Allied health assistant orientation workbook

Office of the Chief Allied Health Officer Revised December 2022



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| Employee name | |
|-----------------------|--|
| Employee number | |
| Discipline/Division | |
| Commencement date | |
| Induction provided by | |
| Designated supervisor | |

The allied health assistant orientation workbook provides support to workers commencing in an allied health assistant (AHA) role for the first time. It is designed to complement Hospital and Health Service (HHS) induction and local workplace orientation/ training. The workbook is for use by you and your manager, to ensure that you get the most out of your orientation and make a great start to your new position as an AHA at this facility.

Not all components of the workbook may be relevant to you. Your manager will be able to provide guidance on which elements are most applicable to you.

It is recommended that this workbook is completed within the first three months of your employment. Training items should be signed off by the trainer or your manager once competency has been achieved.

| Workbook start date | |
|---|-------------------|
| Workbook completion date | |
| Performance and development plan (PDP)* completed | |
| AHA signature | Manager signature |
| | |
| Date | Date |

This orientation workbook is to be used in association with the following documents:

- Allied Health Assistant Framework
- Delegation Framework allied health
- Guidelines for allied health assistants documenting in health records

Available at: https://www.health.qld.gov.au/ahwac/html/ahassist

^{*}May be referred to differently by each HHS, but referred to in this document as the performance and development planning process

The allied health assistant role

AHAs are important members of the healthcare team. They support the delivery of allied health services by undertaking tasks delegated to them by allied health professionals. Allied health professionals working with AHAs may include physiotherapists, occupational therapists, speech pathologists, dietitians, pharmacists, radiographers and podiatrists. An AHA may work with one or more of these professionals across a range of Queensland Health hospital and/or community settings.

As an AHA you have three primary responsibilities:

- 1. carry out delegated activities
- 2. take responsibility for developing services in a safe and efficient manner
- 3. participate in continuing professional development.

Tasks delegated to you by allied health professionals are varied and diverse. You may work in many different ways to provide a mixture of direct patient care and indirect (non-patient related) support. Table 1 includes some of the roles that can potentially be undertaken by AHAs.

Table 1. AHA roles (adapted from Victorian Department of Health, 2012)¹

| Direct patient care | Indirect patient care |
|---|--|
| Implementing and facilitating therapy programs designed by professionals | Ordering stock |
| Assisting professionals in the safe use of equipment | Assisting and coordinating services |
| Supporting and supervising clients with exercise programs – individually or in groups | Preparing and/or maintaining a safe clinical environment |
| Working with patients towards rehabilitation goals | Cleaning and maintenance of equipment |
| Assisting with mobility, gait and transfers | Recording activities and undertaking statistics |
| Gathering and documenting objective and subjective patient information for AHP assessment, diagnosis, care planning or evaluation of interventions. | Maintaining records of work undertaken with patients |
| Provision, fitting and training in the use of equipment | |



Your role may not include all of these activities. Please refer to your role description and duties list.

Scope of practice

As an AHA, you will perform a variety of direct patient care and indirect support tasks throughout the day. It is important that you are aware of what you can and cannot do as an AHA. This is called your scope of practice.

You should only carry out tasks that are:

- within your scope of practice
- delegated to you by an allied health professional
- included in your duties list
- within your skill set (i.e. you have the skills and confidence to do the task).

If you are unsure whether a task fits within your scope of practice, discuss this with your manager. It is important to note that assistants with more experience, or those at higher levels, may be able to carry out tasks that are outside of your scope. However, as you gain experience and training, your scope of practice will grow.

Introduction and orientation to your workplace

Within your first three months of work, you will gradually be introduced to the workplace, facilities and resources. Ask about things you haven't been shown. Use the checklist provided in Appendix 1 to tick off items as you are orientated to them.

If you have never worked in a healthcare team environment before, your manager and/or supervisor will introduce you to the ways of working in a multidisciplinary team. Effective healthcare teams typically display:

- mutual respect and value for individual contribution
- clearly defined roles and responsibilities
- · guidelines to support the way the team undertakes its work
- clearly defined levels of accountability
- a belief that collaborative practice and partnerships will ensure high quality and safe patient care.²

Within three months of commencing employment, every employee is required to undertake the following:

- Queensland Health orientation
- · local orientation and induction
- mandatory training.

Please refer to Tables 2-4 for a list of available training. Please note that not all training requirements listed may be relevant to your role.

Your manager will advise you of the appropriate training required and assist you to book dates/times to undertake this training (if necessary). It will be your responsibility to communicate these training dates to your manager and co-workers. This will assist planning to minimise the disruption to patient/client care.

It is essential that accurate records of this training are maintained by each HHS. All allied health employees are required to:

- keep a copy of evidence of completion of training including certificates (where available) and any email confirmation
- copy your manager into any electronic evidence required by your HHS on your completion of training requirements.

Table 2 Training that does not require annual refresher and is not site-specific

| Training | Training access | Duration |
|---|---|--------------|
| Clinical documentation | Online https://www.health.qld.gov.au/ahwac/html/ahst | 15 mins |
| Clinicalhandover | Online https://www.health.qld.gov.au/ahwac/html/ahst | 15 mins |
| Consumer engagement | Online https://www.health.qld.gov.au/ahwac/html/ahst | 10 mins |
| Cultural awareness – Aboriginal and Torres Strait Islander cultural practice program | Face-to-face | 4-6 hours |
| Driver Safety/Driver Safety Country & 4WD. [NB: Only required for staff who drive Queensland Government vehicles] | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 20 mins |
| Ethics, integrity and accountability – includes Code of Conduct | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 30 – 45 mins |
| Fatigue Risk Management: a guide for employees | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | |
| Hand hygiene and infection control | Online https://www.health.qld.gov.au/ahwac/html/ahst | 30 - 45 mins |
| Chemical Safety and Compliance - Hazardous Chemical Safety | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 10 mins |
| Health and safety orientation | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 10 mins |
| Informed consent | Online https://www.health.qld.gov.au/ahwac/html/ahst | 10 mins |

| Training | Training access | Duration |
|---|--|----------|
| Occupational Violence Prevention Fundamentals | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 20 mins |
| Patient identification and procedure matching | Online https://www.health.qld.gov.au/ahwac/html/ahst | 5 mins |
| Patient rights | Online https://www.health.qld.gov.au/ahwac/html/ahst | 7 mins |
| Queensland Health orientation | Online(ilearn) https://ilearncatalogue.health.qld.gov.au/ | 20 mins |
| The high risk patient | Online https://www.health.qld.gov.au/ahwac/html/ahst | 13 mins |
| Wastemanagement | Online(ilearn) https://ilearncatalogue.health.qld.gov.au/ | 10 mins |
| Workplace harassment | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 6 mins |

Table 3 Training that requires annual refresher and is not site-specific

| Training | Training access | Duration |
|---|--|--|
| Aggressive behaviour management (ABM) | Face-to-face | 4-8 hours |
| | Type of training and frequency for updates dependent upon risk assessment: | |
| | 4 hour face-to-face ABM awareness training is mandatory for staff who may deal with minimal patient/visitor aggression | |
| | 8 hours ABM verbal de-escalation training is required for staff who may deal with verbally aggressive patients/visitors. In some HHS, may also apply where the | |
| Child abuse and neglect | Please complete process as detailed at: https://www.health.qld.gov.au/ahwac/html/ahst | Capability self- assessment tool must be completed followed by Education Module if required. |
| Prevention and Management of Musculoskeletal Disorders (MSD) | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 35 minutes |
| Ergonomics patient handling | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 3 modules (approximately 30 |
| First response evacuation training: | Online (ilearn) https://ilearncatalogue.health.qld.gov.au/ | 20 mins |
| First response evacuation instructions (FREI) | | |
| Fire evacuation program | | |

Table 4 Site-specific training

| Training | Trainingoptions | Notes |
|---|------------------------------|--|
| Corporateorientation | Face-to-face provided by HHS | Once only – to be completed within 1-3 months of employment |
| Fire safety – General evacuation instructions (GEI) | Face-to-face provided by HHS | To be completed within 2 days of employment. |
| Hazardous chemicals [Required based on a risk assessment] | Face-to-face provided by HHS | To be completed within 2 days of employment, plus if any new hazardous chemicals introduced to the immediate area. |
| How to report a workplace incident | Face-to-face provided by HHS | To be completed within 2 days of employment |
| Local emergency procedures | Face-to-face provided by HHS | To be completed within 2 days of employment |
| Manual handling [Required based on a risk assessment] | Face-to-face provided by HHS | To be completed within 2 days of employment. Arranged at a departmental level (for staff who do not complete patient handling but do complete manual handling) |
| Patient handling [Required based on a risk assessment] | Face-to-face provided by HHS | To be completed within 2 days of employment. Arranged at a departmental level (for professions who are involved in |
| Site-specific orientation | Face-to-face provided by HHS | To be completed within 2 days of employment. |
| Wastemanagement | Face-to-face provided by HHS | To be completed within 2 days of employment. |

NB: Depending on your role, workplace, service and HHS, you may also be required to complete training in basic life support and recognition and management of the deteriorating patient.

Work unit-specific training

To enable you to perform all aspects of your role, you may need to complete additional work unit-specific training. Your line manager will advise you on which training to undertake.

Table 5 Work unit-specific training

| Training | Signature on completion | Date |
|---|-------------------------|------|
| Accessing the computer and email | | |
| Orientation to computer resources: | | |
| Internet | | |
| • QHEPS | | |
| Clinical Knowledge Network (CKN) | | |
| Departmental resources | | |
| Appointment booking systems | | |
| Data collection application/processes | | |
| Ordering stationary, resources | | |
| Management of equipment maintenance and repairs | | |
| Health record management | | |
| Guidelines for allied health assistants documenting in health records | | |
| Driving government vehicles (e.g. booking, recording and refueling) | | |
| Home visiting procedures | | |
| Other [Add as required] e.g. food preparation and handling | | |

Access details

Use this worksheet to record your username/login details for the various applications that you will need to access. Remember not to record your passwords here. Do not share your passwords with others.

| Application | Username/login |
|-------------------------|--------------------------------------|
| Novel | |
| Outlook (email) address | firstname.lastname@health.qld.gov.au |
| iLearn | |
| | |
| | |

Legal and ethical responsibilities

As an AHA you, like all other health professionals and support workers, have a number of ethical and legal responsibilities. Many of these have specific policies, which would have been covered by your manager when discussing the previous sections. The information below provides an overview of key legal and ethical responsibilities by which you are required to abide.

Informed consent

Patients have the right to make decisions about their care and treatment. Your delegating health professional/s will ensure that the patient has been informed about the reasons for treatment, the types of treatment and the expected outcome, and that the patient has provided consent for this treatment. However, each intervention requires patient consent and you need to feel confident that the patient has agreed to participate in the intervention. Discuss this further with your supervisor if you want to clarify anything.

Refer to the Guide for informed decision-making in healthcare available at: https://www.health.gld.gov.au/consent, for further information.

Privacy and confidentiality

Patient information is personal and private. Confidentiality is an important part of health service provision. Everyone has a right to confidentiality when they access health services. In your role you will be entrusted with confidential information about your patients.

You are not to disclose confidential information of any nature to any person, except when sharing information with other health professionals involved in the care of the patient.



Additional information is available at: https://www.health.qld.gov.au/system-governance/records-privacy/health-personal.

Documentation

Documentation and record keeping is an important component of health care. Whilst the nature and style of reporting may vary between people and organisations, the recording of relevant facts, results and observations relating to the patient's health is essential. Your manager will provide you with guidelines for what you need to document, and how you should do so correctly in medical notes or patient files.

Refer to the *Guidelines for allied health assistants documenting in health* records available at: https://www.health.gld.gov.au/ data/assets/pdf file/0029/144866/ahadocguide.pdf.

Duty of care

Duty of care is defined as the legal obligation to avoid causing harm to another person; especially through negligence (i.e. without the exercise of reasonable care). Duty of care requires that you do your utmost to ensure the safety of your patient/clients, yourself and your work colleagues. You must comply with occupational health and safety requirements and report any potential hazards or unsafe practice.

Harassment, bullying and discrimination

Everyone is entitled to a harassment and bullying free workplace. Behaviours involving bullying, harassment and discrimination pose a risk of injury or harm to employees and will not be tolerated. You have a responsibility to ensure that you do not encourage or participate in bullying, harassing or discriminatory behaviour. If you observe any of these behaviours, you should report them to your manager.

Delegation of tasks

In your job, you may be working with many different allied health professionals. The person/s allocating tasks to you are called the 'delegating' allied health professional/s. Delegation refers to the decisions made by the allied health professional as to tasks that you can complete. Their decision to delegate a task to you should consider:

- whether the task is within your scope of practice
- if you have the appropriate skill, competence and confidence to do the task
- what supports you require to do the task (e.g. appropriate communication and monitoring systems) and if these are available
- the complexity of the patient and the task.

You have a very important role to play in delegation. It is important for you to let the delegating allied health professional know if you are not comfortable or have concerns in accepting the delegated task. This may be for a number of reasons e.g. you are not confident or that you do not feel you have the skills to do the task.

Training in delegation practices facilitates a better understanding of models of care incorporating assistants and the roles, responsibilities and relationships within these models. It also provides a solid basis for effective teamwork focussed on ensuring quality care and patient safety.

Additional information on delegation and resources for training in delegation practice are available at: https://www.health.gld.gov.au/ahwac/html/ahassist.

Organising your work

As an AHA you will be provided a range of tasks, potentially from different allied health professionals, which you will need to complete throughout the day.

Allied health professionals typically organise their day, week, month and even year using a timetable. A timetable helps them allocate time to all the jobs they need to do and people they need to see.

Timetables are also used by AHAs. A timetable can reflect the time allocated:

- to prepare for an activity
- for administrative tasks (e.g. writing in health records, room preparation)
- with a particular allied health professional
- in a particular location
- to see individual patients/clients
- to running groups
- for daily tasks (e.g. entering statistics), weekly tasks (e.g. sending letters) or monthly tasks (e.g. ordering stationary)
- for travel
- for breaks (e.g. lunch).

Your manager will help you set up a timetable for your days at work. This may be available in some service as an electronic diary.

Your timetable during orientation may look a little different to your everyday timetable as more time initially will be spent letting you observe sessions, talk to team members, become familiar with the health service and attend training. As you become more familiar with the role you may be asked to take responsibility for your timetable and determining where and how to allocate your time.

Regardless of how you access your timetable, you will be required to record activity data on the tasks you perform. Training in activity data collection will be arranged by your manager.

Ongoing learning and development

As an AHA, there are many roles and tasks that you will be expected to perform. You may start the job with skills to do some of them but need training to be able to do others.

The first step is to set up a learning development plan to help you to quickly learn the skills you need to be able to do your job. Refer to Appendix 2 for an example learning development plan.

All staff employed for at least three months must undertake a written PDP agreement with their manager. This helps to guide skill and knowledge development as well as direct service improvement activities in line with the departmental and service business plans. This should be completed jointly by you and your manager. It is reviewed on a regular, pre-determined basis; however this timeframe will vary between work areas and is dependent on experience, tasks and goals.

There are lots of different ways that skill development can occur including:

- enrolling in a TAFE or other training course
- watching and listening to colleagues (e.g. other AHAs, allied health professionals)
- attending HHS training (e.g. manual handling, basic life support, fire and safety)
- observing and then repeating a skill demonstrated by someone else (where appropriate)
- reading books or articles
- completing self-directed learning packages or online learning modules
- direct supervision sessions with feedback from the allied health professional.

Don't forget to ask questions and discuss things you have seen and done – just be sure to maintain confidentiality while doing so.

Clinical supervision

The primary intention of clinical supervision is to enhance your work-related knowledge and skills. Whilst you should identify areas you would like to enhance, you will also be guided and facilitated by your supervisor. If you are undertaking formal training such as the Certificate IV in Allied Health Assistance, your supervisor will help you through this process. Refer to Appendix 3 for an example of a supervision preparation/prompt sheet.

For more information, please refer to The Allied Health Resources page on the Cunningham Centre website for a number of activity guides and reference tools on supervision: https://www.health.qld.gov.au/cunninghamcentre/html/allied health

Life-long learning

Learning is ongoing and will continue well after the first three months, in fact you will continue to learn and develop throughout your career. This booklet is focused on the initial three months (orientation stage).

Appendix 1 Example checklist

| Within first week | | | | |
|-------------------|--|------------------------|---|--|
| Administration | | Information management | | |
| | Stationary Clerical assistance Medical record forms | | Medical records policies and systems Collating patient charts/client files | |
| Coi | nmunication | Info | ormation technology (IT) | |
| | Expectations of staff Key phone numbers Paging Accessing porterage staff Interpreter service bookings Email access Correspondence Notice boards Newsletters Meetings | | Computer access Help Desk/IT support Email Intranet and internet Shared drive/s | |
| Dir | ectories | Pol | icy | |
| | Local HHS directory Community services directory Key contact lists | | Key policies and procedures Departmental procedure manual | |
| Fac | ilities | Res | sources | |
| | Office/desk/workstation Office keys/access systems Site orientation Parking, toilets, staff room, cafeteria Security procedures Duress/emergency alarms Fire safety resources Evacuation points Staff fitness facilities, childcare etc. | | | |
| Hui | man resources (HR) | Wo | rkplace Health & Safety | |
| | Contract – working hours Role description and duty statement Local HR procedures (e.g. leave applications, TOIL, overtime, weekend roster, time sheets/rosters) Payroll issues Dress code/uniform requirements Allowance claims | | | |
| | Security ID Superannuation Salary packaging Union membership Immunisation status | | | |

| | Driver's licence | | |
|--------------------|--------------------------------------|---------------------------|---------------------------------|
| Within first month | | Within first three months | |
| Management | | Self | f-care |
| | Local plans (strategic, operational) | | Employee Assistance Program |
| | Management structure | Con | sumers |
| | Reporting requirements | Con | sumers |
| | Communication channels | | Complaints management procedure |

Appendix 2 Example learning and development plan

| Learning & Development Plan | | | |
|------------------------------------|------------------------------------|-------------------------------------|----------------|
| Identified area(s) for development | Action plan to support development | Evidence to demonstrate development | Date of review |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| Sign and date when achieved | Signature and name of AHA | | |
| | Signature of assessor | | |
| | Date of review | | |

Appendix 3 Example supervision session prompt sheet

| What have I achieved/done well? | |
|---|--|
| What have I learned? | |
| What things about my job are hard or challenging? | |
| What can I do (what needs to be done) to improve the job that I do? | |
| What skills do I need to learn or would like to learn? | |
| What other things would I like to do in my role? | |
| What would I like to achieve in the future? | |

References

- 1. Workforce Leadership and Development Branch, Health Victoria, Victorian Government. (2012). Supervision and Delegation Framework for allied health assistants. Retrieved from Health Victoria, Allied Health Assistants website: https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Supervision-and-delegation-framework-for-allied-health-assistants
- 2. National Cancer Action Team, National Health Service, UK Government. (2010). The characteristics of an effective multidisciplinary team. Retrieved from NHS website: www.ncin.org.uk/view?rid=136