Value of student placements

Professor Kathryn Refshauge
Context: a shared opportunity

– Need for increased allied health workforce:
  – 300,000 more AHPs needed in next decade (Harvard Business Review)
  – 6,200 PTs by 2022 (APA)
  – NDIS workforce needs to double by 2020 (Productivity Commission)

– Increasing areas of need, for example:
  – NDIS
  – Mental ill health
  – Obesity
  – Wellness

– 4:40 rule

– Increasing need for visibility of allied health
Can students bring value to our organisations?

New services eg
vestibular clinic

Silent disco

Physical health for people
with mental ill health
One current research project: South West Sydney

Co-design is essential. SWS LHD determined the initial problems:

- Bed demand, acuity and complexity continue to increase
- Challenge of delivering best practice care within time and resource constraints
- Demand for evidence based clinical placements to meet student education needs

Research Question
Can allied health student placement models enhance the delivery of evidence based care?

- Areas selected: subacute rehab, medical, respiratory, neurology, renal
- Duration: 14 to 30 weeks.

Tanya Thompson 2019
Integrated placement model

Principles:
- Embedded into clinical services
- Students as value add
  - enhance service provision and/or
  - Address a gap or problem
- Innovative placement education models
Results: patients’ experiences: (N=91)

Confidence & Trust

Did treatment help?

Tanya Thompson 2019
Results: clinical outcomes #NOF

“A patient with a Hip Fracture should mobilise at least once a day, everyday, after surgery’

(ACSQHC 2016)

NB: Average Length of stay:
Prior to student involvement = 15.8 days
With student involvement = 11.5 days

Tanya Thompson & Gillian Nisbet 2019