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## Cardiorespiratory physiotherapy education – are we achieving the vision?

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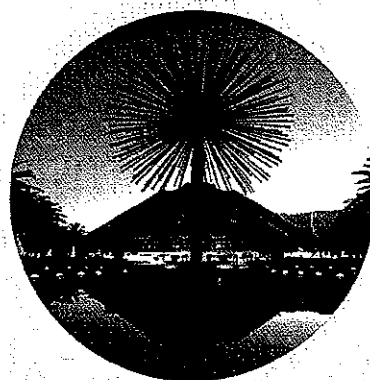


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## Abstract Presentations

### JOB SATISFACTION OF CURTIN PHYSIOTHERAPY GRADUATES 2000-2004: GENERATION Y INFLUENCE

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The aims of the study were to explore the employment characteristics of recent physiotherapy graduates from Curtin University of Technology their satisfaction levels with working in physiotherapy, how many remain employed in the profession and what their future career intentions were. A self-administered questionnaire was sent to contactable entry-level physiotherapy graduates and 256 responded (62.9%). Most respondents (76.5%) were employed full-time in physiotherapy with 14.9% inactive in the profession; 49.8% were Australian Physiotherapy Association (APA) members and 44.9% undertook 10-50 hours of Continuing Professional Development (CPD) in 2006. Of those working as physiotherapists, 79.3% worked in major Australian cities and 92.2% were clinicians. Satisfaction with working in physiotherapy was indicated by 71.9%, with higher levels amongst rural workers, APA members, those completing over 100 hours of CPD, senior and principal physiotherapists. The highest salaries were earned by those working rurally, males, those completing over 100 hours of CPD and those working privately. Overall respondents expected salaries greater than their current salary and X% were satisfied with income in physiotherapy. Sixty-four percent of respondents believed they would leave physiotherapy within 10 years. The three best aspects of working in physiotherapy were helping people/people contact, flexibility and working in a healthcare team. Major areas suggested for improvement were remuneration, recognition for skills/experience and marketing. Although most respondents were satisfied with working in physiotherapy, prospective employment predictions suggest serious implications for the short to medium term. Planning for physiotherapy workforce recruitment and retention to avert the exacerbation of current shortages is essential.

### OUTPATIENT REFORM IN VICTORIA: ROLE INNOVATION FOR PHYSIOTHERAPISTS

**Nail C**

*Austin Health*

Following successful change in Elective Surgery and Emergency Departments in 2007 the Department of Human Services Victoria embarked upon a third wave

of reform – to review and develop the way outpatient services are delivered.

A major component of this work is the evaluation of the way in which role innovation will assist in improving access and using the outpatient workforce more efficiently. Many of these roles involve physiotherapist led clinics in orthopaedics and neurosurgery with the possibility of Botox/Movement disorder clinics in the future.

This paper will provide an overview of the current role innovation initiatives for physiotherapists in Victoria within the context of the DHS Victoria Outpatient Innovation and Improvement Program including barriers to further roll out and future plans.

### CARDIORESPIRATOR PHYSIOTHERAPY EDUCATION – ARE WE ACHIEVING THE VISION?

**Patman S**

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This action research project comprised a broad macro situational analysis type review targeting clinicians conducting cardiorespiratory placements and those providing mentoring/supervision for The University of Notre Dame Australia. The intent was to gain a perspective from the clinicians and supervisors whether current curriculum content and design was effectively preparing students for the real world of cardiorespiratory physiotherapy. By inference, an avenue for reflection on teaching skill and performance was provided. A 46 question survey tool was distributed to facilities and individuals involved in the clinical education of Notre Dame students within the cardiorespiratory physiotherapy area over 2006-07. This questionnaire incorporated three domains: clinical placement resources and student preparation, progression towards the global Australian Standards for Physiotherapy, and development and progression towards the specific cardiorespiratory physiotherapy graduate attributes as determined by Cardiorespiratory Physiotherapy Australia. Eleven individual responses were received. Results indicate that globally students are progressing appropriately, from a cardiorespiratory perspective, towards meeting the expectations of the external clinicians. There is scope for improvements in the preparatory material provided by clinical facilities prior to students participating in their cardiorespiratory placements. Students' satisfactory progress towards meeting the Australian Standards for Physiotherapy is clearly affirmed. Respondents' thoughts on students' progression towards the cardiorespiratory graduate attributes and competencies suggest overwhelming

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satisfaction, with potential further advances against most elements of this domain still possible. Positive affirmations of the professionalism, enthusiasm, motivation, and willingness to learn within the students came out from open-ended questions. These results supplement information from individual student cardiorespiratory placement assessments, Unit Content Evaluations, Teaching Performance Evaluations, Course and Graduate Evaluation Questionnaires to facilitate review of curriculum content and design

### PHYSIOTHERAPY COMPETENCY ASSESSMENTS: FROM BEGINNING TO EXTENDED SCOPE PRACTITIONERS.

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Public hospital managers are required to monitor the clinical practice standards of physiotherapy staff. Competency assessment provides a framework for this task. It is the process of gathering and judging evidence in order to decide whether or not an individual has achieved a standard. A competency standard is an industry determined specification of performance that sets out the skills, knowledge and attitudes required to operate effectively in employment. A clinical competency assessment process was introduced, involving the application of clinical protocols, use of checklists, observation of practice and structured feedback. The aim was to control clinical risk and to provide staff with objective feedback. Prior to implementation, all supervising physiotherapists received instruction from a certified teacher in workplace training and assessment. Competency assessments were conducted when physiotherapists were to perform potentially high risk procedures, for the first time, or to assess orientation needs and the achievement of competency. Assessment included a variety of clinical procedures, from the more standard, such as guedel suction, to more complex procedures such as tracheostomy decanulation. The competency assessment process has been evaluated by survey. Results showed a high level of satisfaction with the process and confirmed that the process provided an accurate reflection of the physiotherapists' usual standard of practice. Competency assessment is part of clinical risk management in our hospitals. It provides a framework that is used to assess competence in the performance of high risk procedures and could be used as part of an assessment process for extended scope roles in physiotherapy.

### CONTINUING EDUCATION NEEDS: A COMPARISON BETWEEN PHYSIOTHERAPISTS AND OTHER ALLIED HEALTH PROFESSIONALS IN VICTORIA

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A continuing education program for allied health professionals is currently accessible in a number of states in Australia for the purpose of building rural workforce capacity and interprofessional practice. The program aims to support professional needs and ambitions of practitioners, particularly those working in rural and remote areas. It utilises recent developments in e-learning to enhance access to continuing education, whether live or retrospectively. The evaluation framework of the continuing education program includes an online pre-program survey to find out perceptions, values and preferences allied health professionals and assistants have in relation to continuing education, and the effect the program may have on their intention to stay in rural practice. Continuing education preferences are presented and comparisons are made between physiotherapists, other allied health professionals and allied health assistants.

### IMPROVING THE TRANSITION OF YOUNG PEOPLE WITH CHRONIC DISEASE TO ADULT HEALTH CARE - WHY, WHEN AND HOW

**Singer BJ<sup>1</sup>, Love SJ<sup>2,3,4</sup>, Gibson N<sup>1,2,3</sup>**

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Transition has been defined as the purposeful, planned movement of adolescents and young adults with chronic physical and medical conditions from child-centred to adult orientated health care systems. The transition of these young people has been receiving increasing attention around Australia and internationally over the past decade. This is in part due to increasing survival rates of children born with chronic or disabling conditions. For instance an increase in numbers of surviving children in early 1990's with peri-natal neurological conditions has produced a large group currently reaching adolescence with complex care needs. Failure to adequately address transition has serious long term implications for the physical and psychosocial well being of young people with chronic health issues and/