# National Allied Health Practice Engagement Toolkit

Implementation and Change Management Plan

February 2025

Primary Health Networks acknowledge all Aboriginal and Torres Strait Islander peoples as Custodians of Country and recognises their continuing connection to land, sea, culture and community. We pay our respects to Elders past and present.

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# 1. Introduction

## 1.1 About the National Allied Health Practice Engagement Toolkit

In 2022, the National PHN Allied Health in Primary Care Engagement Framework was developed to support Primary Health Networks (PHNs) across Australia to increase their focus on Allied Health professionals (AHPs) and their key role as providers in an integrated patient-centred health care system.

The Framework is structured around 6 key priority areas:

- Nationally-led collaboration
- Governance and culture
- Practice engagement
- Data, quality and digital maturity
- Workforce and access to Allied Health care
- Integration, models of care and funding

The National Allied Health Engagement Toolkit (the Toolkit) is a key initiative under the practice engagement priority to support AHPs. PHNs will be the key conduit for the Toolkit with Allied Health practices and will need to undertake practice engagement activities. As coordinators of the local health care system, PHNs have a key role in supporting the effective practice of allied health professionals.

The PHN Cooperative, on behalf of all 31 PHNs, has developed the Toolkit as a foundational step towards providing support to AHPs with:

- Understanding the local health care system they operate in, including their local PHN and how to connect with other primary care professionals and referrers
- Understanding more about the services and resources that are offered by Allied Health peak bodies
- Accessing learning and education opportunities to build skills and capabilities to improve patient care
- Improving safety and quality in allied health care through tools that support improvement approaches
- Understanding and utilising funding streams and accessing grant opportunities to support businesses efficiency and growth
- Understanding the use of different digital health care systems to improve integration and connectivity of the health care system, and to support practice efficiency.

## 1.2 Scope and limitations of the Toolkit

Some key considerations on the scope and limitations of the Toolkit are as follows:

- While the Toolkit contains many resources that are useful for PHN staff, the main audience for the Toolkit is allied health professionals
- Given the diversity of the allied health sector, the Toolkit provides generalised material that is applicable to all allied health professions, and not specific to any profession
- While the Toolkit has some sections for each PHN to customise, it has been developed at a national level and has a local PHN template for each PHN to complete.
- The Toolkit does not provide a directory of local health services/providers

## 1.3 Purpose of this document

This document is designed to support PHNs with the launch and implementation of the Toolkit.  It includes:

- The stakeholder groups involved in the implementation of the Toolkit and their roles
- A communication plan, including key messages and mechanisms for delivery
- Tips for PHNs seeking to increase engagement with AHPs in their region
- An implementation roadmap, with a checklist outlining the key actions to be undertaken by each PHN to successfully implement the Toolkit, as well as a checklist to provide guidance for the Implementation Framework Group (IFG) on the steps required at a national level to guide and support the Toolkit's implementation
- A learning and education plan to support PHN staff to deepen their understanding of AHPs, their practices and processes
- Key indicators of successful implementation
- Processes for tracking progress, collecting feedback, and reviewing and updating the Toolkit
- An overview of risks to consider to support the role of the IFG in risk management

# 2. Stakeholder engagement and communication

## 2.1 Stakeholder groups involved in implementation and their role

The successful implementation of the Toolkit will require PHNs, the IFG, and Allied Health associations all to play a role. The table below summarises the key role of each stakeholder group.

| Key stakeholders | Role in Toolkit implementation |
| --- | --- |
| PHNs | – Launch and manage the ongoing roll-out of Toolkit in each region<br><br>– Monitor and report on implementation progress to the IFG<br><br>– Provide relevant learning and education opportunities to staff |
| Implementation Framework Group (IFG), a steering committee established by the PHN Cooperative to develop and lead implementation of the National PHN Allied Health in Primary Care Engagement Framework | – Oversee the implementation of the Toolkit at the national level, including:<br><br>  – Providing guidance and support to PHNs<br><br>  – Monitoring progress of implementation, and managing risks and issues<br><br>  – Leading on communications at a national level, including liaising with AHPA, IAHA and SARRAH<br><br>  – Leading the periodic review and update of the Toolkit |
| Allied Health peak associations including:<br><br>– Allied Health Professions Australia (AHPA)<br><br>– Indigenous Allied Health Australia (IAHA)<br><br>– Services for Australian Rural and Remote Allied Health (SARRAH)<br><br>– Individual allied health professional peak associations | – Promote the Toolkit across their networks, encouraging AHPs to access the Toolkit through their local PHN. This may include communicating with members through multiple channels, such as emails, social media, webinars and events.<br><br>– Provide input into the periodic review and update of the Toolkit |
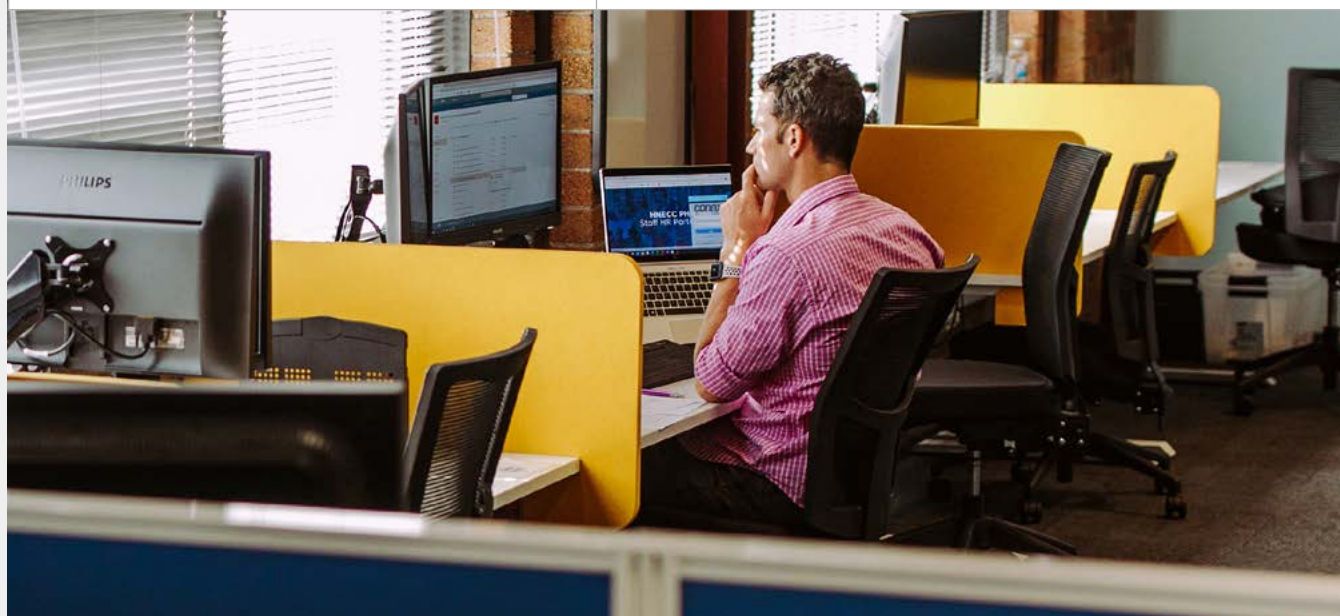
## 2.2 Communication plan – key messages and mechanisms for delivery

Launching the Toolkit effectively requires a strategic communication plan to ensure awareness, understanding and adoption among stakeholders. Below is an outline of communication activities that should occur across the three implementation phases. Pre-launch (stage 1) communications will be led by the IFG, with launch (stage 2) and ongoing (stage 3) communications to be led by individual PHNs. Two communication packs have been developed to support communication with PHNs and with Allied Health (see Attachments). AHPA will lead communications with Allied Health peaks during the launch stage.

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| **Stage 1: Pre-launch activities for IFG** | | | | |
| PHN CEOs | Email | HNECC PHN (as IFG secretariat) | – Inform PHN CEOs that the Toolkit has been completed, and reiterate its purpose<br><br>– Request PHN CEO support, signalling the key actions for each PHN to take to support the launch and rollout of the Toolkit<br><br>– Request PHN CEOs to identify a key contact point for the Toolkit | – The Allied Health Practice Engagement Toolkit -developed by the PHN Cooperative on behalf of all 31 PHNs - is now complete, and your support is requested in preparing for the launch and ongoing rollout in your region.<br><br>– The Toolkit is designed to assist PHNs in undertaking practice engagement activities with your local Allied Health providers, a key priority in the National PHN Allied Health in Primary Care Engagement Framework. The purpose of the Toolkit is to support AHPs with:<br><br>  – Understanding the local health care system they operate in, including their local PHN and how to connect with other primary care professionals and referrers<br><br>  – Understanding more about the services and resources that are offered by Allied Health peak bodies<br><br>  – Accessing learning and education opportunities to build skills and capabilities to improve patient care<br><br>  – Improving safety and quality in allied health care through tools that support improvement approaches<br><br>  – Understanding and utilising funding streams and accessing grant opportunities to support businesses efficiency and growth<br><br>  – Understanding the use of different digital health care systems to improve integration and connectivity of the health care system, and to support practice efficiency.<br><br>– The Toolkit is one element of the reform agenda to strengthen engagement between PHNs and the AH sector. It is part of a broader ongoing process, and builds on the National PHN Allied Health in Primary Care Engagement Framework launched in 2022.<br><br>– The Toolkit has been developed with broad consultation and input from the allied health sector with PHN oversight.<br><br>– The actions that PHNs need to take to launch and rollout the Toolkit are outlined in a checklist in section 3.2 of the Implementation Plan attached. Key actions for each PHN in the pre-launch phase include providing learning opportunities to staff, localising the Toolkit by filling in the templates provided, and deciding on and actioning web hosting arrangements for the Toolkit (if this is not decided at a national level).<br><br>– Please identify a staff member within your PHN to act as a key contact point for the Toolkit. |

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| PHN key contacts for the Toolkit | National webinar | HNECC PHN (as IFG secretariat) and AHPA to support | – Introduce PHN key contacts to the Toolkit and how it can be used, including the localisation templates<br><br>– Outline to PHN key contacts the actions each PHN is requested to take to support the launch and rollout of the Toolkit | – The Toolkit is one element of the reform agenda to strengthen engagement between PHNs and the AH sector. It is part of a broader ongoing process, and builds on the National PHN Allied Health in Primary Care Engagement Framework launched in 2022.<br><br>– The Consultant partnered with AHPA, who provided specialist support to ensure the Toolkit is practical and relevant for AH professionals – the main audience for this toolkit.<br><br>– Consultations were held with all PHNs, allied health peaks, and large and small providers across the country, to identify topics and resources for inclusion in the Toolkit.<br><br>– The Toolkit is a resource developed for allied health professions, and PHNs need to be the conduit with practices. This will require PHNs to undertake practice engagement activities with their local Allied Health providers, a key priority in the Framework.<br><br>– The information in the Toolkit is aimed at Allied Health professionals in private practice, but its information and resources also support PHN staff to build knowledge and understanding of the allied health sector. There are further supplementary resources in the Implementation Plan for PHN staff.<br><br>– Allied Health providers told us that some localised content would also be useful to support their navigation of their local PHN. There is an opportunity for PHNs to provide focused localised content of the Toolkit through the template provided.<br><br>– Key processes and steps that PHNs need to take to support the launch and ongoing rollout of the Toolkit are contained in the PHN checklist in section 3. |
| Allied health providers that participated in consultations | Email | HNECC PHN (as IFG secretariat) on behalf of PHNs | – Close the loop with participants in the consultation process, to inform them of the completion of the Toolkit and to lookout for further communications from local PHNs on the publication of the Toolkit. | – Thank you for participating in the consultations on the Toolkit development. Consultations with allied health peaks, large and small providers and PHNs across the country informed the topics and resources selected for inclusion in the Toolkit.<br><br>– It has now been developed and will soon be launched by the PHNs. Communications will follow from individual PHNs.<br><br>– The Toolkit includes resources on the following topics:<br>  – Local health system navigation<br>  – Education and networking<br>  – Clinical quality and governance<br>  – Business efficiency and funding sources<br>  – Digital health and information systems<br><br>– The Toolkit does not provide differentiated material specific to different allied health professions or different PHNs. |

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| **Stage 2: Launch activities for PHNs** | | | | |
| PHN staff | Internal forums or webinars | Individual PHNs | – Introduce PHN staff to the Toolkit, its purpose and highlight key aspects that are useful to building knowledge and understanding for staff that may engage with Allied Health in their work. | – The Toolkit is a resource for Allied Health professions and it requires PHNs to undertake practice engagement activities with their local Allied Health providers to roll it out and support its uptake. The purpose of the Toolkit is to support AHPs with:<br><br>– Understanding the **local health care system** they operate in, including their local PHN and how to connect with other primary care professionals and referrers<br><br>– Understanding more about the services and resources that are offered by **Allied Health peak bodies**<br><br>– Accessing **learning and education** opportunities to build skills and capabilities to improve patient care<br><br>– Improving **safety and quality** in allied health care through tools that support improvement approaches<br><br>– Understanding and utilising funding streams and accessing grant opportunities to support **businesses efficiency and growth**<br><br>– Understanding the use of different **digital health care systems** to improve integration and connectivity of the health care system, and to support practice efficiency.<br><br>– The Toolkit is one element of the reform agenda to strengthen engagement between PHNs and the AH sector. It is part of a broader ongoing process, and builds on the National PHN Allied Health in Primary Care Engagement Framework launched in 2022. It is aligned with Australia's Primary Health Care 10 Year Plan 2022, which highlights the need for a greater focus on Allied Health professions as part of primary health care, in order to improve access, outcomes, integration, safety, quality and cost-efficiency across the health system.<br><br>– Scyne Advisory partnered with AHPA, who provided specialist support to ensure the Toolkit is practical and relevant for AH professionals – the main audience for this toolkit.<br><br>– Consultations were held with all PHNs, allied health peaks, and large and small providers across the country, to identify topics and resources for inclusion in the Toolkit.<br><br>– The Toolkit is a key resource for PHNs to provide to Allied Health to provide practical business and professional support, that can also help build a foundation for networking and communication with the sector.<br><br>– As PHNs grow in our role in engaging with the Allied Health sector, we have to build knowledge of the diverse professions in allied health as well as understand the business operations. The Toolkit, along with the supplementary resources in the Implementation Plan are both useful resources to develop foundational knowledge of the Allied Health sector, and build confidence in engaging with Allied Health. |

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| Allied Health peaks that participated in consultations | Membership forums and email | AHPA | – Thank Allied Health peaks for their role in the consultation process, and share the Toolkit with them<br><br>Note: While generally the toolkit will be shared by individual PHNs, for national peaks it will be shared by AHPA, to avoid peaks receiving 31 separate launch emails. Utilising AHPA's networks and existing relationships is also intended to help promote awareness and credibility of the Toolkit. | – Thank you for participating in the consultations on the Toolkit development. Consultations with allied health peaks, large and small providers and PHNs across the country informed the topics and resources selected for inclusion in the Toolkit.<br><br>– The Toolkit has now been developed and is available at the following link/s [insert link/s] , with localised versions of the Toolkit available for many PHN regions. We encourage you to share this resource with your members and networks.<br><br>– The Toolkit includes resources on the following topics:<br>  – Local health system navigation<br>  – Education and networking<br>  – Clinical quality and governance<br>  – Business efficiency and funding sources<br>  – Digital health and information systems<br><br>– The Toolkit does not provide differentiated material specific to different allied health professions. While it has some sections which have been customised for each local PHN region, it has been developed at a national level.<br><br>– While the Toolkit is aimed at the Allied Health audience, it will also provide a good foundation for all PHNs to build their knowledge and understanding of the sector and be a step towards strengthening engagement between PHNs and Allied Health sector. |

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| Allied health practices | Email<br><br>Newsletter<br><br>Social media | Individual PHNs | Share the Toolkit with allied health practices, highlighting its purpose and key aspects/ features | – This Toolkit [share link to Toolkit] is designed to support Allied Health practitioners with:<br><br>  – Understanding the local health care system you operate in, including your local PHN and how to connect with other primary care professionals and referrers<br><br>  – Understanding more about the services and resources that are offered by Allied Health peak bodies, including multi-profession peak bodies.<br><br>  – Accessing learning and education opportunities to build skills and capabilities to improve patient care<br><br>  – Improving safety and quality tools available to AHPs that can support patient care and are used in national programs<br><br>  – Understanding and utilising funding streams and accessing grant opportunities to support businesses efficiency and growth<br><br>  – Understanding the use of different digital health care systems to improve integration and connectivity of the health care system, and to support practice efficiency.<br><br>– Each chapter contains a series of topics with a list of (mostly) online resources or tools. The collection of resources provide:<br><br>  – introductory information that is applicable for all AHPs on a topic area and the websites can be further navigated to find more information<br><br>  – practical guides, tools or education resources that can be directly applied to clinical practice or business management<br><br>– The Toolkit is a foundational step, and one element of the reform agenda to strengthen engagement between PHNs and the allied health sector. It is part of a broader ongoing process and builds on the National PHN Allied Health in Primary Care Engagement Framework launched in 2022.<br><br>– For more information, please get in touch with [name and contact details of newly funded Allied Health position, or other relevant contact]. |

| Audience | Communication channel | Lead | Purpose | Key messages |
|---|---|---|---|---|
| **Stage 3: Ongoing communications activities for PHNs** | | | | |
| Allied Health practices | Newsletters<br><br>Social media | Individual PHNs | – Highlight key aspects of the Toolkit and how it can be used by Allied Health Professionals to benefit their practice, including through testimonials from early adopters, to build credibility and interest in the Toolkit. | – Hear from early adopters about their positive experience with using the Toolkit and how they have practically applied its information and resources. For example, this may include stories about:<br><br>  – How they have used the Toolkit to find out about local networking and multidisciplinary learning opportunities, and build their local networks<br><br>  – How resources on the role of different allied health professions have helped them to refer to a broader range of allied health services and work more effectively as part of multidisciplinary teams |

## 2.3 Tips for PHNs seeking to increase engagement with Allied Health practitioners in their region

A key barrier for many PHNs seeking to increase engagement with AHPs is a limited database/network of AHPs in their region. While there is no single approach that will be relevant to all regions and contexts, a range of ideas have been suggested by PHNs and AHPs as useful strategies for addressing this barrier.

The following ideas may be useful for disseminating the Toolkit in the launch phase, as well as in ongoing efforts to expand the database of AHPs in your region and to increase engagement with AHPs more broadly:

– Reach out to General Practices to find out which ones also have AHPs on site and engage with those AHPs

– Reach out to individual professional peaks, some of whom have region specific email "blasts" which can be used to promote resources or events

– Draw on the service directories in the Toolkit, to find local practitioners to expand contact list/ database

– Consider profession specific social media groups (eg. facebook groups), including having champions on social media to promote the Toolkit and relevant PHN events

– Consider using the AHPRA database to communicate with AHPs who may not be members of their peak bodies

– Reach out to local universities, focusing on final year undergraduate courses and student associations

– Attend allied health conferences and events, to increase visibility of the PHN and awareness of how PHNs can support AHPs, and to promote the Toolkit

– Provide ongoing promotion of allied health-focused services and resources (including the Toolkit) through perpetual links in PHN communications (eg. the newsletter)

– Develop networks and low-key events for AHPs (including small business owners), and consider how current multidisciplinary networks and events (including CPD) could better engage AHPs

– Build on word of mouth and informal networks – consider recruiting some early adopters or AHPs already engaged with the PHN (eg. on the clinical council) to help with promotion

– Consider developing an Allied Health engagement strategy for your region.

The case studies developed to support the National PHN Allied Health in Primary Care Engagement Framework provide examples of PHN engagement with allied health and may be a useful resource to refer to.

# 3. Implementation Roadmap

Successful implementation of the Toolkit will require collaborative activity at multiple levels, including:

– strengthening Allied Health expertise and coordination capacity within each PHN, including through the recruitment of dedicated Allied Health liaison/engagement roles, and

– continuing to invest in national collaboration – both among PHNs, and between PHNs and the Allied Health sector.

The table below provides an overview of the implementation roadmap, while the subsequent checklists outline in more detail the key actions for consideration in the Toolkit's implementation, at both a national and PHN level.

# 3.1 Overview of implementation roadmap

| | Stage 1: Pre-launch readiness<br><br>Months 1-3 | Stage 2: Launch<br><br>Months 3-6 | Stage 3: Ongoing rollout and review<br><br>Months 7-15 |
|---|---|---|---|
| **Key milestones** | – Web publication arrangements confirmed and live (IFG)*<br><br>– Plan for ongoing maintenance and periodic review developed (IFG)<br><br>– Plan for monitoring and reporting on implementation progress established (IFG)<br><br>– PHNs have localised the Toolkit, and developed a plan for its dissemination (PHNs) | – Launch communications released (PHNs)<br><br>– First round of reporting on implementation progress is completed (PHNs) | – First periodic review and update of Toolkit is completed (IFG) |
| **Key actions for IFG** | – Socialise the Toolkit and Change and Implementation Plan with the PHN Cooperative<br><br>– Decide on publication arrangements for the Toolkit<br><br>– Release pre-launch communications at national level<br><br>– Plan for maintenance of the Toolkit, and centralised mechanisms to capture and address feedback<br><br>– Plan for review of Toolkit<br><br>– Determine what national support and coordination will be required for launch and rollout<br><br>– Set up mechanisms for reporting on implementation progress | – Consider establishing a channel for PHNs to share implementation progress and challenges (eg. a Community of Practice) | – Updates on implementation progress are included in IFG meetings<br><br>– Confirm and implement plan for first periodic review and update of Toolkit |
| **Key actions for PHNs** | – Identify key contact point and Executive Sponsor for this program of work<br><br>– Review the PHN checklist, and allocate action owners<br><br>– Localise the Toolkit by filling out the templates provided<br><br>– Develop an engagement plan for dissemination of the Toolkit | – Launch the Toolkit internally<br><br>– Share the Toolkit with local stakeholders, according to your engagement plan<br><br>– Ensure a mechanism for capturing local feedback is established, in line with the process agreed by the IFG<br><br>– Participate in processes/ groups for sharing progress and challenges with other PHNs (eg. Community of Practice)<br><br>– Monitor and report implementation progress<br><br>– Expand contact list of Allied Health practitioners in your region<br><br>– Provide relevant learning and education opportunities to staff | – Continue to engage AHPs and share the Toolkit<br><br>– Share an internal staff reminder on the availability of the Toolkit and learning resources<br><br>– Plan a reflection process on the rollout of the Toolkit in your region, and provide input into the periodic review of the Toolkit |

*Pending IFG decision on the web hosting arrangements for the Toolkit. If the decision is to build a microsite which can be shared nationally, this responsibility will stay with the IFG, however if it will be published on individual PHN websites this responsibility will sit with PHNs.

## 3.2 Checklists to support implementation at national and PHN levels

Checklist 1 below is intended to provide guidance for the IFG on the next steps required to guide and support the implementation of the Toolkit.

### Checklist 1: Considerations for implementation at the national level

| # | Considerations | Checklist | Stage | Action owner |
|---|---|---|---|---|
| **Stage 1: Pre- launch readiness** | | | | |
| 1a | Have the Toolkit and Change and Implementation Plan been shared with the PHN Cooperative? | ☐ | 1 | IFG |
| 1b | Has the Change and Implementation Plan been discussed with the PHN Cooperative? | ☐ | 1 | IFG |
| 2 | Has a decision been made and actioned on how the Toolkit will be published? Options include:<br><br>– Web version to be developed, potentially through contracting a web developer to build a microsite which can be shared nationally<br><br>– PHNs decide how to publish it on their website, either as a single document, by chapter or both, eg https://www.eldac.com.au/Toolkits/Residential-Aged-Care | ☐ | 1 | IFG |
| 3 | Has a plan for the ongoing maintenance of the Toolkit (eg. updating broken links, updating contact details) been developed, including identifying roles and responsibilities? (See section 5.2) | ☐ | 1 | IFG |
| 4 | Have centralised mechanisms to gather and address feedback from Allied Health and PHNs on any issues or areas for improvement been put in place, with tools/templates shared with PHNs as relevant? | ☐ | 1 | IFG |
| 5 | Has a plan for the periodic review and updating of the Toolkit been developed, and a timeframe for the first review agreed? (Note: this periodic review process may include substantive revisions to content, distinct from maintenance done on an ongoing basis) | ☐ | 1 | IFG |
| 6 | Have you determined what national support and coordination will be required for effective socialisation and implementation of the Toolkit, and how this will be resourced and led? (In this pre-launch phase, are all PHNs clear on their key actions, with reminders and support in place?) | ☐ | 1 | IFG |
| 7 | Have you collated a list of contact points for the Toolkit in each PHN, to support national coordination of the launch and implementation progress monitoring? | ☐ | 1 | IFG |
| 8 | Have PHNs localised Toolkit content by filling in the templates provided? | ☐ | 1 | IFG |
| 9 | Have simple mechanisms for reporting on implementation progress at national level been agreed, and communicated to Toolkit contact points? (See section 5.1 for suggestions) | ☐ | 1 | IFG |
| 10 | Are all hosting arrangements (if not centralised) live, ready for launch? | ☐ | 1 | IFG |
| **Stage 2: Toolkit launch** | | | | |
| 11 | Have strategic communications been agreed and released at the national level to support the launch of the Toolkit (see section 2 – Communications Plan)? | ☐ | 1 | IFG |
| 12 | Has the IFG considered establishing an engagement channel for PHNs to share progress and challenges in rolling out the Toolkit (eg, a Community of Practice) | ☐ | 2 | IFG |

| # | Considerations | Checklist | Stage | Action owner |
|---|---|---|---|---|
| **Stage 3: Ongoing rollout and review** | | | | |
| 13 | Are regular updates on implementation progress included in IFG meetings? | ☐ | 3 | IFG |
| 14 | Have you considered what additional support and guidance will be required for the review and updating of the Toolkit to take place as planned? | ☐ | 3 | IFG |
| 15 | Has the first periodic review commenced as planned? | ☐ | 3 | IFG |

Checklist 2 below is intended to provide guidance for the newly recruited Allied Health liaison position and the Executive Sponsor of this program of work, on the actions that need to be taken by each PHN to successfully implement the Toolkit. For PHNs with more mature engagement with Allied Health, some of the foundational pieces will already be in place.

## Checklist 2: Considerations for implementation at the PHN level

| # | Considerations | Checklist | Month | Action owner |
|---|---|---|---|---|
| **Stage 1: Pre- launch readiness** | | | | |
| 1 | Have you identified a key contact point and an Executive Sponsor for this program of work, and shared their contact details with the IFG? Have you considered identifying a clinical sponsor (eg. from the Clinical Council) to support promotion of the Toolkit? | ☐ | 1 | PHN |
| 2 | Have you reviewed this checklist, and allocated action owners? | ☐ | 1 | PHN |
| 3 | Have you shared and discussed the Toolkit internally, eg. via an internal all-staff webinar)?  This will be important not only for practice engagement staff, but also useful for staff in other areas, including procurement and program teams. | ☐ | 1 | PHN |
| 4 | Have learning and education opportunities been provided to relevant PHN staff in line with the Toolkit?  (see section 4) | ☐ | 1-3 (and ongoing) | PHN |
| 5 | *If this is not decided at national level:* has a decision been made and actioned on how the Toolkit will be hosted? (Ie. will it be available on the website to be download as a PDF, or will a web version be developed?) | ☐ | 1 | PHN |
| 6 | Have you localised Toolkit content by filling in the templates provided? | ☐ | 1 | PHN |
| 7 | Have you developed a plan for how you will disseminate the Toolkit? This should ideally include PHN staff introducing the Toolkits directly to practices (face to face), as well as distribution through email lists, newsletters, and social media. You may also want to consider webinars and local events. (See section 2.3 for other ideas). | ☐ | 1 | PHN |
| 8 | *If hosting is not done centrally:* is the Toolkit live on the website, ready for launch? | ☐ | 1 | PHN |
| **Stage 2: Toolkit launch** | | | | |
| 9 | Have you shared the Toolkit according to your engagement plan? Has it been received by the list of Allied Health practitioners you currently engage with, and other local stakeholders who may be interested? | ☐ | 1 | PHN |
| 10 | Are you using the nationally coordinated feedback mechanism to capture and share any feedback you have and receive locally on the Toolkit (eg. issues or areas for improvement)? | ☐ | 2 | PHN |

| # | Considerations | Checklist | Month | Action owner |
|---|---|---|---|---|
| 11 | Are you participating in any processes/groups for sharing progress and challenges with other PHN focal points (eg. a Community of Practice)? | ☐ | 2 | PHN |
| 12 | Have you implemented the nationally agreed processes for monitoring Toolkit implementation, and are you reporting on this progress to the IFG? | ☐ | 2 | PHN |
| 13 | How complete is the contact list/database you have of Allied Health practitioners in your region, and how are you seeking to increase engagement with this group?  (see section 2.3) | ☐ | 2 & 3 | PHN |
| **Stage 3: Ongoing rollout and review** | | | | |
| 14 | Are you continuing to share the Toolkit with new Allied Health practitioners you engage with? (If not, is there a process you can put in place to support this?) | ☐ | 3 | PHN |
| 15 | Have you considered sending out an internal staff reminder on the availability of the Toolkit and the resources available for staff learning and education on Allied Health (see section 4)? | ☐ | 3 | PHN |
| 16 | Have you considered planning an internal reflection process on the rollout of the Toolkit in your region, identifying successes and areas for improvement? If possible, have you considered seeking feedback from external stakeholders as well? | ☐ | 3 | PHN |
| 17 | Are you ready to provide input into the first periodic review of the Toolkit? | ☐ | 3 | PHN |



National Allied Health Practice Engagement Toolkit: Implementation and Change Management Plan

# 4. PHN staff learning and education plan

For PHNs to work effectively with their local allied health workforce, a deep understanding of the range of different AHPs and their individual areas of practice and processes is required. The allied health sector comprises at least 26 different professions and well over 200,000 individual practitioners making it the largest health workforce, after nursing overall, and the largest primary care workforce.

While building PHN staff knowledge and capability in this area is an ongoing process, a focus on staff learning and education to support the launch and implementation of the Toolkit will be key to its effectiveness. Building an understanding of the allied health sector amongst PHN staff is best addressed by working with the structured priority learning areas below and drawing heavily on the information contained in the Toolkit. An effective starting point is the individual professional profiles contained in the Toolkit. These introduce the individual professions and their various areas of practice as well as providing links to more detailed information. Referring to the individual professional profiles in conjunction with the suggested learning areas outlined in section 1 – Local health system navigation, will support understanding of allied health practice and how it fits into the broader primary, secondary and tertiary care systems. Greater knowledge of the allied health sector will also help deepen PHN staff understanding of how AHP priorities, practices, funding and incentives differ from General Practice.

Building an understanding of allied health regulation is also important as there can be key differences in how AHPRA-registered professions such as physiotherapy or occupational therapy, and self-regulating health professions such as speech pathology or social work access government digital health initiatives or the requirements that apply under some government programs.

The diversity of the allied health sector also extends to the range of funding programs that allied health providers may draw on to provide accessible services to the local community. It is common for primary allied health practices to draw on Medicare, Department of Veteran's Affairs, private health insurance, accident and compensation scheme, as well as National Disability Insurance Scheme (NDIS) funding. Each of these programs can have individual accreditation, compliance and reporting requirements. By understanding how these funding programs operate and by being able to assist allied health providers to navigate these requirements, PHN staff can provide support for allied health providers as well as being better positioned to consider how to develop and commission locally relevant allied health programs.

The enhanced knowledge PHN staff build from undertaking this program of learning and development will enable them to more effectively engage and support their local allied health practitioners.

| # | Priority learning area | Resources to support learning | |
|---|---|---|---|
| | | **Hyperlinks** | **Full URL** |
| | | **Local health system navigation** | |
| 1 | Have you explored how allied health services are delivered in the local health system including private, public hospital and outpatient clinics, and community services; and what are the local clinical referral pathways relevant to allied health? | – Review local clinical referral pathways<br><br>– Explore Healthmap (healthdirect) | https://healthmap.com.au/ |
| 2 | Do you understand the scope of practice of Allied Health professions and how they help improve health and wellbeing? | – Allied health case studies (Dept of Health and Aged Care)<br><br>– Key areas of practice (AHPA) | https://www.health. gov.au/topics/allied-health/how-it-helps<br><br>https://ahpa.com. au/key-areas/ |
| 3 | Do you understand the difference between APHRA regulated and self-regulated allied health professions? | – How allied health care providers are regulated (Dept of Health and Aged Care)<br><br>– Types of regulation (AHPA)<br><br>– The role of AHPRA (Australian Health Practitioner Regulation Agency)<br><br>– About the National Alliance of Self Regulating Health Professions (NASRHP) (NASRHP) | https://www.health.gov. au/topics/allied-health-care/who-can-provide<br><br>https://ahpa.com.au/allied-health-accreditation/<br><br>https://www.ahpra.gov. au/About-Ahpra.aspx<br><br>https://nasrhp.org.au/about/ |
| | | **Education and networking** | |
| 4 | Do you have communication channels established for keeping informed of upcoming initiatives that impact the allied health sector? | – Allied health sector updates from Dept of Health and Aged Care<br><br>– AHPA news<br><br>– SARRAH news | https://www.health.gov. au/using-our-websites/ subscriptions/subscribe-to-allied-health-sector-updates<br><br>https://ahpa.com. au/news-events/<br><br>https://sarrah. org.au/latest#!/ tfeeds/673018748011/c/ Newsletter |
| | | **Clinical quality and governance** | |
| 5 | Do you have communication channels established for keeping informed of new resources to support clinical quality practices? | – IAHA e-news<br><br>– Culture, ethnicity and health news | https://iaha.com.au/ media-news/iaha-enews/<br><br>https://www.ceh.org.au/ past-ceh-newsletters/ |

| # | Priority learning area | Resources to support learning | |
|---|---|---|---|
| **Business efficiency and support** | | | |
| 6 | Are you informed of other grant opportunities that can support small, allied health businesses? | – Grant opportunities in NSW<br><br>– Grant opportunities in Victoria<br><br>– Grant opportunities in Qld<br><br>– Grant opportunities in WA<br><br>– Grant opportunities in SA<br><br>– Grant opportunities in Northern Territory<br><br>– Grant opportunities in ACT<br><br>– Grant opportunities in Tas<br><br>– Subscribe to the ATO small business newsletter<br><br>– Subscribing to updates from your local council and connecting with local networks such as Business Chambers may also be useful in keeping you informed of opportunities that could support small allied health businesses in your region. | https://www.nsw.gov.au/nsw-government/engage-us/waratah-research-network/grants-and-funding-opportunities<br><br>https://business.vic.gov.au/grants-and-programs?filter=%7B%22status%22%3A%5B%22opening+soon%22%2C%22open%22%2C%22ongoing%22%5D%7D<br><br>https://www.grants.services.qld.gov.au/<br><br>https://www.smallbusiness.wa.gov.au/finance/business-grants<br><br>https://business.sa.gov.au/programs/grant-programs<br><br>https://nt.gov.au/industry/business-grants-funding/business-growth-program<br><br>https://www.act.gov.au/business/grow-your-business/apply-for-grants-and-funding<br><br>https://www.business.tas.gov.au/funding<br><br>https://subscribe.news.ato.gov.au/link/id/zzzz5cbe7b4e8b790364/page.html?prompt=1& |
| **Digital health and information systems** | | | |
| 7 | Do you understand the diversity of practice software that Allied Health use in their everyday business? | – AHPA software spreadsheet<br>Note: This resource is from 2017 and not an up-to-date list of systems and key features. Its purpose is to introduce the diverse range of systems and components available across the sector. | https://ahpa.com.au/wp-content/uploads/2017/09/AHPA-Software-Spreadsheet-V4.pdf |

# 5. Monitoring implementation of the Toolkit

## 5.1 Tracking implementation progress

The successful rollout of the Toolkit will be characterised by:

– Relevance to allied health providers, demonstrated through widespread uptake and utilisation across the allied health sector

– AHPs having greater knowledge and understanding of the role of PHNs in the local health system, and

– increasing engagement activities between PHNs and AHPs.

Tracking progress of the rollout could be approached through several key strategies over the next two years, as outlined in the table below.

| Collection strategy | Data | Information used for decision making |
|---|---|---|
| PHN reporting to IFG | – Number of PHNs who have localised the toolkit<br><br>– Number of PHNs who have shared the Toolkit with local stakeholders | – Assess progress of Toolkit rollout, and identify gaps and any requirements for additional support |
| Web downloads | – Monthly downloads or URL access<br><br>– If published by chapter, then download rates per chapter<br><br>– Rate of return users | – Identify regions where uptake is low and further AHP engagement required<br><br>– Identify topic areas of high interest among audience for future expansion |
| Allied Health surveys<br><br>(This could be done through a link/QR code in the Toolkit, or integrated into existing annual survey processes, if applicable). | – Insights on awareness of Toolkit, usage, relevance of topics, practical application and areas for improvements | – Inform AH engagement strategies and activities, including the ongoing implementation of the National PHN Allied Health in Primary Care Engagement Framework<br><br>– Inform future strategic initiatives |
| PHN completion of the 'Baseline snapshot and prioritisation tool' developed to support the National PHN Allied Health in Primary Care Engagement Framework | – Change in score for practice engagement<br><br>– Change in score across all priority areas | – Assess PHN progress in practice engagement with AH, including how the Toolkit may have played a role in any change<br><br>– Assess PHN progress in engaging with allied health across all priority areas of the Framework, and identify gaps and priority actions |
| Consultations with PHNs | – Qualitative insights on how the Toolkit has supported PHN engagement with allied health, including:<br>  – Success stories and positive feedback<br>  – Challenges and gaps<br><br>– Qualitative insights on progress and challenges with allied health engagement more broadly | – Inform AH engagement strategies and activities, including those related to the Toolkit, as well as the broader ongoing implementation of the National PHN Allied Health in Primary Care Engagement Framework<br><br>– Inform future strategic initiatives |

It will be important for the IFG to agree on simple mechanisms for reporting on progress at a national level, and for PHNs to collect and report data to the IFG in line with this (as outlined in the checklists in section 2.3). Some data (eg. web downloads, or alternatives such as the number of people receiving a link to the Toolkit by email, or number of people participating in a webinar) can be shared frequently to provide a snapshot of implementation progress. Other data will be collected and shared with the IFG less frequently, as part of a periodic review to assess the effectiveness of the Toolkit initiative and inform updates to the Toolkit and broader engagement strategies and activities.

## 5.2 Reviewing and updating the Toolkit

To ensure the ongoing relevance and functionality of the Toolkit, it is crucial to establish a robust review process. This process should include the actions identified below and will require decisions by the IFG to identify the person/ organisation responsible. This continuous feedback loop will help maintain the Toolkit's effectiveness and ensure it remains a valuable resource for AHPs.

| | Action required | How | When | Action owner |
|---|---|---|---|---|
| 1 | Identify a single access point, for Toolkit users and PHNs to send feedback and comments | Provide one email address on the front page of the Toolkit (or have a feedback button built into the Toolkit if a web version is developed). | Pre-launch phase | IFG decision |
| 2 | Identify who will be responsible for ongoing maintenance (eg. updating broken links and contact details), and how this will be resourced | This responsibility could sit with one PHN or an external web developer, but should be done centrally for consistency. The maintenance approach will depend on how the Toolkit is published and hosted. | Pre-launch phase | IFG decision |
| 3 | Plan and conduct a periodic review and update of the Toolkit, including identifying who will be responsible and how this will be resourced | – Review resources to ensure they are still relevant in the current context, eg government policy and initiatives<br><br>– Review feedback collected through the single access point (which has not already been addressed through routine maintenance) and monitoring and consultation data from PHNs<br><br>– Verify that all weblinks are still accessible and direct the user to the appropriate resources | Frequency to be decided by IFG | IFG decision |

The feedback collected through the processes set out above will likely provide suggestions for additional resources or new topic areas of interest to AHPs. This feedback should be systematically collated and analysed to identify emerging needs and gaps in the current Toolkit. By considering these insights (together with the recommendations for future components of the Toolkit included in Appendix 1), any future development of the Toolkit can be tailored to address the evolving requirements of the allied health sector, ensuring it continues to provide relevant and valuable support. This proactive approach will help maintain the Toolkit's effectiveness and enhance its utility for all users.

## 5.3 Risk considerations

Proactive risk management will be an important enabler of the Toolkit's successful implementation. The below risk matrix highlights some key risks to consider in the launch and implementation process, and offers potential mitigation strategies. It is designed to support the IFG in its role overseeing the implementation of the Toolkit, including risk management.

| # | Risk | Impact | Mitigation strategies |
|---|------|--------|----------------------|
| 1 | Stakeholder expectations for the Toolkit are not aligned with the project's scope, budget and limitations, and the Toolkit falls short of high expectations | – Limited uptake of the Toolkit by AHPs <br> – Unmet expectations damage relationships with stakeholders and create reputational risk | – Ensure the Toolkit's scope, content areas and limitations are clear in launch and ongoing communications (building on clear messaging throughout the project initiation and design phases) |
| 2 | The Toolkit may be perceived by Allied Health peak bodies as cutting across what they do for their members. | – Limited Peak support for and engagement in the Toolkit rollout <br> – Limited support for and uptake of the Toolkit | – Continue to ensure clear communication on the purpose and scope of the Toolkit, including that it does not provide profession-specific resources. <br> – Note: Strong collaboration during the design phase has substantially mitigated this risk. |

| # | Risk | Impact | Mitigation strategies |
|---|------|--------|----------------------|
| 3 | Some PHNs do not conduct the engagement and communication activities required for effective Toolkit rollout, due to limited resources or a lack of alignment with the broader priority of increasing engagement with Allied Health | – Limited rollout of the Toolkit in some regions | – Engage the PHN Cooperative immediately following the Toolkit's endorsement, including:<br>    – using this opportunity to reiterate the broader objectives and case for change, including;<br>– The need for a greater focus on Allied Health professions as part of primary health care, in order to improve access, outcomes, integration, safety, quality and cost-efficiency across the health system. This has been highlighted in Australia's Primary Health Care 10 Year Plan 2022 (the 10 year plan)<br>– The opportunity for PHNs to support the allied health sector as a key part of driving a shift towards a wellbeing system and focus on prevention, in line with the 10 year plan<br>    – Highlight the role of the Toolkit as a practical starting point, and how it can support current initiatives. For example, highlighting how PROMs and PREMs resources could help support the rollout of multidisciplinary team (MDT) commissioning<br>    – Ensure all PHNs are aware of the Toolkit and Implementation Plan, its timeframe and the checklist of actions required (to encourage early planning)<br>– Utilise newly funded Allied Health positions to drive engagement and communication activities as part of the Toolkit rollout<br>– Consider what guidance and support the IFG can provide to PHNs to support the launch and ongoing rollout  (eg. templates, standard communications materials)<br>– Monitor implementation progress to identify and address issues |
| 4 | Resources become outdated and links become broken, undermining the relevance and utility of the Toolkit. | – The Toolkit has limited longevity in an environment of reform.<br>– Limited uptake from PHNs and Allied Health over time. | – Ensure a feedback mechanism is built into the Toolkit<br>– Identify who will be responsible for ongoing maintenance (eg. updating broken links and contact details), and how this will be resourced<br>– Establish a plan for the periodic review and updating of the Toolkit, for more substantive revisions. |
| 5 | The Toolkit's release triggers negative reactions from General Practice stakeholders about the increasing PHN focus on allied health | – Damage to PHN relationships with GP stakeholders | – Encourage practice engagement staff to adopt messaging that a focus on allied health is part of primary care, and in line with Australia's Primary Health Care 10 Year Plan 2022 |

# Appendix 1: Recommendations for future components of the Toolkit

During consultations with PHNs and the Allied Health sector in May to June 2024, a number of additional topics of interest for the Toolkit were raised. These have been collated in the table below, and if expansion of the Toolkit is being considered in the future, these recommendations should be reviewed to assess their continuing relevance, given the rapidly changing policy landscape.

| Topic | Potential content |
| --- | --- |
| **Focus area #1: Local health system navigation** | |
| Roles of different allied health professions | – Information on advanced and expanded scope of practice - summary of key points from scope of practice review that is currently underway (skills matrix) |
| Resources to direct consumers to for support and information | – Consumer facing resources on the scope and role of each AH profession<br><br>– Patient support groups, ie local and/or national for condition specific support to refer patients to |
| Overview of local health provider landscape | – Role of local health providers (hospitals, outpatient, community MH service)*<br><br>– Overview of public and private services, and connection and coordination between the two<br><br>– Information and resources to support linkage with hospital system, including. tertiary outpatient services and primary and community care services (eg. GP liaison roles, clinical referral pathways, available services). |
| **Focus area #2: Education, networking and collaboration** | |
| Nationally available education programs and resources | – Family Violence training resources |
| **Focus area #4: Business efficiency and funding sources** | |
| PHN funding opportunities | – Key prerequisites/ requirements (so providers can understand if they have the capacity to apply for and manage PHN funding) - incl. clinical governance requirements, data reporting and performance requirements* |
| Other business resources | – Business continuity and emergency planning |
| **Focus area #5: Digital health and information systems** | |
| Business software, including clinical information systems, and programs that support patient booking and recall systems, billing, and telehealth options | – Software comparison tools and resources<br><br>– What to look for in terms of software interoperability<br><br>– Local PHN offers*<br><br>– Use of AI in practice |

*Content would require localisation