

Rural remote generalist clinical requirements of allied health professions in Northern Australia

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Background: The development of rural and remote generalist workforce and service models in the allied health professions has been identified as a priority by health services in northern Australia. Limited information on the profession-specific and inter-professional (skill sharing) clinical task requirements of rural and remote practice has hampered the progress of this work. In 2013 and 2014, the Greater Northern Australia Regional Training Network (GNARTN) undertook a two stage project to address this information gap.

Methods: GNARTN funded five teams in northern Australia to undertake a comprehensive clinical task mapping and risk assessment process using the Calderdale Framework. Data was aggregated to produce profession-specific clinical task list for physiotherapy, social work, speech pathology, occupational therapy, podiatry and dietetics and nutrition. Tasks assessed as potentially appropriate to skill share were identified. Stage two of the project tested the skill share task list with experienced rural and remote professionals to examine validity and transferability of stage one findings. A modified nominal group technique method was employed.

Results:

- Multi-professional delivery of clinical tasks is common in existing rural and remote models of care
- 135 of the 139 skill shared tasks identified in stage one were assessed to be appropriate for skill sharing, assuming comprehensive training and clinical governance processes are implemented
- Skill sharing is generally proposed as a modest expansion of existing scope of delivery rather than substantial re-orientation of practitioners' skills sets
- Some resources are available to support skill sharing but gaps exist, particularly in clinical task training.

Discussion: The project demonstrated that multi-professional delivery of clinical tasks, including skill sharing, is an accepted component of rural and remote practice and there is support for expansion. Collective action is required to develop supporting resources and harmonise training and credentialing nationwide to ensure maximisation of benefits for clients, health professions and services.