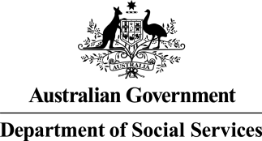


Overview: The Allied Health Disability Workforce Strategy and Action Plan

For the allied health workforce providing services for people with disability and developmental delay in regional, rural and remote areas of Tasmania

**June 2018**

**** Funded by the Australian Government Department of Social Services 

# Overall impact

People with disability and developmental delay with National Disability Insurance Scheme (NDIS) plans in regional, rural and remote Tasmania will have access to adequate and relevant therapy supports so they can achieve their goals.

# The outcomes of this plan

## Priority Area 1 – Adequate workforce supply

Allied health practitioners (AHPs) are attracted and retained to work with people with disability and developmental delay in Tasmania – particularly those providing services in regional, rural and remote areas

## Priority Area 2 – Optimal workforce utilisation

1. People with disability and developmental delay and relevant stakeholders in regional, rural and remote Tasmanian communities can access allied health services
2. Allied health service providers can operate sustainably under the NDIS

## Priority Area 3 - Strong workforce capability

The skills and knowledge of the allied health and disability support workforces are strengthened to better meet the therapy support needs of people with disability and developmental delay in regional, rural and remote Tasmania.

The outcomes will be achieved through implementation of a range of actions, which are detailed in the full workforce strategy and action plan. This plan was informed by extensive project stakeholder engagement activities, including regional and rural community forums and an allied health clinician forum. This broad document has been distilled into a range of activities that will be implemented, funding permitting, over the next 24 months.

# Overview of activities

## Activities to promote ongoing, high quality, evidence-based clinical practice (capability)

* Establish a multi-disciplinary Clinicians Working in the NDIS (CWIN) network. Activities may include:
  + Facilitating collaboration between AHP associations, National Disability Insurance Agency (NDIA) and relevant stakeholders to broaden the scope and reach of existing disability relevant continuing professional development (CPD), and to offer new support initiatives
  + Promotion of existing and relevant CPD and training opportunities and supports
  + Developing and offering a multi-disciplinary CPD calendar covering disability relevant topics
  + Holding regular regional networking events, incorporating CPD activities, facilitated networking, and inviting relevant guest speakers
  + Establishing an incentives/grant program for disability specific CPD access (available to NDIS registered AHPs)
  + Establishing a disability specific clinical mentor program to link newer AHPs with more experienced AHPs
  + Establishing community of practices for peer-to-peer information sharing and support, focussing on specialist areas within the NDIS such as behaviour supports and assistive technology

### Activities to support AHPs to transition to the NDIS (supply and capability)

* Support AHPs to establish viable businesses and strengthen their business capability by:
  + Sharing and supporting interpretations of information regarding demand for and supply of therapy supports in the NDIS market
  + Ensuring that Tasmanian health workforce needs assessments and associated initiatives take into account the NDIS and the needs of the allied health disability workforce
  + Offering CPD opportunities on business skills development
  + Linking AHPs with existing small business grants
  + Promoting NDIS business supports available nationally
  + Co-designing the concept and application of ‘co-ops’ for business and clinical relationships between sole traders or small providers
* Support AHPs to navigate NDIS processes, such as registration, certification, reporting and billing through:
  + Facilitating links with NDIA provider engagement teams and providing NDIS information, support and updates through the CWIN network
  + Developing and/or collating an information package titled ‘NDIS for AHPs’
  + Promote [National Disability Practitioners (NDP) membership](https://www.ndp.org.au/join-ndp) and access to the [sole traders hub](https://www.ndp.org.au/new-to-the-sector-tab/ndis-sole-traders) and the free [Allied Health Hub](https://www.ndp.org.au/allied-health-hub)
  + Facilitate the feedback of any issues that AHPs raise with navigating the NDIS to the NDIA, and to AHP associations to direct advocacy efforts
  + Offer training and information sessions to support providers (particularly sole traders and smaller providers) to prepare for auditing and certification processes related to NDIS registration, offer via CWIN network
  + Work in partnership with the NDIA to develop and offer training for AHPs on how to write successful reports within the NDIS, covering concepts such as ‘reasonable and necessary’ and information on the decision making tools that planners use

### Activities to attract AHPs and allied health businesses to work with people with disability and developmental delay (supply)

* Invite AHPs and allied health businesses that are not yet registered NDIS providers to participate in the CWIN network
  + Support them to understand and evaluate business opportunities under the NDIS by sharing and supporting interpretations of information regarding demand for and supply of therapy supports in the NDIS market
  + Develop and/or collate an information package titled ‘Introduction to working with people with NDIS plans’ and link with initiatives listed under ‘activities to support AHPs to transition to the NDIS’
* Increase the number of quality allied health student placements with NDIS-registered allied health providers by:
  + Investigating and sharing how students can provide funded supports through NDIS plans to increase their value to businesses
  + Investigating existing links and establishing relationships between relevant mainland universities, Tasmanian allied health NDIS providers and Tasmanian AHP association representatives
  + Developing and trialling an ‘incentives package’ for NDIS registered AHPs who support university student placements
  + Establishing and coordinating joint student placement opportunities between different types of providers (sole/small providers, larger providers, not-for-profit and government)
  + Promoting existing resources for students and supervising AHPs to ensure that placements are of high quality
* Establish a rotation program for grade one/new graduate AHPs employed by Tasmanian Health Service or large health services on the mainland, where employees rotate to a Tasmanian NDIS provider for a period of time during their contract
* Encourage Tasmanians to choose to study allied health by:
  + Working with AHP associations to promote allied health careers to school students through career advisors and expos
  + Investigating a collaboration between University of Tasmania (UTas) and mainland universities to offer preparation for in demand allied health professions
  + Offering scholarships to attend university in other states such as those previously available through Services for Australian Rural and Remote Allied Health (SARRAH)
* Investigate mechanisms to embed disability content in existing UTas allied health undergraduate degrees
* Establish an incentives program for new graduates and AHPs experienced in working with people with disability and developmental delay to move to Tasmania, including subsidising relocation and CPD costs
* Utilise the CWIN network to link AHPs looking for work with people with disability and developmental delay and Disability Service Organisations (DSOs) wishing to expand or establish an allied health workforce
* Develop a marketing strategy to attract AHPs to Tasmania and work within the NDIS encompassing the following activities:
  + Investigating opportunities for recruitment including pull factors, current barriers, methods used, successes
  + Inviting collaboration with relevant stakeholders
  + Marketing the Tasmanian lifestyle
  + Targeting events such as university career expos and allied health conferences – involve Tasmanian AHPs to share success stories

### Activities to strengthen knowledge of allied health amongst relevant stakeholders (utilisation)

* Develop and distribute accessible educational resources on the role of AHPs for use by people with disability and developmental delay and their carers and families, as well as NDIA planners, coordinators of supports (CoS), disability support workers (DSWs), and NDIS partner roles
* Deliver training/information seminars on the role of AHPs to the above stakeholders

### Activities to extend the role of DSWs and Allied Health Assistants (AHAs) in the delivery of therapy supports (utilisation)

* Share evaluation findings from the ‘Introduction to Allied Health skill set’ training delivered during the Allied Health Disability Workforce Project– incorporate findings and recommendations into future training initiatives
* Develop and model (using case studies) viable business and clinical practices utilising AHAs
* Continue to raise the issues of pricing and processes regarding the use of AHAs with the NDIA
* Offer training to AHPs working with people with disability and developmental delay in how to work more effectively with DSWs / AHAs

### Activities to support the use of telepractice (utilisation and capability)

* Offer CPD on telepractice, delivered by AHPs already successfully utilising telepractice for therapy delivery
* Offer small grants to allied health providers for purchase and implementation of training and infrastructure for telepractice
* Establish an information hub with freely accessible telepractice resources
* Promote investment in Information Technology (IT) hubs in regional and rural communities to support infrastructure and digital literacy

### Activities to strengthen connections between AHPs, local communities, and other NDIS roles (utilisation and capability)

* Invite CoS, NDIS partners and DSO representatives to CWIN regional network events
* Promote place-based information sharing and linkages by working with local communities to build on existing resources – integrate relevant information about NDIS providers in these
* Establish a pilot project in a rural community: trial a visiting services hub with space for visiting providers to use; link with IT support for telepractice and with local service providers and networks

### Activities to strengthen the delivery of positive behaviour supports (PBS) (capability)

* Deliver competency based training for AHPs in PBS planning, based on national Quality and Safeguarding competency framework
* Provide support for AHPs to access supervision and mentoring from experienced behaviour support practitioners, possibly through an online Community of Practice, based on the requirements of the Quality and Safeguarding framework
* Develop and deliver introductory information on PBS and reducing and eliminating restrictive interventions to participants, carers and families, and CoS, planners, NDIS partners and DSOs
* Deliver training for DSWs and AHAs in implementing PBS plans and reducing and eliminating restrictive interventions