

**2013**

**QUEENSLAND PHYSIOTHERAPY  
CENTRAL ALLOCATION PROCESS  
PROCEDURE MANUAL**



**A strategy of the:  
Queensland Physiotherapy  
Placement Collaborative**

**Version 3.1**

### **1. BACKGROUND**

It is well recognised and accepted within the Queensland physiotherapy profession that the responsibility for provision of pre-registration Physiotherapy clinical education should be a shared one, with tertiary education institutions (Universities) and placement providers (eg Queensland Hospital and Health Services) acting in a partnership. In 2008 the Queensland Health and Mater Health Services (Brisbane) Directors Of Physiotherapy Services (DOPSQ) Clinical Education Sub Group, in collaboration with the university sector providing Physiotherapy pre-registration clinical education, established the Queensland Physiotherapy Clinical Education Placement Working Party (PCEPWP) to fulfill this responsibility.

In February 2013, in recognition of the ongoing collaborative nature and role specialisation of the PCEPWP, the name was changed to the Queensland Physiotherapy Placement Collaborative (QPPC). The PCEPWP and QPPC, with representative membership from the Universities' Schools of Physiotherapy and DOPSQ, has led the development of the Queensland central allocation process (CAP). Following five successful years as a "working party" and the completion of the Queensland CAP for the 2009-2013 placement years all representatives agreed on the change of name.

Table 1: History of Physiotherapy CAP Meetings

Year	Location	CAP for clinical placement in year
2008	Bond University	2009
2009	Allied Health Clinical Education and Training Unit (Queensland Health)	2010
2010	Griffith University	2011
2011	James Cook University	2012
2012	Australian Catholic University	2013
2013	University of Queensland	2014

**The main objectives of the CAP are to:**

- **Improve predictability of student placements for the universities**
- **Assist Queensland public health system (Queensland Hospital & Health Services and Mater Health Services (Brisbane) (HHS & MHSB) facilities and services to build capacity for quality student placements**
- **Improve workforce management of clinical education within Queensland HHS & MHSB facilities and services**

- **Facilitate communication between Queensland HHS & MHSB and the Universities in relation to clinical education**
- **Manage the distribution of placements from Queensland HHS & MHSB facilities and services to the Universities**
- **Develop and refine an equitable system for the ongoing coordination and distribution of available Queensland HHS & MHSB placement opportunities into the future**

The Queensland CAP has resulted in a coordinated, equitable and collaborative approach to building sustainable placement capacity, a mutually beneficial process that has enabled Physiotherapy clinical education in the Queensland public health system to develop to its current level.

The role of the QPPC is to ensure that Queensland HHS & MHSB facilities and services work towards providing a sustainable capacity for quality physiotherapy clinical education placements for pre-entry physiotherapy students, and that these placements are provided to Queensland universities in a fair, efficient way, to optimise clinical education opportunities.

Since September 2009, the Queensland Physiotherapy Placement and Development Coordinator has been employed to plan and coordinate the Physiotherapy CAP and to manage clinical education placements provided by Queensland HHS & MHSB facilities and services throughout the year.

The Queensland Physiotherapy CAP was developed from established industry concepts of supply and demand. While the basic principles were well grounded in theory, the practical application to a clinical education environment was novel and needed to evolve over the course of time. As a consequence, procedures undertaken in the implementation of the CAP have emerged through an action/review methodology.

## **2. QUEENSLAND PHYSIOTHERAPY PLACEMENT COLLABORATIVE**

The Physiotherapy central allocation process is implemented through a collaborative partnership between physiotherapy stakeholders in Queensland HHS & MHSB and the Universities, called the Queensland Physiotherapy Placement Collaborative (QPPC).

The QPPC consists of:

- 3 representatives from the Directors of Physiotherapy Services Queensland (DOPSQ), one from each of the three notional geographical areas of Queensland
- 1 representative from each of the Universities undertaking entry level physiotherapy student education. In 2013 this included Bond University, Griffith University, James Cook University, the University of Queensland and the Australian Catholic University. Future representation from other Queensland universities engaging in entry level physiotherapy student education will be encouraged.
- Queensland Physiotherapy Placement and Development Coordinator
- Statewide Clinical Education Program Manager (Physiotherapy)

Terms of Reference have been established for the QPPC. These will be reviewed every two years to ensure they remain aligned and relevant to the collaborative and the CAP.

The QPPC has developed two supporting documents for the CAP:

- QPPC “Rules of Engagement” for the Central Allocation Process (Appendix 1)
- QPPC “Principles of Placement Allocation” (Appendix 2), a set of seven guiding principles and key considerations to ensure that placements are allocated to each University in a fair and equitable manner.

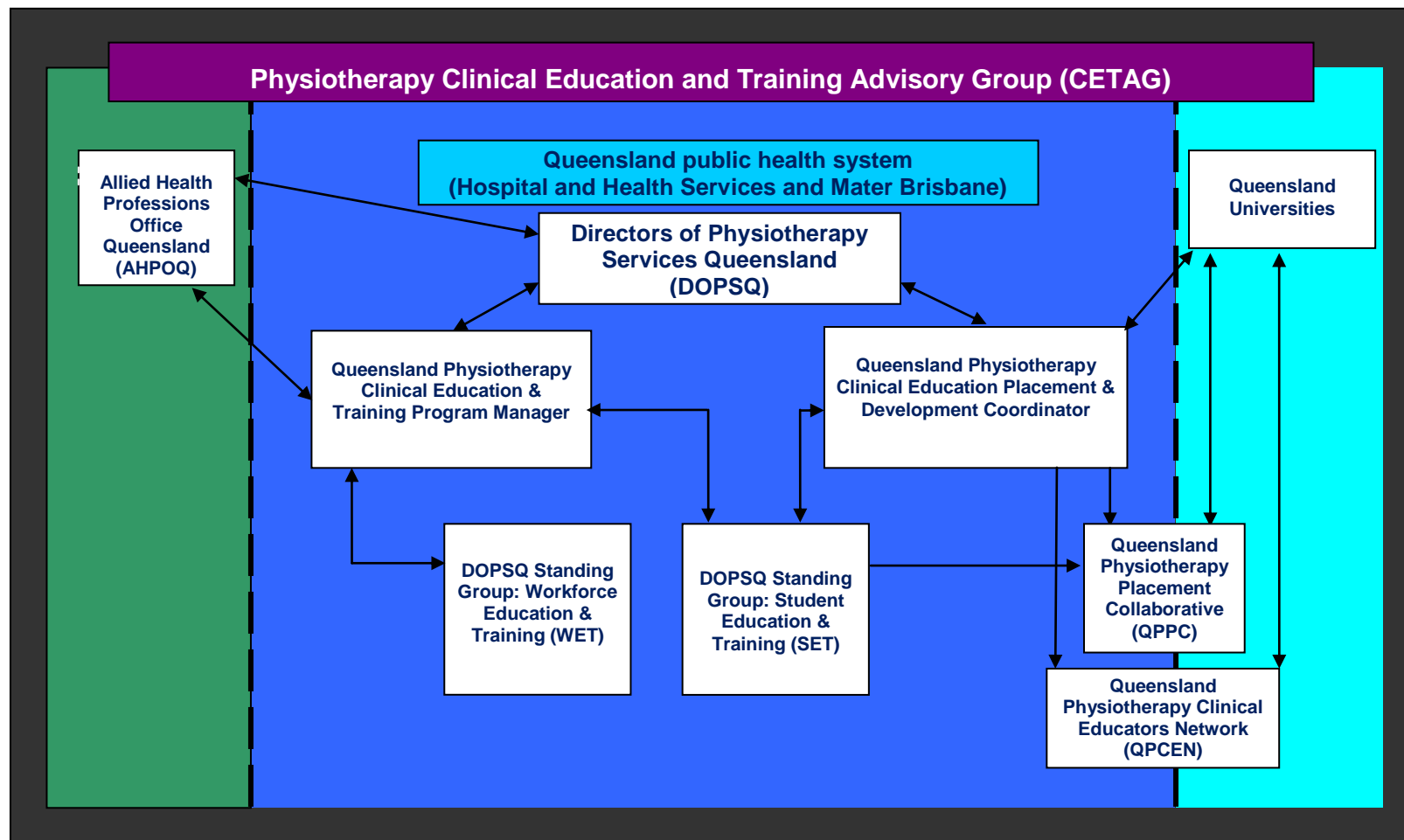
The QPPC provides oversight for the clinical placement process and facilitates communication between Queensland HHS & MHSB and the universities regarding these placements, as well as managing and reporting on the current state of Physiotherapy placement capacity and demand at any point in time.

### **QPPC Key achievements:**

- a) Development of a successful collaborative partnership between the Queensland public health system (Queensland HHS & MHSB) and Queensland physiotherapy education providers with respect to physiotherapy clinical education.**
- b) All parties committed to a uniform Physiotherapy clinical education placement length of 5 weeks.**
- c) All parties committed to the alignment of Physiotherapy clinical practice placement starting dates.**

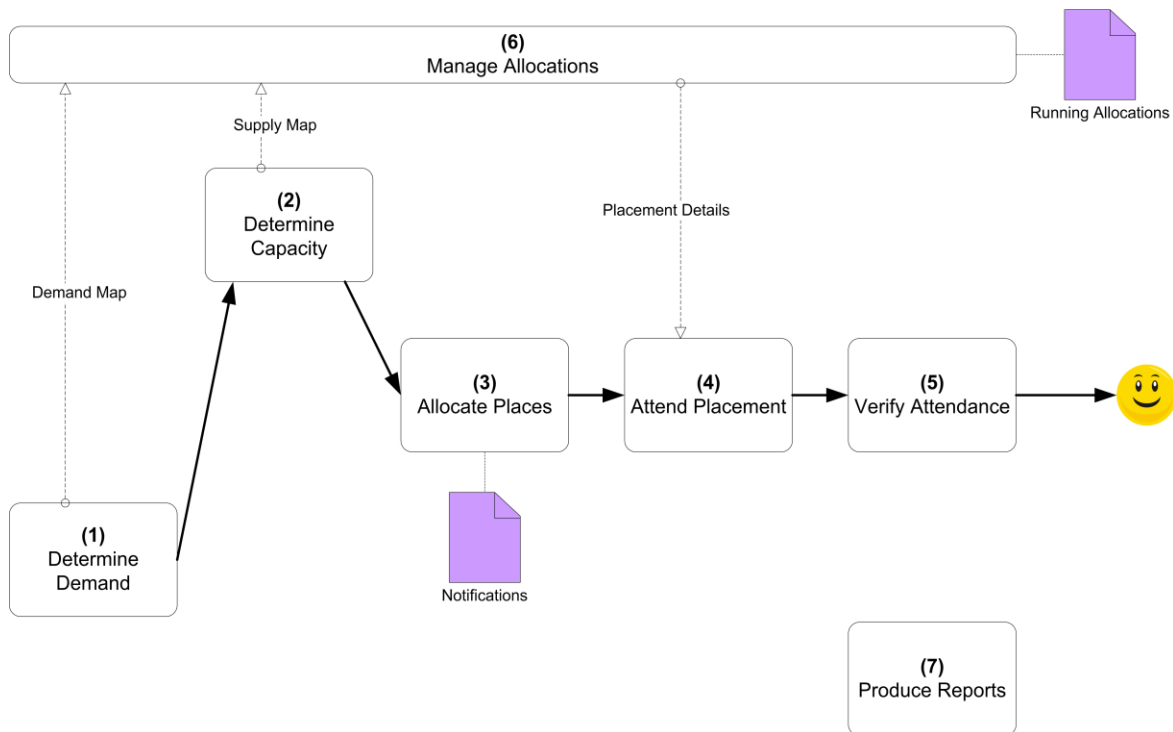
- d) All parties committed to use a standardised assessment instrument for evaluating Physiotherapy clinical placements (Assessment of Physiotherapy Practice)**
- e) Creation of the position of Queensland Physiotherapy Placement and Development Coordinator from funds generated by the clinical placement Agreements. The role of the Coordinator is essential to the management, reporting and ongoing refinement of the CAP and to building sustainable student placement capacity and quality within the Queensland public health system facilities and services.**
- f) Development, implementation and refinement of a Central Allocation Process for pre-registration clinical placements, which includes:**
  - I. Processes for managing supply and demand**
  - II. Reporting of quality data relating to clinical placements within Queensland HHS & MHSB**
  - III. Evaluation of data and processes to continually build capacity and refine the CAP methodology**

Figure 1: QPPC Governance Structure



### **3. THE QUEENSLAND PHYSIOTHERAPY CENTRAL ALLOCATION PROCESS**

#### **CAP Model:**



#### **Queensland Physiotherapy Central Allocation Process (CAP) Descriptions**

QPPC has a well defined set of principles and procedures for managing the allocation of clinical placements and maintaining records of the supply, demand and uptake of placements by for example, University, clinical area, facility or service.

##### **(1) Determine placement demand (University requirements)**

1. University Clinical Education Coordinators identify demand (University requirements) for total placement requirements by clinical area, block dates and number of student placements required. This demand is provided to the QPPC.
2. The Queensland Placement & Development Coordinator creates a compiled Demand Map for the upcoming academic year (compiled university requirements spreadsheet).
3. The Placement & Development Coordinator sends the collated University requirements information to all HHS & MHSB facilities and services. This information includes clinical area, block dates, the previous year's facility placements offered and the new university placement

requirements.

### **(2) Determine placement supply (offers/capacity)**

1. Queensland HHS & MHSB facilities and services via Physiotherapy District Directors or Facility Placement Coordinators respond to the demand map issued by the Placement & Development Coordinator with offers of placements.
2. These placement offers outline the total number of HHS & MHSB placement offers by clinical area and placement block. The offer also includes the facility's demographics of each placement offered (age span, clinical experience mix) as well as any pre-requisite requirements.
3. The Placement & Development Coordinator creates a compiled Queensland HHS & MHSB facilities and services offers document (compiled offers spreadsheet) that covers each HHS, facility, placement block date and physiotherapy clinical area placement type (for example, Cardiorespiratory or Neurorehabilitation).

### **(3) Allocate placements**

1. The QPPC undertakes the CAP meeting over two to three days to process the allocation of placements to Universities for the proceeding year, utilising the rules of engagement (see Appendix 1) and guided by the Principles of Placement Allocation (see Appendix 2).
2. Distribution/Quota: by clinical area placement type, each University's yearly reported requirements for that clinical area is divided by the total reported requirements of all Universities for that clinical area to create a distribution ratio (quota) for each clinical area placement type.
3. The QPPC determines a distribution quota of placements to each university (by clinical area placement type) by the % of available placement offers.
4. Placements are assigned to each university based on the distribution/quota percentage and the total number of places available for each block.
5. A second round of meetings is held to finalize placements based on individual facility and university needs as per steps 3 and 4 above.
6. Additionally, any unallocated placement offers are placed into an un-allocated pool, for future use. Universities also utilise other placement providers (other than Queensland HHS & MHSB) to meet their total clinical placement requirements.
7. Once finalised, the QPPC signs off the placements and a yearly dynamic map of placement allocations (running allocations spreadsheet) is produced outlining allocations by University, facility/service, clinical area, placement blocks and numbers of students to be placed.
8. A spreadsheet is also produced which outlines allocations by University, clinical area, placement blocks and number of students for an individual HHS or entity (facility confirmation spreadsheet).

9. Students complete preferences for placements and provide this directly to the University Clinical Education Coordinators.
10. The University Clinical Education Coordinators assign individual students to their total available placements by placement block and physiotherapy clinical area. The University Clinical Education Coordinators provide the student names to the facilities by placement block and physiotherapy clinical area.
11. Queensland HHS & MHSB facility placement coordinators supply supervisor details for placements, facility/demographic information such as contact and transport information, and any other specific information such as pre-reading.
12. Any subsequent changes to offers or allocations post sign off are managed as change requests, and all changes recorded in the central allocation databases (compiled offers spreadsheet and running allocations spreadsheet) by the Physiotherapy Placement and Development Coordinator.

### **(4) Attend placement**

Once a student has been allocated a place, they physically attend the facility or service for the placement. This process step is included for the purposes of understanding the placement model processes overall.

### **(5) Verify placement attendance**

1. During placement, the *Assessment of Physiotherapy Practice*, is used to evaluate student performance during the clinical placement. At completion of a clinical placement, the Assessment of Physiotherapy Practice is completed and signed by the clinical placement supervisor and the student.
2. The completed evaluation is returned to the university.
3. Any placement not completed (eg due to illness) is notified to the Physiotherapy Placement and Coordinator by the university to allow updating of the running allocations and facility confirmation spreadsheets.

### **(6) Manage placement allocations (ongoing)**

- Managing Allocations is an overarching process controlled by the QPPC that takes inputs from the processes to determine capacity and demand, and allocation of placements.
- The output of this is the Running Allocations document, which details at any given time how demand is currently being met and supply used. This register also contains un-allocated placements that are available if required by a university.
- Ad-hoc placement returns, requests and allocations are also managed via this central process once the initial demand and supply maps are produced each year.
- The Running Allocations register is continuously updated and provided to Universities.

### **(7) Data analysis, interpretation and reporting**

- The Placement & Development Coordinator uses the Running Allocations Spreadsheet to produce a monthly report which is distributed to all QPPC members. This report contains a log of all changes, e.g. returns of allocated placements, take up of new placements and up to date unallocated placements.
- Other reporting generated covers: supply (offers) and demand (requirements) of placements by clinical area, utilisation of capacity on a statewide basis, uptake by clinical area and facility.

## **4. CONTACT**

For further information please contact:

Mark Gooding

Queensland Physiotherapy Placement and Development Coordinator

Email: [mark.gooding@health.qld.gov.au](mailto:mark.gooding@health.qld.gov.au)

## **APPENDICES**

1. QPPC rules of engagement for the CAP
2. QPPC principles of placement allocation for the CAP
3. Flow Chart: Non-Queensland University placement request to QPPC

## **Central Allocation Process (CAP)**

### **Appendix 1: Rules of Engagement**

#### **QPPC RULES OF ENGAGEMENT FOR THE CENTRAL ALLOCATION PROCESS**

##### **Participate and listen actively**

- Participate to the fullest of your ability and share all relevant information.
- Respect others when they are talking; listen and ask clarifying questions.
- Explain your reasoning and intent.

##### **Respect topics & time frames**

- Signal when we are going off-track.

##### **Open to giving and receiving constructive feedback**

- Do not be afraid to respectfully challenge one another by asking questions, but refrain from personal attacks - focus on ideas.

##### **Communicate clearly, concisely**

- Only one conversation will go on at once.
- Speak from your own experience instead of generalizing ("I" instead of "they," "we," and "you").
- Be conscious of body language and nonverbal responses -- they can be as disrespectful as words.

##### **Enable all group members to be heard**

- Instead of invalidating somebody else's story with your own spin on her or his experience, share your own story and experience.

##### **Seek to understand and seek a solution**

##### **Sense of humour**

##### **Acknowledgements:**

- "Ground Rules for Effective Groups" retrieved: <http://www.selba.org/GEDSEng/Social/Facilitation/GroundRules.html> (accessed 23rd August 2013)
- "Guide for Setting Ground Rules" retrieved: <http://www.edchange.org/multicultural/activities/groundrules.html> (accessed 23rd August 2013)

### Appendix 2: QPPC Principles of Placement Allocation

#### QPPC PRINCIPLES OF PLACEMENT ALLOCATION FOR THE CENTRAL ALLOCATION PROCESS

A set of guiding principles has been established by the Queensland Physiotherapy Placement Collaborative (QPPC) to ensure that Queensland public health system (Hospital & Health Services and Mater Health Services (Brisbane), (HHS&MHSB) placements are allocated to each university in a fair and equitable manner, ensuring optimal use of placements according to university needs.

There are 7 principles and a number of key considerations when allocating Queensland public health system placement offers during the central allocation process.

##### Principle 1

All universities are to declare their total placement requirements, regardless of whether they are required from the Queensland public health system or not. This will allow all stakeholders to understand more clearly the actual university requirements (not only the Queensland public health system requirements) as well as provide transparency for decision making.

##### Principle 2

The proportional distribution of placements to each University for each of the Australian Physiotherapy Council (APC) key areas (musculoskeletal physiotherapy, neurological physiotherapy and cardiorespiratory physiotherapy) as well as the CAP clinical areas of orthopaedics, paediatrics, women's health and "other" is based on the total reported university placement requirements for each clinical area.

For each clinical area, each University's yearly reported requirements for that clinical area are divided by the total reported requirements of all Universities for that clinical area to create an annual distribution ratio (quota) specifically for that clinical area placement type.

It is acknowledged that the actual number of students who eventually take up placements may be slightly different from the expected or predicted number due to a number of reasons, which may include but not be limited to:

- Failure of theory component of course preventing progression to clinical placements
- Need to repeat placements
- Course deferrals
- Course transfers

Because of this variance, student numbers will need to be adjusted retrospectively at the time of the Central Allocation Process to reflect the actual number of students in the current placement cohort.

### **Principle 3**

The distribution ratio will be used to calculate an annual placement quota for each university for each clinical area placement type. The university representatives on the QPPC will be responsible for ensuring appropriate “spending” of their individual quotas across their required placement blocks in the year.

### **Principle 4**

University models of education are essentially of two types:

- Embedded model - theory components in a particular clinical area are followed immediately by clinical experiences of the same type. Placements of a particular clinical area type are therefore required all at a particular time of year but not at any other time of year.
- Distributed model – theory components in particular clinical areas occur primarily in the previous pre-clinical year and so clinical placement experiences may occur at any time throughout the clinical year/s. Placements of a particular type are therefore required at any time of the year.

Any allocation of placements should take these models into consideration across the whole year.

### **Principle 5**

Students from each university should have equal opportunities for clinical education placement experiences across differing geographical settings eg regional, rural, tertiary, etc.

### **Principle 6**

“Cross fertilization” is beneficial for students, universities and facilities. Placement allocations should therefore aim to ensure that students do not have all their placements within the one facility or district.

## **Principle 7**

University representatives on the QPPC must come to the central allocation process with a good understanding of their actual placement requirements from the Queensland public health system. This should be equal to the total placement requirements for the year minus the placement requirements already established with other external placement providers (eg private providers, Education Queensland) or able to be provided from internal strategies (eg University clinics).

## **KEY CONSIDERATIONS**

- Equity of distribution of available annual placement offers between universities should be based on both the quota and the university requirements for specific placement blocks.
- The allocation process should consider:
  - Numbers of placements as reflected by demand
  - Geographical distribution
  - Balance of locations (Tertiary/ Primary, community)
  - Dynamics and changes, unplanned or predicted
- Specific demographics, conditions or pre-requisites attached to placement offers should be carefully considered before final allocation.
- Uptake of offers at facilities influences clinical education staff appointments within the Queensland HHS&MHSB.

## Central Allocation Process (CAP)

### Appendix 3:

### Non-Queensland University placement request to QPPC

