

# COLLABORATIVE ALLIED HEALTH CLINICAL EDUCATION

## SUSAN WALLER

Senior Rural Nursing & Allied Health Coordinator, Monash University

## CHRIS O'BRIEN

Allied Health Clinical Support Lead, Bendigo Health &  
Rural Nursing & Allied Health Academic, Monash University

## KAREN MACGREGOR & MICHELLE WEST

Allied Health Educators, Central Gippsland Health, Sale

## ANDRINA MITCHAM

Allied Health Educator, Mildura Base Hospital, Mildura

## KRISTY DOUGHENEY

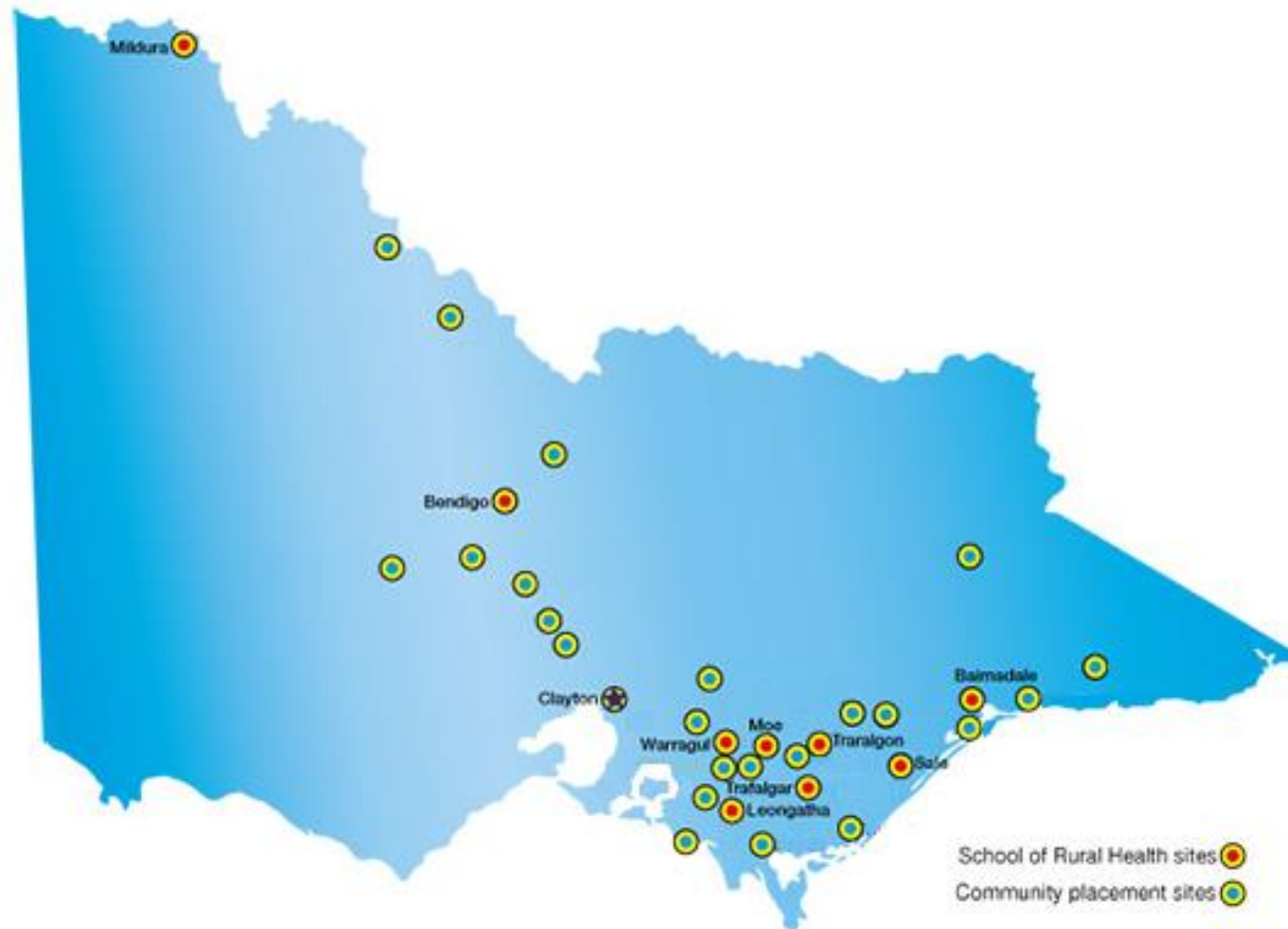
Allied & Community Health Clinical Educator, West Gippsland Healthcare Group, Warragul

## AMANDA ALTON

Allied Health Lead Clinical Educator, LaTrobe Regional Hospital, Traralgon



## MONASH SCHOOL OF RURAL HEALTH SITES



## RURAL NURSING AND ALLIED HEALTH PROGRAM EXPANSION SITES



## INTRODUCTION & BACKGROUND

### A period of change & harmonisation

#### **2016-2018**

Decision to fund 4 RNAH academic (educator) roles

Funding diverted to health services to support AHCE positions

0.5 FTE funding for 4 RNAH Professional (administrative) support roles

Leasing of extra housing stock

Development of Nursing and Allied Health Accommodation Guidelines

#### **2019-2020 (2yr cycle due to DoH RHMT program evaluation)**

12 month funding AHCEs – lack of understanding new UDRH program in region

RNAH professional staff positions ongoing (concurrent medical program admin support)

Renewal agreed for 2019

Quantitative targets met with and without strategy - need for focus on improvement and quality and qualitative parameters

## STRATEGIES FOR SUCCESS

### Strengthening rural allied health placement experiences

#### Influencing and Support

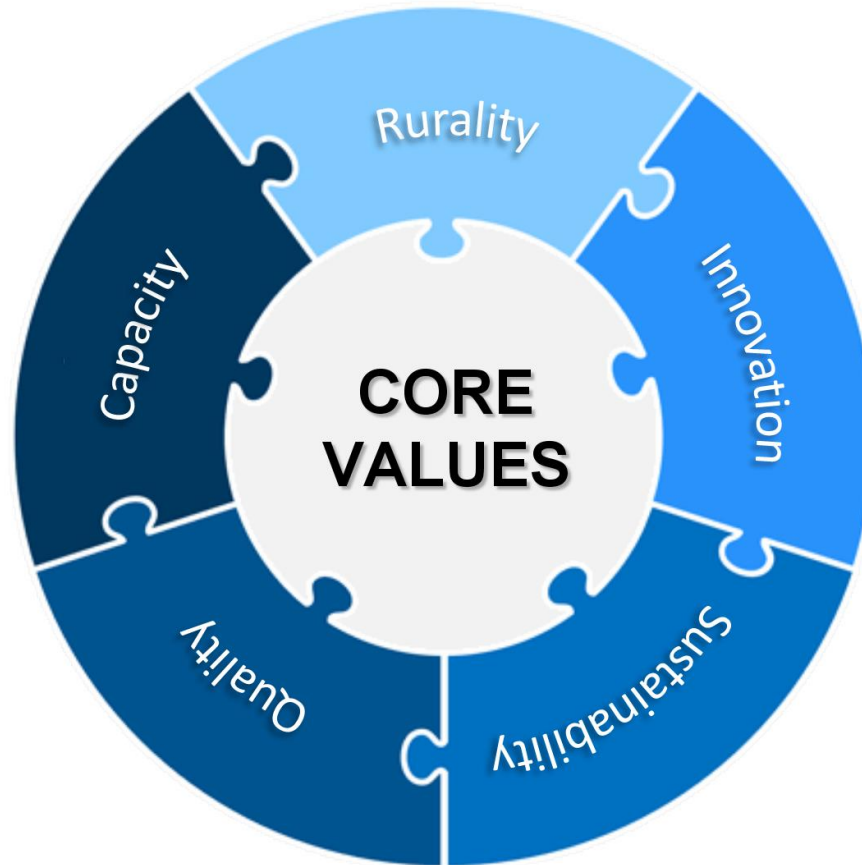
- Relationships with parent universities including Monash heads and placement staff
- Rural Health Club 'Wildfire' culture change led by Rural Health Education Manager
- Allied Health student tracking and reporting to targets (PlaceRight/InPlace)
- Focus on longer placements e.g. OT and SW
- Data managed to reflect rural immersion e.g. PT placement in Traralgon 15 weeks
- Evolving governance strategy - Committee management to Executive management
- 2 Communities of Practice monthly by zoom RNAH academics and professional staff
- Connections to external placement support through ARHEN and RWAV via RNAH Program Lead and Rural Health Education Manager

## EVALUATION



## STRATEGIES FOR SUCCESS

Core values of the Rural Nursing & Allied Health program



## IMPACT OF RNAH FUNDING

### Health service needs for AHCEs met

#### Subsequent positive outcomes shared

- Enabling networking and support opportunities for RNAH funded allied health clinical educator positions
- Google drive of education & teaching resources for sharing within the group-e.g. supervision training and leadership documents
- Lens widened beyond the medical program to better understand the allied health sector and placement program
- Strengthening of student group debriefing and IPL opportunities
- Culture change in the Regional and rural medical training programs e.g. inclusion of other disciplines in learning and social activities
- More student accommodation available close to placement

## SITE OUTCOMES Morwell

Latrobe Community Health Service Morwell



Tyers Park



Latrobe Regional Gallery

## SITE OUTCOMES Bendigo

Bendigo Hospital



Bendigo Wine Region



Bendigo Easter Festival

## SITE OUTCOMES Mildura



Ginporium & Whisky Distillery



Murray River

## SITE OUTCOMES

### Sale

Central Gippsland Health



Ninety Mile Beach



Sale Agricultural Show

## SITE OUTCOMES Traralgon

LaTrobe Regional Hospital



Tarra-Bulga National Park



Gippsland Plains Rail Trail

## SITE OUTCOMES Warragul

West Gippsland Hospital



Mount Worth State Park



West Gippsland Arts Centre

## SITE OUTCOMES Summary



## OVERALL OUTCOMES

### Placement capacity development

	2016	2017	2018
<b>Total Placement Weeks</b> Target: 1848	1952	2257 ↑ 16%	Lots
<b>Average Placement Length (Weeks)</b> Target: 5.0	3.8	4.1 ↑ 8%	4.7 ↑ 24%

## CHALLENGES / OPPORTUNITIES

- Distributed nature of positions across sites limiting opportunity for incidental collaboration
- Variability in staffing profile and recruitment affecting supervision capacity
- Improved promotion and awareness of accommodation support = accommodation is increasingly at capacity
- Insufficient student numbers impacting on quality of IPL, or requiring cancellation
- Distance for students to travel to IPL sessions
- Changes to the 2016 allied health EBA outlining that grade 1 staff cannot be primary supervisors of students has limited opportunities for further clinical placement growth in allied health disciplines under the Health Professionals award
- Some rigid thinking around traditional models of placements including work areas and supervision strategies

## CHALLENGES / OPPORTUNITIES

- Requests for placements out of annual cycle and not on PlaceRight
- Varied support from HEPs for students in difficulty
- Incentives for private hospitals and private practices to support student placements
- Funding cycle of RHMT program challenges continuity
- ePR impacting on resourcing for delivery of education, capacity for students, and development of new training
- Requirement to support organisation-wide education and training over allied health specific education
- AHCE role multidisciplinary with no dedicated discipline specific education roles
- Clinical Nurse Educators (CNCs): Nursing Staff >AHCE : AH staff

## WHERE TO FROM HERE?

### The future of the Rural Nursing & Allied Health Program

- Rural Health Multidisciplinary Training Program Evaluation
- Evolving interprofessional education activities at all sites aligned to the Monash CCC
- Interprofessional student supervision training
- Ongoing appointment of 1 FTE AHCE at Bendigo Health Services
- Refunding of AHCEs positions in 2020 with additional 0.5 FTE RNAH academic in Sunraysia (collaboration with Broken Hill UDRH)
- Tripartite MOU Monash Deakin and Melbourne with plans for La Trobe to join in 2019-2020
- New models, extended contexts and emerging placements (service learning) to be further developed