

**ALLIED HEALTH ASSISTANTS  
SURVEY RESULTS 2012  
NSW HEALTH**



**Health**

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## 1. Introduction

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A number of health workforce challenges have been identified that will directly impact the capacity to deliver allied health services into the future. These include:

- A growing and ageing population;
- Increase in community expectations for timely health care;
- Increase in people with chronic disease;
- Increase in the cost of technology for health service delivery;
- Misdistribution of health professionals across the state;
- Difficulties in attracting and retaining health professionals;
- An ageing workforce

In response to these growing demands, workforce redesign measures are required to ensure sustainability of our health workforce. The Allied Health Assistant (AHA) initiative is one strategy developed by the NSW Ministry of Health to address this workforce issue. The project aims to improve the utilisation of the AHA workforce and to support new models of care and improve patient care outcomes.

AHAs have been a part of the health workforce for many years however; they do not have a unique award category and therefore workforce information about this group is not readily available.

To obtain workforce information related to AHAs a survey was conducted by the Ministry of Health in July 2012. The intention of the survey was to collect information regarding the number of AHAs working across NSW Public Health facilities, the job titles used to describe AHAs and the various Allied Health disciplines they supported. It is recognised that AHAs perform a variety of tasks ranging from direct patient contact and care to technical and administrative support.

This survey represents the first time this information has been collected on a state-wide level. It will thus provide the baseline data against which future surveys can measure change and progress of the AHA initiative.

This report aims to provide comprehensive analysis of the July 2012 AHA survey and therefore to bring a clearer picture of the overall AHA workforce in NSW to support appropriate discussion and future workforce planning. The collection and analysis of the survey data is therefore a first step toward the planning and governance process.

**The NSW Public Allied Health workforce is made up of the 25 service classifications listed below:**

- Physiotherapist
- Occupational Therapist
- Diversional Therapist
- Diagnostic Radiographer
- Speech Pathologist
- Orthotist/Prosthetist
- Podiatrist
- Exercise Physiologist
- Radiation Therapist
- Pharmacist
- Dietitian
  
- Social Worker
- Medical Radiation Scientist
- Nuclear Medicine Technologist
- Psychologist
- Clinical Psychologist
- Orthoptist
- Audiologist
- Art Therapist
- Counsellor
- Genetics Counsellor
- Music Therapist
- Play Therapist
- Sexual Assault Worker
- Welfare Officer

*Of these service groups, the first eleven groups utilise assistants and are included in this report for analysis.*

## 2. Survey of AHAs in NSW

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### Survey Methodology

The Ministry of Health invited Chief Executives of Local Health Districts (LHDs) and Speciality Networks as well as St Vincent's Hospital and Royal Rehabilitation Centre to participate in a survey to identify AHAs working in the NSW public health system.

The survey was provided in an easy-to-follow EXCEL spreadsheet with specific instructions for each field. The survey requested the following information using data as at the last pay period in May 2012:

- Local Health District
- AHA Employee Name
- AHA Employee Number
- Facility
- Clinical Setting
- Allied Health Assistant Discipline 1
- Allied Health Assistant Discipline 2
- Full Time Equivalent
- Award employed under
- Qualification
- Other Relevant Qualifications
- Length of employment in Allied Health Assistant role, by year and month.

Information was received at the NSW Ministry of Health during June 2012 with follow-ups and data cleansing occurring between July and August 2012.

### Data consistency and assumptions made

The following adjustments were made to the data to ensure consistency of reporting and to enable accurate interpretation and comparison:

#### **Methods**

- The employee number was used to extract Award information from the Health Information Exchange (HIE) to enable consistent and accurate reporting.

#### **Assumptions**

- Gender was assumed on the basis of the first name provided;
- Clinical setting was grouped into Acute, Sub-acute or Community;
- Allied Health Discipline 1 was assumed to be the primary discipline of practice for the AHA and Discipline 2 was assumed to be the secondary discipline of practice.

### Survey Responses

For reporting purposes and to enable comparison of data, LHDs were grouped into the following categories: Metropolitan (Metro), Regional, and Rural. St Vincent's Hospital and Royal Rehabilitation Centre are grouped separately in 'Other' for reporting comparison purposes. This is represented in Table 1. Ambulance Service of NSW and Justice Health reported that they did not employ AHAs and were therefore not included in this analysis.

**Table 1: Grouping of Survey Participants**

<b>Metro</b>	<b>Regional</b>	<b>Rural</b>	<b>Other</b>
Sydney	Illawarra Shoalhaven	Southern NSW	St Vincent's
South Western Sydney	Nepean Blue Mountains	Murrumbidgee	Royal Rehabilitation
South Eastern Sydney	Hunter New England	Western NSW	
Western Sydney	Central Coast	Far West	
Northern Sydney		Northern NSW	
Children's Hospitals Network		Mid North Coast	

## Allied Health Disciplines that utilise Allied Health Assistants

The survey found that the following Allied Health disciplines utilised assistants:

- Physiotherapy
- Occupational Therapy
- Diversional Therapy
- Radiography
- Speech Pathology
- Orthotics/Prosthetics
- Podiatry
- Exercise Physiology
- Medical Radiation Therapy
- Pharmacy
- Nutrition and Dietetics

Assistants in Pharmacy include both Pharmacy Assistants and Pharmacy Technicians. Survey information relating to this group was not reported consistently. However, this group of employees are reimbursed under a specific classification in the Health Employees (State) Award and therefore information relating to this group was extracted from the HIE.

Assistants in Orthotics/Prosthetics also have a specific classification in the Health Employees (State) Award and data for this group was consistent as reported in the survey and extracted from the HIE, therefore the survey data was utilised for the purposes of this report.

Dietitian Assistants were not reported consistently in the survey, this could be due to the fact that many have been transferred from an LHD to be employed by Health Share, the former Health Support Services. HealthShare did not participate in the survey and therefore information regarding some Dietitian Assistants was not collected. For the purposes of this report, analysis for this group will be provided in a separate chapter.

### 3. Definitions of AHAs according to Discipline

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The allied health workforce in Australia is comprised of Allied Health Professionals (AHPs) and other technicians, assistants and support workers who work with AHPs.<sup>1</sup> A number of allied health professional bodies have issued position statements defining the role of AHAs. These are included below. Where a descriptor was not available from a professional association, descriptions were obtained from the NSW Health Allied Health Advisors Groups.

#### Allied Health Assistant

The worker is required to conduct therapeutic and program related activities under the guidance of an Allied Health Professional. Supervision may be direct, indirect or remote and must occur within organisational requirements.<sup>2</sup>

#### Physiotherapy Assistants

The Australian Physiotherapy Association defines a Physiotherapy Assistant as a health care worker who works under the supervision of a registered physiotherapist and holds a Certificate IV in Allied Health Assistance (Physiotherapy) or equivalent. These workers have a range of skills which allow a physiotherapist to confidently delegate a higher level of tasks than other support workers.<sup>3</sup>

#### Occupational Therapy Assistants

Occupational Therapy Assistants have been defined as staff that support and supplement the work of a qualified occupational therapist in the delivery of health care to clients. The role may include implementation of specific interventions under the direction of qualified occupational therapists.<sup>4</sup>

#### Diversional Therapy Assistants

The role of Diversional Therapy Assistants includes both direct clinical care and support to clinical care. Within direct clinical care the role may include mobility assistance and helping the Diversional Therapist run daily activity programs aimed at enhancing social inclusion, physical activity and mental wellbeing.

Within the assistant role activities may include drivers transporting frail Aged Day Centre clients between their homes and the centres.

#### Dietitian Assistants

Dietitian Assistants are skilled health care workers who, under the direct supervision of a professionally qualified Dietitian, can assist in the implementation of a client's nutritional care program. Dietitian Assistants have a skills-set derived from their Vocational Education and Training (VET) qualifications which enables them to support nutrition and dietetic service delivery. Although some of the tasks undertaken by Dietitian Assistants in some settings may encompass duties related to other services, more than 75% of their work time is in the performance of clinical nutrition support tasks.<sup>5</sup>

#### Pharmacy Assistants

Pharmacy Assistants undertake a number of different tasks in a hospital pharmacy. These mainly involve drug distribution to wards, hospital pharmacy production and dispensing activities under the

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<sup>1</sup> Allied Health Professions Australia

<sup>2</sup> Community Services and Health Industry Skills Council – HLT42512 Certificate IV in Allied Health Assistance

<sup>3</sup> Australian Physiotherapy Association Position Statement

<sup>4</sup> Occupational Therapy Australia

<sup>5</sup> Statement of NSW Health Nutrition and Dietetics Advisors Group on the Roles and Tasks Undertaken by Dietitian Assistants; May 2010

supervision of a Registered Pharmacist and/or Technician. The award stipulates that Grade 1 Pharmacy Assistants do not require a qualification, but at Grade 2 a qualification in Certificate III in Community Pharmacy is required.<sup>6</sup>

### Pharmacy Technicians

A Grade 1 Pharmacy Technician must be qualified with at least a Certificate III in Community Pharmacy, Grades 2 – 4 Pharmacy Technician require a Pharmacy Technician Certificate IV or must have qualifications deemed by the employer as equivalent. The duties performed by this group will vary depending on the level of competency displayed in performing complex tasks under supervision of a Pharmacist in specialist areas of practice. These may include cytotoxic drug reconstitution, sterile production, clinical trials, information management systems etc.<sup>7</sup>

### Speech Pathology Assistant

Speech Pathology Australia (SPA) identifies various position titles of speech pathology support staff including allied health assistants, therapy assistants, language aides, and literacy aides, integration aides or school services officers. SPA acknowledges that the role of these workers and the level of training and experience required are often not clearly defined and that speech pathologists must provide adequate training and then determine the competency of the support worker to undertake the delegated tasks.<sup>8</sup>

### Orthotic/Prosthetic Assistant

Technical Assistant (Orthotic/Prosthetics) at Level 1 are responsible for providing technical support to Orthotists and the manufacture of a comprehensive range of orthotic and related devices for patients referred to the Orthotic Department. This includes fabrication, adjustment, modification, maintenance and repair of orthoses as requested by the Orthotist. The technician may be asked to attend outpatient clinics, clinical rooms or hospital wards to assist the attending Orthotist. This includes assisting the Orthotist during casting or measure taking procedures. A Technical Assistant (Orthotic/Prosthetics) at Level 2 will have a comprehensive range of knowledge and skills to a high standard in a variety of areas of technical production and design and methods of manufacture and may be called upon to provide advice in each of these areas.<sup>9</sup>

### Podiatry Assistant

The Podiatry Board of Australia defines a podiatry assistant as a member of staff employed within a facility or practice who is not a registered podiatrist and who assists a podiatrist in the delivery of services to his or her patients or clients. Assistants can be delegated treatment of 'low risk' clients, is defined as a person who may have systemic disease however it is managed and stable and there are no systemic complications involving the foot or lower limb.<sup>10</sup>

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<sup>6</sup> Health Employees' (State) Award

<sup>7</sup> Health Employees' (State) Award

<sup>8</sup> Speech Pathology Australia Parameters of Practice (2005-2007)

<sup>9</sup> Health Employees' Technical (State) Award

<sup>10</sup> Podiatry Board of Australia – *Guidelines for podiatrists working with podiatric assistants in podiatry practice 2010*

## 4. AHA Workforce by Local Health District (LHD)

### Full-Time Equivalent (FTE) of Allied Health Workforce

Award regulations for the AHA workforce determine 38 hours as the standard working week which equates to 1 Full Time Equivalent (FTE). Amounts worked less than the 38 hours is defined as part-time work and reported as a proportion to 1 FTE.

The survey required Local Health Districts (LHDs) to report the FTE contribution of all employed AHAs. Data for Assistants in Pharmacy included both Pharmacy Assistants and Technicians and was extracted from the Health Information Exchange (HIE) for the same period as the survey, 30 May 2012. This is represented in Table 2.

The total derived AHA FTE for each LHD was calculated by adding the AHA survey FTE and the FTE as extracted from the HIE for Assistants in Pharmacy. The total derived FTE for the AHA workforce is 612.2.

**Table 2: Total FTE of AHA Workforce by LHD**

LHD	AHA* Survey FTE	Assistants in Pharmacy^ HIE FTE	Total Derived AHA FTE
<b>METROPOLITAN</b>			
Sydney	8.7	24.6	33.3
South Western Sydney	26.4	19.1	45.5
South Eastern Sydney	25.8	27.3	53.1
Western Sydney	23.0	32.0	55.1
Northern Sydney	10.4	26.2	36.5
Children's Hospitals Network	8.6	15.2	23.8
<b>REGIONAL</b>			
Illawarra Shoalhaven	22.4	18.2	40.7
Nepean Blue Mountains	34.4	9.6	44.0
Hunter New England	47.4	51.4	98.8
Central Coast	14.9	23.0	37.9
<b>RURAL</b>			
Southern NSW	13.0	1.6	14.6
Murrumbidgee	20.2	5.0	25.2
Northern NSW	10.9	17.8	28.6
Mid North Coast	6.0	11.1	17.1
Western NSW	23.4	12.2	35.5
Far West	4.0	3.0	7.0
<b>Sub Total</b>	<b>299.4</b>	<b>297.4</b>	<b>596.8</b>
<b>OTHER</b>			
St Vincent's	1.0	N/A	1.0
Royal Rehabilitation	14.4	N/A	14.4
<b>Grand Total</b>	<b>314.8</b>	<b>N/A</b>	<b>612.2</b>

Notes –

\* AHA FTE is as reported in the survey and is therefore an estimate.

^ Data for Assistants in Pharmacy was extracted from the HIE as at 30 May 2012

Does not include Dietitian Assistants (see Chapter 12)

St Vincent's and Royal Rehabilitation Centre do not report into the HIE, therefore information relating to Assistants in Pharmacy for these employers could not be obtained



## Total Number of AHAs employed in NSW Health

The survey requested that LHDs identify each AHA that was employed at 30 May 2012. This is represented in Table 3 below which showed a total of 398 AHAs were employed as of this date. The data for Assistants in Pharmacy was extracted from the HIE as instances on the payroll for each LHD, totalling 389. The totals for each LHD were added to give a total number of AHA per LHD. Based on this calculation, the total number of AHAs employed in NSW is 787.

There are some limitations to this data, the total headcount as reported in the survey is a figure reliant on manual entry and can therefore only be treated as an estimate. Also, the instances on the payroll for Assistants in Pharmacy is based on employee number. An individual may be employed across more than one LHD in which case would have more than one employee number and can therefore appear on the payroll on more than one occasion.

**Table 3: Total numbers of Allied Health Assistants by LHD (headcount)**

LHD	AHA Survey	Assistants in Pharmacy HIE	AHA total number
<b>METROPOLITAN</b>			
Sydney	10	27	37
South Western Sydney	34	23	57
South Eastern Sydney	33	34	67
Western Sydney	25	39	64
Northern Sydney	14	32	46
Children's Hospitals Network	9	12	21
<b>REGIONAL</b>			
Illawarra Shoalhaven	30	30	60
Nepean Blue Mountains	40	11	51
Hunter New England	68	75	143
Central Coast	19	33	52
<b>RURAL</b>			
Southern NSW	16	3	19
Murrumbidgee	23	8	31
Northern NSW	13	23	36
Mid North Coast	9	18	27
Western NSW	32	18	50
Far West	5	3	8
<b>OTHER</b>			
St Vincent's	1	N/A	1
Royal Rehabilitation	17	N/A	17
<b>Total</b>	<b>398</b>	<b>389</b>	<b>787</b>

The number of AHAs employed in LHDs varied depending on the geographical size of the LHD, the number of employees and the type of services provided. Hunter New England employs the highest number of AHAs (143) in NSW. This contrasts to their regional counterparts ranging from 51 (Nepean Blue Mountains) and 60 (Illawarra Shoalhaven), and may be attributed to Hunter New England remaining a very large LHD.

## 5. Part-time AHA Workforce

If an employee worked less than the 38 hours per week, they are defined as working part-time. This was reported as a proportion to 1 FTE in the survey. Table 4 shows the total number of AHAs per LHD separated by the number reported to be working less than 1 FTE, with the proportion working part-time included as a percentage of the total. Of the total 787 AHA positions reported, 385 (48.9%) were part-time workers. Data for Assistants in Pharmacy was also included in the totals.

**Table 4: Proportion of AHAs working part-time or less than 1 FTE**

	AHA < 1 FTE	Total	% Part time
<b>METROPOLITAN</b>			
Sydney	8	37	21.6%
South Western Sydney	26	57	45.6%
South Eastern Sydney	26	67	38.8%
Western Sydney	19	64	29.7%
Northern Sydney	19	46	41.3%
Children's Hospitals Network	9	21	42.9%
<b>REGIONAL</b>			
Illawarra Shoalhaven	34	60	56.7%
Nepean Blue Mountains	17	51	33.3%
Hunter New England	94	143	65.7%
Central Coast	33	52	63.5%
<b>RURAL</b>			
Southern NSW	11	19	57.9%
Murrumbidgee	12	31	38.7%
Northern NSW	19	36	52.8%
Mid North Coast	20	27	74.1%
Western NSW	29	50	58.0%
Far West	2	8	25.0%
<b>OTHER</b>			
Royal Rehabilitation	7	17	41.2%
St Vincent's	0	1	0.0%
<b>Total</b>	<b>385</b>	<b>787</b>	<b>48.9%</b>

In the Metropolitan group, Sydney LHD employs the smallest proportion of part-time workers (21.6%). This compares to its counterparts South Western Sydney, Northern Sydney and Children's Hospital Network where more than 40% of the AHA workforce are employed part-time. Mid North Coast employ the largest proportion of part-time workers, 74.1%. Two of the regional LHDs Hunter New England and Central Coast have more than 60% of their AHAs workforce working part-time.

## 6. Gender of the AHA Workforce

The survey required LHDs to identify the AHAs employed by first name and surname. The gender for these individuals was assumed using the first name. The information in HIE relating to Assistants in Pharmacy distinguishes gender.

Table 5 shows a breakdown of AHAs by gender. Of the 787 AHAs reported to be working in LHDs, 658 (78.9%) were female and 129 (21.1%) were male.

**Table 5: AHA Headcount breakdown by Gender**

Gender	AHA Survey	Assistants in Pharmacy	Total number	% of Total number
Female	314	344	658	78.9%
Male	84	45	129	21.1%
<b>Total</b>	<b>398</b>	<b>389</b>	<b>787</b>	<b>100.0%</b>

Note: The numbers for Assistants in Pharmacy include both Pharmacy Assistants and Technicians. This number is the Instances on the Payroll extracted from HIE as at 30 May 2012.

The AHA workforce employed part-time was broken down by gender. This is represented in Table 6 showing that 18.6% of males are reported to be working less than 38 hours per week, comparable to 54.9% of females. This is consistent with previous reports of more females working part-time hours than males in the health workforce.<sup>11</sup>

**Table 6 – Full-time and Part-time split by gender**

	Part-time	Full-time	Total	% Part-time
Female	361	297	658	54.9%
Male	24	105	129	18.6%
<b>Total</b>	<b>385</b>	<b>402</b>	<b>787</b>	<b>48.9%</b>

It has been reported that the Allied Health Professional workforce is also a female dominated part-time workforce and that many leave the workforce primarily for family reasons but return to the workforce later; males also leave the workforce but are less likely to return.<sup>12</sup> This survey did not capture information relating to the exit and return rates of AHAs in the workforce; however information relating to the length of employment is provided in Chapter 10.

<sup>11</sup> Medical, Nursing, Pharmacy, Physiotherapy, Podiatry, Psychology, Dental and Dental Auxiliary Labourforce Profiles NSW (2000 -2009), are available online <http://www.health.nsw.gov.au/pubs/subs/workforce.asp>

<sup>12</sup> *Allied Health Workforce Modelling NSW 2011* – NSW Ministry of Health 2012

## 7. Distribution of Allied Health Assistants

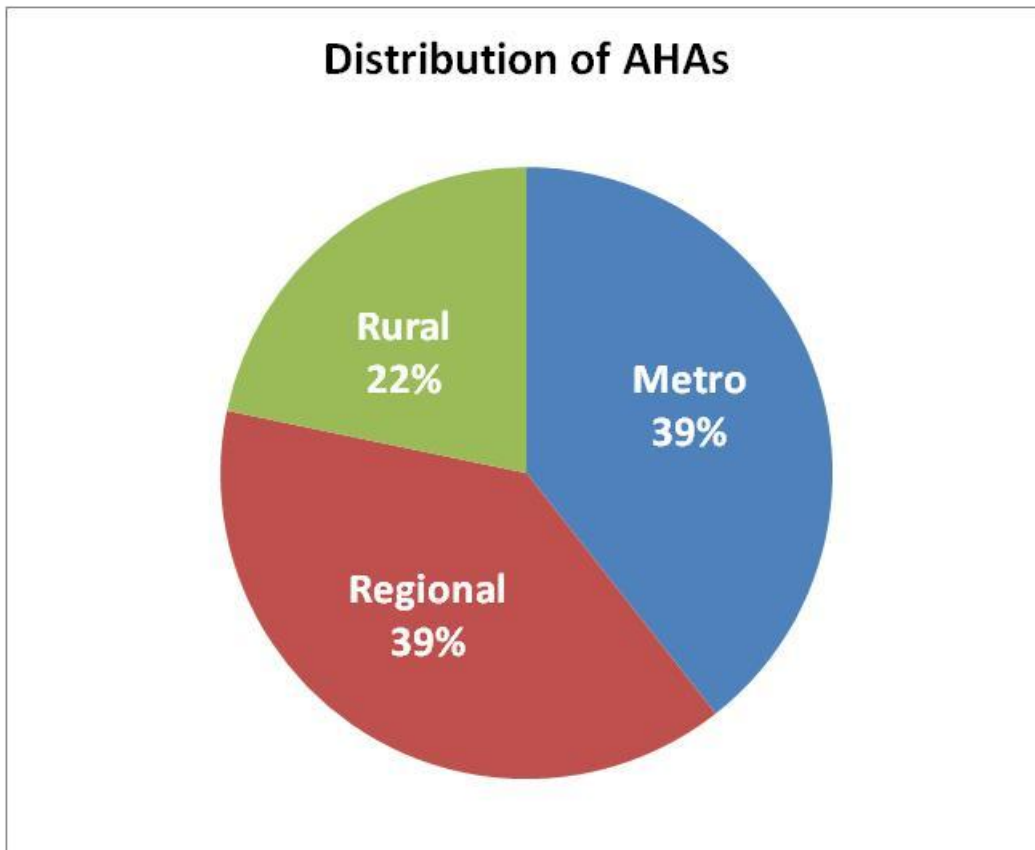
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Table 7 shows the distribution of the Allied Health Assistant (AHA) workforce by Metropolitan (Metro), Regional and Rural facilities. This table illustrates that the highest proportion of AHAs in NSW are located in Metro, (310, 39.4%) followed by Regional, (306, 38.9%), and then Rural (171, 21.7%). This is also represented in Chart 1.

**Table 7: Metro, Regional and Rural split by LHD**

Location	Total	% of Total
<b>Metro</b>	310	39.4%
<b>Regional</b>	306	38.9%
<b>Rural</b>	171	21.7%
<b>Total</b>	<b>787</b>	<b>100%</b>

**Chart 1 - Distribution of AHAs Workforce**



Note: **Metro** LHDs are Children's Hospital Network, Northern Sydney, South Eastern Sydney, South Western Sydney, Sydney, Western Sydney. **Regional** LHDs include Central Coast, Hunter New England, Illawarra Shoalhaven, Nepean Blue Mountains. **Rural** LHDs are Far West, Murrumbidgee, Mid North Coast, Southern NSW, Northern NSW and Western NSW. For the purposes of this report Royal Rehabilitation and St Vincent's are classified as Metro facilities.

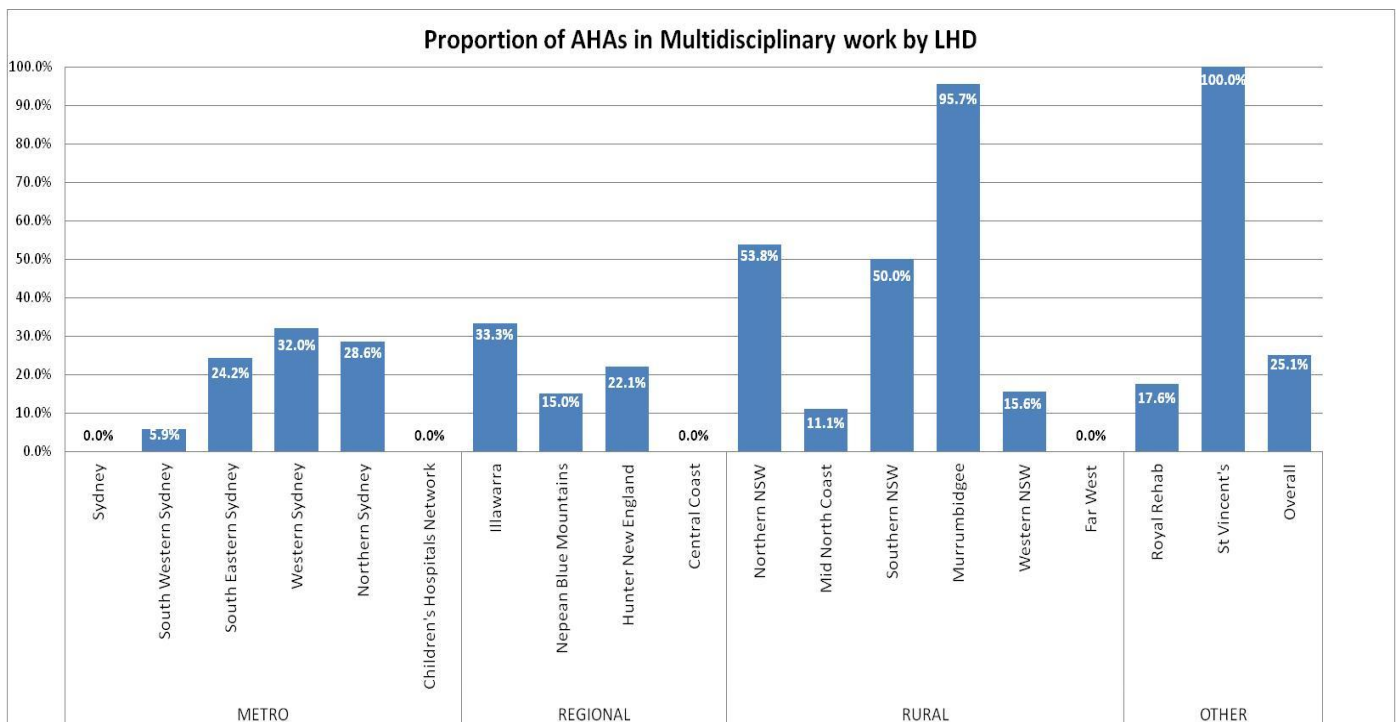
## 8. Multi and Single Disciplinary Split

The survey asked respondents to identify the various disciplines the AHAs were working in. It was assumed that 'Discipline 1' was the primary discipline and that 'Discipline 2' was the secondary discipline. AHAs providing services in more than one discipline were considered to be Multidisciplinary AHAs (Multi).

Chart 2 shows the proportion of AHAs working in more than one discipline separated by LHD. AHAs employed at Sydney, Children's Hospital Network, Central Coast, and Far West work with a single discipline. A total of 95.7% AHAs employed in Murrumbidgee are working across more than one discipline; this can be attributed to the Rural AHA Project<sup>13</sup>. St Vincent's employ one AHA across both Physiotherapy and Occupational Therapy. Southern NSW and Northern NSW also employ at least 50% of AHAs providing service across more than discipline. It can be seen that just over 25% of the AHA workforce are working in more than one discipline.

Assistants in Pharmacy have been excluded from this analysis as they only provide services in Pharmacy and are allocated in accordance with the required qualification and award structure. Thus, there is no scope to train this workforce outside of a single discipline.

**Chart 2: Proportion of AHAs working in more than one discipline by LHD**



<sup>13</sup> Evaluation – Rural Allied Health Assistant (RAHA) Project – Interim Reports 1 (Dec 2010) & 2 (Nov 2011), Rural Division, Health Education & Training Institute

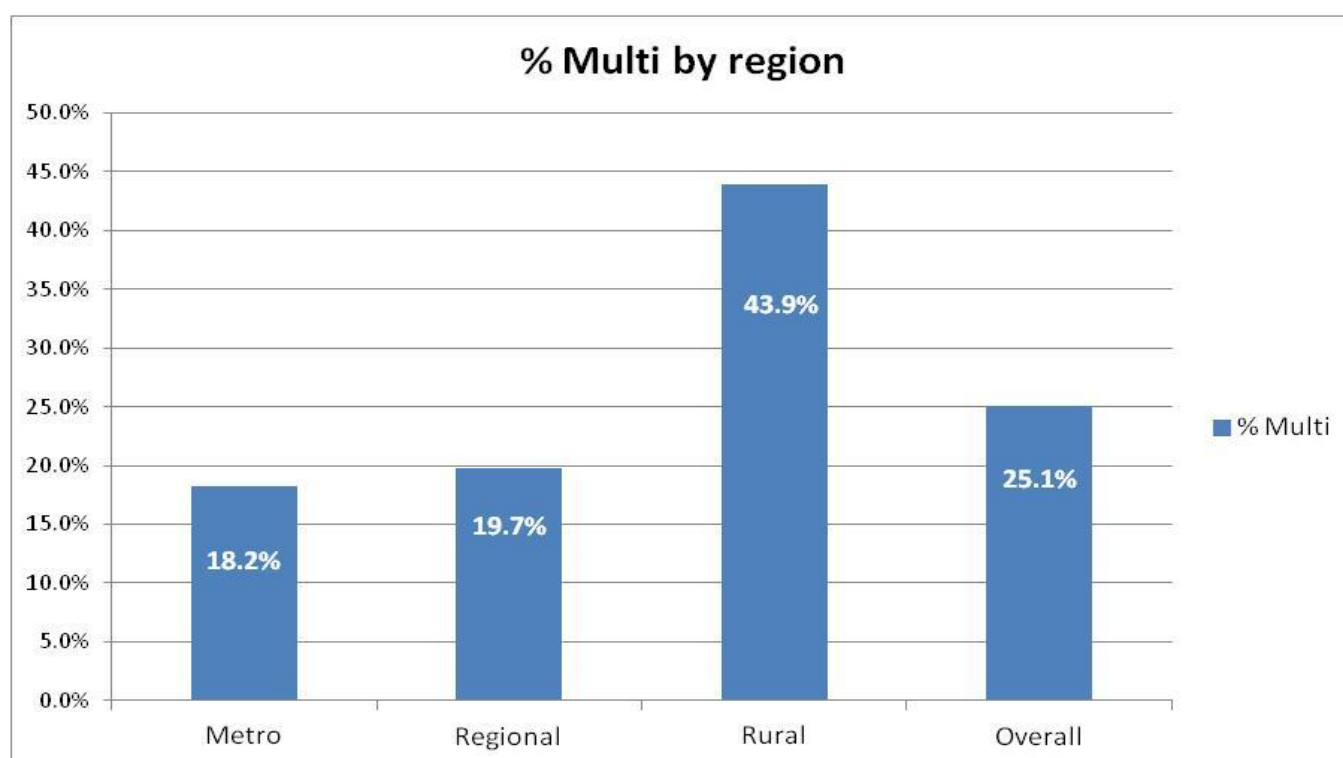
Table 9 shows that 43.9% of AHAs working in Rural areas are working in more than discipline. This is comparable to Metro and Regional LHDs where less than 20% of AHAs are working in more than one discipline.

**Table 9: Multi and Single Disciplinary Spilt by Metro, Regional and Rural**

Location	Multi	Single	Total	% Multi
<b>Metro</b>	26	117	143	18.2%
<b>Regional</b>	31	126	157	19.7%
<b>Rural</b>	43	55	98	43.9%
<b>Total</b>	<b>100</b>	<b>298</b>	<b>398</b>	<b>25.1%</b>

These results are also represented in Chart 3 which shows that AHAs employed in a rural location appear more likely to work across more than one discipline. A reason for this could be due to the undersupply of the professional workforce and the requirement to be trained across more than one discipline to enable effective delivery of Allied Health services.<sup>14</sup>

**Chart 3: Proportion of AHAs in Multidisciplinary work by region**



<sup>14</sup> Evaluation – Rural Allied Health Assistant (RAHA) Project – Interim Reports 1 (Dec 2010) & 2 (Nov 2011), Rural Division, Health Education & Training Institute

The primary and secondary disciplines were grouped according to the various combinations AHAs are providing services in. This is represented in Table 10. It can be seen that 41 Assistants in Physiotherapy (PT) are also working as Assistants in Occupational Therapy (OT). It also shows that 38 Assistants in OT are also working as Assistants in PT, bringing this combination of PT and OT to a total of 79, and the most common combination for AHAs to be providing allied health services.

The results from the survey reported that Radiography, Orthotics/Prosthetics, Podiatry and Exercise Physiology Assistants in NSW do not work in any other discipline.

**Table 10: Breakdown of AHA by primary and secondary disciplines**

<b>Discipline Combination</b>	<b>Primary Discipline</b>	<b>Secondary Discipline</b>
<b>Assistants in Pharmacy<sup>^</sup></b>	<b>389</b>	
<b>Physiotherapy</b>	<b>214</b>	
Occupational Therapy		41
Speech Pathology		2
Dietetics		1
<b>Occupational Therapy</b>	<b>134</b>	
Physiotherapy		38
Speech Pathology		11
Art Therapy		1
Dietetics		1
<b>Diversional Therapy</b>	<b>21</b>	
Occupational Therapy		1
<b>Radiography</b>	<b>10</b>	
<b>Speech Pathology</b>	<b>7</b>	
Occupational Therapy		3
<b>Orthotics/ Prosthetics</b>	<b>5</b>	
<b>Podiatry</b>	<b>3</b>	
<b>Exercise Physiology</b>	<b>2</b>	
<b>Medical Radiation Therapy</b>	<b>1</b>	
Occupational Therapy		1
<b>Unknown</b>	<b>1</b>	
<b>Total</b>	<b>787</b>	<b>100</b>

<sup>^</sup> Note: The data for Assistants in Pharmacy are the instances on the payroll extracted from HIE as at 30 May 2012 and includes both Pharmacy Assistants and Technicians.

## 9. Clinical Setting

Respondents were required to identify in which clinical setting the AHA was employed. This was a free text field and the responses varied considerably as individuals did not use consistent terminology to identify particular clinical settings. The responses were grouped into one of 3 different clinical settings:

1. Acute – in a hospital setting
2. Sub-acute – in a rehabilitation facility
3. Community – in the home or hospital out-patients

Table 11 shows the split of AHAs employed across the three settings by LHD. AHAs employed in the rural LHDs employ more AHAs in the community and that AHAs in Southern NSW, Murrumbidgee and Far West do not employ any AHAs in the Acute care setting.

**Table 11: Clinical Setting of AHAs split by LHD**

LHD	Acute	Sub-acute	Community	Total
<b>METRO</b>				
Sydney	5	3	2	10
South Western Sydney	10	15	9	34
South Eastern Sydney	4	20	9	33
Western Sydney	20	5	0	25
Northern Sydney	5	6	3	14
Children's Hospitals Network	7	2	0	9
<b>REGIONAL</b>				
Illawarra	8	19	3	30
Nepean Blue Mountains	10	20	10	40
Hunter New England	37	12	19	68
Central Coast	7	9	3	19
<b>RURAL</b>				
Southern NSW	0	2	14	16
Murrumbidgee	0	10	13	23
Northern NSW	1	3	9	13
Mid North Coast	1	5	3	9
Western NSW	5	16	11	32
Far West	0	0	5	5
<b>OTHER</b>				
Royal Rehabilitation	0	10	7	17
St Vincent's	0	1	0	1
<b>Total</b>	<b>120</b>	<b>158</b>	<b>120</b>	<b>398</b>

Note: Assistants in Pharmacy were not included in this analysis.



The data was consolidated into Acute, Sub-acute and Community for Metro, Regional and Rural LHDs. This is represented in Table 12, and also in Chart 4. It can be seen that the number of AHAs employed in acute care and the community setting are the same (120, 30%) and that more are employed in the sub-acute setting (158, 40%).

**Table 12: Number of AHAs spilt by clinical setting and location**

Location	Acute	Sub-acute	Community	Total
Metro	51	62	30	143
Rural	7	36	55	98
Regional	62	60	35	157
<b>Grand Total</b>	<b>120</b>	<b>158</b>	<b>120</b>	<b>398</b>

**Chart 4: Proportion of AHAs spilt by clinical setting**

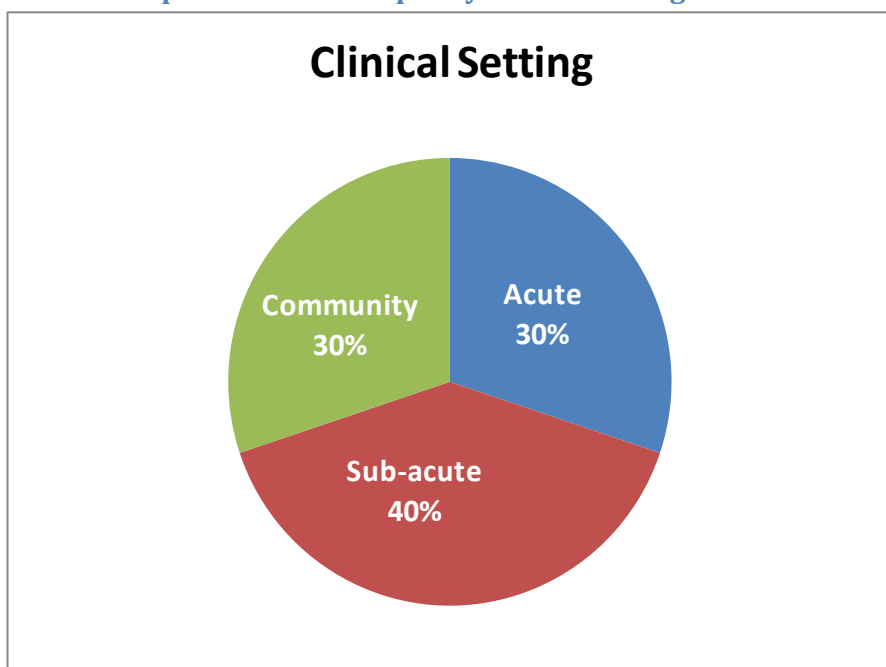
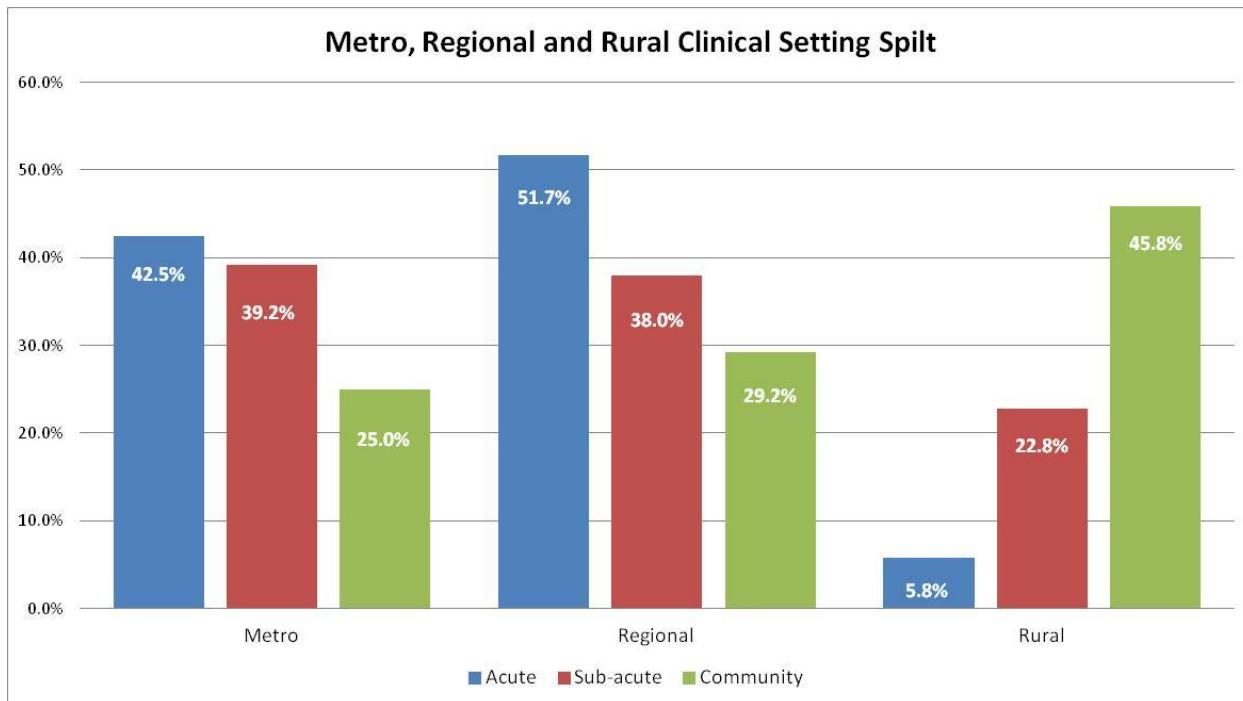


Chart 5 shows the clinical setting spilt by Metro, Regional and Rural LHDs. AHAs employed in metro and regional LHDs offer more services in the acute and sub-acute settings than in the community, whereas AHAs in Rural LHDs primarily provide services in the community setting and less likely to be employed in the acute care setting.

**Chart 5: Metro, Regional and Rural Clinical Setting Spilt**



## 10. Length of Employment

The survey requested respondents identify the number of years and months each AHA has been employed. An average number of employment months was calculated for each LHD and is represented in Table 13 below. Sydney and Central Coast employ AHAs for an average of 12 years or more. Overall AHAs are employed by one LHD for an average of 6.6 years.

**Table 13: Average number of months AHAs are employed per LHD**

LHD	Headcount	Average (years)
<b>METRO</b>		
Sydney	10	12.6
South Western Sydney	34	5.4
South Eastern Sydney	33	4.0
Western Sydney	25	5.6
Northern Sydney	14	4.8
Children's Hospitals Network	9	7.2
<b>REGIONAL</b>		
Illawarra Shoalhaven	30	7.2
Nepean Blue Mountains	40	7.8
Hunter New England	68	6.2
Central Coast	19	12.5
<b>RURAL</b>		
Southern NSW	16	7.1
Murrumbidgee	23	4.4
Northern NSW	13	9.9
Mid North Coast	9	7.8
Western NSW	32	6.8
Far West	5	4.6
<b>OTHER</b>		
Royal Rehabilitation	17	3.1
St Vincent's	1	2.2
<b>Overall</b>	<b>398</b>	<b>6.6</b>

## 11. Qualifications of Allied Health Assistants

Table 14 shows the number of AHAs and the qualifications they hold. It can be seen that 33.7% (134) of the AHA workforce hold a Certificate IV qualification in AHA, that 6.8% (27) are working towards a Certificate IV in AHA and 2% (8) hold a Certificate III in AHA. Thus, a total of 169 or 42.5% of the AHA workforce will be qualified with a Certificate in AHA. It should be noted that 30.2% (120) of the workforce do not have formal qualifications. It can be seen that there is inconsistency with the level and type of qualifications that AHAs working in NSW hold.

**Table 14: Qualifications of AHAs**

Qualification	Number	% of Total
<b>Cert IV AHA</b>	134	33.7%
<b>No qualification</b>	120	30.2%
<b>Working towards Cert IV AHA</b>	27	6.8%
<b>Nursing EN</b>	13	3.3%
<b>Bachelor Exercise Science</b>	12	3.0%
<b>Nursing AIN</b>	12	3.0%
<b>Overseas qualified physiotherapist</b>	12	3.0%
<b>Other</b>	11	2.8%
<b>Cert III in Aged Care</b>	9	2.3%
<b>Cert III AHA</b>	8	2.0%
<b>AH student</b>	7	1.8%
<b>Cert III or IV in Disability</b>	7	1.8%
<b>Cert IV Leisure and Health</b>	5	1.3%
<b>Diversional Therapy</b>	4	1.0%
<b>Cert III or IV in Fitness</b>	4	1.0%
<b>Bachelor Other</b>	3	0.8%
<b>Orthotic Qualification</b>	3	0.8%
<b>Remedial massage</b>	3	0.8%
<b>Bachelor Occupational Therapy</b>	2	0.5%
<b>Nursing RN</b>	1	0.3%
<b>Overseas qualified nurse</b>	1	0.3%
<b>Grand Total</b>	<b>398</b>	<b>100%</b>

Notes on qualifications:

- There are 11 AHAs with qualification grouped as 'Other'. This includes: Diploma of Teaching, Certificate in Information Technology, Associate Diploma in Social Science, Certificate II in Health Support Services, Australian Physio Association course in Physio Assistants, Cert II in Emergency Medicine, Cert III Health Services Assistance, Diploma in Welfare, Cert IV in Community Services work
- Diversional Therapy consists of Cert II in Diversional Therapy (2), Associate Diploma in Diversional Therapy (1) and Certificate in Art Therapy (1)
- Bachelor Other consists of Exercise Physiologist, Bachelor of Science (Human Movement) and Bachelor of Health Science Therapeutic Recreation
- Remedial Massage includes Diploma in Remedial Therapy and Diploma Health Science (Massage Therapy) 2000

Award regulations specify that Assistants in Pharmacy are required to hold a qualification in order to be employed as either a Pharmacy Assistant or Pharmacy Technician. The most relevant qualifications are either a Certificate III or IV in Hospital-Health Services Pharmacy Support. The total numbers are represented in Table 15.

**Table 15: Qualifications for Assistants in Pharmacy**

Pharmacy	Qualification	Instances on Payroll	% of Total
Pharmacy Assistant Gde1	No qual or Cert III	87	22.4%
Pharmacy Assistant Gde2	Cert III	28	7.2%
Pharmacy Technician Gde1	Cert III	127	32.7%
Pharmacy Technician (Grade 2 – 4)	Cert IV	147	37.8%
<b>Total</b>		<b>389</b>	<b>100.0%</b>

## 12. Dietitian Assistants

Survey data indicated that not all LHDs reported this group consistently and therefore have not been included in the overall AHA headcount and FTE (Chapter 4, Tables 2 and 3. Illawarra Shoalhaven, Northern NSW, Southern NSW, Far West and St Vincent's did not report on this group. In some former Area Health Services, nutrition assistants were reassigned to Food Services and are therefore managed under HealthShare. This may explain this variation.

### Headcount and Full Time Equivalent (FTE) of Dietitian Assistants

It was reported in the survey that there are 142 Dietitian Assistant employed across LHDs, this is represented in Table 16. The FTE as reported in the survey for Assistants in each LHD is also included in Table 16 below.

**Table 16: FTE of Dietitian Assistants and Dietitians by LHD**

LHD	Dietitian Assistant Headcount*	Dietitian Assistant FTE^
<b>METRO</b>		
Sydney	19	17.8
South Western Sydney	26	20.6
South Eastern Sydney	20	18.1
Western Sydney	16	16
Northern Sydney	1	1
Children's Hospitals Network	19	16.3
<b>REGIONAL</b>		
Nepean Blue Mountains	12	10.5
Hunter New England	6	3.1
Central Coast	11	8
<b>RURAL</b>		
Murrumbidgee	2	1.8
Mid North Coast	4	2.7
Western NSW	5	4.8
<b>OTHER</b>		
Royal Rehabilitation	1	0.4
<b>Total</b>	<b>142</b>	<b>121</b>

Notes:

\*The headcount figure is reported in the survey and can therefore only be treated as an estimate

^ The FTE for Dietitian Assistants is reported in the survey and can therefore only be treated as an estimate.

## Part-Time workforce

AHAs who worked less than the 38 hours per week are defined as being part-time workers and were reported as a proportion to 1 FTE in the survey. Table 17 shows the total number of Dietitian Assistants working full-time (91) and part-time (51), also that 35.9% of Dietitian Assistants are working part-time. This is comparable to all other AHAs where 48.9% are working part-time (Table 4).

**Table 17: Full-time and Part-time spilt of Dietitian Assistants by LHDs**

LHD	Full-Time	Part-Time	Total	% Part-time
<b>METRO</b>				
Sydney	16	3	19	15.8%
South Western Sydney	14	12	26	46.2%
South Eastern Sydney	14	6	20	30.0%
Western Sydney	16	0	16	0.0%
Northern Sydney	1	0	1	0.0%
Children's Hospitals Network	13	6	19	31.6%
<b>REGIONAL</b>				
Nepean Blue Mountains	6	6	12	50.0%
Hunter New England	1	5	6	83.3%
Central Coast	4	7	11	63.6%
<b>RURAL</b>				
Murrumbidgee	1	1	2	50.0%
Mid North Coast	1	3	4	75.0%
Western NSW	4	1	5	20.0%
<b>OTHER</b>				
Royal Rehabilitation	0	1	1	100.0%
<b>Total</b>	<b>91</b>	<b>51</b>	<b>142</b>	<b>35.9%</b>

**Table 18: Full-time and Part-time spilt of Dietitian Assistants by Gender**

	Full-time	Part-time	Total	% Part-time
Female	88	49	137	35.7%
Male	3	2	5	40.0%
<b>Total</b>	<b>91</b>	<b>51</b>	<b>142</b>	<b>35.9%</b>

Table 18 shows the gender spilt of the Dietitian Assistant workforce and the proportion working part-time. It can be seen that 35.7% of women and 40% of men are working part-time. This is comparable to all other AHAs where 54.9% of women and 18.6% of men are working part-time (Table 5). It should be noted that the large proportion of male Dietitian Assistants working part-time can be attributed to the low numbers of males in the workforce.

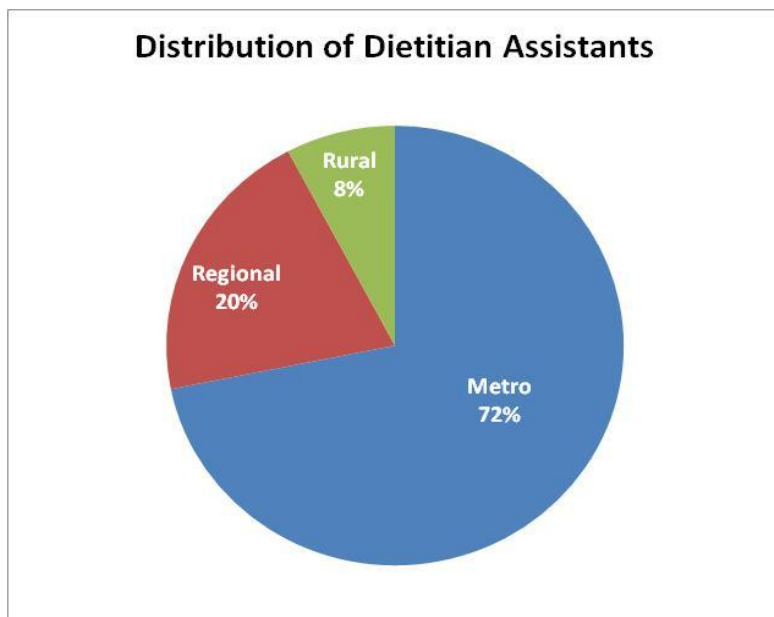
## Distribution of Dietitian Assistants

Table 19 shows the distribution of Dietitian Assistants by Metro, Regional and Rural facilities. It can be seen that the survey reported 72% are employed by Metro LHDs, followed by Regional (20%) and only 8% are employed in Rural LHDs. This is also represented in Chart 6.

**Table 19: Distribution of Dietitian Assistants**

Location	Headcount	% of Total
<b>Metro</b>	102	72%
<b>Regional</b>	29	20%
<b>Rural</b>	11	8%
<b>Total</b>	<b>142</b>	<b>100%</b>

**Chart 6: Distribution of Dietitian Assistants**



### Clinical Setting

As described in Chapter 9 responses for this field were grouped into one of 3 different clinical settings:

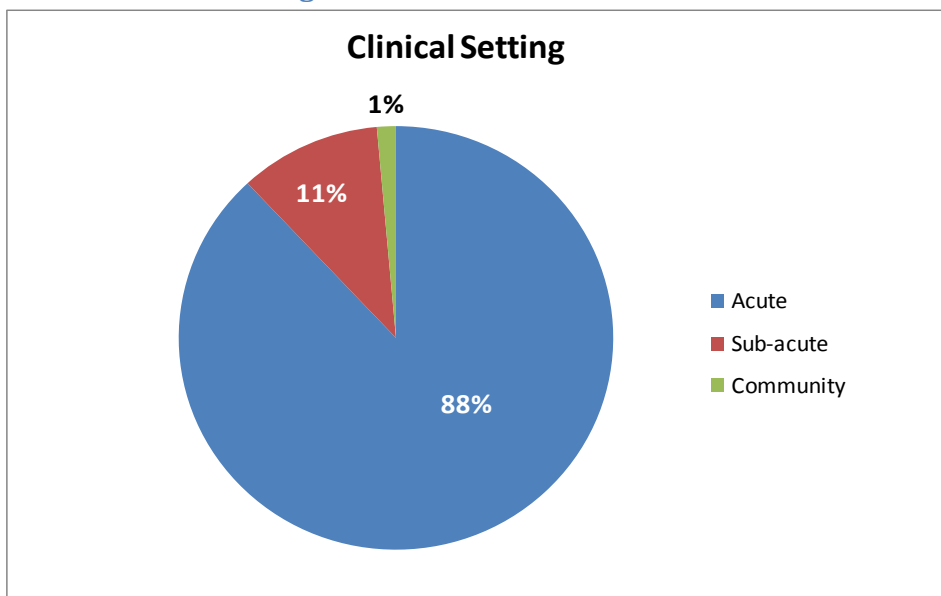
1. Acute – in hospital setting
2. Sub-acute – in a rehabilitation facility
3. Community – in the home or hospital out-patients

Table 20 shows the split of Dietitian Assistants across the 3 clinical settings by LHD. It can be seen that Hunter New England is the only LHD that have reported to employ Dietitian Assistants in the community setting. The majority are employed in the acute care setting (125). This is also represented in Chart 7 where 88% of Dietitian Assistants are employed in acute care followed by 11% in sub-acute care and only 1% in community care.

**Table 20: Clinical Setting of Dietitian Assistants by LHD**

LHD	Acute	Sub-acute	Community	Total
<b>METRO</b>				
Sydney	19	0	0	19
South Western Sydney	26	0	0	26
South Eastern Sydney	20	0	0	20
Western Sydney	16	0	0	16
Northern Sydney		1	0	1
Children's Hospitals Network	19	0	0	19
<b>REGIONAL</b>				
Nepean Blue Mountains	12	0	0	12
Hunter New England	4	0	2	6
Central Coast	7	4	0	11
<b>RURAL</b>				
Murrumbidgee	0	2	0	2
Mid North Coast	2	2	0	4
Western NSW	0	5	0	5
<b>OTHER</b>				
Royal Rehabilitation	0	1	0	1
<b>Total</b>	<b>125</b>	<b>15</b>	<b>2</b>	<b>142</b>

**Chart 7: Clinical Setting of Dietitian Assistants**



**Length of Employment**

The survey form asked respondents to identify how many years and months each Assistant has been employed for. An average number of employment years was calculated for each LHD which is represented in Table 21. Northern Sydney has reportedly employed one Dietitian Assistant for a total of 20 years; Sydney LHD has employed Dietitian Assistants on average for 18.4 years. On average across NSW, Dietitian Assistants are employed by one LHD for 11.5 years. This is significantly longer than all other AHAs who are employed for an average of 6.6 years (Table 13).

**Table 21: Length of Employment of Dietitian Assistants**

LHD	Number	Average (years)
<b>METRO</b>		
Sydney	19	18.4
South Western Sydney	26	14.3
South Eastern Sydney	20	8.4
Western Sydney	16	14.2
Northern Sydney	1	20.0
Children's Hospitals Network	19	5.8
<b>REGIONAL</b>		
Nepean Blue Mountains	12	10.1
Hunter New England	6	7.3
Central Coast	11	10.3
<b>RURAL</b>		
Murrumbidgee	2	6.5
Mid North Coast	4	13.5
Western NSW	5	7.4
<b>OTHER</b>		
Royal Rehabilitation	1	1.0
<b>Total</b>	<b>142</b>	<b>11.5</b>



## Qualifications

The list of Qualifications as reported in the survey that Dietitian Assistants hold is listed in Table 22. The majority hold a Certificate III in Dietetics Assistance (43.7%) and the second largest group hold a Certificate IV in AHA (13.4%).

**Table 22: Qualifications of Dietitian Assistants**

<b>Qualification</b>	<b>Number</b>	<b>% of Total</b>
<b>Certificate III Dietetics Assistance</b>	62	43.7%
<b>Certificate IV AHA</b>	19	13.4%
<b>Overseas Degree (Nutrition and/or Dietetics)</b>	12	8.5%
<b>Bachelor of Science (Nutrition and Food)</b>	10	7.0%
<b>Certificate as Diet Supervisor</b>	10	7.0%
<b>No Qualification</b>	10	7.0%
<b>Not Provided</b>	9	6.3%
<b>Certificate in Home Economics</b>	6	4.2%
<b>Assistant In Nursing</b>	1	0.7%
<b>Bachelor Education (Home Ec)</b>	1	0.7%
<b>Diploma in Applied Science: Nutrition</b>	1	0.7%
<b>Diploma in food Technology</b>	1	0.7%
<b>Total</b>	<b>142</b>	<b>100.0%</b>

A common requirement at the LHD level when applying for positions as a Dietetic Assistant has been the Certificate III in Dietetics Assistance, attributing to the large proportion of this workforce holding this qualification.

## 13. Summary

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The results of the AHA survey provide a picture of the AHA workforce in NSW public health services which is the first time information of this kind has been made available. Incorporating data extracted from the Health Information Exchange (HIE) in relation to Pharmacy Assistants and Pharmacy Technicians provided a more complete picture of the NSW AHA workforce in 2012. Assistants in Pharmacy comprise about 50% of the entire AHA workforce.

The distribution of AHAs across Metro, Regional and Rural LHDs varies considerably, with the majority located in Regional NSW.

AHAs are predominately female (78.9%) and nearly 50% of the workforce is employed part-time. The average length of employment for an AHA in NSW is 6.6 years.

The results in the survey reported that approximately 25% of the AHA workforce are trained to provide services across more than one allied health discipline. AHAs employed in rural LHDs are far more likely to be working across more than one discipline than their regional or Metro counterparts. The most common combination for multidisciplinary AHAs to be working in is Physiotherapy and Occupational Therapy.

AHAs are working in relatively even numbers across the three clinical settings of acute, sub-acute and community; however AHAs employed in Rural NSW are more likely to be working in a community setting than their Metro counterparts.

The survey reported there is inconsistency with the qualifications of AHAs employed in NSW, with at least thirty different qualifications identified. One third of the AHA workforce hold a Certificate IV in Allied Health Assistance (33.7%), and about a third do not hold any qualification (30.2%). The majority of Assistants in Pharmacy hold either a Certificate III or IV in Hospital-Health Services Pharmacy Support and are remunerated as either a Pharmacy Assistant or Pharmacy Technician. The award structure and required level of qualification is defined in the Health Employees (State) Award.

Dietitian Assistants were reported separately due to the inconsistency of responses in the survey to this group noting that many have been transferred to be employed in Food Services under HealthShare. Where the information was available, it was reported that the majority of Dietitian Assistants are employed in Metro LHDs. The majority of Dietitian Assistants are also female (137) with 35% of the workforce working part-time. Dietitian Assistants are primarily employed in the acute care setting. The average length of employment for a Dietitian Assistants in NSW is 11.5 years.

The AHA Initiative will aim to address the inconsistencies of the workforce. Consistency in distribution, job titles and qualifications will in turn provide for an appropriately trained and qualified workforce to ensure flexibility and the delivery of safe, quality health care to patients.

## 14. Conclusion

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The allied health workforce is facing increasing demands as it adjusts to challenges such as an ageing population, higher incidence of chronic disease and increasing consumer knowledge and expectations of allied health services. AHAs form an integral part of the Allied Health workforce and if utilised effectively can be one solution to addressing these workforce trends.

The NSW Health AHA 2012 Survey report provides baseline data for future analysis and comparison of the NSW AHA workforce as it grows and develops into the future. Results from the survey will assist in tracking the progress of the AHA Initiative and can provide the basis to inform future workforce planning.