



AUSTRALIAN COUNCIL OF
DEANS OF HEALTH SCIENCES

National Disability Insurance Scheme

Position Statement

November 2018

ACDHS recommends

- development of initiatives and incentives to increase the number of clinical placements offered by disability service providers
- development of formalised pathways supported by well recognised, structured programs of study designed for allied health professionals in the disability sector

Background

The Australian Council of Deans of Health Sciences (ACDHS) is the peak representative body of Australian universities that provide pre-professional education in the allied health sciences. The Council is a strong advocate for the role and contribution of the allied health professions.

ACDHS is a forum for representation, coordination and information sharing, and aims to strengthen the education of allied health practitioners in Australia to meet the needs of communities. With an ageing Australian population and the growth of disability and chronic disease, the allied health professions will be critical to providing adequate and appropriate health, disability and social care.

Workforce distribution

Australia requires a health and social care workforce that is well distributed and has an appropriate mix of health professionals who can work in a range of settings. As the number of university programs have increased over recent years, the most significant issue for the professions of allied health may no longer be one of total supply, but rather workforce distribution.

Workforce maldistribution across sectors, service and geography limits access to the services provided by allied health professionals. Variable service access most often impacts populations of significant disadvantage. ACDHS advocates for equitable access to high quality allied health services and supports initiatives that seek to redress workforce maldistribution.

Marketization of service provision

Recent changes to funding models have made positive steps to have funding and related decisions sit with the consumer/participant. A significant shift of service provision was associated with the implementation of National Disability Insurance Scheme (NDIS). The NDIS funding model required a shift of service provision from public/state funded organisations to private providers.

Consequential challenges emerging from this shift include the loss of workforce development capacity and clinical governance structures for the professions of allied health. One resultant tension is between the expressed demand for significant increases in the number of allied health professionals to work in the disability field and the financial structures that provide little or no incentive to contribute to the education of the future workforce. ACDHS asserts this loss of clinical placement capacity is a significant inhibitor to the development of the future disability workforce.

Clinical placements

Opportunities for clinical placements in settings aligned to contemporary service models and settings are critical for the education of the future allied health workforce. Clinical placements with disability service providers are a key component of developing an allied health disability workforce. Addressing the loss of clinical placements in the disability sector requires a strategic review of policy and funding models. Incentives for disability service providers to develop and host quality student placements are required, at least in the short term, if graduates of allied health programs are to choose to work in the disability sector. Innovations in service learning models and work integrated learning in the disability sector could create additional learning experiences that would benefit both participants and students if supported by appropriate incentives.

Beyond Graduation

However, even then, conversion of positive student experiences to the allied health disability workforce face a number of challenges. Barriers include current funding and service models and access to positions, mentoring, supervision and career progression.

Pathways for allied health professionals to acquire either the depth of skills required in specialised areas of practice or breadth of skills required in generalist areas of practice are not readily available. Post graduate university programs support knowledge and skill acquisition that are recognised by formal awards. While many of the individual professional associations recognise these awards within their professional development structures, the alignment with employment structures is not consistent. To date, it appears there is little acknowledgement or reward for private disability providers to formally advance their qualifications.

ACDHS asserts that following graduation, formalised pathways supported by well recognised, structured programs of study are required for the professions of allied health if the disability workforce is to expand to meet the projected demands. It would be feasible to then consider the growth in experienced allied health clinicians working in the disability sector could continue to grow the disability workforce by providing clinical placements for students if appropriately incentivised.

Allied Health Pathways

Work has been underway over recent years to develop a post entry level pathway for allied health professionals working in rural and remote communities. The development of the allied health rural generalist (AHRG) concept is providing a coherent body of work that has potential to address key components of a rural allied health pipeline. This concept could be considered for the development and expansion of the disability workforce.

Work on the AHRG concept is ongoing and provides one example of a post entry level pathway for the professions of allied health. Combined with strategies to expose pre-entry level students to the disability sector, such a pathway could build an allied health disability workforce pipeline and mitigate the projected shortfall in allied health professionals available to work in the disability sector.

As educators of the future allied health disability workforce, ACDHS recommends

- development of initiatives and incentives to increase the number of clinical placements offered by disability service providers
- development of formalised pathways supported by well recognised, structured programs of study designed for allied health professionals in the disability sector

Professor Esther May ACDHS Chair
Endorsed by the ACDHS Council October 2018