

Extended Scope Allied Health Roles – Preparatory Checklist

	Haven't thought about it at all	Thought about it only	Thought about it and ready to move on it	Have something in place	Well developed
Need for change <ol style="list-style-type: none"> i. Patient need ii. Service delivery need iii. Professional development iv. Recruitment and retention v. Using current workforce more efficiently 					
Business case <ol style="list-style-type: none"> i. Available clinical place ii. Costs of new initiative vs. likely outcomes iii. Patient throughput iv. Patient access v. Patient satisfaction vi. Staff satisfaction vii. Intangible return on investment viii. Staff complement <ul style="list-style-type: none"> • Within profession • Impacting on other professions • Likely opposition? ix. Patient health outcomes 					
Employment terms and conditions <ol style="list-style-type: none"> i. Working with HR considering classifications & remuneration ii. Duty statement available iii. Selection criteria (Attracting the right people) <ul style="list-style-type: none"> • Pre-requisite clinical experience and academic background • Change champion • Commit to process • Commit to training • Future leader 					
Evidence-base <ol style="list-style-type: none"> i. Knowledge about evidence-based practice in the area ii. Access to current evidence summaries in the area iii. Applying EBP model in the workplace 					

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<p>Governance</p> <ul style="list-style-type: none"> i. The plan has been discussed with others ii. Change champions are nominated and agreed iii. Senior people have been engaged iv. Steering committee in place v. Roles and responsibilities clarified 					
<p>Developed networks/ partnerships</p> <ul style="list-style-type: none"> i. Within profession <ul style="list-style-type: none"> • Managerial • Peers ii. Other health disciplines within the same department iii. Administrative staff iv. Inter-professional / within team v. Legislative requirements <ul style="list-style-type: none"> • Prescribing • Imaging • Referring vi. Having overt support from relevant local senior medical colleagues vii. With academic institutions 					
<p>Training</p> <ul style="list-style-type: none"> i. Formalised ii. In-house <ul style="list-style-type: none"> • Mentoring • Competency • Credentialing iii. Able to demonstrate safety iv. Able to demonstrate ongoing competence v. CPD opportunities considered vi. Identified & appropriate supervisor available vii. Identified & appropriate supervisor agreed 					
<p>Incidence management</p> <ul style="list-style-type: none"> i. Data capture ii. Risk management iii. Reporting iv. Solutions 					