Allied Health Strategic Plan 2019-2022
Acknowledgment of Country

Western Sydney Local Health District acknowledges the first people of the land. The overarching Aboriginal nation in Western Sydney is the Darug nation.

We pay our respect to Elders past, present and emerging. We acknowledge the importance of land, water, spirit, kinship and culture, and the importance that these elements have to the health, wellbeing and future of the Aboriginal and Torres Strait Islander community.

Artwork by Leanne Tobin. Leanne’s artwork reflects the vibrancy and transitional motions of the dragonflies as they move through their journey of life.
I am pleased to present the Western Sydney Local Health District (WSLHD) Allied Health Strategic Plan 2019-2022. This three year plan is the result of extensive consultation and collaboration across WSLHD which occurred over a six month period in early 2019. The plan incorporates feedback and ideas from allied health professionals across all disciplines, senior executives and many of our partners in health care including medical specialists, nursing and midwifery staff, our business partners and non-clinical colleagues. This has resulted in a plan which is rich, diverse and considers the important clinical and non-clinical partnerships allied health needs to nurture and strengthen to deliver outstanding value based care to the population of western Sydney. This plan aligns with the broader priorities outlined within the WSLHD and NSW Health Strategic Plans and presents us with a road map to guide operational/business planning and actions to improve the outcomes of patients, our staff and the organisation.

Over the next three years, we need to start tackling some of the more complex problems facing our rich, diverse but also vulnerable community. This was a clear message from the NSW Premier in the address to the NSW Government Sector in 2019. To do this, we need to work together within health, but also across government agencies to think outside the box, using our collective talents and expertise to really start making an impact for some of our most vulnerable populations. This includes our Aboriginal population, culturally and linguistically diverse communities, people with a disability, vulnerable families, women and children, victims of violence, the elderly, people living with mental illness and drug and alcohol issues.

Vulnerability factors are those which place an individual at much higher risk of harm, potentially leading to poorer health outcomes, particularly when receiving care in acute facilities. Outcomes of care provided in our emergency departments, acute or subacute services can become exponentially worse for the patient, not due to the presenting health issue but, due to a multitude of socioeconomic determinants of health. This is especially true for our population within western Sydney with one of the highest number of residents with disability in Australia, the largest urban Aboriginal population in NSW, refugee and migrant populations, high rates of domestic violence, substance abuse, mental illness and homelessness.

This presents a unique challenge for the allied health professions to work in partnership with colleagues and consumers to provide value based health care focussed on crisis aversion, prevention, out of hospital care and responsiveness to the needs of vulnerable and diverse patient groups. What matters to the patient must be central to the design and delivery of innovative and contemporary models of care that not only deliver excellent health care outcomes in an efficient manner, but ensure that the experience of the patient is optimised in every way.

I look forward to walking with you on this journey to enhance the “muscular contribution” of the allied health professions as we strive for excellence in value based health care delivered in partnership with our patients, colleagues, partners and the community.

Jacqueline Dominish
District Director Allied Health
Western Sydney Local Health District
Our Vision
We are recognised leaders in delivering effective value based models of care through innovation in research, education and clinical practice.

Our Mission
Allied health professionals deliver high quality, patient-centred care that improves the health and well-being of the people of Western Sydney.

Our Philosophy
- We will strive for professional excellence and are committed to life-long learning, innovation and translation of evidence to practice.
- We will strive to utilise data and analytics in our everyday business to ensure our performance is data driven and value based.
- We will provide individualised quality and safe patient care, with pride, compassion, empathy and integrity.
- We will work in partnership with colleagues, our community and consumers.
- We will empower and enable individuals to challenge, transform and lead change.
- We are committed to how we care for each other and our community.

Our Values
We are committed to delivering a world class allied health service which is underpinned by the NSW CORE Health Values and our service values of patient-centred care, professionalism and curiosity/innovation.

Patient-centred Care
Health care that is respectful of, and responsive to, the preferences, needs and values of our patients and consumers. Being patient-centred means we:
- Are empathetic of our patients needs and we treat our patients with dignity, respect and compassion.
- Take a holistic approach to the treatment and care of our patients and work with them in a collaborative manner to develop appropriate treatment plans.
- Provide patients with sufficient and meaningful information about their condition and treatment options so that they can make an informed decision about their health care.

Professionalism
The conduct, aims, and qualities that characterise us as a professional group. Being professional means we:
- Deliver services in accordance with the ethical standards of our relevant professions and health services.
- Work collaboratively with other health professionals in inter-disciplinary teams and deliver safe, high quality value based care to our patients and consumers.
- Ensure that our services are aligned with current evidenced-based best practices.
- Advocate the value of our role and expertise as allied health professionals and take accountability for our work.
- Are seen as dependable and trusted specialists by our patients and colleagues.
- Engage holistically within WSLHD to ensure strategies and objectives align with the overarching business goals of the District.

Curiosity/Innovation
The application of better solutions to meet the existing or unarticulated needs of our patients and consumers. Being curious and innovative means that we:
- Are committed to operating at the leading edge of best practices in our field.
- Encourage our people to be curious and to constantly ask questions, explore new knowledge and challenge the ‘status quo’ so that we continue to grow and develop our service.
- Adopt and apply evidence-based research and new technologies to improve our practice.
- Provide a workplace culture that supports learning, innovation, research and improvement.
- Apply continuous improvement methodologies to review and improve our practices.
- Network with other departments and agencies to identify and implement best practices.
- Work with our patients and consumers to identify and implement service improvements.

Links to other organisational plans and objectives, including but not limited to:
- WSLHD Health Services Plan: Growing good health in western Sydney detailed plan to 2026
- WSLHD Aboriginal Workforce Plan
- WSLHD Disability Workforce Plan
- WSLHD Disability Inclusion Action Plan – in development
- WSLHD Culture Framework
## Western Sydney Local Health District Allied Health Strategic Plan 2019-2022

### Objectives

#### 1. Keeping People Healthy
- **1.1 Population Health**
  - Drive, develop and engage health programs/services that are responsive to incidence, prevalence and demand data to increase the health and well-being of the people in Western Sydney
- **1.2 Aboriginal Health**
  - Embed improving Aboriginal health as a core focus of all allied health services in WSLHD
- **1.3 Mental Health**
  - Ensuring people living with mental illness are provided with holistic care with a focus on physical health needs to improve the health, wellbeing and life expectancy of people with mental illness
- **1.4 Staff Health and Wellbeing**
  - Improve the health and well-being of our staff

#### 2. Patient Experience Matters
- **2.1 Partner with our patients and consumers to develop a patient-centred service that delivers excellence in allied health care**
- **2.2 Partner with Aboriginal stakeholders and the Aboriginal community to ensure patient experience and care needs are identified and allied health services are culturally responsive to these needs**
- **2.3 Support patients with disability to access the National Disability Insurance Scheme (NDIS) or other relevant services and provide necessary care and support across the continuum of care**

#### 3. Integrated Research, Education and Clinical Practice
- **3.1 Our Culture**
  - Building a sustainable culture of research and learning
- **3.2 Our Capability**
  - Building our capability in research and learning
- **3.3 Our Capacity**
  - Building our capacity to undertake research and learning
- **3.4 Education Strategy**
  - Commitment to the development and training of our allied health workforce to ensure excellence and clinical practice at the top of scope.
- **3.5 Clinical Practice Strategy**
  - Effectively translate research into clinical practice

#### 4. Exceptional People
- **4.1 Ensuring strong professional and operational governance of all allied health staff across WSLHD to ensure patient safety, staff wellbeing, clinical excellence, efficiency and adherence to professional practice standards**
- **4.2 Developing the capability and skills of allied health leaders and managers to produce dynamic change agents able to lead from all areas of the organisation and deliver transformational change**
- **4.3 Embedding processes that support and nurture the growth and development of the allied health workforce**
- **4.4 Grow the Aboriginal allied health professional and allied health assistant workforce**
- **4.5 Enhancing the participation of people with disability in the allied health workforce**

#### 5. Information underpins everything we do
- **5.1 Develop a clear and consistent communication strategy to ensure timely and accurate dissemination of information to allied health staff across all areas of WSLHD**
- **5.2 Develop a “data driven performance culture” within allied health**
- **5.3 Determine appropriate IT requirements for allied health**
- **5.4 Build effective relationships and governance processes with Digital Health Solutions (DHS) to ensure the information requirements of allied health professionals are addressed in a timely and appropriate manner**

#### 6. Spending Wisely
- **6.1 Improve the management of our financial resources**
- **6.2 Increase the value of the services we deliver**
- **6.3 Improve utilisation of our workforce**

### Values
- To be recognised leaders in delivering effective value-based models of care through innovation in research, education and clinical practice
- Deliver high quality, patient-centred care that improves the health and well-being of the people of Western Sydney and beyond
- Committed to delivering a world class allied health service which is underpinned by the NSW CORE Health Values and our service values of patient-centred care, professionalism and curiosity/innovation
## Strategic Priority 1 – Keeping People Healthy

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</table>
| 1.1 | Population Health | DDAH HODs/ Service Managers | Director Population Health, Business & Clinical Analytics, Universities, SCHN, FACS, PHN | First 2000 Days Leading Better Value Care, PARVAN, Get Healthy Coaching Service | - Integrate and collaborate with key stakeholders including primary health care providers, tertiary institutions in delivering acute, subacute and community care programs (both government and non-government) to improve population health outcomes.  
- Shift the focus of care towards early intervention and prevention.  
- Initiate and develop allied health programs to support the most vulnerable in our population including  
  - Aboriginal and Torres Strait Islander people  
  - Victims of violence  
  - People living with a mental health issue  
  - Vulnerable youth and children  
  - Vulnerable families  
  - People living with a drug and alcohol issue  
  - The elderly  
  - People with a disability  
  - Pregnant women  
  - Culturally and Linguistically Diverse (CALD) people  
- Develop a culture of service delivery that is tailored to the diversity of the population of WSLHD.  
- Increase health literacy through use of evidenced based initiatives. |
| 1.2 | Aboriginal Health | DDAH HODs/ Service Managers | DAHS, GWAHS, AHH, DDAH GMs/EDs, CE | NSW Aboriginal Health Plan 2013-2023, NSW Health Good Health-Great Jobs, Aboriginal Workforce Strategic Framework 2016 - 2020 | - Develop, plan and implement health programs and services in partnership and collaboration with the Aboriginal community, elders and consumer representatives.  
- Regularly engage with the Aboriginal Health Impact Statement processes which capture and report the levels of consultation with Aboriginal people either internally and / or externally to the organisation.  
- Implement culturally responsive actions to ensure allied health services are safe and accessible to the Aboriginal population including flexibility in service delivery and provision of culturally inviting spaces.  
- Implement assertive employment strategies to increase the participation of Aboriginal people in the allied health professional and allied health assistant workforce to 1.8% across all professions and salary bands. |
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| 1.3 | **Mental Health**<br>Ensuring people living with mental illness are provided with holistic care with a focus on physical health needs to improve the health, wellbeing and life expectancy of people with mental illness. | DDAH HODs/ Service Managers AH Clinicians | EDMH ODMH DCMH MH AH HODs Drug Health Population Health | NSW Health Strategic Framework and Workforce Plan for Mental Health 2018-2022 | • Develop effective working relationships with mental health services to ensure the physical health needs of people with mental illness are a focus of care provided by allied health services in all facilities within WSLHD.  
• Support mental health services in the development and provision of allied health services to ensure the needs of people with mental illness are met regardless of whether they are being treated in mental health or mainstream services in particular for the Aboriginal population.  
• Ensure all WSLHD allied health staff provide holistic service provision to consumers with mental illness including a focus on a bio psychosocial approach to care.  
• Recognise the need for integrated models of care between drug health, mental health, population health and physical health services across the continuum of care to ensure delivery of consumer focussed care for people with multiple co-morbidities and complex needs. |
| 1.4 | **Staff Health and Wellbeing**<br>Improve the health and wellbeing of our staff. | DDAH HODs/ Service Managers | DP&C | WSLHD Allied Health Clinical Supervision Policy  
WSLHD Culture Framework | • Celebrate achievements of staff regularly and publicly.  
• Ensure allied health staff have access to regular clinical supervision.  
• Implementation of staff resilience and wellbeing training to ensure an agile and resilient workforce in the changing healthcare environment.  
• Embed staff health and well-being initiatives that focus on good nutrition, exercise and mental health.  
• Coordinate programs that create and build a cohesive and strong allied health teams.  
• Supporting managers to lead positive cultural change and empower staff.  
• Provide opportunities for networking of allied health staff across WSLHD.  
• Improve the experience all staff including our Aboriginal and culturally and linguistically diverse staff and staff with disability.  
• Support staff members with disability to access reasonable adjustment in the workplace, which may include flexible work arrangements.  
• Incorporate agile workforce contingencies that are culturally and disability diverse and which will meet organisational needs for a sustainable workforce for the future.  
• Implementation of workforce strategies as per 6.3. |
## Strategic Priority 2 - Patient Experience Matters

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</table>
| 2.1 | Partner with our patients and consumers to develop a patient-centred service that delivers excellence in allied health treatment across the continuum of care. | DDAH HODs/Service Managers | Innovation & Redesign PHN MH ICH Inpatient health services Consumer and Community Engagement Team | LBVC NSQHS Standards | • Actively engaging with consumers in the planning of their care and treatment.  
• Developing and implementing programs to increase the health literacy of consumers to enable them to make more informed choices in relation to their care.  
• Being open and transparent with consumers and providing them with all the relevant treatment options so they can choose the best option to meet their needs.  
• Regularly seeking and responding to feedback from consumers to improve the patient experience across the continuum of care.  
• Engage with Redevelopment, Finance, Innovation & Redesign and appropriate consumer representatives to review & redesign allied health services to meet future redevelopment service requirements and consumer expectation.  
• Develop the capability of staff to effectively collaborate, engage consumers and capture patient experience.  
• Support the Consumer and Community Engagement team in attracting Aboriginal consumers in a culturally safe feedback model and accessible space.  
• Support the Consumer and Community Engagement team in attracting consumers with Disability in a safe and appropriate feedback model and accessible space.  
• Support the Consumer and Community Engagement team in attracting consumers with a CALD background in a safe and appropriate feedback model and accessible space. |
| 2.2 | Partner with Aboriginal stakeholders and the Aboriginal community to ensure patient experience and care needs are identified and allied health services are culturally responsive to these needs. | DDAH HODs/Service Managers | Allied health clinicians | NSQHS Standards User Guide for Aboriginal and Torres Strait Islander Health | • Engage with WSLHD Aboriginal health services and providers to ensure good working relationships and ability to obtain regular feedback from the Aboriginal community on experience.  
• Engage with the Aboriginal Health Collaborative through the WSLHD pathway to ensure programs, pathways and activities are developed according to agreed processes and against identified needs.  
• Obtain and utilise culturally appropriate patient experience feedback tools and methods.  
• DDAH to attend WSLHD and GWAHS Executive meetings to maintain awareness of issues impacting on the local community in relation to their experiences of care. |
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| 2.3 | Support patients with disability to access the National Disability Insurance Scheme (NDIS) or other relevant services and provide necessary care and support across the continuum of care. | DDAH HODs/ Service Managers NDIS Coordinator ID Coordinator                   | NDIS Clinical Staff            | NDIS NDIS NSW Health Disability Inclusion Action Plan 2016 - 2019              | • Ensuring patients have access to timely information and support to access the NDIS.  
• Ensuring patients with disability not eligible for the NDIS are able to access available services following transition of care and maintain their independence in the community.  
• Engage with the WSLHD NDIS Coordinator to ensure appropriate early management and escalation of issues to support the ongoing care of people with a disability. |
### Strategic Priority 3 – Integrated Research, Education and Clinical Practice

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| 3.1 | **Our Culture**<br>Building a sustainable culture of research and learning. | Prof AH DDAH | IREN Universities Chief Allied Health Officer ACI HETI | NSW Directors of Allied Health Advisory Group Plan 2018-2021 | • Professor of allied health role to be sustained.  
• Seek joint research and education opportunities with external partners.  
• Undertake multi-disciplinary research and education  
• Refer to and link with Allied Health Research Strategic Plans for WSLHD, and any future plans with NSW MoH.  
• Strengthen the commitment of researchers to undertake research on the allied health outcomes of Aboriginal people in an urban environment.  
• Undertake research on the impact of allied health services on culturally and linguistically diverse populations. |
| 3.2 | **Our Capability**<br>Building our capability in research and learning. | Prof AH DDAH | REN Universities Chief Allied Health Officer ACI HETI | NSW Directors of Allied Health Advisory Group Plan 2018-2021 WSLHD Allied Health Strategic Plan | • Allied Health Research and Education Steering Committees will  
- Increase research and education collaborations with other health care professionals and universities  
- Be active contributors in research publications and conference presentations.  
- Identify opportunities to undertake collaborative research in local, state and national priority areas, in particular in chronic disease prevention and treatment.  
- Identify opportunities to undertake collaborative research which supports patient-centred approaches to health issues and impacts affecting people with disability as consumers in an urban environment.  
- Build capability of allied health professionals to undertake collaborative research which supports patient-centred approaches to health issues and impacts affecting Aboriginal people as consumers in an urban environment, using a culturally safe community-controlled approach to research. |
| 3.3 | **Our Capacity**<br>Building our capacity to undertake research and learning. | Prof AH DDAH | REN Universities Chief Allied Health Officer ACI HETI | NSW Directors of Allied Health Advisory Group Plan 2018-2021 WSLHD Allied Health Strategic Plan | • Obtain funding to support research activities  
• Establishment of research positions within allied health.  
• Provide staff with appropriate support for undertaking research degrees and research publications, including research education activities.  
• Obtain appropriate technology resources to support research and education activities.  
• Support students to engage in allied health research projects conducted within the LHD.  
• Publish outcomes of dedicated urban based Aboriginal allied health research. |
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<tr>
<td>3.4</td>
<td><strong>Education Strategy</strong></td>
<td>AHTC, DDAH</td>
<td>HETI, MoH, PAHA, CAHO, Universities</td>
<td>HPWP 2012-2022</td>
<td>- Maintain support from allied health department heads, other operational managers and seniors for allied health education.</td>
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<td>- Identify opportunities to further develop the skills of allied health professionals to enhance service delivery and meet the changing demands of the population.</td>
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<td>- Establishment of educator roles within allied health</td>
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<td>- Timely dissemination of training information and opportunities.</td>
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<td>- Education governance committees established for allied health and allied health assistants.</td>
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<td>- Development of an allied health and allied health assistant (AHA) intranet page to load training materials</td>
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<td>- Utilisation of HETI AHA scholarships &amp; workplace learning grants.</td>
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<td>- Partnership with local educational providers to upskill staff.</td>
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<td>- Support for students enrolled in allied health professions, contributing to training and education in clinical placements, which in turn develops the education roles of allied health staff.</td>
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<td>- Identify opportunities to educate and inform allied health professionals of research outcomes and enable translational programs of work.</td>
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<td>- Work with HETI, Ministry of Health and training providers on Aboriginal allied health professionals and Assistant programs and pathways.</td>
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<td>3.5</td>
<td><strong>Clinical Practice Strategy</strong></td>
<td>Prof AH, DDAH, Discipline leads, AH Research Governance Committee</td>
<td>REN</td>
<td>NSW Directors of Allied Health Advisory Group Plan 2018-2021, WSLHD Allied Health Strategic Plan</td>
<td>- Evidence based principles to be imbedded into core allied health business.</td>
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<td>- Scope of Practice re expert clinical skills be regularly monitored and reviewed.</td>
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<td>- Explore and employ new models of care led by most recent advances in evidence with evaluation of Patient Reported Outcome and Experience Measures plus financial viability.</td>
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<td>- Seek opportunities to deliver new models of care, in multi-disciplinary teams, in partnership with medical and nursing colleagues.</td>
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<td>- Support implementation strategies to fast track uptake of evidence into clinical practice and enable solutions to be tested in a safe and efficient manner.</td>
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<td>- Engage with the Agency for Clinical Innovation on Aboriginal patient related outcome measures (PROM's).</td>
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## Strategic Priority 4 – Exceptional People

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| 4.1 | Ensuring strong professional and operational governance of all allied health staff across WSLHD to ensure patient safety, staff wellbeing, clinical excellence, efficiency and adherence to professional practice standards. | DDAH HODs/Service Managers | GMs EDMH EDICH Operational Managers | NSW Secretary Priorities: Patient Safety First: Strengthening Governance and Accountability #2.5 #2.2 #2.1 | • Ensuring all staff have access to regular clinical supervision appropriate to their level of expertise and work role  
• Engagement of operational line managers to ensure allied health staff are supported to undertake necessary activities to maintain professional standards and registration requirements  
• Consistent business rules are developed to ensure all allied health professionals adhere to the same standards  
• District Director of Allied Health is involved early in the risk assessment and review of all issues where risks to patient safety or the organisation are identified as a result of alleged poor clinical practice, professional conduct and breach of registration or professional practice requirements. |
| 4.2 | Developing the capability and skills of allied health leaders and managers to produce dynamic change agents able to lead from all areas of the organisation and deliver transformational change. | DDAH DP&C | People and Culture Team HODs/Service Managers REN | Health Professionals Workforce Plan 2012-2022 WSLHD Culture Strategy | • Develop capabilities of allied health leaders and managers including emerging leaders in areas such as:  
- business writing  
- data analysis and utilisation  
- project management  
- clinical redesign  
- change management  
- innovation and improvement  
- financial/budget management. |
| 4.3 | Embedding processes that support and nurture the growth and development of the allied health workforce | DDAH DP&C | People and Culture Team HODs/Service Managers REN | Health Professionals Workforce Plan 2012-2022 WSLHD Culture Strategy | • Identify opportunities to minimise duplication across professional groups where core and common skill needs exist and maximise sharing of resources and educational participation opportunities.  
• Developing the profile and brand of WSLHD allied health as a high quality service that attracts and retains the best allied health professionals.  
• Support the development of staff capabilities through education, training, supervision and work-based development opportunities.  
• Develop a workforce culture that is performance driven and that is based on efficiency and adherence to safe quality care.  
• Promote and support diversity across the allied health workforce.  
• Early identification and support of emerging leaders and future managers. |
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| 4.4 | Grow the Aboriginal allied health professional and allied health assistant workforce | DDAH DAHS DP&C | CE HODs/Service Managers GMs/EDs | NSW Health Good Health-Great Jobs Aboriginal Workforce Strategic Framework 2016 - 2020 | • Utilisation of the information available on the NSW Health Good Health - Great Jobs “Stepping Up” Website supporting hiring managers and Aboriginal job seekers to improve the recruitment and retention of Aboriginal people in NSW health service employment.  
• Implementation of assertive employment strategies  
• Transforming workplace environments and attitudes to be culturally responsive through elimination of racism and ensuring cultural safety and support of Aboriginal allied health staff.  
• Establish Aboriginal workforce targets across all occupations and salary bands to a minimum of 1.8% of the allied health workforce.  
• Identify resources required to establish and recruit to allied health training pathways for Aboriginal people in professional and non-graduate streams.  
• Identify areas of high need to address Aboriginal health care, such as podiatry, in order to prioritise recruitment of Aboriginal people against relevant areas of need.  
• Identify opportunities to align the allied health workforce priorities as outlined in the NSW Health Health Professionals Workforce Plan with the priorities of the Good Health – Great Jobs Aboriginal Workforce Strategic Framework.  
• Identify opportunities to work in partnership with the VET and University sectors to enable the growth and development of the Aboriginal allied health workforce.  
• Partner with the Aboriginal Workforce Coordinator to ensure the establishment of safe and appropriate Aboriginal workforce activities in allied health. |
| 4.5 | Enhancing the participation of people with disability in the allied health workforce | DDAH HODs/ Service Managers | DP&C | NSW Health Disability Inclusion Action Plan 2016-2019 | • Promote an environment of disability inclusion and diversity in the allied health workforce.  
• Ensure reasonable adjustments are made to support employment of people with disability into allied health services.  
• Be a leader in establishing a disability workforce target in the allied health portfolio.  
• Identify opportunities for career progression for people with a disability.  
• Partner with the Disability Workforce Coordinator to ensure the establishment of safe and appropriate workforce activities for people seeking employment and professional development pathways in allied health. |
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| 4.6 | Ensuring that recruitment processes and notification of employment and secondment opportunities are transparent and fair | DDAH HODs/Service Managers | HR Business Partners | NSW Health Recruitment and Selection Policy | • Expressions of interest to be sent out for all temporary/short term employment and secondment opportunities to ensure equal opportunity, transparency and fairness for all allied health staff.  
• NSW Health and WSLHD recruitment policy and processes are complied with at all times. |
| 4.7 | Develop an effective and sustainable performance development model. | DDAH DP&C | HR Business Partners HODs/Service Managers | WSLHD Employee Journey Program | • Implement WSLHD’s Employee Journey program.  
• Ensure all staff have an annual Performance and Development Plan with goals linked to the allied health Strategic Plan.  
• Ensure all staff receive regular feedback on their performance plan.  
• District Director allied health to participate in quarterly performance meetings with all allied health Heads of Departments, relevant operational managers/executives and Professional Leads. |
| 4.8 | To foster a culture where accountability, professionalism and open communication is expected from ALL allied health staff. | DDAH HODs/Service Managers | GMs EDMH EDICH | NSW HEALTH CORE Values WSLHD Culture Strategy | • Increase staff autonomy, accountability, responsibility and independence.  
• Maintain open lines of communication to breakdown hierarchy as well as closing feedback loops. |
• Establish teams to work within education with focus on great multidisciplinary communication.  
• Implementation of inter-professional leadership frameworks.  
• Provision of inter-professional training.  
• Link staff learning to performance plans.  
• Prioritise clinical education that improves quality and safety of service delivery.  
• Establish mentoring programs across allied health professions. |
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| 4.10 | Strengthen education governance                                          | DDAH Director Education WSLHD AH Education Committee AHTC                    | REN                   | AH Governance Guide HETI            | • Review the terms of reference of the WSLHD Allied Health Education Committee and ensure it is reflective of best practice governance processes.  
• Engage education champions to grow a team of education mentors/consultants.                                                                 |
| 4.11 | Enhance the teaching skills of discipline educators                      | DDAH AHTC                                                                    | Director Education REN Universities | AH Governance Guide HETI            | • Celebrate teaching and education excellence.  
• Maximise on job training and development opportunities.  
• Support opportunities to teach / mentor students in areas of expertise and for allied health clinicians to collaborate with universities |
| 4.12 | Improve staff education through enhanced partnerships with education providers and industry | DDAH Director Education AHTC                                                  | REN Universities      | AH Governance Guide HETI            | • Expand interdisciplinary learning forums.  
• Further develop structures to communicate educational activities and successes.  
• Focus on quality of student placements, promoting the WSLHD brand and develop the future of allied health. |
| 4.13 | Ensure allied health education priorities are linked to Western Sydney LHD Strategic plan | DDAH AHTC WSLHD AH Education Committee HODs/Service Managers                | REN                   | AH Governance Guide HETI            | • Develop central education strategies and priorities to support education delivery.  
• Work with the Research Education Network to develop WSLHD wide education, training and research strategies. |
## 5 Strategic Priority 5 – Information Underpins Everything We Do

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| 5.1 | Develop a clear and consistent communication strategy to ensure timely and accurate dissemination of information to allied health staff across all areas of WSLHD | DDAH | Communication and Finance Business Partners | WSLHD Culture Strategy | • Develop targeted email distribution lists to enable timely dissemination of information to all allied health professionals and discipline specific groups.  
• Use of social media and communication tools such as broadcasts, videos, the regular dose and the pulse to share information and celebrate success. |
| 5.2 | Develop a "data driven performance culture" within allied health | DDAH HODs, AH Data Quality Committee | DHS Business and Clinical Analytics Team eHealth | NSW Health SP Digital Health and Data Analytics #2.5 #3.5 #6.4 #6.5 | • Ensure LHD wide governance of data and analytics strategies through the WSLHD Allied Health Data Quality Committee.  
• Utilise data to plan, develop and monitor services  
• Review existing data systems and identify ways in which they can be better used to improve/support service delivery.  
• Ensure the reliability of data entry (through education and monitoring processes).  
• Explore opportunities for e-health to improve allied health service delivery. |
| 5.3 | Determine appropriate IT requirements for allied health | DDAH Chief Digital Health Officer, HODs Service Managers | DHS | eHealth Strategy for NSW Health 2016 - 2026 | • Conduct analysis of current and future Information Technology requirements for allied health and work with WSLHD DHS to develop appropriate IT infrastructure and systems to support the requirements of allied health professionals within a digital hospital environment. |
| 5.4 | Build effective relationships and governance processes with Digital Health Solutions (DHS) to ensure the information requirements of allied health professionals are addressed in a timely and appropriate manner | DDAH Chief Digital Health Officer | Officer DHS | eHealth Strategy for NSW Health 2016 - 2026 | • Advocate for a Health Informatics role within allied health.  
• Implement an IT governance structure between allied health and DHS.  
• Develop appropriate KPI’s to monitor activity and performance. |
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| 5.5 | Build effective relationships and governance processes with Business Analytics Support to ensure access to and utilisation of data is fit for purpose and meets business needs | DDAH, EDF     | Business Analytics Teams       | eHealth Strategy for NSW Health 2016 – 2026  
NSW Health Allied Health Minimum Data Set                                                             | • Partner early with Business Analytics to enable appropriate monitoring, reporting and delivery of key district wide strategies including LBVC, growth in non-admitted patient services and patient related measures.  
• Work with business analytics to improve access to real time meaningful data to support clinical operations.  
• Develop training strategies to support LHD wide roll out of new solutions, dashboards and reporting tools. |
## Strategic Priority 6 – Spending Wisely

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| 6.1 | Improve the management of our financial resources | DDAH EDF HODs/Service Managers | Finance Business Partners | NSW Health Secretary Priorities - Strengthening Governance and Accountability | • Ensure allied health staff have access to programs that support financial literacy and business capability.  
• Work with the Business Analytics Unit to ensure allied health staff have the appropriate tools to effectively report and manage operational matters and allied health performance indicators. |
| 6.2 | Increase the value of the services we deliver | DDAH HODs/Service Managers | ICH GMs EDO Business Analytics Team | LBVC | • Ensure the participation of allied health staff is front and centre in the implementation of Leading Better Value Care initiatives.  
• Identify opportunities to grow non admitted allied health services through value-based models of care away from acute facilities and into the community including outpatient, community and telehealth services.  
• Develop and apply health economics strategies to demonstrate and enhance the value of the services we deliver.  
• Develop and implement strategies to reduce preventable hospital readmissions.  
• Work with Integrated Care to ensure streamlined referral processes and clinical pathways exist across the continuum of care focussed on patient experience.  
• Identify opportunities for additional revenue generation within our coding and billing processes. |
| 6.3 | Improve our workforce utilisation in line with current evidence based practice and value based health care. | DDAH DP&C HODs/Service Managers | GMs EDs EDO | LBVC HPWP 2012-2022 | • Implement a demand-based roster model that matches clinical demands to clinical skills sets.  
• Review current skill mix and utilisation of AHA’s.  
• Utilise external staffing resources to manage demand when this option achieves greater efficiencies.  
• Identify and implement efficiencies across services/cost codes.  
• Identify and enable opportunities for allied health staff to rotate between settings and clinical areas across WSLHD.  
• Ensure the WSLHD allied health workforce is agile and flexible enabling deployment in response to peak activity and demand changes within and between WSLHD facilities and services  
• Demonstrate the courage to identify and disinvest in areas of low value care and reinvest in areas of higher value and demand to meet the needs of the WSLHD population and efficient operation of WSLHD health services. |
Glossary

ACI - Agency for Clinical Innovation
AH - allied health
AHA - allied health assistants
AHH - Aboriginal Health Hub
AHTC - Allied Health Training Coordinator
CAHO - Chief Allied Health Officer
CALD - culturally and linguistically diverse
CE - Chief Executive
DAHS - Director Aboriginal Health Strategy
DCMH - Director Community Mental Health
DDAH - District Director Allied Health
DHS - Digital Health Solutions
DP&C - Department of Premier and Cabinet
ED - Executive Directors
EDF - Executive Director Finance
EDICH - Executive Director Integrated and Community Health
EDMH - Executive Director Mental Health
FACS - Family and Community Services
GM - General Manager
GWAHS - Greater Western Aboriginal Health Service
HETI - Health Education and Training Institute
HOD - head of department
HPWP - Health Professionals Workforce Plan 2012-2022
HR - human resources
ICH - Integrated and Community Health
ID - intellectual disability
KPI - key performance indicators
LBVC - Leading Better Value Care
LHD - local health district
MH - mental health
MoH - Ministry of Health
NDIS - National Disability Insurance Scheme
NSQHS - National Safety and Quality Health Service
ODMH - Operations Director Mental Health
PAHA - Principal Allied Health Advisor
PARVAN - Prevention and Response to Violence Abuse and Neglect
PHN - Primary Health Network
PROM's - patient related outcome measures
REN - Research and Education Network
SCHN - Sydney Children’s Hospital Network
SP - strategic plan
WSLHD - Western Sydney Local Health District
Allied Health Strategic Plan 2019-2022