



Working Collaboratively in the Development of a Credentialling Program for Allied Health Professionals

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Credentialling: why do it?

- **Underpinned by acute hospital commitment to safety & quality in patient care**
- **Demonstration of allied health clinical competence**
- **Links with professional development processes**
- **Involves staff in peer review and QI activities**

Credentialling aims to:

- Reduce risks in delivery of safe patient care
- Ensure consistency in patient care and management
- Align service delivery with evidence based practice
- Enhance staff satisfaction and confidence through demonstration of competency in practice
- Promote shared management/staff understanding of roles and responsibilities
- Develop and apply transparent processes to evaluate competencies and identify training needs

Credentiailling project involved:

- **Project plan (2003), including risk management & staff communication strategies**
- **Development of generic process and template for all allied health disciplines and levels**
- **Trial of model in two services (SW & PT)**

Title

Industrial award level	Clinical care <ul style="list-style-type: none"> • Competencies • Case management 	Teaching and training <ul style="list-style-type: none"> • Inservices • Teaching 	Clinical services management <ul style="list-style-type: none"> • CPE points 	Research	Postgraduate qualification
Level one and two: Practitioner	Secondary tasks	Secondary tasks	Primary tasks	Primary tasks	Primary tasks
Level three and four: Practitioner Specialist Deputy manager	Secondary tasks	Secondary tasks	Primary tasks	Secondary tasks	Primary tasks
Level five: Manager	Primary tasks	Primary tasks	Secondary tasks	Primary tasks	Primary tasks

Primary tasks

Secondary tasks

Why Social Work and Physiotherapy?

- **Two ends of ‘concreteness’ spectrum in tangible, concrete skills**
- **SW interest in defining tasks and skills of practice in acute health care**
- **PT requirement to prepare new graduates for safe practice across hospital units**

The Physiotherapy Approach

- Linked with necessity to ensure safe practice by new graduates in acute care units & participants in on call roster
- ‘Dovetailed’ with award of education & training grant to develop self learning packages.
- Focus on skills/knowledge needed in specific practice areas
- Resulted in workbooks used for learning & assessment
- Aim to complete in first year of employment, ideally in probation period
- Positive reports of enhanced confidence to work in areas that are ‘scary’, ‘intimidating’, stressful

Developing the credentialling process in social work

- **Getting down to basics in a brainstorming process involving staff at all levels**
- **Systematic deconstruction of casework process**
- **Identification of other key activities and associated skills in acute care health practice**

Competency	Indicator	Meets	Does not yet meet	Proposed response linked to professional development plan
Contact with patient	Checks arrangements for contact, including location, constraints on privacy, involvement of significant others			
	Confirms consent for contact or plans introductory strategies when consent has not been obtained (for example, situations of suspected child or elder abuse)			
	Uses appropriate introductory techniques, including clear statement of name and position			
	Clarifies patient/significant other's understanding of purpose of referral			
	Explains likely format and progress of interview			

Competency	Indicator	Meets	Does not yet meet	Proposed response linked to professional development plan
Response to referral	<ul style="list-style-type: none"> • Consults with referring person 			
	<ul style="list-style-type: none"> • Reads patient's notes 			
	<ul style="list-style-type: none"> • Clarifies purpose of referral 			
	<ul style="list-style-type: none"> • Assesses appropriateness of referral 			
	<ul style="list-style-type: none"> • Anticipates likely knowledge, skills, contextual content relevant to referral 			
	<ul style="list-style-type: none"> • Anticipates likely obstacles to achieving objective/s of referral 			
	<ul style="list-style-type: none"> • Prioritises response 			

Credentialling the process: how could we be sure we're on the right track?

- Using the wisdom and experience of social workers with diverse years and fields of practice
- Cross referencing with current texts
- Reference to AASW documents: *Practice Standards (2003)* & *Competencies (1999)*
- Reference to accreditation & competency documents for other disciplines

Criteria for credentialling process

- **User friendly**
- **Incorporate activities and processes already undertaken by staff**
- **Integrate with professional supervision and performance review and development processes**

Keeping the project and implementation on track – finding time for another task

- **Engaging with a supportive, focused project officer**
- **Working across disciplines: healthy competition to meet targets and time frames**
- **Involving staff to promote a sense of ownership**
- **Keeping the process on agendas of relevant business meetings**

Ongoing benefits

- **Sense of satisfaction on completion**
- **Gives focus and direction to reflective practice**
- **Encourages concrete thought and articulation for disciplines with less precise skills**
- **Promotes integrity of allied health services' commitment to safe practice**
- **Positive role model for students**

Challenges

- **Updating the program to incorporate changes**
- **Meeting targets for completion in a busy environment**