

Communiqué

"A Way Forward for Allied Health"

Outcomes from the 7th National Allied Health Conference, Hobart,
Tasmania, 18-20th July 2007.

Background

The 7th National Allied Health Conference held in Hobart, Tasmania, 18-20 July 2007 was attended by over 300 allied health professionals (AHPs) from across Australia, New Zealand and the UK. They represented sectors including public and private health, state and federal health and administration, education, and rural and urban health practitioners.

Keynote speakers and presenters in concurrent sessions clearly articulated the successes and challenges in the delivery of quality allied health services. The challenges have been well documented over the past decade and whilst there has been progress in many areas, workforce challenges, equitable access to a broad range of quality allied health services and the lack of national allied health leadership remain as key challenges. Conference delegates highlighted the need to develop strategies as a way forward for allied health nationally.

A workshop held on the last day, 'Allied Health, Now and in the Future' summarised the outcomes of the three days of presentations, workshops and network collaborations and identified three (3) major issues as central to the current national allied health agenda .

The recommended strategies to address each issue are consistent with those developed to meet the relevant principles of the National Health Workforce Strategic Framework.

Major Allied Health Issues

Participants grouped and prioritised the top 3 issues as follows:

1. Allied health leadership
2. Allied health policy and politics
3. Workforce

A Way Forward

Workshop participants agreed that the first step would be to release a communiqué to conference participants and a wider audience.

Suggested strategies considered under each key issue are as follows:

1. Leadership

- The appointment of a National Chief Allied Health Officer to provide coordination and strategic leadership nationally. The location of this Officer is an important consideration as allied health professionals work across sectors within and outside of Health.
- Continue to develop and support existing allied health leadership including individual leaders and existing allied health organisations including Allied Health Professions Australia (AHPA), National Allied Health Advisors Committee (NAHAC) and Services for Australian Rural and Remote Allied Health (SARRAH).
- Develop national allied health networks across the domains of clinical practice, management, education and research.
- Adopt a data driven and health economics approach to planning allied health services and strengthen the evidence base for allied health outcomes.

2. Allied health policy and politics

- The development of a national leadership position and comprehensive evidence base for allied health outcomes will underpin a coordinated and strategic response to allied health service and workforce planning.
- Establish Allied Health representative positions on national policy making groups, including all relevant taskforces, working parties and committees convened by the Health Workforce Principal Committee (HWPC). In particular, allied health must have

direct representation on the HWPC working group considering health workforce reform. As a sector with a major contribution to the health and well-being of the community, allied health has positive contributions to make to planning at the national level.

- Develop and support cross jurisdictional communication and collaboration. Key examples include between the health and education sectors and between public and private health.
- Support the continued development of the national peak body Allied Health Professions Australia (AHPA). Future directions include the development of key portfolios within its structure, assistance with the preparation and distribution of position papers and engagement with allied health professionals in health, education and administration.
- Encourage cross jurisdictional adoption and utilisation of workforce categories as outlined in the "Framework for categorisation of the Australian Health Workforce" (SARRAH, 2007¹).

3. Workforce

- Clinical education is a key workforce issue. Assist the development and implementation of national strategies to improve the efficiency and effectiveness of clinical education.
- Support workforce changes including the development of new models of service delivery. Initial activity would include the collation of existing evidence on new service models in the Australian and other jurisdictions.
- Contribute to the development of emerging workforce roles. Investigate existing models, such as the UK Skills Escalator, as a means of promoting emerging workforce roles, increased workforce flexibility and skill transferability as well as life-long learning and increased career and skill development opportunities. As part of this, support the development of a national framework of career pathways for AHPs in clinical, management, education and research areas.
- Develop programs to support the retention of AHPs. Possible strategies include re-entry courses; targeted support to promote the exchange of allied health professionals between metropolitan and country areas, and

the implementation of more opportunities for lifelong learning and skill transferability within the workplace.

- Develop best practice guidelines for the management of allied health services. Guidelines should include the support of allied health managers (e.g. mentoring, education and training); the management of allied health professionals by non-allied health officers and the representation of Directors of Allied Health in clinical governance structures with direct input into policy and planning at organisational level.
- Develop and implement a national mentoring program for targeted groups eg new graduates, clinical educators/supervisors, early career researchers, and experienced AHPs transitioning to a new domain of practice.
- Develop a national scheme to reimburse Higher Education Contribution Scheme fees (or equivalent) of AHPs willing to working in designated areas of need: particular geographic locations and areas of community needs experiencing particular workforce shortages.

What Next

At the closing of the 7th National Allied Health Conference delegates were advised that this communiqué would be prepared and disseminated, following the 'Allied Health, Now and in the Future' Workshop.

The communiqué provides a basis for discussion within the allied health professions and to inform others of the agenda developed at the 7th National Allied Health Conference.

Conference participants are encouraged to circulate the communiqué to their colleagues to stimulate discussion and where appropriate utilise the document in discussion with relevant stakeholders.

Leaders in allied health policy and politics are also encouraged to use the contents of the document in supporting the way forward on a National Allied Health Agenda.

Assessment of progress against the National Allied Health Agenda at a workshop will be a focus of a workshop to be convened at the 8th National Allied Health Conference to be held in Canberra in August 2009.

1 Lowe S, Adams R, O'Kane A; 2007; A framework for the categorisation of the Australian Health Professional Workforce; SARRAH