

CareSearch Engagement Activity

Action Plan: Allied Health (AH) sector

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CareSearch is funded by the
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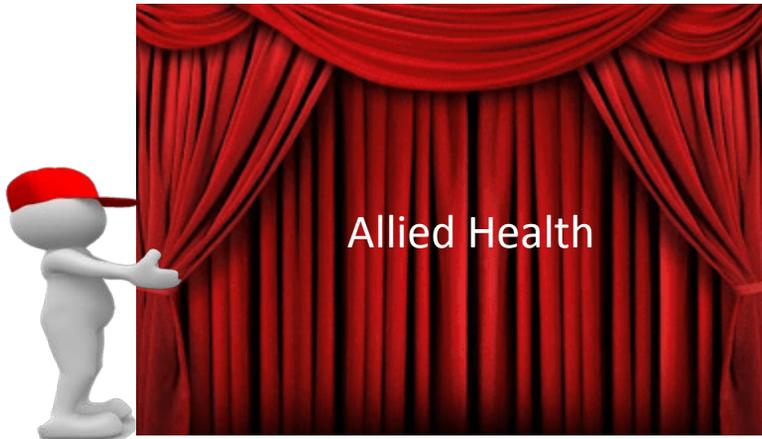
CareSearch and palliAGED Engagement Project

Supporting health professionals and health consumers by ensuring that high-quality and relevant palliative care information and resources are easy to access and understand



Outline

To first understand the context of allied health (AH) we asked twenty representatives to take centre stage and do all the talking





We asked how allied health professionals learn of new information



Challenges:
Multidisciplinary teams strive to be interdisciplinary but often keep professional boundaries



We asked how we can get information to where it is needed

- In-house training
- In-service magazines
- Newsletters
- Conferences and forums
- Call to action – e.g. “please pass this on”
- Quality improvement programs and standards





We asked about the role of evidence

- Good awareness of evidence-based practice (EBP) but sometimes rigid implementation or lack of funding to implement
- Understanding the quality of evidence (theoretical evidence)
- There is a desire for practical evidence – evidence that can drive or be implemented in practice
- Use of evidence can be encouraged via quality improvement, targeted e-mails, clinical practice groups
- Perception that ‘hot’ EBP is noticed yet simple and inexpensive changes are often overlooked





Challenges in relation to EBP

Recognised by the whole group was that there is no funding for additional or new practices or transition to new practice(s). This may lead to the choice of what to remove when a new or additional practice is adopted i.e. a new practice will have to replace a practice rather than funding allowing an additional practice.

A caution was added that clinicians don't stop doing things and will take on additional tasks and this may lead to burn-out.





We asked about AH palliative care needs

- Greater confidence around death & dying
- Understand the role of AH disciplines in palliative care
- How to approach the topic of palliative care with people
- Impact of social determinants on access
- Impact of culture on preferences





We asked about AH palliative care needs (cont'd)

- Seeing palliative care as part of AH not a role within AH
- What information or skills are need to be a part of palliative care
- Recognising that a client has started an end-of-life (EoL) journey
- Understanding who is in charge of care and which people/professions can be involved





And we asked about what AH knows about CareSearch and palliAGED

We learnt that we need to look at increasing awareness in your sector of what we have to offer and how it can help in terms of

- practical information
- finding evidence
- resources for clients



What we can do is

- build awareness of search filters and grey literature to help find evidence
- increase the visibility of practical support
- improve navigation

Your 'blue sky' suggestions* revealed six themes:

- Collaborate with AH to support research, quality improvement, and policy
- Develop new information/presentation formats
- Better Linkages
- Strong marketing
- Education and training
- Structural changes to websites



** We asked if there were no restrictions, what could CareSearch do to better support and interact with your sector*

What we propose to do – Action Plan

Our priorities for the next 12 months:

1. Articles on palliative care and EBP in industry and vocational magazines



These article are to

- raise awareness of palliative care
- learn how to recognise and meet the needs of palliative care clients
- provide important information to you about palliative care
- explain how you and your colleagues can use CareSearch and palliAGED resources to provide palliative care with confidence

Topics for articles:

1. What is palliative care and why is it important?
2. The role of allied health in palliative care
3. How CareSearch and palliAGED can help allied health professionals with palliative care
4. Communicating with palliative care clients and their family
5. Finding evidence and why it matters
6. Finding clinical guidance that you can trust

Magazines

- **Connections** (occupational therapy)
- **HealthTimes** (nursing midwifery and allied health)
- **InMotion** (physio)
- **InPsych Magazine** (psychology)
- **Pharmacy News** (pharmacy)
- **RESPONSE magazine** (paramedicine)
- **Social Work Focus** (social work)
- **Speak Out Magazine** (speech pathology)
- **Spectrum** (Medical Imaging and Radiation)

Newsletters

- **Allied and Scientific Health** (allied health evidence)
- **Australian Pharmacist** (pharmacy)
- **ACA newsletter** (counselling)
- **E-Bulletin AASW** (social work)
- **e-nOTices** (occupational therapy)
- **Flagship** (physio)
- **IAHA newsletter** (indigenous AH)
- **Pharmacy Daily** (pharmacy)
- **Rapid Response** (paramedicine)

What we propose to do – Action Plan

Our priorities for the next 12 months:

2. Promote linkages with professional groups and acknowledge contributors to content development
3. Improve navigation within CareSearch



The workshop was a rich source of ideas. Ideas that are out of scope of this current project have been noted and will be used as part of planning of future work.

What we propose to do – Action Plan



For some of the action items having community members contribute via content writing or product review will be important.

If you are keen to be involved please just let us know by sending an e-mail to

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Next steps

Next phase is Implementation & Evaluation

To keep up-to-date,
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To be involved or to express ideas or comments contact us
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