

HEALTH PROFESSIONAL WORK LEVEL STANDARDS BRIEF

Subject: Amendment to Health Professional Work Level Standards

To:

From: Karen Murphy, Allied Health Advisor, Strategy and Corporate

Purpose of Brief

To seek consultation on a proposed amendment to the ACT Government – Health Directorate Health Professional Work Level Standards. The purpose of the amendment is to introduce a clinical stream under the current Health Professional Level 5 to accommodate new extended scope physiotherapy roles.

Background

The ACT Government – Health Directorate, through the leadership of the Office of the Allied Health Advisor is currently undertaking an exciting two-phase project investigating and implementing extended scope practice roles for physiotherapists. This is a joint project with the International Centre for Allied Health Evidence (iCAHE) at the University of South Australia.

There is evidence in the National and International literature of the benefits of extending the scope of Physiotherapy. These benefits include a reduction in patient waiting times, a decrease in the length and number of "stops" in the patient journey and timely access to appropriate treatment and investigations.

Phase 1 (July 2008) – scoping project

Phase 1 (completed in July 2008) assessed the feasibility of introducing Extended Scope Physiotherapy roles within the ACT Government – Health Directorate. This research project reviewed national and international literature and used focus groups to scope local perceptions on Extended Scope Physiotherapy. This work identified five potential clinical areas for Extended Scope Physiotherapy roles – Orthopaedics, Emergency Department, Obstetrics, Gynaecology and Developmental Delay/Disability. The literature and local interviews indicated most support for roles in ED and Orthopaedics.

Phase 2 (February 2010 – ongoing) – design and implementation

Phase 2 of the project is being guided by a multidisciplinary steering committee with the support of iCAHE to ensure that a robust, evidence-based approach is taken. The design and implementation phase has been conducted in the clinical fields of the Emergency Department and Orthopaedic Outpatients:

Orthopaedic Outpatients

In November 2010 the project team introduced a new Multidisciplinary Triage clinic consisting of a Consultant Rheumatologist, an Orthopaedic Surgeon and a trainee extended scope Physiotherapist. Scope extension for a Physiotherapist in this position has included tasks such as injecting, prescribing







and ordering and interpreting images such as MRI, CT and X-ray. A separate Physiotherapy-only triage clinic was also initiated. Both of these clinics triage patients referred to Outpatient Orthopaedics.

Early evaluation of these clinics indicates that a physiotherapist working in this position is able to provide an appropriate level of care; they provide similar treatment to that of a Doctor and there is a trend towards reducing waiting times for Orthopaedic Outpatient appointments. Based on these findings, and with input from the Multidisciplinary team, it has been shown that the clinics provide a safe and efficient method of triaging Outpatient Orthopaedic referrals and as such these clinics have been the model of care for Outpatient Orthopaedics since January 2011.

Emergency Department

The pilot position in the Emergency Department has been designed as an extension of an existing primary contact physiotherapy role in the Emergency Department and a trial of a trainee extended scope Physiotherapist commenced in October 2011. Substantial work has been undertaken with the Emergency Department Medical team in designing the detail of this extension of practice. The development of this position has been underpinned by extensive literature reviews and an evidence based practice approach to ensure that safe, efficient and effective models of care are developed.

The project team has designed the new role to include tasks supported by the literature, such as limited prescribing, independent management of simple fractures, independent interpretation of X-rays and undertaking local anaesthetic injections for the management of small joint dislocations. The evidence-base suggests that this will impact on key performance indicators including length of stay and triage targets and also relieve Doctors for more complex cases.

Independent evaluation of the pilot roles has been rigorously planned in collaboration with iCAHE. This evaluation will determine the impact of the pilot roles on healthcare delivery including clinical, organisational and stakeholder outcomes, preliminary evaluation will commence in March 2012.

Training and Credentialing

Stringent education and credentialing criteria have been developed for these positions to ensure competent, safe and evidence-based practice. The Steering Committee support a two-pronged education and credentialing process. One arm comprising of a tertiary education program to be delivered by the University of Canberra, which will commence in February 2012. The modules available include pharmacology, injecting, radiology, a clinical practice module, pathology, advanced musculoskeletal assessment and management, evidence-based practice and leadership. A student can obtain a graduate certificate, a graduate diploma or a Professional Doctorate in extended scope practice dependant on the number of modules successfully completed.

The second arm involves support from the relevant Canberra Hospital departments, including, but not exclusive to the Emergency Department, Orthopaedics, Rheumatology and Radiology.

The project team in collaboration with iCAHE have recently published data and experiences relating to this project, these are available via the following links:

Morris J, Grimmer-Somers K, Kumar S, Murphy K, Gilmore L, Ashman B, Perera C, Vine K, Coulter C, 2011: "Effectiveness of a physiotherapy-initiated telephone triage of orthopaedic waitlist patients" research paper available in *Dovepress "Patient Related Outcome Measures"*







Gilmore L, Morris J, Murphy K, Grimmer-Somers K, Kumar S, 2011: "Skills escalator in allied health: a time for reflection and refocus" research paper available via *Dovepress "Journal of Healthcare Leadership"*

Stanhope J, Grimmer-Somers K, Milanese S, Kumar S, Morris J, 2012: "Extended scope physiotherapy roles for orthopedic outpatients: an update systematic review of the literature" research paper available in Dovepress "Journal of Multidisciplinary Healthcare"

Issues:

- An amendment to the work-level standard within the current Health Professional Classification is required to introduce this new role
- There is a requirement as laid out under the relevant enterprise agreement to consult with staff and Unions
- Consultation can be undertaken by writing to the Project Steering Committee with specific letters to the relevant Unions; APESMA, CPSU, HSU. These letters contain a detailed description of the draft proposal including draft work-level standards and draft duty statement and selection criteria.
- Then an invitation for the relevant Union representatives to attend a meeting of the project Executive Management Group on Wednesday 4 April at The Canberra Hospital, Building 24, Meeting Room 2 for the purposes of briefing them on the proposal and responding to any queries they may have.

Recommendation of the Extended Scope Physiotherapy Project Steering Committee and Relevant Unions

That you engage with members to review the attached draft amendment to the work level standards for their comment.



