



Government
of South Australia

Southern Adelaide
Health Service



FLINDERS
MEDICAL
CENTRE

Workforce Development: Aboriginal Traineeships in an Acute Allied Health Setting

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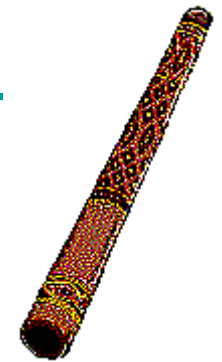


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Background

- Build new workforce roles in Health due to national skills shortage and ageing workforce.
- Health care with cultural knowledge and sensitivity limited for the Aboriginal population.
- Certificate III in Health Service Assistance (Allied Health Assistant) – Health Training Package Framework
- Entry point into the health system for young people with view to University training.
- Increase ratio of Aboriginal staff within FMC.
- Took time to establish program to ensure success!



The program and its challenges

- Development of clear duties for the Trainees.
- Ensuring appropriate cross-cultural and supervisory training for Allied Health Workers.
- Provision of comprehensive orientation to the hospital setting.
- Ongoing mentorship
- Links to the vocational agency (TAFE)
- Order of subjects to be undertaken.



Building the role

- Range of duties depending on the department Trainee was being placed in.
- Structure of role included an orientation month and two months in each department
- Final month is a multi-disciplinary work environment to consolidate learning.
- Considerable time spent discussing job duties and functions of the role.
- Consultation with all involved essential to success.



Support for the Trainees

- Multi-faceted mentoring systems both from internal and external sources:

Allied Health

Vocational Institution

Recruitment Agency

Human Resources (Male)



- Links established to Karpa Ngarrentendi (FMC Aboriginal Health Unit) for cultural support and closer contact with Aboriginal inpatients.



Learnings – Success & Shortcomings

SHORTCOMINGS

- Two trainees recruited to support each other – different people and different learning abilities and styles
- More robust recruitment program including reference checking to ensure suitability to role.
- Male mentor available.
- Course not offered in Adelaide, therefore studies undertaken in a remote and self-directed fashion.



Learnings – Success & Shortcomings

- Structure of the program and time initially taken to set it up and consult.
- Structured orientation program.
- Structured training of Allied Health staff
- Targeted and pragmatic cultural awareness training.
- Mentorship program.
- Cultural links with Aboriginal Health Unit.



Evaluation - staff

- Induction/orientation program helpful 100% but could be shorter
- Support systems beneficial
- Timing of subjects and work experience not always perfect
- Benefits to departments further down the track as the trainees are well oriented and settled
- Support needed with applying for positions at completion
- Success of programme will help future recruitment



Evaluation - trainees

One found short periods in departments difficult but other like them.

One found time allocation to study problematic, the other said this was fine

One found support systems beneficial, the other support not enough

Part of traineeship most rewarding and most challenging - Hands on experience



Future Plans

- Broaden and strengthen the Allied Health Assistant role within FMC.
- Retention of Trainees in ongoing positions.
- Develop strong links between the Aboriginal communities and the acute sector.
- Clear articulation between TAFE and University sectors.
- Aboriginal and non-indigenous staff working side by side to enhance patient outcomes.
- Bridge the gap between the health of Aboriginal and non-indigenous Australians.
- FMC committed to a further program in 2008.



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