

A DAY IN THE LIFE OF AN INTERDISCIPLINARY ALLIED HEALTH ASSISTANT

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The Alfred

BACKGROUND

Allied Health Assistants have traditionally been aligned with one allied health discipline. There are, however, benefits to patient care from having AHA's work across disciplinary boundaries especially for complex patients who require multidisciplinary interventions. Furthermore, such diversity in provision of treatment and therapy can extend an AHA's skill set, allowing for greater job satisfaction, staff retention and potential career development of the AHA workforce

Alfred Health, a major tertiary hospital with state-wide specialty units, employs 69 AHA's of whom 21 work across 2 or more disciplines. A senior AHA, funded by the Victorian Adult Burns Service (VABS) has worked on the unit since 2010 to assist with the provision of therapy services to its patients.

AIM

To describe 1: A typical workday in the VABS for the senior AHA and 2: Present a case study of a burns inpatient who had interdisciplinary care (occupational therapy & speech pathology).

* Name changed for privacy purposes

CASE STUDY

72yr old male (John*) admitted to the Alfred burns unit with 18% total body surface area burns to his face, scalp, bilateral upper limbs and hands post a BBQ gas bottle explosion. John required multiple surgeries and procedures to his face, scalp and upper limbs.

1: Debridement of all wounds and the removal of dead skin, debris etc... that may have lodged into the skin.



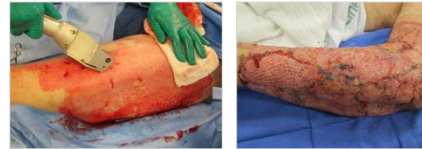
(debrided hand)

2: The application of a synthetic covering (Biobrane) to create a protective layer over the raw debrided skin and to allow for some healing over a 3-5 day period.



(biobrane glove)

3: Split skin grafting (SSG) to unhealed areas – mainly the upper limbs. The donor skin coming from John's thigh.



(donor site: thigh)

(SSG to upper limb)

A TYPICAL DAY

John's sessions with the AHA in both occupational therapy (OT) and speech pathology (SP), heavily revolved around range of movement (ROM), scar management and prevention of contractures.

Active and passive orofacial and upper limb exercises were completed on a daily basis with sessions structured around the needs and goals that John along with his medical and allied health team had identified.

Both the OT and SP sessions would typically average 1 hour and because they both had similar goals to achieve combining the two made sense.

John needed help in not just increasing his ROM but also in breaking down and reducing the scarring that was developing over his hands and face through massage, stretching, exercises and the use of

pressure garments.

Below are examples of the type of exercises John would complete.



CONCLUSION

The role of a an interdisciplinary AHA in the Victorian Adult Burns unit of the Alfred Hospital is varied and tailored to the needs and goals of the patient.

It allows for more intensive sessions, which inturn increases the patients engagement in their therapy and brings continuity to their care – important factors when working on a busy unit like the burns unit at The Alfred.

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