

Strengthening the clinical skills of a multidisciplinary allied health assistant workforce

NEED FOR CHANGE

- Builds on the success of the CREST project involving greater delivery of rehabilitation by Allied Health Assistants & Key Support Workers
- Recognises need for a process to allow expansion of this approach to other rehabilitation services provided by CDHB & WCDHB
- Supports the establishment of multidisciplinary working for assistants in allied health
- In line with Allied Health strategic direction

PLANNING

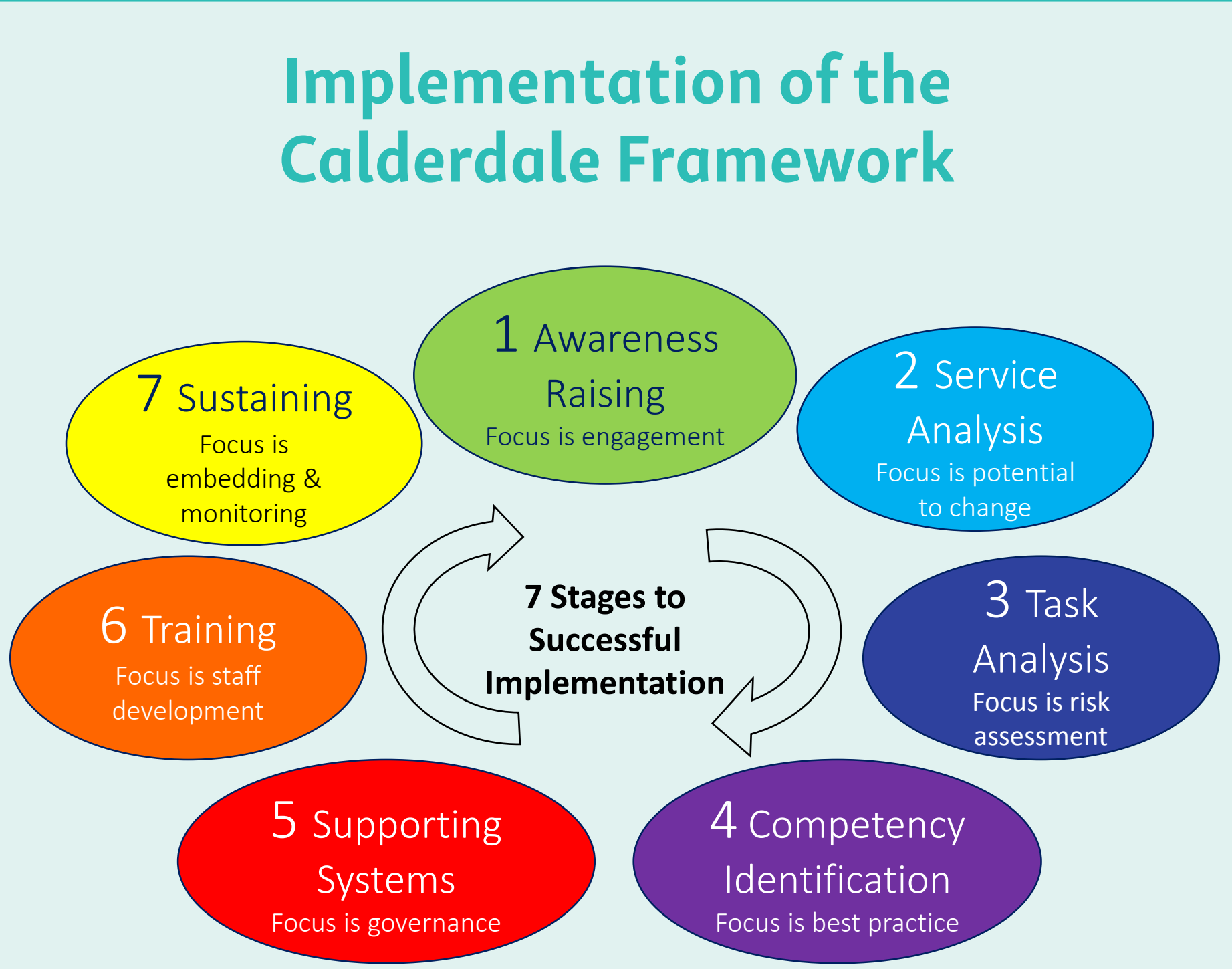
- Aim is to enable Allied Health Assistants:
 - to provide specific delegated clinical tasks according to best practice &
 - to foster client independence on tasks as appropriate
- Service Analysis used to identify a group of ‘high volume low risk’ clinical tasks – 10 clinical tasks selected
- Project led by Calderdale Framework Practitioner under the direction of Directors of Allied Health & with support from Clinical Managers, allied health professionals & South Island Workforce Development Hub.

IMPLEMENTATION

- Clinical Task Instructions (CTIs) for use in training & performance assessment (quality control) were selected from South Island regional ‘CTI library’ or developed
- Teaching model used for CTI education was Taught, Modelled, Competent (TMC) – considered best practice for teaching clinical skills
- Roll out: Older Person’s Health, then Ashburton allied health. Further roll-out to Christchurch Hospital, SMHS, WCDHB allied health planned.
- Challenged assistants & line managers to embrace wider multidisciplinary role. Engaged DAHs to reinforce new ways of working & support for the training.

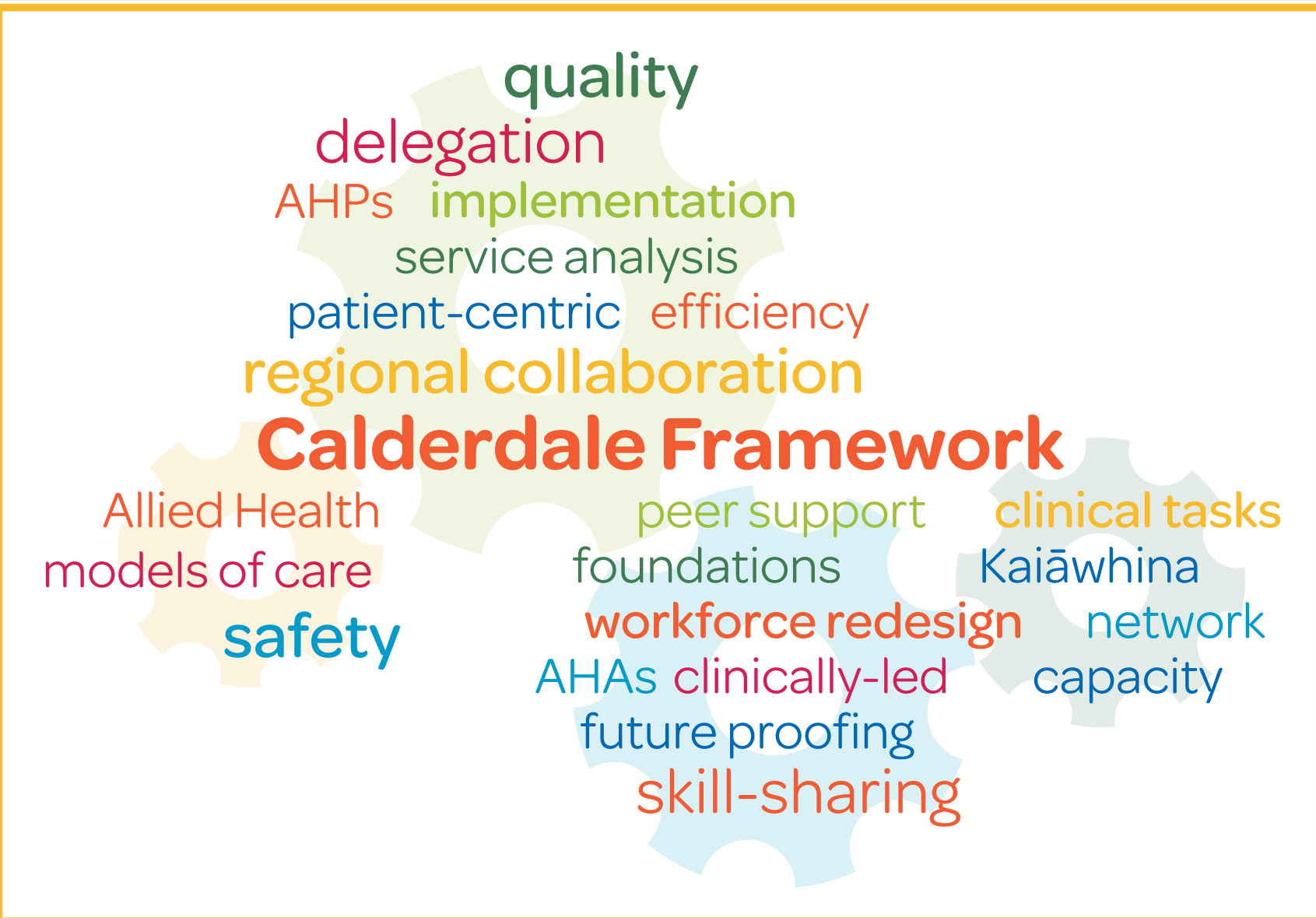
RESULTS & FINDINGS

- 23/26 Allied Health Assistants in Older Person’s Health completed training – sign off of ‘competence’ underway
- Delegation of clinical tasks required a change in practice from supervising allied health professionals
- Training a necessary prerequisite to adequate performance but also needed to be built into current work practice
- CTIs ensured best practice care and consistency of client care – & improved capacity for client access to care



The Calderdale Framework allows workforce re-design which is ‘best for people, best for system’, using a clinically-led service development approach. It supports standardised care and has the potential for service-level efficiencies. Originally developed in the UK, the South Island Directors of Allied Health brought the Framework methodology into use for allied health projects beginning in 2015.

For further information see: www.sialliance.health.nz/our-priorities/workforce-development-hub/calderdale-framework/



South Island Workforce Development Hub

MOB-D SINZ Mobility Practice (+/- aids) including stairs

Delegated Task

Assessment: Performance Criteria Checklist

Name:	Position:	Work Unit:	Performance Criteria	Taught	Modelled	Competent
				Date and initials of supervising AHP	Date and initials of supervising AHP	Date and initials of supervising AHP
1.	Demonstrates knowledge required to undertake the task.					
2.	Obtains all required information from delegating health professional, and seeks clarification if required.					
3.	Completes preparation for task including ensuring the required equipment is clean and safe for use, planning and clearing a walking path, and ensuring environment is continually managed to minimise risks to client and staff.					
4.	Introduces self to client and checks client identity.					
5.	Describes purpose of delegated task and seeks informed consent.					
6.	Positions self and client appropriately to complete task and ensure safety.					
7.	Delivers task effectively and safely as per delegated instructions and CTI procedure. a) Clearly explains and demonstrates task, checking client's understanding. b) Instructs the client on the planned walking route. c) Encourages client to complete sit-stand transfer and allows to gain their balance, with assistance from mobility aid if required. d) Confirms position of mobility aid and adjusts height, if required. e) Explains recommended walking pattern and use of mobility aid, if required. f) Explains recommended walking pattern for mobilising up and down					

EMBEDDING & SUSTAINING

- Expanding the training across services promotes the multidisciplinary role of Allied Health Assistants as the norm for CDHB
- Service analysis will allow for relevant modification/new inclusions to training programme
- Engagement of allied health professionals in competency assessment promotes their delegation practice – addressing barriers to change



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