


# Allied health clinical leader

## Acute medical service

# Drivers for change

- Delays in:
    - discharge
    - referrals to allied health and commencement of allied health intervention
  - Duplication of
    - assessment and intervention
  - Lack of coordination of allied health services
  - Under utilisation of support works
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# Key elements of role

- Transdisciplinary assessment, intervention and management of medical assessment and planning unit (MAPU) patients
- Skill-sharing of tasks of allied health professions through competency based training
- Use of *Allied Health Clinical Leader Assessment and Management Tool* to facilitate transdisciplinary assessment

# Evidence of impact

- Darling Downs evaluated the leader role via:
  - single blind randomised controlled trial (RCT)
  - staff surveys, interviews and focus groups

# Outcomes

- 11 hour decrease to initial assessment
  - Decreased time to referral and transfer to GEMS – earlier management planning
  - 40% reduction in length of stay (3 days 11 hours)
  - Decrease of readmission length of stay (from 25.3 days to 6.3 days)
  - No additional patient safety risk
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# Outcomes

- Improvements in activities of daily living performance
  - Improvement in quality of life measures
  - Positive feedback from allied health and medical staff
  - Increased cross allied health referrals
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