



# SARRAH

Services for Australian  
Rural and Remote Allied Health



# The Allied Health Rural Generalist Training and Education Scheme (TAHRGETS)

## Program Guidelines

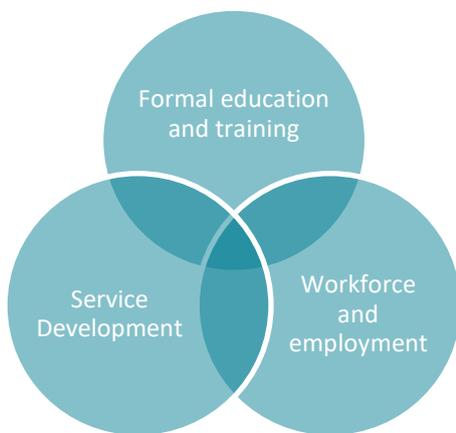
## Overview

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The Allied Health Rural Generalist (AHRG) Pathway aims to support the growth, sustainability and value of the rural and remote allied health workforce and the proliferation of rural generalist service models that deliver accessible, safe, effective and efficient services for rural and remote consumers.

The AHRG Pathway provides a framework for allied health service providers operating in rural settings to employ new graduates and early career allied health professionals, providing them with intensive support, formal training, and ensuring that safe and high-quality health care is provided to clients.

This workforce development initiative is structured around three key components:



- A formal education program that supports the development of the clinical and non-clinical rural generalist practice requirements of the relevant allied health profession.
- Workforce policy and employment structures that support the trainee to develop their skills and capabilities such as structured supervision.
- Rural generalist service models that support and engage allied health professionals to implement innovative and effective solutions to the challenges of delivering care across geographically dispersed and culturally diverse population

The AHRG pathway is available to the following professions:

Nutrition and Dietetics	Occupational Therapy,	Pharmacy,
Physiotherapy	Podiatry	Radiography,
Speech Pathology,	Psychology	Social Work

The Allied Health Rural Generalist (AHRG) Pathway has shown success in the recruitment and retention of allied health practitioners within state health jurisdictions. The Allied Health Rural Generalist Workforce and Employment Scheme (AHRGWES) built on these learnings by expanding Pathway implementation into private and non government sectors.

Funded by the Commonwealth Department of Health The Allied Health Rural Generalist Education and Training Scheme (TAHRGETS) will further expand AHRG Pathway implementation by supporting additional training positions for private and non government organisations providing allied health services. This support will include education funds for trainees and workplace training grants for employers to support implementation.

### **TAHRGETS objective**

TAHRGETS will establish 90 new AHRG training positions within the private and non government sectors. These positions are to commence in 2022 and be completed by 2024.

Of these positions, 30 training positions will be dedicated to Aboriginal Community Controlled Health Organisations, or organisations providing allied health services to Aboriginal communities.

## Applying for positions

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Organisations wishing to apply for TAHRGETS must be able to demonstrate they meet the eligibility criteria.

Organisations will be able to apply for a maximum of four Level 1 and four Level 2 positions.

## Eligibility

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To be eligible for TAHRGETS the organisation must:

1. Private or non-government organisation providing allied health services that are predominantly non-state-health based.
2. Be located within an Modified Monash Model area classified MMM 3-7, or
  - or be located within an MMM 2 and provide the majority of your services within MMM 3-7 regions
  - or be an organisation located elsewhere, where the employed trainee lives and works in a community in an MMM 3-7 area.
3. Be willing and able to meet the mandatory requirements (described below, and summarised in Appendix 1)
4. Agree to actively participate in reporting and evaluation processes.

To be eligible for TAHRGETS the trainee must

1. Have a qualification (and where appropriate be registered), in one of the nine eligible professions.
2. Be an Australian citizen or resident.
  - Certain temporary Visa holders will be considered on a case by case basis.

## Mandatory requirements

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Participation in the AHRG Pathway includes mandatory requirements to support the trainees work integrated development.

### 1. Education

The education component of AHRG Pathway is a two-level program, encompassing rural generalist practice development. James Cook University (JCU) are currently the only providers of this program.

## Level 1 James Cook University (JCU) Level 1 Rural Generalist Program

The level 1 pathway is tailored to early career professionals and those new to rural and remote practice. Ideally the trainee will have completed their probationary period with the employer. Practitioners complete a program of 12 modules with each taking six weeks to complete.

Course: [Rural Generalist Program \(Allied Health\)](#)

Time allowed: 18 months.

## Level 2 James Cook University (JCU) Graduate Diploma of Rural Generalist Practice

The level 2 pathway is targeted at professionals with 2 or more years of clinical experience. Over a period of 18 months to 2 years (part-time study load) practitioners complete a Graduate Diploma in Rural Generalist Practice comprising 8 units. The program supports progression from early career to proficient rural generalist practitioner.

Course: [Graduate Diploma of Rural Generalist Practice](#)

Time allowed: 24 months.

NB: The Level 2 education requirements for Medical Imaging are found in Appendix 2

## 2. Supervision

The trainee must be provided with structured supervision. For the Level 1 program this is expected to be a discipline specific supervision, for the Level 2 this supervisor can be from another discipline.

Additionally for **medical imaging**, the organisation must indicate they are able to meet the supervision and support requirements of the Medical Sonography qualification.

## 3. Service development project

The rural generalist trainee must **participate** in a service development project over the course of the program. The specific nature of the project will vary depending on the needs of the service and community. Common project themes are:

- Delegation and better use of support workers (assistants)
- Expanded scope, including skill sharing between the Allied Health professions.
- Service expansion using technology: including telehealth to deliver remote services
- Partnerships that bring care closer to home for rural and remote consumers

## 4. Allocated development time

A minimum of 0.1FTE (up to 0.2FTE) is allocated to enable the trainee to participate in the mandatory requirements. (\*please note that this is what your employer implementation package is intended to support).

Time for study for the Level 1 would be mostly work integrated, however for the Level 2 there is an expectation of a personal time commitment to study.

## 5. Reporting

The organisation must provide quarterly reports to SARRAH as per template provided.

At project completion trainees and organisations must provide a short presentation on the process and outcomes of their service delivery project. This should be accompanied by a brief summary.

## 6. Evaluation

The participating organisations will contribute to, and support the trainee and other key stakeholders (e.g. co-workers, other managers, clients or local service providers) to participate in routine data collection activities that contribute towards the evaluation of TAHRGETS project, including but not limited to:

- (a) Surveys and interviews to collect organisational, contextual and qualitative information and to plan appropriate data collection activities for the life of the project;
- (b) data relating to service development projects

Data collection activities will be planned in collaboration with the participating organisation, an external evaluation and research team and supported by SARRAH project staff.

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## Funding and supports

### Education Funds

SARRAH will contribute education funds to cover the cost of the formal education component of the pathway, paid directly to the education provider.

Level 1 pathway; up to \$11,000 per participant

Level 2 pathway; up to \$31,000 per participant

### Workplace Training Grants

SARRAH will contribute workplace training grants paid to the organisation. The organisation can be flexible in using these funds which are intended as an in part compensation to cover backfill to support the rural generalist trainee to complete education, supervision and service development project components of the program. Payments are made prospectively on a quarterly basis.

Level 1 pathway; \$21,500 per participant over 1 year

Level 2 pathway; \$43,000 per participant over 2 years.

TAHRGETS participants will also have access to support through individual SARRAH memberships, access to education offerings and other resources.

## Appendix 1: Summary of TAHRGETS program guidelines

	LEVEL 1	LEVEL 2
<b>Eligibility – organisation</b>		
Private or non government organisation (providing non-state-health funded services)	Essential	Essential
Location is in MMM 3-7 <sup>1</sup>	Essential	Essential
Be willing and able to meet the mandatory requirements (see below)	Essential	Essential
Agree to participate in reporting and evaluation processes	Essential	Essential
<b>Eligibility – trainee</b>		
Professional qualification	Dietetics, Occupational Therapy, Medical Imaging, Pharmacy, Physiotherapy, Podiatry, Speech Pathology, Psychology, Social Work	Dietetics, Occupational Therapy, Medical Imaging <sup>2</sup> , Pharmacy, Physiotherapy, Podiatry, Speech Pathology, Psychology, Social Work
Residency	Australian citizen or resident (temporary visa holders will be considered on case by case basis)	Australian citizen or resident (temporary visa holders will be considered on case by case basis)
<b>Recommended years of experience</b>	New graduate up to 2 years	2 years or more
<b>Mandatory Requirements</b>		
Support trainee to complete formal education	Course: <a href="#">Rural Generalist Program (Allied Health)</a> Provider: JCU or other accredited program Time allowed: 18 months Mostly work integrated study	Course: <a href="#">Graduate Diploma of Rural Generalist Practice</a> Provider: JCU or other accredited program Time allowed: 24 months Study commitment in personal time required (See Appendix 2 for Medical Imagers)
Provide structured supervision	Discipline specific	Discipline specific or multidisciplinary
Provide allocated development time <sup>3</sup>	Minimum 0.1 FTE (up to 0.2FTE)	Minimum 0.1 FTE (up to 0.2FTE)
Provide trainee with service development project and project support	Essential	Essential
<b>Implementation package funding and support</b>	Trainee education funds up to: \$11, 000 Workplace training grants up to: \$21,500 (over 1 year) Free SARRAH memberships Specific SARRAH education and resources Other support as identified	Trainee education funds up to: \$31, 000 Workplace training grants: \$43,000 (over 2 years) Free SARRAH memberships Specific SARRAH education and resources Other support as identified

## Appendix 2: Approved Level 2 Education program for Medical Imaging

### Approved Level 2 education program for Medical Imaging

- Any accredited, entry-level qualifying program in medical sonography (2 year part time) (<https://www.asar.com.au/course-accreditation/asar-accredited-courses/>)
- In addition, if not previously completed in the JCU Level 1 Rural Generalist Program:
- Any 3 of the following modules (Source JCU Level 1 Rural Generalist Program - Rural Service Delivery Domain):
    - [MO1001 Project Management Skills](#)
    - [MO1002 Rural and Remote Community Context](#) or [MO1003 Aboriginal and Torres Strait Islander Community Context](#)
    - [MO1004 Rural and Remote Organisational Context](#)
    - [MO1005 Strategies for Rural and Remote Service Delivery](#)
    - [MO1006 Quality Improvement](#)
    - [MO1007 Project Evaluation and Translating Outcomes](#)
  - Module [MO1016 Fast Focused Assessment with Sonography in Trauma \(FAST\)](#) (Source JCU Level 1 Rural Generalist Program – Clinical Skills Domain)
  - Module [MO1027 Remote Medical Imaging](#). (Source JCU Level 1 Rural Generalist Program – Clinical Skills Domain)
  - Module [MO1025 Education and Training](#) (Source JCU Level 1 Rural Generalist Program – Service –specific clinical skills Domain)
  - For medical imaging education funds for the level 2 education contributed by SARRAH is also capped at \$31,000. The proposed funding breakdown for medical imaging is:

Item	Estimated cost	SARRAH contribution
6 Level 1 Modules (800 per module)	\$ 5,500	Full
Medical Sonography	\$ 9,000*	Full for Commonwealth Supported Places (CSPs)  In the event that CSPs are not available will part contribute up to a total education fund of \$28,000

\*based on current costs of Commonwealth Supported Places at various universities