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From “Allied Who?”to Allied Wealth

Natalie Sullivan

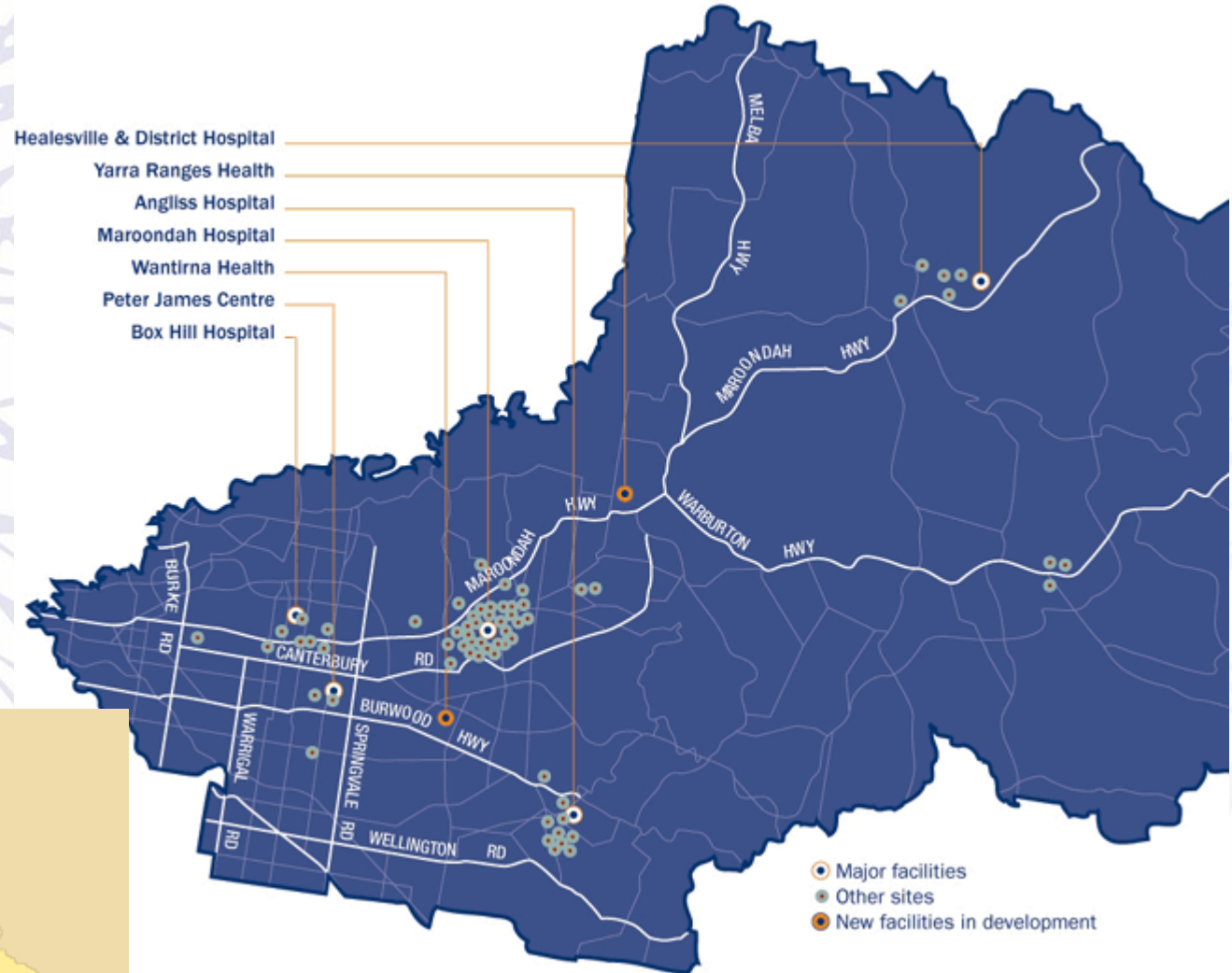
Chief Allied Health Officer
Eastern Health



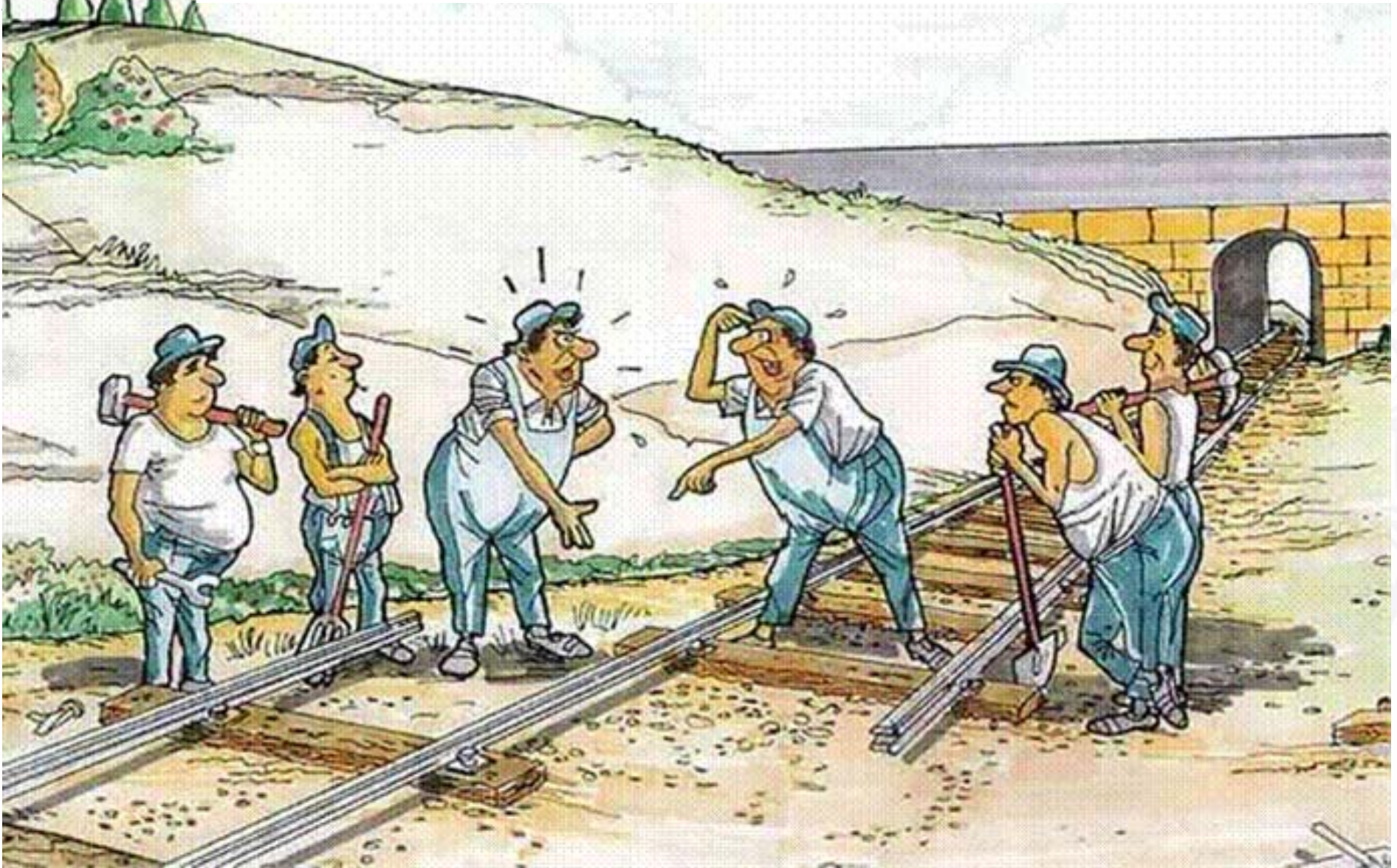
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Eastern Health

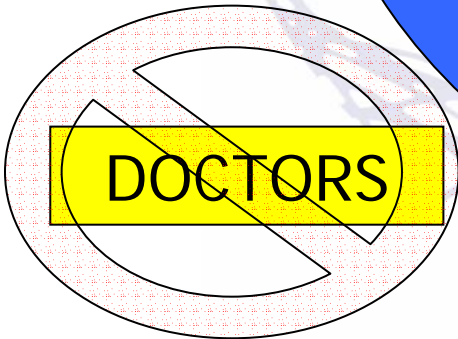
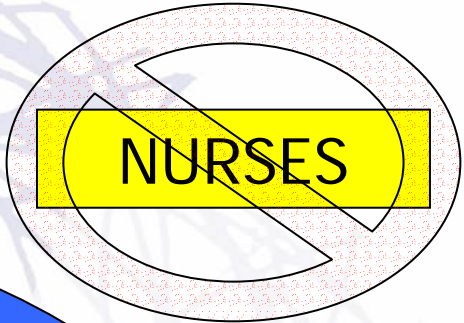
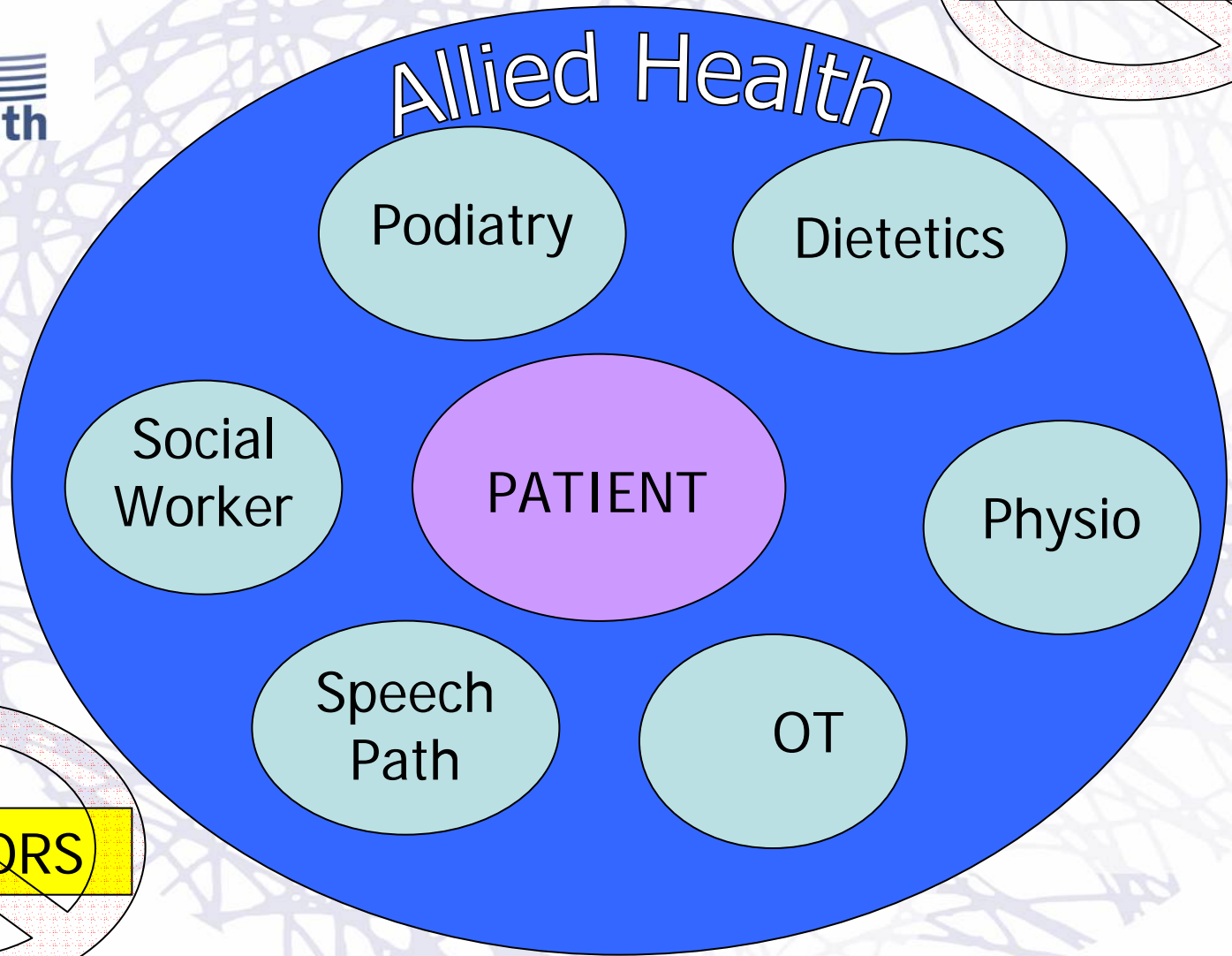


What do you mean we have to work together?





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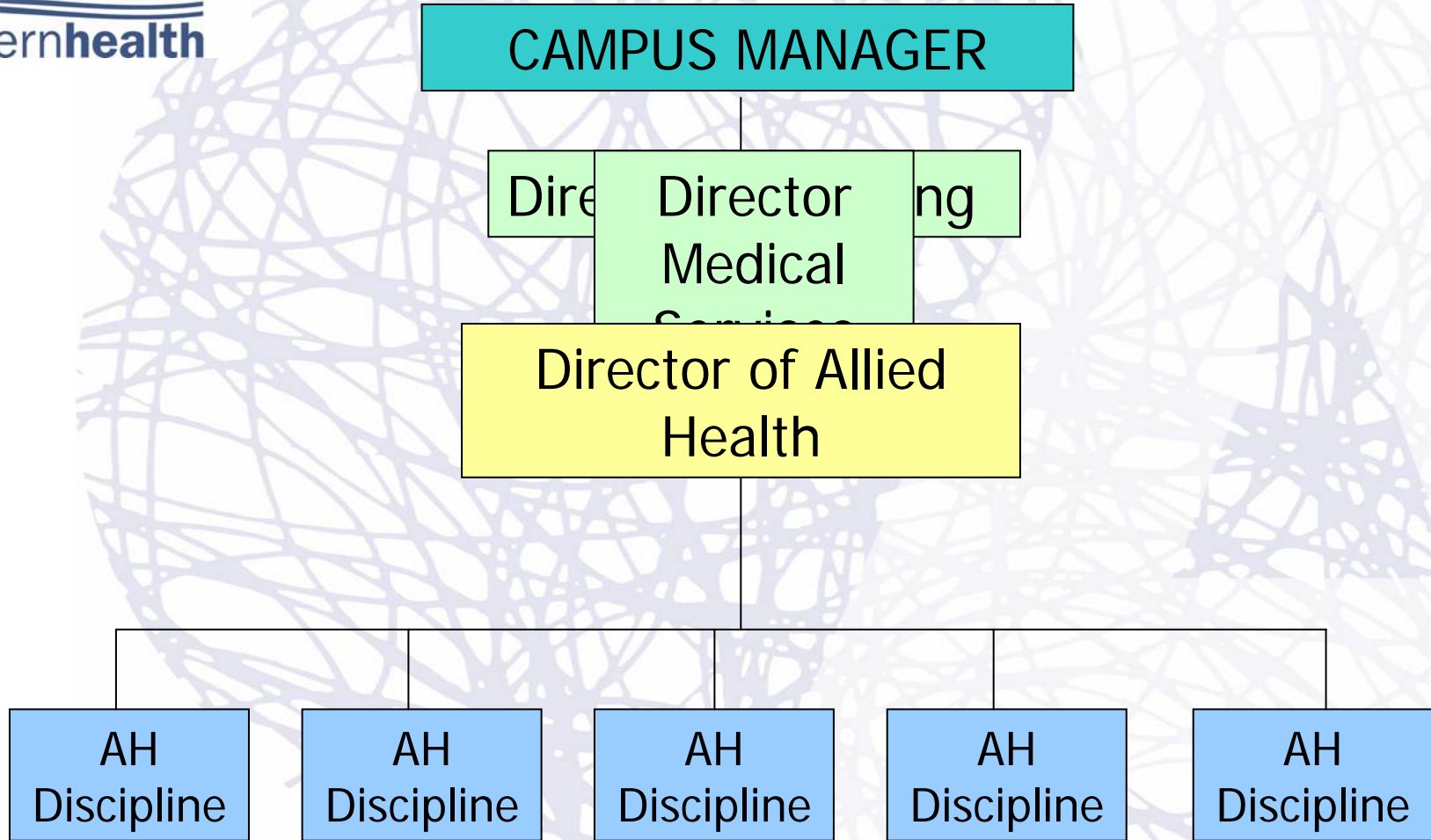




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Organisational Structures



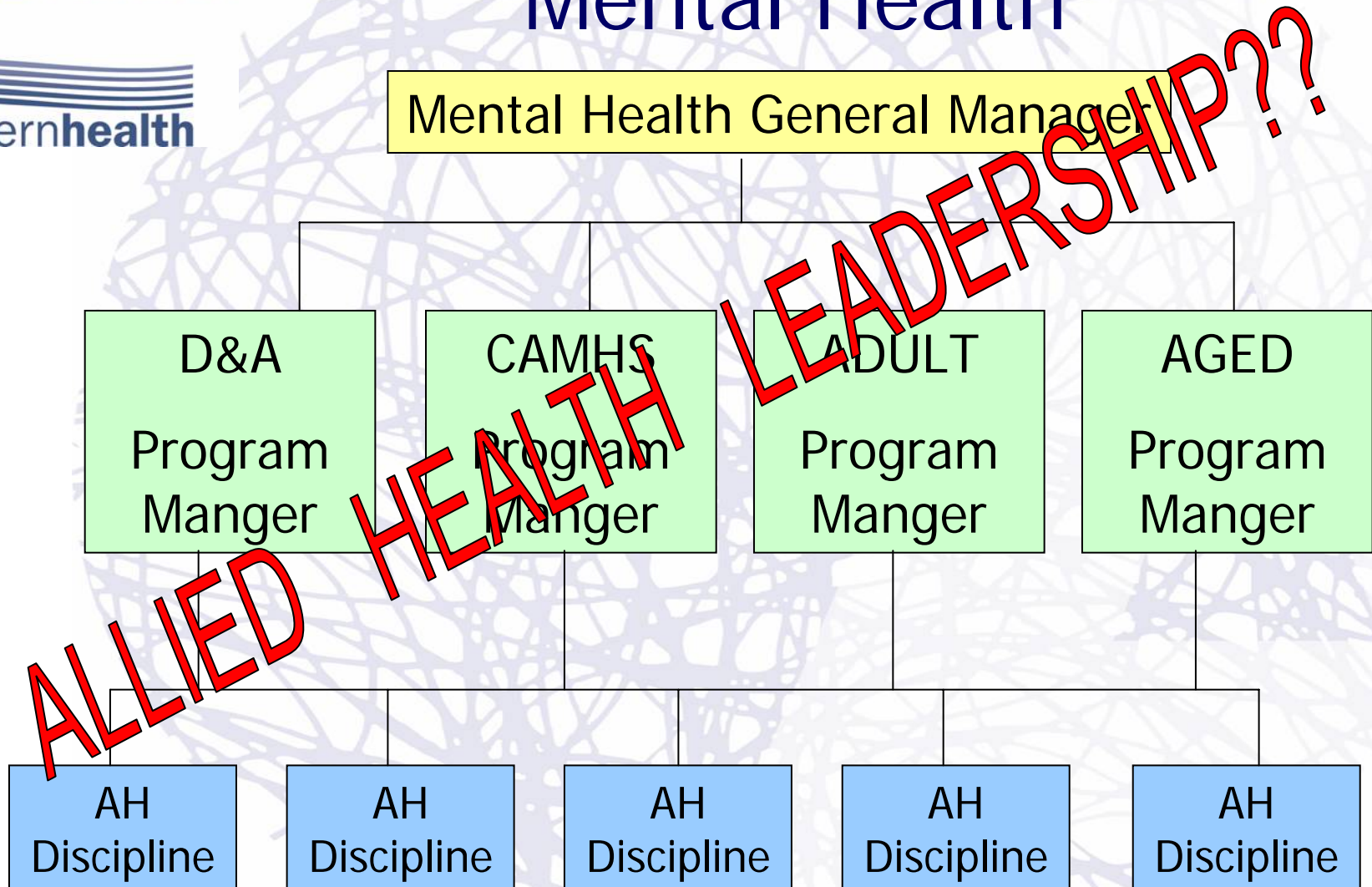


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Mental Health

Mental Health General Manager

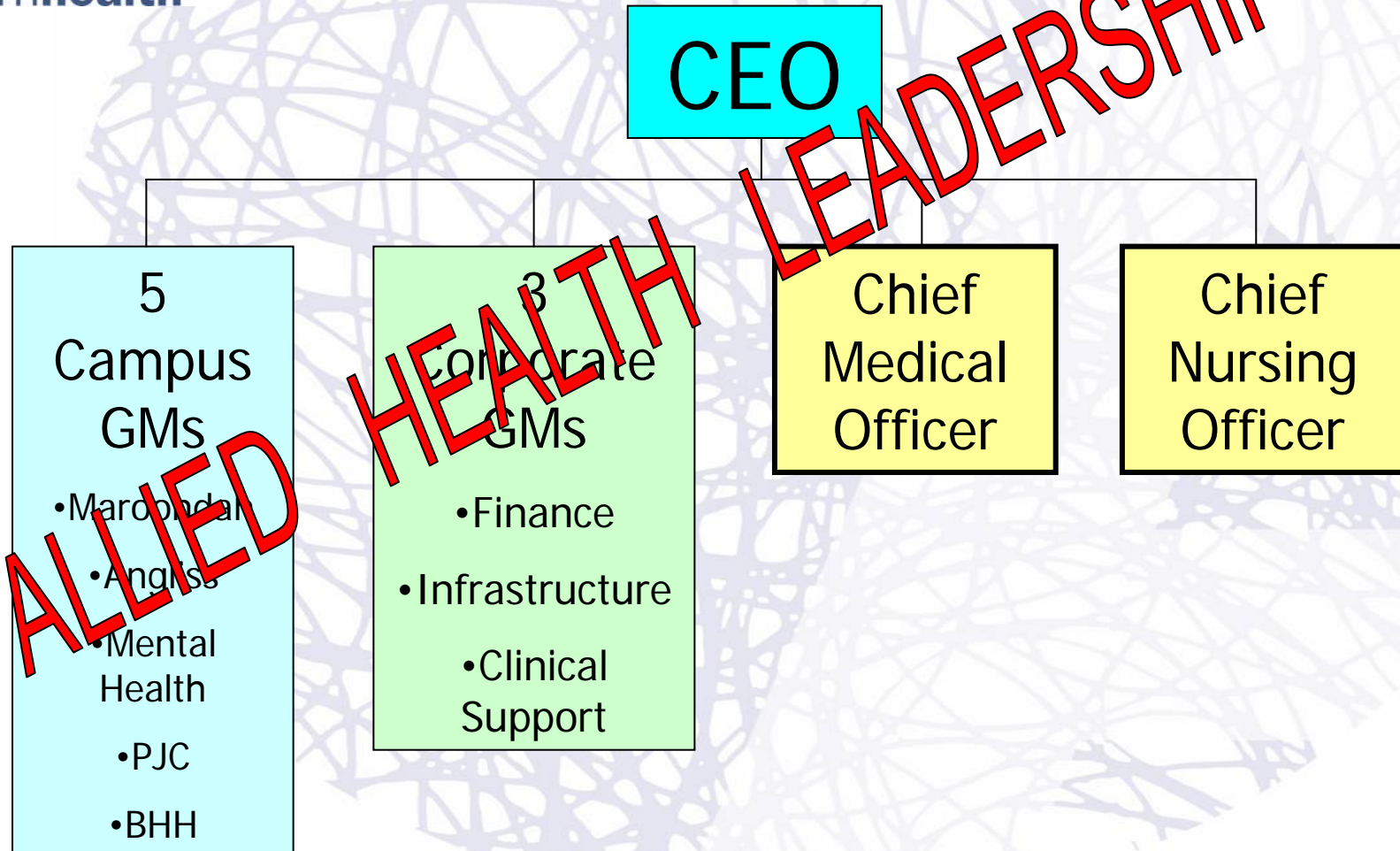




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EH Structure

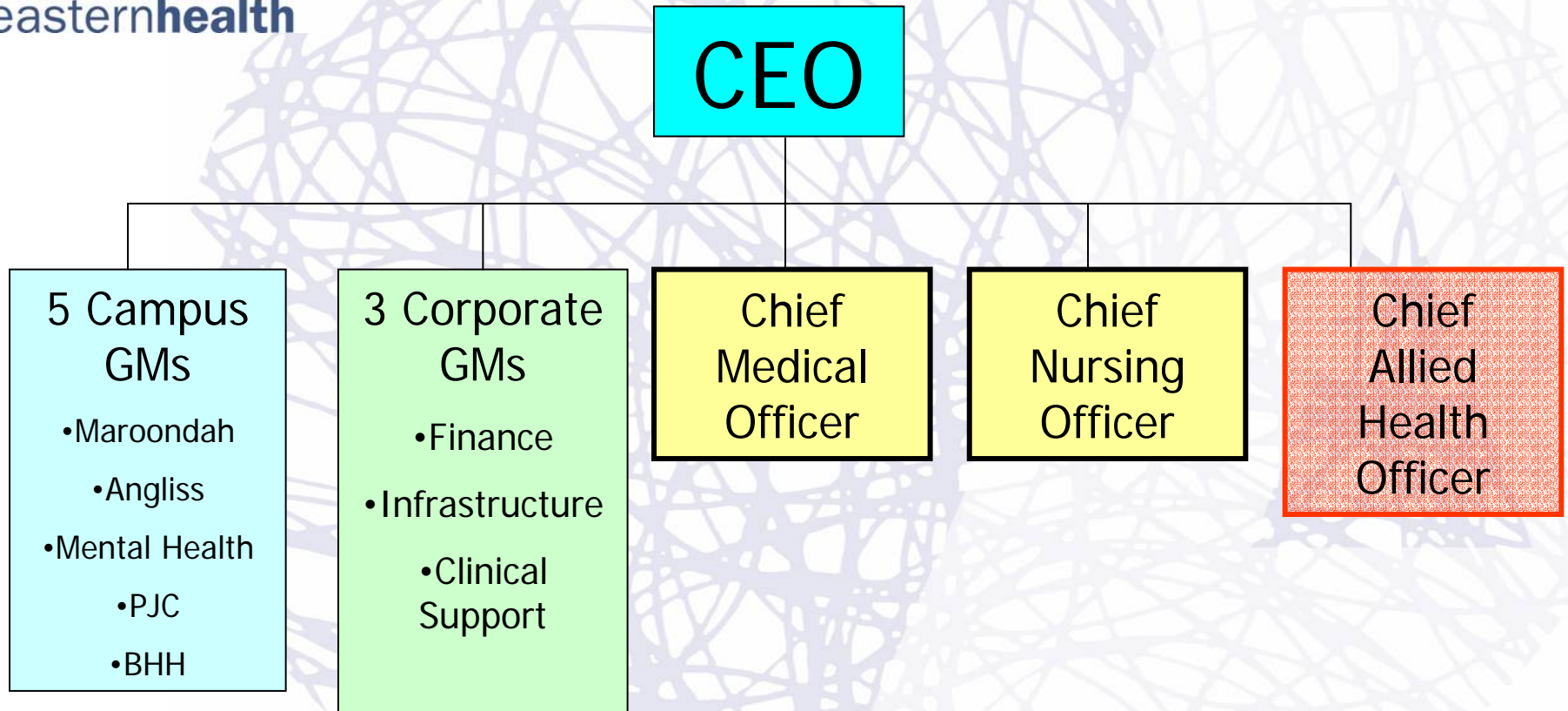




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New Structure





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Collaboration Factors

- **Environment** (political/social climate)
- **Membership** (mutual respect, appropriate cross section of members, see membership in their interest, compromise)
- **Process/Structure** (process & outcome, decision making, flexibility, roles and policy guidelines)
- **Communications** (Open and frequent, formal and informal)
- **Purpose** (concrete, attainable goals, shared vision, purpose)
- **Resources** (sufficient funds, skilled convener)

(Mattessich & Monsey 1992)



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Allied Health Council

- To provide leadership to Allied Health professions in matters relating to professional practice
- To participate in strategic planning
- To provide professional support to CAHO
- To ensure effective communication between disciplines and to Eastern Health programs and executive



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April 2005

But the Nurses have...

We need more resources!

But we are different!

It's not fair!

- What do we think of w Allied Health in eastern

want internal and external to think of FH Allied Health?

- What factors are going Health in the future?

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STRATEGIC OBJECTIVES



- Ensuring consistency in performance expectations
- Enhancing performance management system to include structured supervision and mentoring systems
- Improve clarity in staffing and service models to optimise the efficient use of resources
- Improve management and coordination of staff education and training
- Improve coordination and management of undergraduate clinical programs
- Improve data management increase benchmarking activity
- Enhance profile through Effective Leadership



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Ensuring Consistency in performance expectations

- Core competencies identified
- Responsibilities and expectations relating to service improvement, quality, education, research
- Performance measures against each key result areas reflected in performance reviews
- Generic Position Descriptions for all grades



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Enhancing Performance Management

- Multidisciplinary supervision policy under development
- Supervision tools developed



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Staffing and service models

- All allied health services across Eastern Health mapped
- Skills register for each discipline developed
- Extended and enhanced scope of practice opportunities explored
- Review of all outsourced allied health services undertaken identifying approx \$1M to bring back in house – increase workforce and expand opportunities



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Coordination of staff training

- Staff rotations established
- Education newsletters
- Smart Moves program (EH wide no-lift program developed for Allied Health)
- Quarterly allied health management forums



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Improving undergraduate clinical program coordination

- Established Eastern Health Physiotherapy Clinical School in partnership with Latrobe University (140 placements per year)
- Undergraduate Clinical Placement Education Program



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Data Management

- Implementation of Health Management Systems (HMS) across allied health
- Acute, subacute, ambulatory and community
- Track patients across continuum
- Benchmarking opportunities
- Organisation wide clinical costing
- Improved business decisions
- Monitor activity
- Legitimate bargaining power



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Enhancing profile of AH

Structures have changed

- From Allied Health Coordinators to Site Executive positions
- Mental Health Program discipline seniors
- Professional Leadership Groups



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Professional Leadership Groups (PLG)

- Discipline specific (OT, PT, SW, SP, N&D, Pod)
- Service provision issues (EBP)
- Support and encourage research and teaching
- Develop policies and procedures
- Strategic directions
- Timely recommendation on profession specific issues
- Discussion and resolution
- Communication within discipline across campuses



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Allied Health Directors PLG

- Identify opportunities for standardisation across sites and disciplines
- Provide mutual support and discussion forum
- Effective communication between sites
- Service planning & multidisciplinary models of care
- KPI development and monitoring & benchmarking
- Identify and address multidisciplinary professional issues



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Allied Health Council

- Allied Health Directors of each campus
 - Discipline PLG Chairs
 - Mental Health Program Representative
 - Community Health Representative
 - Chief Allied Health Officer (chair)
- Clear roles and responsibilities between site and professional representatives.



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Other achievements

- Allied Health service growth
- Full time Professor of Allied Health
- Allied Health Logo
- Multidisciplinary research and education precinct



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Difficulties along the way

- Balancing workloads
- Getting everyone on board
- Managing expectations





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Reflection – success factors

- **Environment**
- **Membership**
- **Process/Structure**
- **Communications**
- **Purpose**
- **Resources**

(Mattessich & Monsey 1992)



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Conclusion

- Highly skilled workforce
- Innovative
- Committed
- Passionate
- Versatile
- Team Focused

We Make a Difference!