



# Allied Health Assistants Policy

## 1. Background

Allied Health Assistants are important members of the multi-disciplinary health team. An Allied Health Assistant (AHA) is a non-regulated health worker who works under the direction of an Allied Health Professional (AHP). AHAs undertake a range of tasks that are either assigned or delegated by the AHP. Delegated tasks refer to those where both parties have responsibility for completion of the task, but the accountability remains with the AHP. Assigned tasks are those that the AHA has both responsibility and accountability.

This policy provides guidance on the delegation of tasks to AHAs. These tasks typically are service provision activities delivered to clients and caregivers.

## 2. Policy Statement

The delegation of tasks to AHAs must comply with the following standards:

- The AHA works under the direction and delegation of an AHP
- The task being delegated is within the scope of practice of the AHA
- The task being delegated is within the scope of practice of the delegating AHP
- The AHA receives training and support required to carry out the delegated task
- The delegating AHP retains accountability for the delegated task

## 3. Scope of Practice

The scope of practice for an AHA will consider the:

- Scope of practice of a profession (as guided by Professional Associations/Boards)
- Scope of practice of context (e.g. service program)
- Scope of practice of the individual (individual's skills, capabilities, knowledge and confidence)

The following tasks are considered outside the AHA scope of practice and **may not be delegated** to an AHA:

- Undertaking standardised or non-standardised diagnostic tests and assessments (excluding diagnostic tools and assessments used as screening tools)
- Interpreting referrals, screening, assessments or test results
- Developing diagnosis, prognosis and treatment goals
- Making clinical decisions, including client selection for exclusion/inclusion in caseload or discharging from treatment and the type, frequency and duration of services
- Planning, instituting or modifying treatment programs

- Giving interpretive information to clients, relatives or other staff
- Signing any documents outside of scope of practice without the co-signature of the AHP.
- Prescribing Assistive Technology or Home Modifications
- Discharge planning

AHAs must have a defined scope of practice for their role, with a shared understanding by the AHA and health team, of tasks within and outside of their scope of practice.

## 4. Roles and Responsibilities

### 4.1 Allied Health Assistant

The AHA is responsible for:

- Working within their scope of practice
- Undertaking the tasks delegated to them by AHPs
- Raising any issues and requesting additional support throughout the delegation and monitoring process
- Participating in the supervision and monitoring process for the delegated task
- Undertaking learning activities to develop skills and confidence in task completion

### 4.2 Delegating Allied Health Professional

The delegating AHP is responsible for:

- Determining which tasks are appropriate for delegation (refer to [Appendix A](#)) and ensuring that the:
  - Delegated activity is within the scope of the AHP's practice and that they are competent to assess, plan, implement and evaluate
  - Delegated activity is within the scope of practice of an AHA
  - AHA has the appropriate level of skills and confidence to carry out the activity
  - Context in which the task is being carried out (e.g. access to supervision, client complexity, etc.) is considered
- Delegating the task to the AHA
- Providing support, training and guidance to the AHA for task completion
- Establishing well-defined lines of accountability for the tasks, especially when more than one professional is involved in delegating an activity
- Defining the type and frequency of monitoring that the delegated activity requires, as defined in [Appendix B](#).

## 5. Resources

E-Learning Modules are available via the WA Country Health Service (WACHS) Learning Management System (LMS) to support delegation practice, and are designed for both AHPs and AHAs:

- Module One: What is Delegation? (15 mins) AH23 EL1
- Module Two: The Delegation Process - Phase One (25 mins) AH24 EL1
- Module Three: The Delegation Process - Phase Two and Three (20 mins) AH25 EL1

A range of Allied Health Assistant resources are also available via the WACHS [Allied Health Assistants](#) intranet page.

## 6. Compliance

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

## 7. Evaluation

The WACHS Allied Health Leadership and Governance Team is to undertake review of this policy as per the WACHS policy review schedule.

## 8. Standards

[National Safety and Quality Healthcare Standards](#) 1.24

## 9. Appendices

**Appendix A** – [WACHS Delegation Decision Making Tool](#)

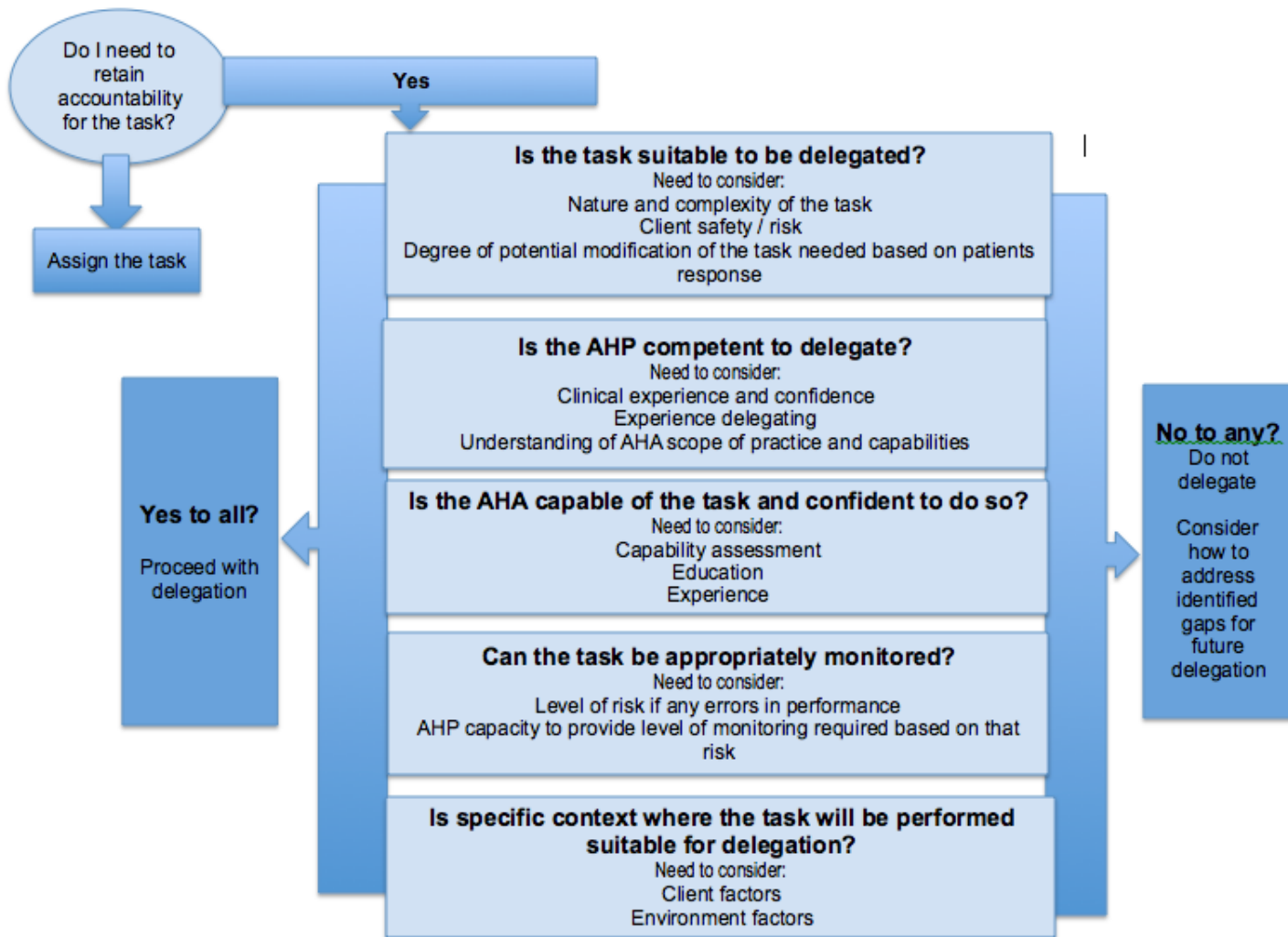
**Appendix B** – [WACHS Monitoring and Supervision Requirements](#)

**This document can be made available in alternative formats  
on request for a person with a disability**

<b>Contact:</b>	Program Manager Allied Health (S. Spitz)		
<b>Directorate:</b>	Health Programs	<b>TRIM Record #</b>	ED-CO-13-83915
<b>Version:</b>	5.00	<b>Date Published:</b>	20/02/2020

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.

Appendix A – WACHS Delegation Decision Making Tool



## Appendix B – WACHS Monitoring and Supervision Requirements

### Monitoring Plans

Monitoring plans are to include:

- description of the activity delegated
- identification of who the activity is delegated to
- method of monitoring activity
- mode of monitoring activities (e.g. face to face, phone, videoconference)
- AHP responsible for monitoring methods, and
- frequency of monitoring required.

### Monitoring by Supervision

Supervision is used as a term to describe the monitoring process whereby a designated AHP directly observes the AHA conducting a clinical activity. Supervision is required in the following instances:

- when monitoring the performance of the AHA for safety and quality purposes
- when determining the competence of an AHA’s to perform an activity
- when providing immediate feedback and demonstration of aspects of an activity to improve performance
- where professional regulatory bodies stipulate the level of supervision required for a clinical activity.

Table 1 outlines the requirement and extent of supervision to be included as a monitoring strategy for clinical activities.

<b>Impact on service</b>	Minimal	Some quality impact	Moderate impact on quality	Significant impact on quality
<b>Adverse Risk</b>	Minimal	Mildly attributable to performance	Moderately attributable to performance	Directly attributable to performance
<b>Timeframe</b>	Significant time can elapse before error has an impact	Some time before impact evident	Short time before impact evident	Immediate/rapid impact evident
<b>Monitoring Supervision Needed</b>	No supervision needed	Some supervision needed	Frequent supervision needed	Close supervision needed