



**Overview of the Victorian Allied Health
Assistant Workforce Recommendations
for the aged care sector**

The Victorian Allied Health Assistant Workforce Recommendations

“The Allied health professional will meet you first, work out your plan and your goals with you and then the Allied health assistant will help you reach those goals by seeing you regularly”

Consumer

Context

All Victorian consumers have the right to access safe and effective therapy and supports. Allied health assistants have a role in this, under the delegation and supervision of Allied health professionals. The optimal utilisation of Allied health assistants enables greater access to services for a larger number of consumers, whilst allowing Allied health professionals to complete more complex work.



Figure 1: The Department's Five Year Allied health assistant workforce objectives

Purpose

The Department of Health, in collaboration with Monash Health, have developed the Victorian Allied Health Assistant Workforce Recommendations. These aim to meet the Department's Allied health assistant workforce objectives (Figure 1). The recommendations support the optimal utilisation of Allied health assistants across the health, aged care and disability sector. They have been developed through broad consultation and are underpinned by the three core principles of respect, learn and grow. These eighteen recommendations and implementation resources cover the areas of pre-employment training, workforce planning and governance, consumer centred therapy and

supports, recruitment, orientation and induction, workplace training, professional development, and career pathways.

The Victorian aged care sector

In the aged care setting, certificate training is not a pre-requisite to be employed as an Allied health assistant. Combined with a lack of formal role definition, this leads to blurring of lines between Allied health assistants and other support workforces (i.e., leisure and lifestyle assistant, direct care worker or, personal care attendant).

There are rare current examples of aged care services directly employing Allied health assistants, however these roles, often under the delegation of nursing, align more closely with a leisure and lifestyle assistant role.

Allied health professionals are often brokered for residential and in-home aged care services. Some of these Allied health professionals use Allied health assistants to increase the reach of their service.

The national Sunbeam program, during the height of the COVID-19 response, highlighted opportunities for increased Allied health assistant utilisation in the delivery of Allied health services to those in residential aged care facilities impacted by COVID-19¹.

Outside of the residential aged care setting, opportunities exist within the Commonwealth Home Support Programme² (CHSP) and Home Care Package³ (HCP) programs to implement Allied health assistant workforces. Allied health assistant service in the CHSP and HCP offerings are predominately bundled into 'Allied Health Services' provided in community health settings.

The Victorian 'Better at Home initiative'⁴ provides another opportunity to utilise Allied health assistant workforces to deliver Allied health services to older Australians.

The Royal Commission into Aged Care Quality and Safety⁵ recommends increased access to evidence-based Allied health services for older Australians in residential and in-home settings. This provides an



impetus to optimally utilise the Allied health assistant role in the aged care sector.

Future opportunities to improve definition and utilisation of Allied health assistant workforces may also be identified as aged care services transition to new funding models.

It is clear that Allied health assistants provide an opportunity in aged care service delivery to broaden access to, and extend the reach of, Allied health therapy to older Australians.

Key messages for the aged care sector

- The proposed aged care reforms recommend increased access to evidence based Allied health service for older Australians.
- Allied health workforce shortages remain significant in the aged care sector and Allied health assistants pose part of the solution.

To increase utilisation of Allied health assistants:

- contemporary funding must be applied to improve access to Allied health services.
- the Allied health assistant role must be clearly delineated from other support workforces.
- Allied health assistants must work under the supervision and delegation of Allied health professionals within robust governance structures.
- consumers must receive clear and accurate information about their treating team inclusive of information about Allied health assistants and their role.



Recommendations to optimise the utilisation of Allied health assistants across Victoria

Seven key areas of utilisation are covered in the recommendations. While all of the eighteen recommendations are relevant to Allied health assistants, professionals and employers working in the disability sector, the most relevant recommendations are highlighted.



Pre-employment training

Recommendation 1

The Allied Health Assistance training package is regularly reviewed in consultation with the health, disability and aged care sectors at national and local Registered Training Organisation (RTO) level.

Recommendation 2

Incorporate an interview as requirement of the pre-training review for the Allied Health Assistance courses, including an assessment of communication, literacy and numeracy capabilities.

Recommendation 3

The Vocational Education and Training VET sector works collaboratively to ensure the certificate Allied Health Assistance course curriculum is consistent across providers.

Recommendation 4

The Vocational Education and Training VET sector increases clinical exposure and placement experience in pre-employment training.

Recommendation 5

The Vocational Education and Training VET sector provides clear messaging to prospective and enrolled Allied health assistant students as to the role of an Allied health assistant



Workforce planning and governance

Recommendation 6

Workplaces undertake robust workforce planning and redesign processes in relation to the Allied health assistant workforce.

Recommendation 7

Workplace governance structures define role delineation and delegation practices to ensure safe, effective evidence based therapy and supports.

Recommendation 8

The existing supervision and delegation frameworks support the training and practice of supervision and delegation between Allied health professionals and Allied health assistants.

Recommendation 9

Workplaces establish and maintain a culture of mutual respect, equal value and collaboration to promote continual learning and growth of Allied health assistants and the value of the role.



Consumer-centred therapy and supports

Recommendation 10

Consumers are provided with information about the roles of the treating team, and the benefits of having an Allied health assistant involved with their therapy and supports.





Recruitment

Recommendation 11

To improve consistency of graduate knowledge and ensure clear scope of practice parameters, the Certificate III and Certificate IV Allied Health Assistance training is the entry level qualification for all Allied health assistants in all sectors and where equivalence is required, it is transparent and defined clearly.

Recommendation 12

When recruiting Allied health assistants, the interview incorporates behavioural scenarios to evaluate candidate's aptitude and capability to provide safe and effective therapy and supports and appropriate attitudes to learning.



Orientation and induction

Recommendation 13

Workplace orientation for all new Allied health professionals and assistants provides clarity regarding the roles and responsibilities of the Allied health assistant and other professional staff to support a mutually respectful culture.



Workplace competency-based training

Recommendation 14

All competency-based training development aligns with the *Allied health: credentialing, competency and capability framework*.

Recommendation 15

Workplace competency-based training is complemented by working side-by-side with Allied health professionals to develop trusted working relationships and shared knowledge of roles.

Recommendation 16

Workplace competency based training and assessment is undertaken by supervisors who meet relevant requirements.

Recommendation 17

Competency attainment is recorded for transferability between roles and settings.



Professional Development

Recommendation 18

Allied health assistant learning needs are formally identified and addressed to instil life-long learning, maintain performance standards and support career development.

For more information

For full details of key consultation findings, activities a workplace might consider, aged care case examples, indicators of progress and resources, please refer to the full version of the Victorian Allied Health Assistants Workforce Recommendations available at: <<https://vichaworkforceproject.monashhealth.org>>.

Additionally further Allied health assistant workforce projects supported by the Department of Health are available at: <<https://www.health.vic.gov.au/allied-health-workforce/allied-health-assistant-workforce>>.

References:

1. Australian Government, *Allied Health Services in Residential Aged Care Facilities (RACFs) - COVID Allied Health Package*. 2021, Australian Government: Sydney.
2. Department of Health and Aged Care. *Commonwealth Home Support Programme (CHSP)*. 2022; Available from: <https://www.health.gov.au/initiatives-and-programs/commonwealth-home-support-programme-chsp>.
3. Department of Health and Aged Care. *Home Care Packages Program*. 2022; Available from: <https://www.health.gov.au/initiatives-and-programs/home-care-packages-program>.
4. Department of Health, *Better Care at Home initiative*. 2022, State Government of Victoria: Melbourne.
5. Royal Commission into Aged Care Quality and Safety, *Final Report - Volume 1 Summary and Recommendations*. 2021, Commonwealth of Australia

