



**HEALTH  
EDUCATION  
& TRAINING**

WHERE INNOVATION DRIVES  
EXCELLENCE IN EDUCATION AND TRAINING  
FOR IMPROVED HEALTH OUTCOMES

# Applying for a Workplace Learning Grant Webcast

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# Webcast Panel

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# Overview

1. WPL outcomes
2. Learning across borders
3. Key elements for applications
4. New processes
5. Support for local applications
6. Evaluation 'down the track'
7. Workshop – changing practice
8. Questions





## WPL Outcomes (2014 – 2016/17)

Wide Reaching  
Cost Effective  
Program

Over **665** training activities

**16,128** participants

**\$2,648,676** total cost

**\$164** per participant





## Top 10 training themes

**Thematic analysis** of applications across 4 rounds:

- 793 eligible applications

28% activities involved 3 or more AH disciplines

Themes	Number
Specific Clinical Skill	301
Mental Health	116
Non-clinical workplace skills	88
Communication	67
Counselling	48
Trauma	45
Rehabilitation	41
Knowledge sharing	32
Clinical Supervision	28
Research	27





# Does WPL increase PD opportunity in the workplace?

91% Strongly agreed/Agreed

4% Neutral

5% Disagreed/Strongly disagreed

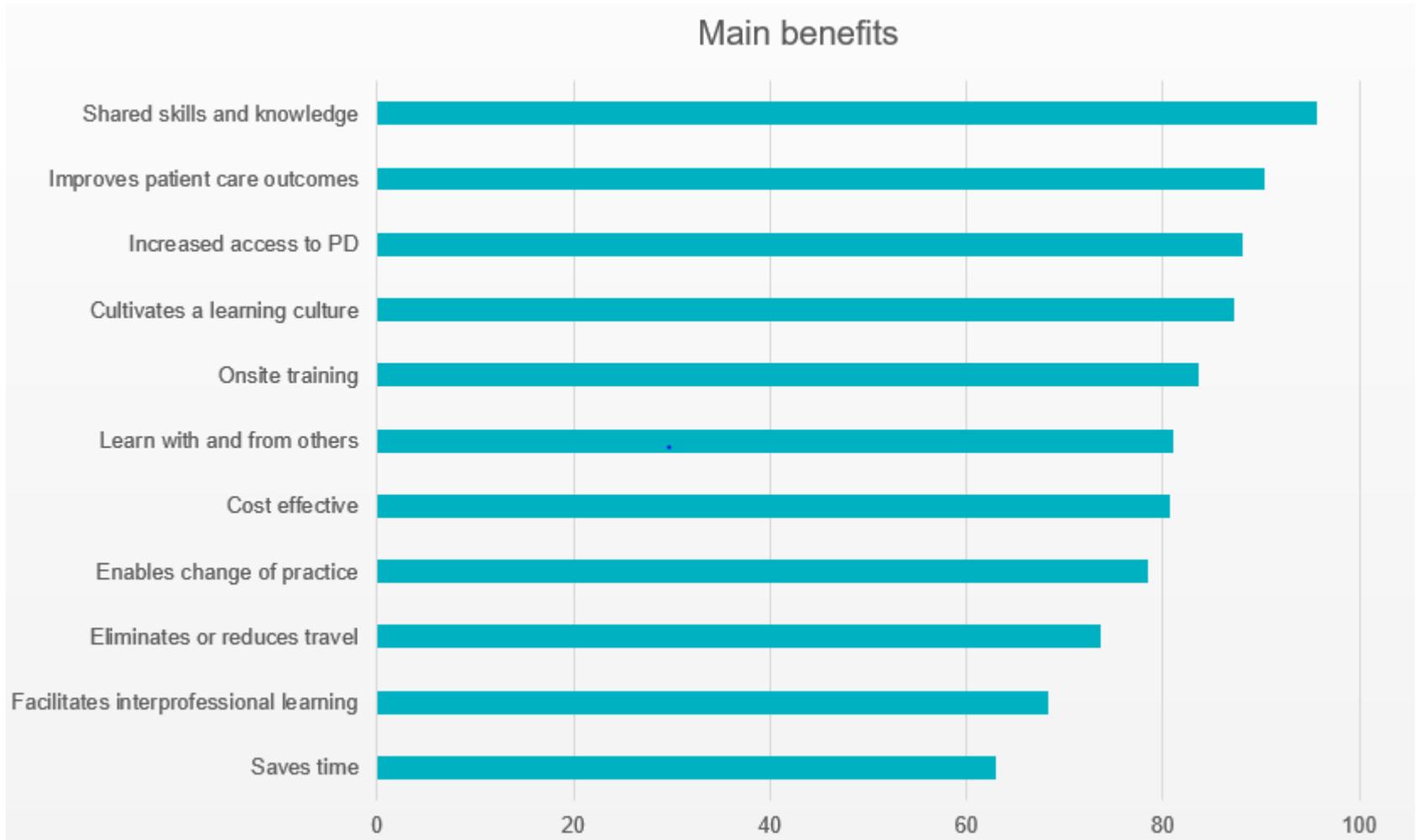
*“We would have virtually no capacity for significant professional development without this grant”*

*“We are able to access the best presenters in each topic which we couldn't do as we have no education budget”*





# What are the main benefits of the program?





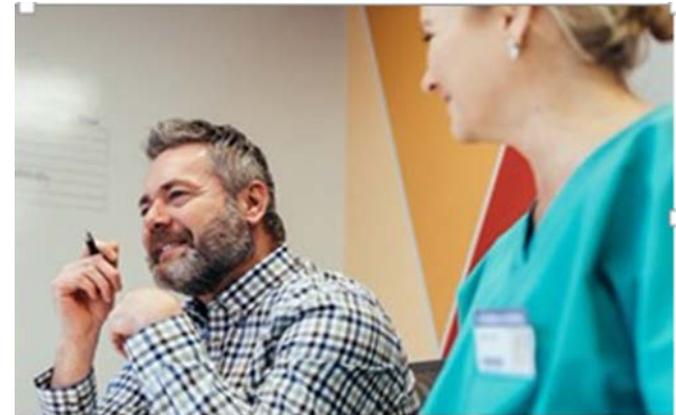
# Learning across borders

- Shadow placement to Cairns and Hinterland Hospital
- Comparison of St George and Sutherland Service
- Evaluation plan
- Evaluation outcomes
- Reflections on the value of this style of WPL and impact to service



# Key Elements for Applications

- Eligibility criteria
- Selection criteria
  - Description of proposed WPL activity
  - Justification based on evidence
  - Learning objectives
  - Evaluation strategy
  - Budget





## Eligibility criteria – all important

- At least 60% AHP and/or AHAs
- Currently employed by NSW Health
- Learning must occur onsite in the workplace
- At least 3 people
- Timing of activity within current financial year
- Activity supported by external presenter
- Quote included
- Supported by allied health director or equivalent position

**The application needs to meet all eligibility criteria to be considered for funding**

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## Selection criteria - Description

- A clear description of proposed WPL activity that is understandable by an AHP unfamiliar with the training topic
- Detailed plan and purpose of the activity
- An outline of training
- Name of the presenter
- Include the location, audience and timeframe of the planned learning





## Selection criteria - Justification

- This section should include the potential improvements to workplace/clinical practice or patient outcomes
- Include the relevance and appropriateness of the activity to the work team
- Include specific detail about the value to the workplace/clinical practice or patient outcomes
- Present clear justification with reference to evidenced based practice, literature, data and/or links to NSW Health documents





# Selection criteria – Learning Objectives

- Clear learning objectives directly related to the workplace learning activity
- Ensure learning objectives are specific and measurable
- Where appropriate link to evaluation
- See page 31 of “The Learning Guide” – HETI
  - Action
  - Content
  - Condition
  - Criteria



## Selection criteria – Evaluation strategy

- A clear and comprehensive evaluation plan of the impact of the proposed WPL activity
- Consider an evaluation approach that includes both short term (within 3 months) and longer term (more than 3 months)
- Include purpose, evaluation focus questions, data sources and methods, usage and dissemination
- Example evaluation survey or focus questions and/or sustainability considerations
- Consider completing the HETI module – “Evaluating Education and Training”



## Selection criteria – Budget

- Clear, detailed and accurate
- All items included are relevant and/or necessary to supporting WPL activity
- Specific items listed separately
- Quotations provided for all necessary items
- Describe clearly how any potential gap in funding will be covered
- The budget and quote figures need to match

### **Description of value for money**



# General suggestions

- Minimise use of acronyms
- Backfill – “ utilisation of funds for the backfill of NSW Health AHA/AHPs will only be considered for shadow placement WPL activities”
- Read the terms and conditions and do not request funds for activities that the terms and conditions exclude.
- One application per team – clearly describe the team
- Late submissions are never accepted



# As a Grant Recipient

- Management of grant
  - Acceptance
  - Invoice raising
  - Arrange training
  - Run training
  - Complete evaluation
- Important to notify HETI asap if program can not go ahead





## WPL Evaluations

Online via Survey Monkey

- Description of WPL activity – from application
- Brief justification of WPL – from application
- Key learning from WPL
- Methods of Evaluation
- Evaluation results
- Description of how the WPL activities changed or improved workplace/clinical practices
- Future directions with workplace learning for the team

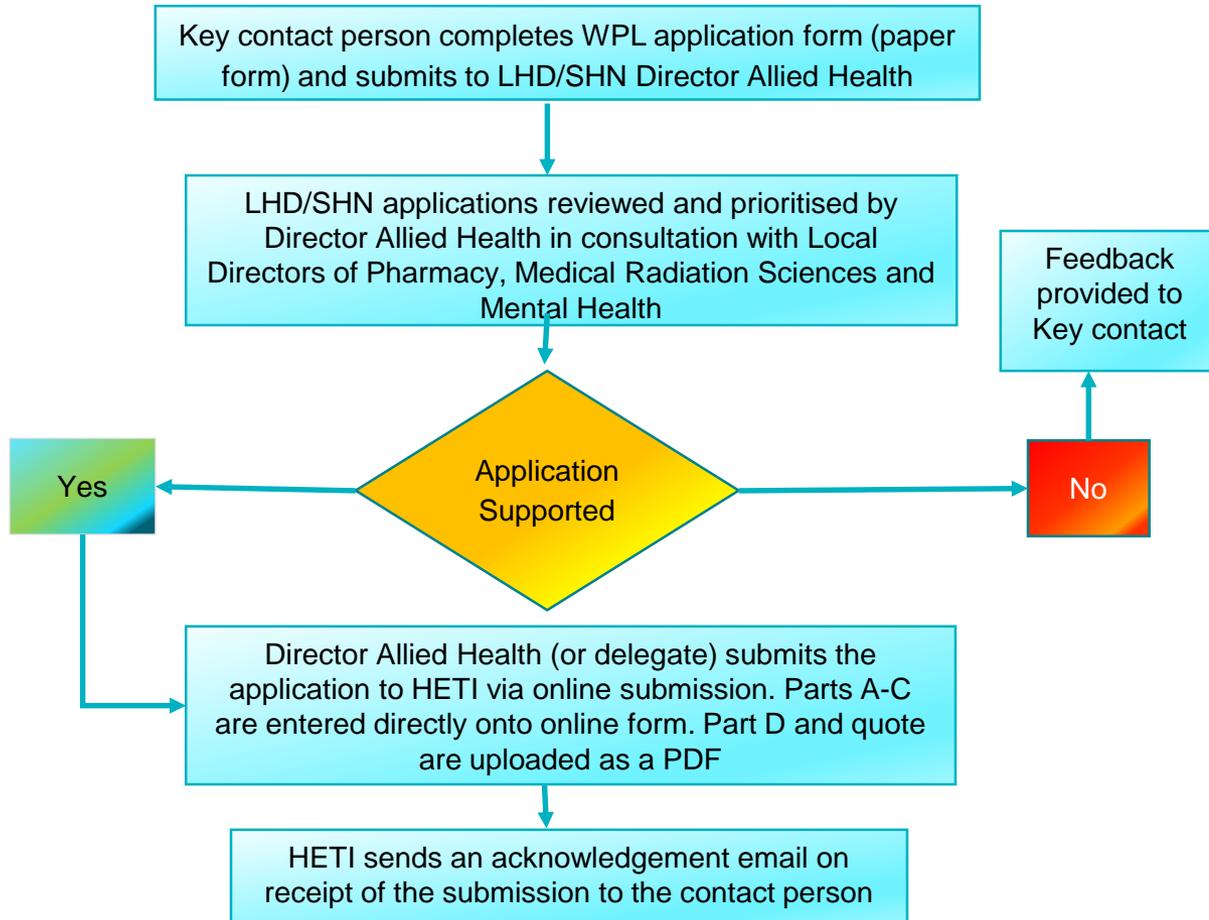




# Workplace Learning Changes in 2018

- Online application process
- Approval and prioritisation
- Submission caps
- Aboriginal and Torres Strait Islander impact statement
- Cross boundary applications







# Support for Local Applications

- Existing support structures
  - Key contacts in LHD's – experts in grant application writing and education, teams who have been successful in the past
  - In SNSWLHD Allied Health Advisors and Educator provide co-ordination role and assist with application process
- New structures to support 2018 changes
  - Key person to co-ordinate all applications for the LHD
  - Prioritisation at local level due to application cap per LHD
  - LHD committee to assist Director Allied Health to review and prioritise the applications prior to submission





## Evaluation down the track

Assessment of changes to workplace/clinical practice

**Example 1: 6 month follow up Evaluation of Participant Goals set at a Person Centred Workshop**

- 100% of participants achieved one of their goals
- 94% partially or totally achieved their 3 goals
- 83% of all the goals set by participants were fully achieved.

Barriers: time constraints, competing demands, the rigidity of system processes, needing the consensus of the team and forgetting.

**Participants who attended a 1 day person centred practice workshop report a change in their practice 6 months later**



## Evaluation down the track

**Example 2 – Did SPs implement skills learnt in a workshop on early language intervention and run parent groups, 6 months later?**

- One group was run at one site with ten parent participants
- 46 children received early language intervention in one-on-one setting totaling 189 consultations

Barriers – staffing, lack of planning before and after the education about how model could be implemented

Long term evaluation: annual assessment of the number of parent groups and one on one consultations conducted using the approach

# Lessons learnt from Evaluation

- Consider in detail how the education will be used in the workplace - the enablers and barriers to implementing skills
- Is this the right time to run this education? staffing, major organisational change, re-developments
- Ensure at end of activity there is time to plan how learnings will be translated into practice – individual and team level
- Supports that enable implementation
  - high priority education need
  - planning before the activity re implementation
  - longer term follow up - keeps participants accountable





# Workshop – Changing practice

Parkinson's Disease (PD) Warrior

Aged Care and Rehabilitation Physiotherapy team

Balmain Hospital

- Brief description of WPL activity
- Justification and description of how this met workplace need
- Evaluation plan
- Evaluation outcome
- Reflection on the value of this style of WPL
- Clinical impact





# Description of PD warrior

- Exercise program specifically designed to treat PD
- Developed by
  - Melissa McConaghy (Specialist Neurological Physiotherapist and author of- *The New Parkinson's Treatment: Exercise is Medicine*)
  - Lyn Tullock (Neurological Physiotherapist and Clinical Director of Advance Rehab Centre, Sydney)
- 8 module (5 week) online course
- 1 day practical workshop
- 10 core PD Warrior exercises





## Workplace need

- 1 in 340 Australians have PD
- 32 people diagnosed daily in Australia
- Increasing age = increased risk
  - 1:1000 >65 years of age
  - 1:100 >75 years of age
- Approx 10,000 geriatric patients admitted to SLHD annually
- Balmain is an Aged Care and Rehab hospital
- PD is a common condition seen at Balmain Hospital



# Evaluation Plan

- Keep it simple and not too onerous
- Short term evaluation
  - Pre and post knowledge tests
- Mid to longer term evaluation
  - Current treatment (pre course), then surveys at 3 and 6 months
  - 6 month record of PD patients and which of the 10 PD Warrior core exercises were prescribed



# Evaluation Outcome

- Knowledge test improved from 67% pre course to 78% post course
- Outcome measures

Pre course	Post course
10MWT, Berg Balance Scale (BBS), Timed Up and Go (TUG)	10MWT, BBS, TUG Additional 6MWT, Mini Best Test, PDQ-39 questionnaire, 10MWT with cognitive task



# Evaluation Outcome

- Top 5 exercises prescribed to PD patients

Pre course	Post Course
Gait training with cues	Squat and Stop*
Sit to stand	Over the River*
Gen LL exercises	Banded side step*
Gen balance exercises	Sit to stand
Stepping forwards and backwards with cues	Stair practice

\* PD Warrior core exercise





# Reflection

- Online module- covered all the theory
- 1 day practical workshop
  - Morning- assessment of patients, 10 core exercises
  - Afternoon- practical session with 2 outpatients, 1 inpatient
- Much more meaningful seeing it in practice with actual patients
- Practical workshop showed it can be modified to fit our inpatient population





# Clinical Impact

- Shift from traditional PD exercises to PD Warrior exercises
- Implementation of more outcome measures
- Feedback from participants
  - Improved knowledge
  - Able to provide more targeted exercises
  - Break up the exercises into smaller components or simplify for the patients regularly seen in our inpatient setting
- Difficult to implement in the later stages of PD
  - but this WPL activity has **changed** participants thinking and treatment of people with PD



# Questions





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