
Allied Health Rural Generalist pathway model - Own grown workforce

Initiative Type

Education and Training

Service Improvement

Status

Deliver

Added

22 August 2019

Last updated

28 February 2020

URL

<https://test.clinicalexcellence.qld.gov.au/improvement-exchange/allied-health-rural-generalist-pathway-model-own-grown-workforce>

Summary

The Rural Allied & Community Health Team in Gayndah (Wide Bay HHS) has participated in state-wide trials since 2014 of the Allied Health Rural Generalist Pathway, including redesign of existing positions into Rural Development Pathway and Rural Generalist Training Positions, and implementation of service improvement projects to support the learning of the trainees and to provide tangible benefits for the local community. Simultaneous development and expansion of allied health assistant roles in Gayndah and outlying service centres and increased use of Telehealth is increasing access to allied health services across the region. **Partnerships** Key partnerships have been with our regional HHS 'hub' site and other rural services in Queensland – particularly to support the trainees and to access supervision and support. As we embed the Rural Generalist trainee positions we hope to work closely with our rural and regional education providers as part of our Grow our Own approach. The project has successfully navigated healthcare system challenges to deliver change, improvement and innovation in the health service and has presented at the Clinical Excellence Queensland Showcase 2019.

Key dates

Jun 2014

Jun 2021

Implementation sites

Wide Bay rural facilities: Gayndah, Monto, Eidsvold, Mundubbera, Biggenden, Childers, Gin Gin.

Partnerships

Key partnerships have been with our regional HHS 'hub' site and other rural services in Queensland – particularly to support the trainees and to access supervision and support. • As we embed the Rural Generalist trainee positions we hope to work closely w

Key Contacts

Lisa Baker

2108

paul.blee.hiu

Team Leader, Rural Allied & Community Health Service

Wide Bay Hospital and Health Service

(07) 4161 3575

Lisa.Baker@health.qld.gov.au

Aim

- Implement an “own grown” workforce approach that facilitates recruitment when unable to recruit to senior allied positions in our rural location.
- Attract base level allied health professionals to rural roles through a recognised training position.
- Support training in rural generalist clinical and service capabilities relevant to the local community and service setting, to enhance skills of early career allied health professionals.
- Increase access to allied health services for rural consumers in the Wide Bay HHS including expanding the range of services available “closer to home”.
- Improve the quality and safety, appropriateness, efficiency and sustainability of rural and remote allied health services.

Benefits

Workforce:

- The Gayndah team has had good recruitment pools for advertised rural generalist training positions, and strong engagement from existing staff to transition to training roles.
- A training focus is being embedded in the team at all levels - not just rural generalist positions.
- The Allied Health Rural Generalist Pathway is being embedded in the team structure and culture and is providing continued impetus for innovative service development strategies.

Service development:

- Service development initiatives have produced positive outcomes for clients including greater local access to services across the region.
- Allied health assistant roles have been created in seven communities and provide service continuity between outreach and Telehealth -supported allied health interventions. Service and clinical outcomes have been positive (see “Evaluation” section for data).

Background

Rural generalist health professionals possess, or are developing, broad clinical competencies in their profession, plus one or more areas of "depth" or "special skills" that align to a specific service priority or community need. Rural generalists provide services to a large range of consumers, for a wide breadth of clinical presentations, and usually work across the age spectrum and in a variety of healthcare delivery settings (inpatient, ambulatory care, community). Working in small teams and in inter-professional and inter-agency service models is common. This requires a range of non-clinical capabilities including collaborative practice, service evaluation and planning, leadership, education and training, community engagement and cultural safety.

Solutions Implemented

The Gayndah Allied Health Team have developed the following solutions to address workforce and service development aims:

- Nine (9) allied health professionals have been employed in the team in rural development pathway or rural generalist pathway positions since 2013. As at June 2019 five of seven HP3 positions in the team are designed as training roles.
- The designated rural generalist training positions attract funding from the Allied Health Professions' Office of Queensland (CEQ), which support post-graduate education fees for trainees and a range of workforce, training and service development initiatives in the team.
- Service development initiatives are oversighted by senior team members with rural generalist trainees undertaking key activities and contributing to the management of the project. This approach is supporting trainees to develop important professional skills in project management, service delivery and organisational awareness, evidence-based practice and evaluation; whilst enabling a small rural team to produce substantial local service improvement activity.
- Allied health assistants are providing a critical workforce foundation for telehealth and outreach in small rural facilities that is enabling the clinical capability of the site to expand with regard to a range of allied health services.
- Service development initiatives completed or in process include:
 - Service involvement in Telehealth dysphagia assessment research.
 - Telehealth-delivered, allied health assistant-supported falls and balance program.
 - Telehealth-delivered allied health pre-admission clinic for clients scheduled for knee and hip replacement.
 - "Rolling Rehab" service that has maximally utilised allied health assistants and a delegation-supported model of care to provide sub-acute inpatient and ambulatory care services in Gayndah and outlying areas.
 - Implementation of a new chronic condition focused psychologist including implementation of a new sleep clinic for people with chronic conditions.
 - Review of rural allied and community health service pathways and resources for low

Evaluation and Results

The Gayndah Allied Health Team evaluate local the service development initiatives and contribute to the state-wide evaluation of the Allied Health Rural Generalist Pathway. Service development evaluation has included:

- Clinical activity (occasions of service) delivered in Gayndah, rural sites, via telehealth and by allied health assistants
- Clinical outcome measures for falls and balance clinic, rolling rehab, telehealth dysphagia assessments
- Client satisfaction survey for telehealth falls and balance and preadmission clinic

Workforce outcomes:

- All rural generalist training position recruitment processes have been successful. Currently three of four previous trainees remain in rural or remote Queensland Health facilities, with one previous trainee practising in a regional Queensland Health service.
- All five current rural generalist trainees are undertaking post-graduate studies in rural generalist practice through James Cook University.

Service outcomes:

- Physiotherapy telehealth Occasions Of Service (OoS)/year: 2013 = 0; 2015 = 182; 2016 = 361, 2017 = 425, 2018 = 323 (noting from 2018 inpatient telehealth OoS is no longer recorded in the same physiotherapy data set).
- Waiting time snapshot for physiotherapy in 2014– 5/7 towns category 2 wait time within 2 weeks, 2019 5/8 towns within 2 weeks (whilst providing an additional town outreach clinic, and enhanced services including falls and balance group, rolling rehabilitation clinic, chronic pain clinic).
- Telehealth service delivery – research outcomes from dysphagia assessments via telehealth are pending publication but reflect significantly reduced wait times and cost savings.

Lessons Learnt

- An allied health assistant (AHA) and telehealth supported model of care for rural centres without a full resident allied health team is a viable and valuable option to enable the provision of care as close to clients' homes as possible. There is further scope to expand the model to other clinical areas and service settings.

-
- Resources and well established, documented processes enable new staff to adapt their practice to the telehealth/AHA-supported service model as a “business as usual” approach.
 - Links with hub site and work shadow opportunities along with designated training time are critical enablers for the support of graduates in early career training roles.
 - The Allied Health Rural Generalist Pathway provides a valuable structure for recruiting, and building our allied health workforce capacity for rural team sustainability.

Further Reading

[Queensland Health, Allied Health Telehealth Evaluation Resource Guide, 2016](#)

Queensland Health, Allied Health Telehealth Capacity Building Project: Completion Report , 2016

[Queensland Health. Allied Health Rural Generalist Training Positions Reference Guide, 2019](#)

[Queensland Health. Allied Health Rural Generalist Pathway Information Sheet, 2019](#)

Queensland Health. Allied Health Rural Generalist Training Positions 2014 Implementation Report, 2015

[Queensland Health. Allied Health Rural Generalist Training Positions 2015-16 Implementation Report, 2017](#)

[Queensland Health, Allied Health Rural and Remote Sub-acute Framework, 2017](#)

PDF saved 10/04/2025