

Can a culture change make Aged Care a more attractive rotation for junior Physiotherapy staff?

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Background

Poor culture was identified by the Aged Care (AC) Physiotherapy team leader through observation and informal feedback in February 2012. A staff satisfaction survey was conducted, followed by a team-building planning day. Themes from the feedback indicated lack of support for junior Physiotherapy staff, increasing caseload pressure, decreased access and subsequent poor relationships with the Multidisciplinary ward-based team members, and difficulty with patient transport to gym-based exercises.

Methods

As a result of the identified themes, a multiple strategy approach was undertaken. This included shifting Physiotherapy assessments and treatments from gym-based to ward-based interventions; caseload reallocation to relieve pressure on junior staff; allowing Physiotherapists to discharge patients when intervention is futile and no goals identified; and the allocation of patients' with increased complexity to senior staff, or to junior staff with extra support, including senior presence during family meetings.

AC Physiotherapy staff were re-surveyed using the original survey in March 2015. Results were collated with themes analysed. The participants were the AC Physiotherapy team, at a large metropolitan hospital in Melbourne, Australia (approximately fourteen Physiotherapists and Allied Health Assistants).

Results

Surveyed staff listed senior support and teamwork as the best features of working in the AC team. Caseload pressure was not listed as a positive or negative. Overall team culture and the relationship with ward staff has improved. Grade One rotation preferences selecting AC increased over the past three years.

Discussion

By addressing specific issues identified, there has been a positive cultural outcome from implementing changes driven by the AC Physiotherapy team. It is concluded that providing increased support to Junior Physiotherapy staff during AC rotations, particularly with patients and families grieving the loss of function and independence can have a positive impact on team culture. Junior staff also need guidance and support for discharging patients when intervention is futile.