

Ministerial Taskforce on health practitioner expanded scope of practice – progress report 2

Allied Health Professions' Office of Queensland

March 2015

Ministerial Taskforce on health practitioner expanded scope of practice: progress report 2

Following the release of the *Ministerial Taskforce on health practitioner expanded scope of practice: final report* (the Taskforce) in June 2014, initiatives have been implemented across Hospital and Health Services to transform healthcare delivery through maximising the contribution of allied health professionals. This is consistent with the Government's policy platform to enable allied health professionals to work to their full scope of practice i.e. to perform what they are educated, competent and authorised to do.

Recommendations of the Taskforce aim to improve the delivery of health services to the community in a more cost-effective manner through:

- improving patient access to services
- reducing waiting times in emergency departments and for specialist and surgical appointments
- improving patient flow.

Implementation progress of Taskforce recommendations is reported six-monthly at 30 September and 31 March each year. This is in keeping with business planning and budget cycles. Final reporting will conclude 30 June 2016.

This report outlines achievements from October 2014 to March 2015. Key areas of progress, issues and risks that have been identified to date are highlighted as well as priorities for the next reporting period.

Key achievements to March 2015

Recommendation	Achievements
Recommendation 1: Hospital and Health Boards	Completed, no further action
Recommendation 2: Service agreements	Ongoing negotiations with Health Commissioning Queensland regarding the inclusion of key performance indicators or incentives to support implementation of allied health professional expanded scope of practice in service agreements.
Recommendation 3: Showcase outcomes	<ul style="list-style-type: none">• Workshops facilitated for allied health professional expanded scope of practice models in ear, nose and throat services and general medicine.• Snapshots of Success (model information) published to support implementation of models for dietitian-first gastroenterology clinics and fiberoptic endoscopic evaluation of swallowing by speech pathologists.

Recommendation	Achievements
<p>Recommendation 4: Redesign models of care</p>	<ul style="list-style-type: none"> • Funding provided to support HHSs to collaborate to implement proven models of care (Allied Health Collaboratives) and to further develop other initiatives (Funded Initiatives). • Statewide rollout of expanded scope models targeting emergency departments, ear, nose and throat outpatient services, prescribing by allied health professionals and radiographer commenting supported by advisory groups to oversee development and implementation. • Showcase of collaboratives at Allied Health Directors Forum 2015: Allied health paediatric outpatient and inpatient liaison service; Non-medical prescribing; Expansion of speech pathology telepractice for the management of dysphagia; Radiography commenting; Allied health first contact practitioner in urology, urogynaecology, gynaecology and colorectal services; First contact occupational therapy hand clinic and Dietitian management of gastrostomy devices. • Rural and remote generalist models of care, including telehealth, expanded scope of practice, delegation and new services, implemented as part of the Allied Health Rural Generalist Training Positions initiative. Statewide videoconference held in February 2015 showcasing the outputs from the first year of these positions.
<p>Recommendation 5: Address barriers</p>	<ul style="list-style-type: none"> • Fourteen successful applicants identified for the Health Practitioner Research Scheme (2015-16) to support evaluation of allied health service delivery or workforce models that improve patient access and improve health outcomes. • Data collection of Taskforce key performance indicators for period July 2013 to June 2014 (baseline data) completed and the first Ministerial Taskforce KPI Survey Report published. • Allied health professional clinical governance framework reviewed and feedback received following consultation. • Frequently asked questions relating to indemnity and expanded scope of practice published on QHEPS. • Fact sheets relating to barriers to implementation for activity based funding and Medicare revenue published to QHEPS.

Recommendation	Achievements
<p>Recommendation 6: Education, training and tools</p>	<ul style="list-style-type: none"> • Discussions progressed nationally with the physiotherapy, podiatry, sonography and medical physics professions in regards to accreditation standards to ensure training and education meet the requirements for the future workforce. • Allied Health Education Forum held with Queensland Health, Universities and TAFE to progress development of collaborative strategies and mutually beneficial partnerships in educational activities and training of the allied health workforce. • Inventory of existing tools, training and resources to support the expansion of allied health workforce practice completed. • Development of audiologist training package to support expanded scope practice for the management of paediatric glue-ear. • Support expanded scope of practice training to enable <ul style="list-style-type: none"> – suctioning by speech pathologists – nasendoscopy by speech pathologists for fiberoptic endoscopic evaluation of swallowing – primary contact audiology services – prescribing by podiatrists, physiotherapists and pharmacists. – radiographer commenting – allied health pathology requesting – primary contact allied health vestibular services.

Risks and issues

The inclusion of key performance indicators relating to the implementation of expanded scope of practice for allied health professionals within Service Level Agreements with HHSs has not occurred to date. However further discussions will occur with all relevant stakeholders with regard to this issue. In addition, alternate mechanisms including regular reporting on progress and incentivising workforce reform in the purchasing framework are being explored.

Priorities for the next period

Recommendation	Priorities for next period (April to September 2015)
<p>Recommendation 1: Hospital and Health Boards</p>	<p>Completed, no further action required.</p>
<p>Recommendation 2: Service agreements</p>	<ul style="list-style-type: none"> • Continued negotiation with Health Commissioning Queensland regarding the inclusion of key performance indicators or incentives to support implementation of allied health professional expanded scope of practice in service agreements.

Recommendation	Priorities for next period (April to September 2015)
Recommendation 3: Showcase outcomes	<ul style="list-style-type: none"> • Publish Snapshots of Success (model information) to support implementation of models for audiology management of paediatric glue ear, allied health paediatric outpatient and inpatient liaison service and primary contact physiotherapy services in the emergency department. • Share outcomes of Allied Health Collaboratives and Funded Initiatives.
Recommendation 4: Redesign models of care	<ul style="list-style-type: none"> • Continue financial support for Allied Health Collaboratives and Funded Initiatives with final reports required by 30 June 2015. • Validate and publish locally-developed delegation and skill sharing clinical task instructions.
Recommendation 5: Address barriers	<ul style="list-style-type: none"> • Progress legislative reform relating to prescribing and administration of medications and referrals for diagnostic imaging to improve patient access and flow. • Launch the revised allied health clinical governance framework. • Complete data collection of Taskforce key performance indicators for the period July 2014 to June 2015.
Recommendation 6: Education, training and tools	<ul style="list-style-type: none"> • Progress discussions nationally with professions in regards to accreditation standards to ensure training and education meet the requirements for the future workforce. • Launch Allied Health Assistant Framework to support employment of allied health assistants within services. • Support expanded scope of practice training for <ul style="list-style-type: none"> – speech pathology suctioning – nasendoscopy for fiberoptic endoscopic evaluation of swallowing – primary contact audiology services – upper limb image interpretation for hand therapists – prescribing for podiatry, physiotherapy and pharmacy. – primary contact allied health vestibular services – insulin adjustment by allied health professionals.

Progress and achievements to date in accordance with the implementation plan are outlined in Appendix A. Note an additional strategy [5.9 to develop and implement measures] has been added to the implementation plan.





Appendix A: Progress against implementation plan

Legend: Denotes achieved Denotes on hold Denotes in progress Denotes not achieved

Recommendation	Strategy as outlined in implementation plan	Status	Achievements to date
1. Hospital and Health Boards (HHBs) to lead the implementation of models of care that include allied health professionals expanding their scope of practice.	1.1 Minister to launch the Ministerial Taskforce report and distribute to HHSs.	Achieved	<ul style="list-style-type: none"> Report launched by the Minister for Health, 4 June 2014. Report distributed to HHSs on 5 June 2014.
	1.2 Present at the meeting of HHB chairs on the background, purpose and benefits of allied health professionals expanding their scope of practice.	Achieved	<ul style="list-style-type: none"> Initial presentation to Board Chairs on 5 March 2014. Regular updates provided to the Boards.
2. Service agreements between the Department of Health and each Hospital and Health Service (HHS) to require the implementation of models of care that include allied health professionals expanding their scope of practice, and to report annually.	2.1 Work with HHB chairs and the Healthcare Purchasing, Funding and Performance Branch to include expanded allied health scope of practice in service agreements between the Department of Health and HHSs.	In progress	<ul style="list-style-type: none"> Working with relevant stakeholders to include incentives in service agreements. Presented allied health initiatives to Hospital and Health Board Chairs on 2 March 2015.
	2.2 Develop key performance indicators reflecting outcomes achieved through expanding allied health scope of practice for inclusion in service agreements between the Department of Health and HHSs.	In progress	<ul style="list-style-type: none"> Discussions held with Health Commissioning Queensland with regard to developing KPIs or incentivising purchasing. Meeting with the Health Minister on 6 November 2014.

Legend: Denotes achieved Denotes on hold Denotes in progress Denotes not achieved

Recommendation	Strategy as outlined in implementation plan	Status	Achievements to date
3. Allied Health Professions' Office of Queensland (AHPOQ) to showcase to HHSs, the Queensland Clinical Senate and clinical networks opportunities to enhance patient experiences and provide cost effective services through allied health professionals expanding their scope of practice.	3.1 Distribute the Ministerial Taskforce report and implementation plan to all stakeholders.	Achieved	<ul style="list-style-type: none"> • Report published on AHPOQ website and distributed to stakeholders. Awaiting distribution to Health Ministers in other jurisdictions.
	3.2 Present the Ministerial Taskforce report at the meeting of health services chief executives, the Queensland Clinical Senate and to relevant statewide clinical networks.	In progress	<ul style="list-style-type: none"> • Presentations to: <ul style="list-style-type: none"> – Australian Physiotherapy Association – Optometry Australia – Logan Hospital allied health staff – Australasian Pharmaceutical Sciences Association – pre conference workshop – Occupational Therapy Board of Australia
	3.3 Collaborate with HHS allied health professionals to undertake a roadshow focussed on allied health expanded scope of practice. Include local HHBs, health service chief executives, medical, nursing, allied health professionals, and allied health assistants.	In progress	<ul style="list-style-type: none"> • Presentations to: <ul style="list-style-type: none"> – Psychology discipline group – Speech Pathology discipline group – Audiology discipline group • Workshops and showcases: <ul style="list-style-type: none"> – General Medicine Forum – Ear, nose and throat workshop – Allied Health Directors Forum • Snapshots of Success (model information) published to support implementation of models for dietitian-first gastroenterology clinics and fiberoptic endoscopic evaluation of swallowing by speech pathologists.

Legend:  Denotes achieved  Denotes on hold  Denotes in progress  Denotes not achieved

Recommendation	Strategy as outlined in implementation plan	Status	Achievements to date
<p>4. The Department of Health to support redesign of models of care to improve the patient journey and deliver cost-effective services in outpatient clinics, emergency departments and mental health services by allied health professionals expanding their scope of practice.</p>	<p>4.1 Collaborate with the Clinical Access and Redesign Unit, HHSs and relevant statewide clinical networks to develop a plan for targeted implementation of allied health expanded scope of practice, targeting emergency departments and outpatient services, particularly for musculoskeletal and ear, nose and throat needs.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • Advisory groups established for expanded scope of practice in emergency department and allied health prescribing.
	<p>4.2 Work with HHSs and relevant statewide clinical networks to implement allied health professional expanded scope roles.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • The Calderdale Framework Clinical Task Instruction Validation project commenced and six Queensland Health-developed clinical task instructions published.
	<p>4.3 Work with and report through the Rural and Remote Statewide Clinical Network and national stakeholders (including Health Workforce Australia and Greater Northern Australia Regional Training Network) to oversee implementation of rural and remote allied health generalist roles, and Telehealth and support worker models.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • Southern Cross University engaged to assist with the evaluation of allied health rural generalist training positions. • Telehealth scoping project completed and implementation plan developed. • Lymphoedema management redesign trial including telehealth and training of generalist clinicians in regional and rural sites ongoing.

Legend: Denotes achieved Denotes on hold Denotes in progress Denotes not achieved

Recommendation	Strategy as outlined in implementation plan	Status	Achievements to date
<p>5. The Department of Health to address barriers to allied health professionals expanding their scope of practice by:</p> <ul style="list-style-type: none"> identifying and implementing alternative funding models and incentives with relevant partners amending regulation, legislation and policy developing measures and facilitating research into the outcomes of full scope of practice and extended scope tasks to further contribute to evidence. 	5.1 Work with the Healthcare Purchasing, Funding and Performance Branch and HHSs to address funding barriers to models of care changes.	In progress	<ul style="list-style-type: none"> Workshop held with allied health directors to identify funding models and barriers. Meeting held with DDG, Health Commissioning Queensland.
	5.2 Partner with HHSs and Medicare Locals to investigate funding and service delivery models to improve access to allied health services in the community.	On hold	<ul style="list-style-type: none"> Meeting held with Metro North Medicare Local regarding pathways for musculoskeletal care. No further progress - awaiting transition to Primary Health Networks.
	5.3 Liaise with the Australian Government Department of Health to advocate for and investigate funding models to support access to allied health services in the community.	On hold	<ul style="list-style-type: none"> Progressing development of formal proposal to the Commonwealth Department of Health.
	5.4 Work with the Regulatory Instruments Unit and the Chief Health Officer to progress changes in legislation relating to prescribing by podiatrists and requesting of X-rays by physiotherapists and podiatrists.	Achieved	<ul style="list-style-type: none"> <i>Health (Drugs and Poisons) Regulation 1996</i> revised to enable prescribing by podiatrists. <i>Radiation Safety Regulation 2010</i> revised to enable physiotherapists to request X-rays and to extend the authorisation of podiatrists in requesting X-rays.
	5.5 Work with Human Resource Services and unions to implement flexible healthcare assistant roles	In progress	<ul style="list-style-type: none"> Work with Clinician Planning Unit and Workforce Relations Unit to progress
	5.6 Promote the Health Service Directive on Credentialing and defining the scope of clinical practice and the Allied health clinical governance framework in Queensland Health.	In progress	<ul style="list-style-type: none"> Resources to assist with credentialing for expanded scope service models including pathology requesting, radiography commenting, prescribing and physiotherapists in emergency department developed and published on QHEPS.
	5.7 Address policy and legislative issues impacting on allied health professional scope of practice including home modifications, ordering of equipment and supplies and WorkCover Queensland.	In progress	<ul style="list-style-type: none"> Working with Nursing and Midwifery Office of Queensland to develop a submission to enable authorisation for health professionals other than medical officers to initiate and progress workers compensation claims.
	5.8 Target research grant allocation to	In	<ul style="list-style-type: none"> Fourteen successful

	further evaluate models of care incorporating expanded scope of practice.	progress	applicants identified for the Health Practitioner Research Scheme (2015-16) to support evaluation of allied health service delivery or workforce models that improve patient access and improve health outcomes.
	5.9 Develop and collect measures to evaluate the success of implementation of the Ministerial Taskforce	In progress	<ul style="list-style-type: none"> Baseline data collected for period 1 July 2013 to 30 June 2014 and first report published on QHEPS

Legend:



Denotes achieved



Denotes on hold



Denotes in progress



Denotes not achieved

Recommendation	Strategy as outlined in implementation plan	Status	Achievements to date
<p>6. AHPOQ, in partnership with education providers, accreditation bodies and professional associations, to develop and facilitate access to education, training and tools to support allied health professionals to expand their scope of practice.</p>	<p>6.1 Work with accreditation bodies and professional associations to influence training courses so the professions are capable of meeting future workforce needs.</p>	<p>In progress</p>	<p>Meetings held with:</p> <ul style="list-style-type: none"> - Psychology Board of Australia - Australian Sonographers Association - Speech Pathology Australia - Medical Physics (national consultation) - Directors of Medical Imaging - Australian Orthopaedic Association - The Royal Australian and New Zealand College of Radiologists (RANZCR) - School of Allied Health Sciences – Griffith University - Australian Health Practitioner Regulation Agency (AHPRA) - Medical Radiation Practice Board of Australia - Australian Medical Association (Queensland Branch) - Australian Audiology Society
	<p>6.2 Refresh and promote tools and resources available to support the workforce to implement expanded scope of allied health practice.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • Published revised pathology requesting guidelines, prescribing framework and radiographer commenting toolkit resources.
	<p>6.3 Identify gaps in tools and resources.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • Inventory of existing tools and resources completed and gaps identified.
	<p>6.4 Work with education providers to identify and provide flexible training packages to deliver education and training to the workforce to facilitate expanded scope of practice.</p>	<p>In progress</p>	<ul style="list-style-type: none"> • Collaborated with QUT to develop education and training to support allied health prescribing trials. • Engaged Pathology Queensland to deliver training for requesting pathology. • Engaged Lightbox Radiology Education to develop training for upper limb image interpretation for hand therapists • Engaged University of Melbourne to review educational and assessment validity of training package for primary contact audiology services

	6.5 Support the workforce to undertake required training.	In progress	Supported workforce to undertake required training: <ul style="list-style-type: none"> - pathology requesting for podiatry (12), physiotherapy (17), pharmacy (11), occupational therapy (6) and dietetics (13) - prescribing for physiotherapy (13) and pharmacy (5) - provision of written comment for radiography (21). - primary contact allied health vestibular services(6)
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