing the Cert IV AHA qualification has clarified the tasks and duties that could be delegated to an allied health assistant.

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. My improved understanding of the competencies gained by completing the Cert IV AHA qualification has influenced the tasks and duties I will delegate to an allied health assistant.

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Before being a workplace supervisor for an allied health assistant undertaking the Cert IV AHA qualification, what did you think of the qualification?

1. I thought it did not contribute any value
2. I thought it contributed a little value
3. I thought it contributed a lot of value

30. After being a workplace supervisor for an allied health assistant undertaking the Cert IV AHA qualification, what did you think of the qualification?

1. I think it does not contribute any value
2. I think it contributes a little value
3. I think it contributes a lot of value

**31. I would recommend the Cert IV AHA qualification to allied health assistants.**

Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**32. Why would you not recommend the Cert IV AHA qualification to other allied health assistants?**

1. The Cert IV AHA qualification is not aligned with workplace requirements
2. The Cert IV AHA qualification does not add any value to the abilities of allied health assistants
3. The Cert IV AHA qualification is too difficult
4. The Cert IV AHA qualification takes up too much time
5. Other (please specify)

**33. Can you suggest improvements that could be made to assist with your role as workplace supervisor to an allied health assistant undertaking the Cert IV AHA qualification?**

**34. Are you willing to be contacted for further discussions regarding your experience as a workplace supervisor of an allied health assistant undertaking the Cert IV AHA qualification?**

1. Yes → continue to
2. No → continue to

**35. Please select the type of follow-up interview you are willing to participate in: (multiple responses possible)**

1. Telephone interview
2. Focus group discussion

**36. Please provide your contact details for us to arrange a convenient time to interview you (In order to ensure your anonymity and confidentiality, your contact details will not be linked with this questionnaire):**

**37. Please provide any additional comments or suggestions that you may have.**

Thank you for participating in the AHP survey

## Appendix 5: Stakeholder Consultation List

Stakeholder	Position	Organisation/unit/facility
Dean Cook	VET Liaison Officer (Group 1)	Queensland Health
Jennifer Finch	A/Director, AHCETU	Queensland Health
Judith Nance	Senior Project Officer AHCETU (2008-2010)	Queensland Health
Liza Jane McBride	Manager, Allied Health Pathways Team	Queensland Health
Matthew Molineux	Manager Performance and Evaluation	Queensland Health
Melissa McConaghy	A/Project Officer VET Team	Queensland Health
Jackie Harle	VET Liaison Officer (Groups 2 & 3) Teacher (N&D)	Queensland Health SCIT
Jacqueline Kraayenbrink	VET Liaison Officer (Groups 2 & 3) Teacher (OT & PT)	Queensland Health SCIT
Karen Artis	Head of School - Health	SCIT
Laura Simpson	Contract Support Officer	SCIT
Regina Andrews	Team Leader/Teacher	SCIT
Richelle Hawtin	Teacher (OT&PT)	SCIT
Teresa Schmidt	Previous Head of School - Health	SCIT
Anne Griffiths	Teacher	SQIT
Ashley Crouch	Workplace Training Officer	SQIT
Sharon Lofthouse	Education Manager	SQIT
Zoe Walsh	VET Liaison Officer (Group 1)	Queensland Health - Mater

## Appendix 6: Focus Group Protocol

### Part A: Welcome, Introduction and Overview

#### Overview:

*Siggins Miller Consultants have been engaged by ClinEdQ to conduct an initial evaluation of the delivery of the Clinical Education for Allied Health Assistants program by Queensland Health. This includes the delivery of the Certificate IV in Allied Health Assistance (Cert IV AHA) qualification in partnership with a number of Queensland Institutes of TAFE. Siggins Miller is conducting this focus group to seek your opinions and feedback on multiple aspects of the delivery of the Cert IV AHA qualification under this program. From the partnership initiation to the mode of delivery as well as the cost/benefits of the Clinical Education for Allied Health Assistants program in relation to the assistants undertaking the qualification.*

*Your input during this session will be used to help assess the impact of interventions on project drivers and planned outcomes to date and to help inform an evaluation framework which will be implemented in the future.*

*Thank you for agreeing to participate.*

### Part B: Focus Group Procedure

#### **Establishment of the delivery partnership for the Cert IV AHA qualification**

- *You will be asked to discuss the process of establishing the partnership for the delivery of the Cert IV AHA qualification including successes and achievements and difficulties or barriers along the way.*

#### **Delivery of the Cert IV AHA qualification**

- *You will be asked to consider the strengths and weaknesses on how the Cert IV AHA qualification is currently being delivered.*

#### **Evaluation of the Cert IV AHA qualification in relation to the Queensland Health assistant workforce**

- *You will be asked to consider appropriate criteria and processes for evaluating the delivery and relevance of the Cert IV AHA qualification.*

#### **Brainstorming costs and benefits of the Cert IV AHA qualification**

- *You will be asked to talk about costs and benefits of the Cert IV AHA component of the Clinical Education for Allied Health Assistants program.*
- *You will be asked to think through the costs and benefits as they relate to a number of stakeholder groups.*

#### **Other**

- *This is an informal discussion and there are no 'right' or 'wrong' answers.*
- *We will record the discussion - this is to make sure that we do not miss any of your comments.*
- *We will take this information away and write up a summary of the key points that you raise.*
- *The information you provide is confidential and only for the use of this project. No one is identified in the write-up, so we hope that you feel comfortable to share your views.*
- *If you would like a copy of the write up, you can let us know at the end of the meeting and we can arrange it for you.*
- *Does anyone have any questions before we start?*

## Part C: Focus group questions

### 1. Introductions

### 2. Establishment of the delivery partnership for the Cert IV AHA qualification

a) *What are your views regarding the establishment process of the delivery partnership for the Cert IV AHA qualification?*

*Discussion points may include:*

- What is the history/background to the establishment of the delivery partnership for the Cert IV AHA qualification?
- During the initial establishment phase, can you describe the relationship between TAFE and Queensland Health? i.e. reporting mechanisms, consultation, communication channels.
- What support/resources were provided by TAFE/Queensland Health during the establishment of partnership? (i.e. consider financial, human resources, technical support etc).
- What were some of the successes and achievements during this process?
- What were some of the difficulties and barriers during this process?
- If there were barriers, what was done to address/overcome those barriers?

### 3. Delivery of the Cert IV AHA qualification

a) *What do you think are the strengths and weaknesses on how the Cert IV AHA qualification is currently being delivered?*

*Discussion points may include:*

- What service delivery model is your TAFE using? (*only for TAFE*)
- What aspects of the delivery of the Cert IV AHA qualification are working well? (i.e. successes)
- What aspects of the delivery of the Cert IV AHA qualification are not working well (i.e. barriers)
- What, if anything, is being done to address the above mentioned barriers?
- What are your views regarding the support TAFE/Queensland Health is receiving from Queensland Health/TAFE and other stakeholders for the delivery of the Cert IV AHA qualification?
- What strategies may be employed to improve/facilitate the delivery of the Cert IV AHA qualification?

b) *What are your views regarding the human resource/staffing requirements for the delivery of the Cert IV AHA qualification?*

*Discussion points may include:*

- What are the human resource requirements currently available for the delivery the Cert IV AHA qualification (i.e. teaching staff, liaisons, project officers, administrative staff etc.)?
- What, if any gaps can you identify with staffing requirements for the delivery of the Cert IV AHA qualification?

c) *What are your views regarding the resources (financial, technical etc.) currently available for the delivery of the Cert IV AHA qualification?*

*Discussion points may include:*

- Financial sustainability of the delivery of the Cert IV AHA qualification using the current delivery partnership model.
- Funding gaps/surpluses and its impact on the delivery of the Cert IV AHA qualification.
- What other resources are available to ensure the sustainable delivery of the Cert IV AHA qualification?

#### 4. Evaluation of the Cert IV AHA qualification

a) *What is needed to evaluate the impact of the Cert IV AHA qualification on/for Queensland Health assistants and work areas?*

*Discussion points may include:*

- What are the criteria by which the Cert IV AHA qualification should be evaluated?
- What data is currently being collected by TAFE/Queensland Health?
- Who is responsible for collecting data?

#### 5. Cost – Benefit of the Cert IV AHA qualification

a) *What are the non-financial benefits of Queensland Health assistant staff undertaking/completing the qualification to a) allied health assistants; b) allied health professionals; c) patients and; d) system?*

*Examples may include:*

- Enhanced allied health assistant understanding of the psychosocial context of illness (AHA level)
- Provides opportunity for assistants to develop communication skills, appreciate a degree of responsibility over their patients, interact with patients on a regular basis (AHA level)
- Builds respect for and acceptance of the different roles allied health assistants play in patient care (AHA/AHP level)
- Facilitate improved patient journey through health system (patient level)

b) *What are the financial benefits of Queensland Health assistant staff undertaking/completing the qualification to a) allied health assistants; b) allied health professionals; c) patients and; d) system?*

*Examples may include:*

- Reduced costs for patients
- More appropriate and efficient use of workforce (system level)

c) *What are the non-financial costs of Queensland Health assistant staff undertaking/completing the qualification to a) allied health assistants; b) allied health professionals; c) patients and; d) system?*

*Examples may include:*

- Insufficient time allowed for supervision (AHP level)

d) *What are the financial costs of the training and education model currently used for the delivery of the Certificate IV AHA to a) students and; b) supervisors?*

*Examples may include:*

- Travel or other costs for AHAs to undertake study

#### 6. Any other comments

- *Are there any other comments that anyone would like to make?*

#### Part D: Closing

*Thank you for participating.*

## Appendix 7: Detailed results of the allied health assistant (student) survey

### Participant background

#### 1. In which district/s do you work? (multiple responses possible)

Cape York	0%
Torres Strait - Northern Peninsula	0%
Central West	1%
Mt Isa	1%
Children's Health Services	2%
Mackay	2%
South West	2%
Other	2%
Gold Coast	4%
Central Queensland	4%
Wide Bay	5%
Cairns and Hinterland	7%
Darling Downs - West Moreton	8%
Townsville	8%
Sunshine Coast	12%
Metro South	18%
Metro North	25%

#### 2. To which age range do you belong?

<20	2%
21-30	9%
31-40	16%
41-50	39%
>50	34%

#### 3. What is your gender?

Male	17%
Female	83%

#### 4. What is your job title? (i.e. What does it say on your employee ID badge)

Podiatry Assistant/Aide	0%
Speech Pathology Assistant/Aide	1%
Occupational Therapy Assistant/Aide	10%
Therapy Assistant//Aide	13%
Dietetic Assistant/ Nutrition Assistant/Aide	14%
Physiotherapy Assistant/Aide	16%
Other	17%
Allied Health Assistant/Aide	28%

#### 5. Which of the following best describes your current role?

Assisting a single allied health department in a community setting	2%
Assisting across several allied health departments in a community setting	4%
Assisting in a multidisciplinary team within a community setting	11%
Other	11%
Assisting in a multidisciplinary team in a hospital setting	11%
Assisting across several allied health departments in a hospital setting	13%
Assisting a single allied health department in a hospital setting	48%

**6. With which of the allied health disciplines do you work? Please select all that apply (multiple responses possible)**

Podiatry	2%
Other	11%
Speech Pathology	15%
Dietetics/Nutrition/Food Services	20%
Occupational Therapy	23%
Physiotherapy	29%

**7. How many years experience do you have working in your current role or a similar AHA role?**

Less than 1 year	5%
Greater than 1 year to 2 years	15%
Greater than 2 years to 5 years	31%
Greater than 5 years to 10 years	28%
Greater than 10 years	20%

**8. With which TAFE did you complete, or are currently enrolled in the Cert IV AHA qualification?**

Southern Queensland Institute of TAFE (SQIT)	19%
Sunshine Coast Institute of TAFE (SCIT)	81%

**9. Which stream/s have you completed, or are currently enrolled in for the Cert IV AHA qualification? You may select more than one stream but only select those streams in which you completed ALL the compulsory units (of competency).**

Podiatry	0%
Other	1%
Speech Pathology	7%
Community Rehabilitation	10%
Nutrition and Dietetics	17%
Generic	19%
Occupational Therapy	20%
Physiotherapy	26%

**10. When did you commence your Cert IV AHA qualification? (Please select the closest date)**

March 2009	31%
February 2010	42%
October 2010	27%

**11. Have you completed your Cert IV AHA qualification?**

Yes	64%
No	33%
I withdrew from the Cert IV AHA qualification	3%

**13. How long did it take you to complete the qualification? (n=70 who had completed the qualification)**

Less than 6 months	12%
6 months to 9 months	9%
10 months to 12 months	29%
13 months to 18 months	45%
Greater than 18 months	5%

**19. Did you receive any recognition of prior learning (RPL) for any of your units of competency?**

Yes	85%
No	15%

**21. How satisfied were you with the RPL process used by your TAFE? (n=84)**

Very dissatisfied	13%
Somewhat dissatisfied	15%
Neither dissatisfied nor satisfied	17%
Somewhat satisfied	26%
Very satisfied	29%

**22. Did you complete the Cert III AHA qualification prior to commencing the Cert IV AHA qualification?**

Yes	33%
No	67%

**23. What was your reason for enrolling in the Cert IV AHA qualification? Please rank your top three choices.**

To re-enter into the workforce	150%
To gain new/additional skills	171%
As a requirement of my current role	198%
To gain recognition of existing skills	200%
To gain formal qualifications	200%
To update my skills	202%
Out of personal interest	227%
Other	256%
Program content	283%
As a refresher training	300%

**24. What is your highest level of qualification received?**

High school grade 10	16%
High school grade 12	8%
Certificate III	22%
Certificate IV	27%
Diploma	15%
Bachelor degree	8%
Other	5%

**Learning experiences and expectations**

**25. What is your overall level of satisfaction with the Cert IV AHA qualification? (consider the relevance of the course content to your work, support provided by TAFE teachers, VET liaison project officers, local workplace supervisors and AH CETU)**

Very dissatisfied	10%
Somewhat dissatisfied	27%
Neither dissatisfied nor satisfied	14%
Somewhat satisfied	30%
Very satisfied	19%

**26. What is your overall level of satisfaction with the support provided to you during your Cert IV AHA qualification for the following:**

**26.a. Access to TAFE teachers**

Very dissatisfied	12%
Somewhat dissatisfied	20%
Neither dissatisfied nor satisfied	17%
Somewhat satisfied	24%
Very satisfied	28%

**26.b. Access to Queensland Health workplace supervisors**

Very dissatisfied	10%
Somewhat dissatisfied	16%
Neither dissatisfied nor satisfied	16%
Somewhat satisfied	20%
Very satisfied	38%

**26.c. Timeliness of responses to your questions**

Very dissatisfied	11%
Somewhat dissatisfied	13%
Neither dissatisfied nor satisfied	23%
Somewhat satisfied	25%
Very satisfied	29%

**26.d. Usefulness of responses to your questions**

Very dissatisfied	8%
Somewhat dissatisfied	8%
Neither dissatisfied nor satisfied	26%
Somewhat satisfied	32%
Very satisfied	26%

**27. On average how many hours per week did/do you spend on your study for the Cert IV AHA qualification?**

Less than one hour per week	2%
Greater than 1 hour to 2 hours per week	16%
Greater than 2 hours to 5 hours per week	37%
Greater than 5 hours to 10 hours per week	28%
Greater than 10 hours per week	16%

**28. Overall, how do you find the workload of the Cert IV AHA qualification?**

Overwhelming workload	12%
Too much work	43%
Right amount of work	45%
Too little work	1%
No work	0%

**29. Have you required support during the Cert IV AHA qualification?**

Yes	71%
No	29%

**30. How easy was it to access support? (n=71 – those who required support)**

Very difficult	9%
Somewhat difficult	28%
Neither difficult nor easy	22%
Somewhat easy	22%
Very easy	19%

**31. From whom did you seek support? (multiple responses possible) (n=71 – those who required support)**

AHCETU/ClinEdQ	0%
Other TAFE staff	2%
Other	3%
Queensland Health Vocational Education and Training (VET) Liaison Project Officers	5%
A friend	6%
Your TAFE teacher	26%
A colleague	27%
Your Queensland Health work supervisor	31%

**32. How would you rate the support that you received? (n=71 – those who required support)**

Very Unhelpful	9%
Somewhat unhelpful	6%
Neither unhelpful nor helpful	5%
Somewhat helpful	33%
Very helpful	46%

**33. How do you find the level of difficulty of the Cert IV AHA qualification?**

Very difficult	5%
Somewhat difficult	36%
Neither difficult nor easy	42%
Somewhat easy	11%
Very easy	5%

**34. I was given clear explanation by the TAFE on the Cert IV AHA qualification requirements.**

Strongly disagree	10%
Somewhat disagree	14%
Neither disagree nor agree	21%
Somewhat agree	38%
Strongly agree	17%

**35. I was given clear explanation by the TAFE on what would be required of me as a student during the Cert IV AHA qualification (i.e. time commitments required for study and assessment requirements).**

Strongly disagree	13%
Somewhat disagree	16%
Neither disagree nor agree	21%
Somewhat agree	35%
Strongly agree	16%

<b>36. I was given clear explanation by the TAFE on the roles and responsibilities of the TAFE teaching staff.</b>	
Strongly disagree	14%
Somewhat disagree	15%
Neither disagree nor agree	21%
Somewhat agree	31%
Strongly agree	19%

**37. I was given clear explanation by the TAFE on the role and responsibilities of my Queensland Health workplace supervisor.**

Strongly disagree	18%
Somewhat disagree	17%
Neither disagree nor agree	17%
Somewhat agree	29%
Strongly agree	17%

**38. How much contact have you had with your TAFE teacher over the course of the Cert IV AHA qualification? (Contact can be defined as email, phone calls, face-to-face communication regarding your individual enrolment, progress or completion of the Cert IV AHA qualification).**

No contact at all	2%
Minimal contact	40%
Some contact	34%
Somewhat regular contact	15%
Regular contact	9%

**40. What is the main mode of contact with your TAFE teacher?**

Face to face	1%
Over the phone	15%
Through email	84%

**41. How often are you in contact with your TAFE teacher?**

Weekly	4%
Fortnightly	8%
Monthly	10%
Infrequent or on a needs basis	77%

**42. How would you rate the contact that you have received from your TAFE teacher?**

Very Unhelpful	8%
Somewhat unhelpful	10%
Neither unhelpful nor helpful	15%
Somewhat helpful	32%
Very helpful	34%

**43. Did/do you have a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification?**

Yes	65%
No	35%

**44. How much contact have you had with your Queensland Health workplace supervisor over the course of the Cert IV AHA qualification? (Contact can be defined as email, phone calls, face-to-face communication regarding your individual enrolment, progress or completion of the Cert IV AHA qualification). (n=67, those who said they had a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification)**

No contact at all	3%
Minimal contact	12%
Some contact	12%
Somewhat regular contact	19%
Regular contact	55%

**46. What is the main mode of contact with your Queensland Health workplace supervisor? (n=65, those who said they had a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification)**

Over the phone	3%
Through email	4%
Face to face	93%

**47. How often are or were you in contact with your Queensland Health workplace supervisor? (n=65, those who said they had a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification)**

Weekly	52%
Fortnightly	10%
Monthly	6%
Infrequent or on a needs basis	31%

**48. How would you rate the contact that you have received from your Queensland Health workplace supervisor? (n=65, those who said they had a designated Queensland Health workplace supervisor for the practical component of the Cert IV AHA qualification)**

Very Unhelpful	1%
Somewhat unhelpful	1%
Neither unhelpful nor helpful	6%
Somewhat helpful	15%
Very helpful	76%

**49. Did you receive any other type of support from your workplace for the practical component of the Cert IV AHA qualification? (n=34)**

Yes	49%
No	51%

**51. How much support have you received from the Queensland Health VET liaison project officer over the course of the Cert IV AHA qualification?**

No support at all	47%
Minimal support	30%
Some support	10%
Somewhat frequent support	4%
Regular support	8%

**52. Why have you not received any support from the Queensland Health VET liaison project officer over the course of the Cert IV AHA qualification? (n=58, those who received no support)**

TAFE/Queensland Health did not arrange it	11%
It wasn't necessary	16%
Other	20%
I did not know that I could	52%

**53. What is the main mode of contact with the Queensland Health VET liaison project officer? (n=43, those who received support)**

Face to face	9%
Over the phone	11%
Through email	80%

**54. How often are you in contact with the Queensland Health VET liaison project officer? (n=43, those who received support) (n=43, those who received support)**

Weekly	7%
Fortnightly	2%
Monthly	0%
Infrequent or on a needs basis	91%

**55. How would you rate the support that you receive from the Queensland Health VET liaison project officer? (n=43, those who received support)**

Very Unhelpful	2%
Somewhat unhelpful	11%
Neither unhelpful nor helpful	47%
Somewhat helpful	22%
Very helpful	18%

**Relevance of the Cert IV AHA core units of competency to workplace requirements**

**56. HTLHIR 402B – Contribute to organizational effectiveness in the health industry.**

Very irrelevant	1%
Somewhat irrelevant	14%
Neither irrelevant nor relevant	11%
Somewhat relevant	41%
Very relevant	26%
N/A	8%

**57. HLTHIR 506B – Implement and monitor compliance with legal and ethical requirements.**

Very irrelevant	6%
Somewhat irrelevant	9%
Neither irrelevant nor relevant	11%
Somewhat relevant	31%
Very relevant	39%
N/A	5%

**58. HLTOHS 300A – Contribute to OHS processes.**

Very irrelevant	3%
Somewhat irrelevant	7%
Neither irrelevant nor relevant	5%
Somewhat relevant	36%
Very relevant	45%
N/A	5%

**59. HLTIN 403B – Implement and monitor infection control policy and procedures.**

Very irrelevant	5%
Somewhat irrelevant	8%
Neither irrelevant nor relevant	5%
Somewhat relevant	28%
Very relevant	52%
N/A	2%

**60. Overall, I have found the mandatory elective units of competency (i.e. the allied health electives from my stream/s) to be relevant to my workplace requirements.**

Strongly disagree	3%
Somewhat disagree	10%
Neither disagree nor agree	13%
Somewhat agree	38%
Strongly agree	35%
N/A	2%

**61. Overall, I have found the “other” elective units of competency to be relevant to my workplace requirements.**

Strongly disagree	5%
Somewhat disagree	9%
Neither disagree nor agree	22%
Somewhat agree	35%
Strongly agree	27%
N/A	2%

**62. Overall, the assessment tasks are a fair indication of the knowledge I am acquiring as a result of the Cert IV AHA qualification.**

Strongly disagree	6%
Somewhat disagree	9%
Neither disagree nor agree	17%
Somewhat agree	37%
Strongly agree	30%
N/A	2%

**Workplace**

**64. I will apply the knowledge I have gained from the Cert IV AHA qualification in my work.**

Strongly disagree	3%
Somewhat disagree	9%
Neither disagree nor agree	14%
Somewhat agree	30%
Strongly agree	44%

**65. I am likely to share the knowledge and skills gained from the Cert IV AHA qualification with my peers.**

Strongly disagree	5%
Somewhat disagree	15%
Neither disagree nor agree	17%
Somewhat agree	30%
Strongly agree	33%

**66. I am likely to undertake further independent study to learn more about the topics covered by the Cert IV AHA qualification.**

Strongly disagree	13%
Somewhat disagree	13%
Neither disagree nor agree	33%
Somewhat agree	25%
Strongly agree	17%

**67. I am likely to attend further formal training to gain knowledge and skills for my work role.**

Strongly disagree	5%
Somewhat disagree	6%
Neither disagree nor agree	23%
Somewhat agree	37%
Strongly agree	29%

**68. The work tasks/duties I undertake are likely to change as a result of the knowledge and skills I have gained from the Cert IV AHA qualification.**

Strongly disagree	15%
Somewhat disagree	19%
Neither disagree nor agree	25%
Somewhat agree	32%
Strongly agree	10%

**69. I would recommend doing the Cert IV AHA qualification to other allied health assistants.**

Strongly disagree	8%
Somewhat disagree	9%
Neither disagree nor agree	21%
Somewhat agree	37%
Strongly agree	25%

**70. Why wouldn't you recommend the Cert IV AHA qualification to other allied health assistants?(multiple responses possible)**

The Cert IV AHA qualification was too difficult	4%
Cost	6%
Not relevant to work	10%
Lack of support from workplace	13%
Lack of support from TAFE	16%
Not enough time to complete the Cert IV AHA qualification	17%
The Cert IV AHA did not meet my expectations	17%
Other	17%

## Appendix 8: Detailed results of the allied health professionals survey

### Participant background

#### 1. In which district/s do you work? Please select all that apply. (multiple responses possible)

Cape York	0%
Central West	0%
Mt Isa	0%
Torres Strait - Northern Peninsula	0%
Other	0%
Mackay	1%
Children's Health Services	4%
Sunshine Coast	4%
South West	4%
Townsville	5%
Wide Bay	5%
Cairns and Hinterland	9%
Central Queensland	9%
Gold Coast	11%
Metro South	11%
Darling Downs - West Moreton	13%
Metro North	23%

#### 2. To which age range do you belong?

<20	0%
21-30	17%
31-40	28%
41-50	32%
>50	23%

#### 3. What is your gender?

Male	15%
Female	85%

#### 4. How many years experience do you have working as an Allied Health Professional?

Less than 1 year	2%
Greater than 1 year to 2 years	2%
Greater than 2 years to 5 years	5%
Greater than 5 years to 10 years	28%
Greater than 10 years	64%

#### 5. Do you hold a Certificate IV in Training and Assessment (Cert IV TAA) or an equivalent or higher education related qualification?

I don't know about the Cert IV TAA qualification	0%
I am currently undertaking the Cert IV TAA qualification	2%
I don't have a Cert IV TAA but have plans to enrol in the qualification	2%
I have an equivalent qualification	2%
Other	2%
I have a higher education related qualification	20%
I have completed the Cert IV TAA qualification	30%
I don't have a Cert IV TAA	44%

**6. In which discipline do you work?**

Podiatry	3%
Speech Pathology	5%
Nutrition and Dietetics	13%
Other	13%
Occupational Therapy	30%
Physiotherapy	36%

**Cert IV AHA Qualification****7. Have you previously, or are currently supervising an allied health assistant undertaking the Cert IV AHA qualification?**

Yes	90%
No	10%

**8. Assisting the allied health assistant with the theoretical course material specific to the Cert IV AHA qualification. For example teaching the material or answering questions related to it (n=41)**

Less than 1 hour per week	57%
Greater than 1 hour to 3 hours per week	37%
Greater than 3 hours to 5 hours per week	4%
Greater than 5 hours to 10 hours per week	2%
Greater than 10 hours per week	0%

**9. Assisting the allied health assistant with practical skill development in the workplace specific to the Cert IV AHA qualification. For example, teaching a specific practical competency. (Note: this does not include observations related to assessment) (n=41)**

Less than 1 hour per week	53%
Greater than 1 hour to 3 hours per week	39%
Greater than 3 hours to 5 hours per week	8%
Greater than 5 hours to 10 hours per week	0%
Greater than 10 hours per week	0%

**10. Assessment activities specific to the Cert IV AHA qualification. For example completion of third party observation reports, marking or providing formal feedback on formative assessment tasks from the learner guides (n=41)**

Less than 1 hour per week	51%
Greater than 1 hour to 3 hours per week	45%
Greater than 3 hours to 5 hours per week	4%
Greater than 5 hours to 10 hours per week	0%
Greater than 10 hours per week	0%

**11. What is your overall level of satisfaction with allied health assistants enrolled in the Cert IV AHA qualification? (please consider level of knowledge, competencies demonstrated and overall workplace performance) (n=41)**

Very dissatisfied	4%
Somewhat dissatisfied	4%
Neither dissatisfied nor satisfied	12%
Somewhat satisfied	55%
Very satisfied	24%

**12. As the workplace supervisor of an allied health assistant undertaking the Cert IV AHA qualification, have you required support from the TAFE? (n=41)**

Yes	20%
No	80%

**13. What was your overall level of satisfaction with the support provided to you by the TAFE? (n=8)**

Very dissatisfied	10%
Somewhat dissatisfied	50%
Neither dissatisfied nor satisfied	10%
Somewhat satisfied	30%
Very satisfied	0%

**14. How easy was it to access support from the TAFE? (n=8)**

Very difficult	10%
Somewhat difficult	50%
Neither difficult nor easy	30%
Somewhat easy	10%
Very easy	0%

**15. As the workplace supervisor of an allied health assistant undertaking the Cert IV AHA qualification, have you required support from the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ? (n=41)**

Yes	17%
No	83%

**16. What was your overall level of satisfaction with the support provided to you by the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ? (n=7)**

Very dissatisfied	0%
Somewhat dissatisfied	13%
Neither dissatisfied nor satisfied	25%
Somewhat satisfied	38%
Very satisfied	25%

**17. How easy was it to access support from the Queensland Health VET Liaison Project Officers or the Allied Health Clinical Education and Training Unit (AHCETU)/ClinEdQ? (n=7)**

Very difficult	0%
Somewhat difficult	13%
Neither difficult nor easy	38%
Somewhat easy	25%
Very easy	25%

**18. The workload of supervising an allied health assistant undertaking the Cert IV AHA qualification is appropriate (n=41)**

Strongly disagree	2%
Somewhat disagree	13%
Neither disagree nor agree	27%
Somewhat agree	52%
Strongly agree	6%

**19. There is a significantly greater workload associated with supervising an allied health assistant undertaking the Cert IV AHA qualification in comparison to an allied health assistant NOT undertaking the Cert IV AHA qualification (n=41)**

Strongly disagree	2%
Somewhat disagree	6%
Neither disagree nor agree	29%
Somewhat agree	40%
Strongly agree	23%

**20. Overall, the practical assessment tasks required for the Cert IV AHA qualification are closely aligned to with the workplace tasks and duties that assistants undertake (n=41)**

Strongly disagree	2%
Somewhat disagree	19%
Neither disagree nor agree	15%
Somewhat agree	58%
Strongly agree	6%

**21. Supervising an allied health assistant undertaking the Cert IV AHA qualification has increased my understanding of the role of an allied health assistant (n=41)**

Strongly disagree	10%
Somewhat disagree	15%
Neither disagree nor agree	38%
Somewhat agree	31%
Strongly agree	6%

**22. Supervising an allied health assistant undertaking the Cert IV AHA qualification has improved my understanding of the competencies gained by assistants completing the Cert IV AHA qualification (n=41)**

Strongly disagree	4%
Somewhat disagree	2%
Neither disagree nor agree	21%
Somewhat agree	56%
Strongly agree	17%

**23. My improved understanding of the competencies gained by completing the Cert IV AHA qualification has clarified the tasks and duties that could be delegated to an allied health assistant (n=29)**

Strongly disagree	3%
Somewhat disagree	14%
Neither disagree nor agree	17%
Somewhat agree	58%
Strongly agree	8%

**24. My improved understanding of the competencies gained by completing the Cert IV AHA qualification has influenced the tasks and duties that I will delegate to an allied health assistant (n=29)**

Strongly disagree	6%
Somewhat disagree	8%
Neither disagree nor agree	19%
Somewhat agree	53%
Strongly agree	14%

**25. Before being a workplace supervisor for an allied health assistant undertaking the Cert IV qualification, what did you think of the qualification? (n=41)**

I thought it did not contribute any value	4%
I thought it contributed a little value	47%
I thought it contributed a lot of value	49%

**26. After being a workplace supervisor an allied health assistant undertaking the Cert IV qualification, what do you think of the qualification? (n=41)**

I think it does not contribute any value	6%
I think it contributes a little value	45%
I think it contributes a lot of value	49%

**27. I would recommend the Cert IV AHA qualification to allied health assistants (n=41)**

Strongly disagree	2%
Somewhat disagree	4%
Neither disagree nor agree	19%
Somewhat agree	40%
Strongly agree	34%

**28. Why would you not recommend the Cert IV AHA qualification to other allied health assistants? (n=11)**

The Cert IV AHA qualification is too difficult	0%
The Cert IV AHA qualification is not aligned to workplace requirements	9%
The Cert IV AHA qualification does not add any value to the abilities of allied health assistants	9%
The Cert IV AHA qualification takes up too much time	27%
Other:	55%
<ul style="list-style-type: none"> <li>• Too generalized - no real value to the workplace (only reason would be if linked to pay rise)</li> <li>• No peer support</li> <li>• No benchmarking</li> <li>• Learning is done in isolation</li> <li>• Not strongly aligned with workplace requirements</li> <li>• Difficulty of AHA's completing the training</li> <li>• Too much repetition.</li> <li>• Difficulty with work-life balance</li> </ul>	

**33. Can you suggest improvements that could be made to assist with your role as workplace supervisor to an allied health assistant undertaking the Cert IV AHA qualification?**

<ul style="list-style-type: none"> <li>• Communication/contact/support between TAFE/AHCETU and supervisors at beginning of process and throughout (on site visits, teleconferencing, attending study days)</li> <li>• Make role of supervisor (requirements, expectations) clear from start</li> <li>• Make instructor guide available to supervisor along with modules/materials/learner guides and assessment criteria to be better informed of what is required of supervisor</li> <li>• Provide AHA and AHP more allocated time in workplace to work/supervise</li> <li>• Reduce repetitive nature of questions, and signage criteria</li> <li>• Ensure that the students know exactly what their course entails</li> <li>• Better course dissemination processes for the AHA so they are not so frustrated with getting timely feedback, advice and support.</li> </ul>	
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**37. Please provide any additional comments or suggestions that you may have.**

<ul style="list-style-type: none"> <li>• Flexibility required for Rurally based AHA students who are in workplace settings where there aren't the standard AHA programs found in major hospitals</li> <li>• Poor course organisation through Sunshine Coast TAFE - they have lost assignments and confused the AHA on a number of occasions</li> <li>• Some specific info regarding working with children as an elective for relevant AHPs.</li> </ul>	
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