



Health Sciences Australia

Australian Council of Deans of Health Sciences

MEETING	Australian Council of Deans of Health Sciences		
CHAIR	Professor Ian Wronski		
DATE	Monday 29 August, 2016	LOCATION	Crowne Plaza Hotel “The Crossing” room
TIME	9-430 ACDHS meeting 430-530 Follow up discussion on innovation submission		1 Binara St Canberra
Chair	Ian Wronski		
Invited guests			
Mr Damien McGrath DSS			
Mr Dave Hallinan DoH	Dr Wendy Southern DoH sent apologies		
Ms Rachel Yates UA			
Members	Attending	Apologies	Proxy
Charles Sturt University	Tim Wess		
Curtin University	Michael Berndt		
Curtin University	Lorna Rosenwax		
Deakin University	David Crawford		
Flinders University		John Coveney	Meredith Peters
Flinders University		Michael Kidd	
Griffith University		Allan Cripps	
Griffith University		Tony Perkins	
Griffith University	Peter Westwood		
James Cook University	Ian Wronski		
James Cook University	Pamela Stronach		
Latrobe University		Karen Dodd	
Monash University		Wendy Cross	Marilyn Baird
QLD University of Technology	Ross Young	Robyn Nash	
University of Canberra		Diane Gibson	Dr Dominic Upton
University of Canberra		Maggie Jamieson	
University of Newcastle	Judith Scott		
University of Newcastle	Elaine Terry		
University of Queensland	Bruce Abernathy		
University of Queensland		Sarah Roberts-Thomson	
University of South Australia	Esther May		
University of Sydney	Kathryn Refshauge		
University of Sydney	Stella Vasiliadis		
University of Tasmania		Justin Walls	
Western Sydney University	Gregory Kolt		
Observational member			
University of Otago		Don Robertson, Peter Crampton	
In attendance			
ACDHS EO	Robyn Adams		



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Minutes	Australian Council of Deans of Health Sciences		
CHAIR	Professor Ian Wronski		
DATE	Monday 29 August, 2016	LOCATION	Crowne Plaza Canberra Room: 'The Crossing' 1 Binara Street 2601 Canberra ACT Australia Tel:
TIME	9.00am – 4.30pm		

Minutes

Item		Actions
1.	<p>Welcome, introductions and apologies</p> <p>Following general introductions, the chair welcomed Professor David Crawford representing our newest member- Deakin University.</p> <p>Apologies noted.</p> <p>The meeting confirmed the minutes from March 2016 ACPDHS meeting.</p> <p>Brief discussion on the status of previous actions and plan for progression–no action required.</p> <p>Correspondence: Discussion of correspondence –no action required.</p> <p>NB see separate minutes for Extraordinary Council meeting held on 29 August 2016.</p>	Chair to sign approved minutes of October 2016.
2.	<p>Clinical education and other sector developments</p> <p>Clinical education:</p> <p>Professor Wronski provided a summary of activity in the clinical education area.</p> <p>Discussion included:</p> <ul style="list-style-type: none"> Funding within the Rural Health Multidisciplinary Training (RHMT) programme. http://www.health.gov.au/internet/main/publishing.nsf/content/rural-health-multidisciplinary-training-programme-framework <ul style="list-style-type: none"> Members noted that they were unable to count international students within RHMT programme KPI reporting. While recognising the funding source, discussion included the value of developing diversity and the possibility of including some international student activity-perhaps with a cap eg 10%. Also of interest was funding for simulation training following the MYEFO changes to CTF- were there any funds yet to be allocated? Following a discussion in March 2016 on the variation in clinical hours required for course accreditation and the increasing demand for clinical education, Professor Refshauge commenced work in this area and will provide a report at the November meeting Student to contribution to service delivery remains an area of interest <ul style="list-style-type: none"> a number of examples of student contribution to services- (eg MB MRP-Private imaging provided by students) <p>IHPA</p> <p>TTR- National Efficient Price-paper has been submitted to Ministers for approval. Will provide costings of clinical training in hospitals in Australia. Funding will be Commonwealth with States then making allocation decisions.</p> <p>Workforce Mobility</p> <p>Professor Wronski noted that there was considerable discussion on workforce mobility at the recent APEC meeting in Peru.</p> <p>Anticipates increased activity in this area in short to medium term.</p> <p>Will need to determine the role ACDHS could play.</p>	<p>EO to work with Executive to craft a request for DOH to include some international activity in KPI reporting.</p> <p>EO to collate case studies of student contribution to service provision</p>

	Members noted that there was increased student mobility (supported by initiatives such as the recently expanded Colombo Plan)	
3	<p>Department of Social Services</p> <p>Mr Damien McGrath, Director, Market and Workforce Development, Market Oversight Branch, NDIS Reform Group, Department of Social Services, provided an overview of the NDIS. Mr McGrath noted the significant changes in funding and service models and the underpinning principles of participant choice and control. Important to note that NDIS does not assume responsibility for all care and services, but is a complementary service to health, education and employment.</p> <p>The model shifts funding responsibility from primarily block funded services allocated through State Governments to Commonwealth allocations, based on participant choice; with delivery shifting from not-for-profit organisations to smaller private providers or corporate for-profit providers.</p> <p>Initial estimates indicate significant increase in the number of allied health professionals choosing to work in disability will be required to meet the service demand- particularly in the Early Intervention component. Anticipate particular demand in four allied health professions- Occupational Therapy, Speech Pathology, Physiotherapy and Psychology.</p> <p>Concerns and challenges</p> <ul style="list-style-type: none"> Attracting current and future allied health professionals to work in disability <ul style="list-style-type: none"> How to increase awareness of work options in disability for students and current health professionals The availability for clinical placements <ul style="list-style-type: none"> Including the capacity to provide supervision for students No mechanisms to support private providers to take students <ul style="list-style-type: none"> Unable to bill for student supervision or to bill for student service provision (perhaps at a lesser rate) Feasibility of establishing workforce development KPI in funding/reporting structures for registered providers or within any accreditation system Quality and safety of placements <ul style="list-style-type: none"> A national Safety and Quality Framework is in development but may not be available for 1-2 years. State governance frameworks are to be used in the interim. Areas of possible market failure eg remote and rural <ul style="list-style-type: none"> Mentioned RHMTs as a possible option to explore development of RR models More generally, need to manage inherent conflict within business and service models Knowledge and skills <ul style="list-style-type: none"> Provision of NDIS service model and philosophy in curriculum content Preparing students to work in new MOC and capitalise on opportunities by developing their business and marketing skills Transdisciplinary practice models Potential application of allied health generalist model being developed in Queensland for rural practice <p>Innovative models and next steps</p> <ul style="list-style-type: none"> Positive discussion on possible innovations Members provided examples that could be collated as a series of case studies Suggestion to progress with a small group to work with NDIS on clinical placements <ul style="list-style-type: none"> UniSA- Esther May USyd-Michelle Lincoln JCU- Pam Stronach Monash-Prue Morgan or Ellie Fossey Deakin-Susan Balandin 	<p>EO to circulate A3 NDIS rollout timeline</p> <p>EO to collate case studies (provided by members) highlighting enablers, innovations and barriers</p> <p>EO to liaise with Damien McGrath re progressing a working party to focus on clinical placements.</p> <p>DM to provide NDIS content for possible inclusion in curricula</p>
4	Governance and Policy	

	<p><i>Executive Officer update</i></p> <p>Australian Allied Health Forum (AAHF)</p> <ul style="list-style-type: none"> • Professor May and EO attended a teleconference in June and will attend a face to face meeting in September. • Key item of discussion were actions to progress following the release of an Outcomes and Action paper following a series of consultations held during 2015 where allied health stakeholder groups considered how allied health could strengthen its contribution to the health system in order to deliver better health outcomes for Australians. This document can be found on the AHPA website and has been titled a strategic plan for the allied health sector. http://www.ahpa.com.au/Portals/0/Strategic%20Plan%20for%20the%20Allied%20Health%20Sector%20May%202015%20%28D16-479498%29%20%281%29%20%281%29.pdf • A brief discussion on the feasibility of establishing a national allied health training advisory network occurred. This was followed by circulation of a paper seeking the perspectives of AAHF members on the development of an advisory network. • It was also noted that as a member of AAHF, ACDHS will be listed as a host organisation for the 2017 National Allied Health Conference (NAHC) to be held in Sydney 26-29 August. The conference website will be launched soon • Professor Refshauge is one of the Co-Leaders of the 2017 NAHC Scientific Committee <p>Sponsorship IAHA</p> <p>The Executive approved the request from IAHA for sponsorship for the 2016 AIAH forum with the amount to be as in 2015 - \$15,000 Ex GST. As part of the sponsorship ACDHS will have a table of 8 at the Gala dinner.</p> <p>The forum will be held in Canberra on 30-31 November with a pre forum workshop on 29 November titled <i>Embedding Aboriginal and Torres Strait Islander perspectives in allied health curricula</i>. The workshop will be facilitated by Professor Kerry Arabena</p> <p>Submissions/consultations</p> <p><i>DET Accreditation survey</i></p> <p>The Department of Education and Training has commissioned PhillipsKPA (including Professor Ewan) to survey and characterise the extent and scope of professional course accreditation practices in Australian higher education. The project aims to examine a range of dimensions, including the scope of professional accreditation arrangements, the practical impact on institutional operations, the perceived advantages and disadvantages and the effect of professional accreditation on innovation in course design. Input is being sought from universities, other registered higher education providers, professional bodies and student groups.</p> <p>EO has circulated a collation of comments previously provided by members on this topic for review. Responses are due by Friday September 9</p> <p><i>Developing a national allied health advisory training network</i></p> <p>Following Dr Southern's suggestion to discuss the possible formation of an advisory network with AAHF colleagues, perspectives from most members have been obtained and are being collated to inform the next steps. The input provided by Mr Hallinan is timely (see below in section 6). Collated information will be provided at the September 23 meeting of the Australian Allied Health Forum (AAHF)</p> <p>Working parties</p> <p><i>ERA working party</i></p> <p>EO provided an update on recent activity and the challenge to acquire detailed data to support the preferred aim of the Council: to seek an additional 4 digit code within Division 11 Medical and</p>	<p>EO to re circulate the collation of responses to the DET professional education survey</p> <p>Members to provide comments to EO by 7 Sep 16</p> <p>Establish guest list for IAHA gala dinner 30 Nov</p> <p>Convene 2nd meeting of ERA working group</p> <p>EO to work to quantify numbers of allied health researchers/PhDs</p> <p>BA to seek advice of UQ colleague</p>
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	<p>Health Sciences. 'Allied health and rehabilitation therapies' was agreed as a working title for the proposed code.</p> <p>Election timeframe for the incoming chair As Professor Wronski has indicated he will step down from the position of Chair mid 2017 it was agreed to conduct the election prior to the November meeting. This would allow the incoming chair a transition/handover period with the current chair.</p>	EO to organise the conduct of the election for the next ACDHS chair prior to Nov 21 meeting
5	<p>Planning</p> <p>Developing the next strategic direction for the Council</p> <p>To guide the next phase of activity of ACDHS, members of the executive commenced initial discussions on what the next decade may hold and what the role for ACDHS may be.</p> <p>Following provision of an overview, members discussed and amended the draft vision and intent. While not formatted the following are offered as reflecting the discussions</p> <p>Vision/mission/.. <i>Providing leadership in health systems and allied health in Australia and the Asia-Pacific</i> Strategic priority areas</p> <ol style="list-style-type: none"> 1. Education 2. Health 3. Research advocacy <p>The so what...perhaps the end goal or strategic intent... <i>Securing the place of allied health in the Australian health and education systems</i> Values for consideration included: <i>Frank and fearless; courageous leadership; ...</i></p> <p>A number of current issues were also listed including: funding within health and education, accreditation and regulation, clinical placements, workforce mobility, preparing graduates for new service and business models</p> <p>There was agreement that one role of ACDHS was 'providing an authoritative voice' on matters within the scope of the council. Other phrases meeting with some agreement included: 'diversity is our strength'; 'be the go to place..'; 'influencing and advocating'</p> <p>This work is to be progress for further member comment.</p>	EO to work with ACDHS executive to progress the development of a strategic plan
6	<p>Department of Health and Ageing (DoH)</p> <p>David Hallinan, <i>First Assistant Secretary, Health Workforce</i> provided an overview on Commonwealth priorities for health workforce including:</p> <ul style="list-style-type: none"> • Innovation and reform • Health workforce • Scope of Practice • Assistant and support workforce • Accreditation and NRAS review <p>Innovation and Reform: Mr Hallinan provided an update on the Primary Health Care Advisory Group (PCAG) and the recent announcement of the Health Care Home sites. The following were noted</p> <ul style="list-style-type: none"> • The PCAG has completed its work investigating options into the reform of primary health care to support patients with chronic and complex illness, and the treatment of mental health conditions. http://www.health.gov.au/internet/main/publishing.nsf/Content/PrimaryHealthCareAdvisoryGroup-1 • Introduction of the Health Care Home model The first stage of Health Care Homes have been announced, initially covering 65,000 patients. Sites include the Primary Health Network regions of: Western Sydney (NSW), Perth North (WA), Tasmania (TAS), Hunter New England and Central Coast (NSW), 	

	<p>Making use of existing scope and where indicated extending scope (subject to enabling regulation and legislative changes) is of increasing interest.</p> <p>Structural limits to optimising scope of practice were discussed, with the following examples provided</p> <ul style="list-style-type: none"> aged care funding instrument (ACFI) provided as one example where billing items for physiotherapy are limited to massage and TENS, precluding evidence based interventions such as falls prevention and exercise [Note: see for example pp37-39 Complex health care procedures relevant to the resident https://agedcare.health.gov.au/sites/g/files/net1426/f/documents/10_2014/acfi_user_guide_1_july_2013.pdf] potential for radiographers to provide the initial reading where double reporting requirements are specified, with a radiologist providing the second reading <p>NRAS accreditation review Yet to be announced</p> <p>Assistant and support workforce Jurisdiction feedback reflects an increasing need for allied health professional education to include knowledge and skills in delegation to the assistant and support workforce. It is anticipated that a letter to this effect will be forwarded to ACDHS</p>	
7	<p>Universities Australia update Rachel Yates, Policy Director Health and Workforce), Universities Australia provided an overview of current work and future direction for the Health Professional Education Standing Group (HPESG). HPESG have been developing a clinical education paper including costs and funding models in the public hospitals with a series of options for the way forward. Rachel informed members of the formation of a new jurisdictional group titled Health Education Working group. Professor Caroline McMillen, of University of Newcastle ,will chair both HPESG and HEWG</p>	
8	<p>General Business and next meeting/s</p> <p>Matters without notice- Pam Stronach (JCU) provided members with an overview of an emerging issue impacting the registration of graduates from their APAC accredited Psychology program offered in Singapore. Key parties are discussing impact and options. Advice yet to be received.</p> <p>Agenda items for next meeting/s:</p> <ul style="list-style-type: none"> feedback from Working Party on clinical education hours required to meet accreditation <p>Location and approximate timeframes for 2016 meetings</p> <ul style="list-style-type: none"> November 2016 – Canberra 	<p>Schedule November meeting date [EO]</p> <p>EO send thank you letters</p>
4.30pm - Meeting Closed		

Minutes approved subject to amendments proposed and accepted by the meeting of the ACDHS members
Professor Ian Wronski- ACDHS Chair  **Date 21 November 2016**

4.30-5.00 Informal meeting with Andrew Lamming MP following the ACDHS Submission: Inquiry into innovation and creativity: workforce for the new economy
Key points of discussion included:

- a query about the readiness of graduates to work in new service and business models,
 - for example business skills to create startup business or NDIS
- Student and graduate mobility
- Description of service model for vulnerable children attending early childhood center where visiting allied health professionals could fund the service through the MBS chronic disease item following the GP establishing a care plan.

