

RURAL HEALTH PLACEMENTS: GETTING STARTED AND SUPPORTS FOR YOU SHOW NOTES



SUMMARY

The conversation delves into the topic of rural placements for students, highlighting the interest and positive experiences of those who participate in rural practice. It emphasizes that while not all students may be suited for rural placements, many find them rewarding and beneficial.

TAKEAWAYS

- Rural placements are not suitable for every student.
- Many students express interest in rural placements.
- Students often have a wonderful time in rural practice.
- Nervousness about rural placements is common but manageable.
- Experiences in rural settings are generally positive.
- Students do not regret their decision to participate in rural placements.
- Rural practice offers unique learning opportunities.
- Engagement in rural health can enhance student education.
- Support systems are important for students in rural placements.
- Rural placements can lead to long-term career interests in rural health.

CHAPTERS

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- 00:20 The Role of University Departments of Rural Health
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FURTHER RESOURCES

- [Australian Rural Health Education Network \(ARHEN\)](#) is the national association for the 19 University Departments of Rural Health (UDRH) across rural and remote Australia, where you can find the location of the 19 across Australia
- Links to the four UDRHs of WA who co-produce this podcast:
 - Website of [Goldfields UDRH](#)
 - Website of [Majarlin](#)
 - Website of [UDRH SW](#)
 - Website of [WACRH](#)

TRANSCRIPT

Welcome to Rural Health Conversations, a podcast exploring the people, places and perspectives shaping health professions education in rural and remote Australia. We pay our respects to the traditional owners on which we live, learn and work and to elders past and present. We recognize that First Nations people have been caring for country, community and culture for tens of thousands of years and that this land has never been ceded.

Each episode will explore the experiences, insights and innovations that make rural health professions education so vital to supporting and developing our rural workforce. From practical strategies to inspiring ideas and stories from the field, this is your space to connect, learn and celebrate the essential work you do in preparing health care professionals for rural and remote practice. This series has been developed by the West Australian University Departments of Rural Health.

The four WA University Department of Rural Health are the West Australian Centre for Rural Health, WACRH in the Midwest and the Pilbara, Majarlin in the Kimberley, the University Department of Rural Health South West, UDRH SW in Bumbury and Goldfield's University Department of Rural Health. We are grateful for the sponsorship of ARHEN. I'm Abigail Lewis and I'm on Wurundjeri Country.

Kathryn Fitzgerald

and I'm Kathryn Fitzgerald on Southern Yamaji Country. So welcome, as Abigail said, to our first Rural Health Conversations podcast. In this series, we're going to be talking about supervising students on rural placements. So in this first episode, Abigail and I want to talk a little bit about getting started with students and taking students on placement and the supports that are available to you as supervisors in rural and remote areas.

Abigail Lewis

But before we get into that topic, Kathryn, tell me your 30 second story on what led you to working in rural health.

Kathryn Fitzgerald

Well, I'm not your traditional rural health professional. I didn't grow up in a country area. But my first job was in the Pilbara as a new graduate. And as a speech pathologist, I worked in the Pilbara. And then I came to the Midwest. And I just really love the way that as a rural health professional, you have to learn to think outside the box and look at solutions on how to deliver services, particularly to people in remote areas.

So I had some great opportunities to work also outside of my clinical work in rural health policy and program development. And that then contributed back to my thinking as an allied health professional. So I was always really interested in workforce and I could see even from many years ago, workforce was a problem in rural areas. And I've had students on prac from quite early on and then officially moving into it, more teaching at a university at Wakra about 12 years ago and since then been focused on developing rural placement programs and supporting rural health professionals as supervisors. Sorry that was quite a long 30 seconds I think. And what about you Abigail, tell me your 30 second story on what led you to work in rural health.

Abigail Lewis

Well, I did grow up in rural UK, although not as rural, of course, as rural Australia. But most of my working life, I worked in Perth, so in a major city. I worked in disability field for many years for therapy focus, and then I moved into becoming the clinical coordinator for speech pathology in 2009 at Edith Cowan University. We did have a rural focus in the program and one of our very early jobs that we managed to get a grant from Health Workforce Australia in 2012 and we sent all of our fourth years to Geraldton and in fact we sent them all to you Kathryn and so we've been working together since that time.

Kathryn Fitzgerald

I remember that, yep.

Abigail Lewis

So I've always had an interest in trying to encourage students to take on rural placements and I moved to the southwest in 2023 to take up a position in the University Department of Rural Health down here. So I've been down here for two years now.

So today we want to delve into what's needed to get rural placement ready from a practice or service who are considering taking a student. You know, you may have a lot of different, there may be a lot of different perspectives, the supervisor, the students, the university, and we also want to highlight the role of the University Department of Rural Health, especially now that we've got four in Western Australia.

We also recognise that placements can look different depending on the region and the discipline, but there are some important common parts of rural placements. So to start with Katherine, where can a rural placement be and are they different from metro placements?

Kathryn Fitzgerald

That's a big question, Abigail. So rural placements can be anywhere. There are health professionals. And of course, it differs depending on what region you're in. So you're in the southwest and I'm in the Midwest. But generally speaking, rural placements are for students in what we're focusing on is mostly nursing and allied health, are in hospitals or primary health care settings. The NDIS has been a real game changer for rural placements. So there's been a lot more placements in that area. Age care, disability and sometimes you find that placements can for students can actually be across some of those areas. They don't necessarily have to work in one area. And the other thing that's really interesting about placements in rural areas, they can range from short placements through to very long placements of several months or occasionally up to a year in some cases. So I think what makes it different to other placements is rural placements allow students to work across the lifespan.

They work with clients or patients, depending what you call them, in different settings. And then students also tell us what they really enjoy about rural placements is also being able to work really closely with not just the health professionals in their own professional, but learning from other professions, be that other students or other health professionals. And then the other thing they tell us, which we know is also important, is the links to the community that rural placements can provide and how students can really see how they can make a difference working in a rural community. I think also that for I guess thinking about it from different perspectives from a supervisor perspective I think one of the things that people often think about of being a supervisor is you need to have a lot of experience as in your clinical field to have a supervisor but it's not actually true. In fact, we did a survey not so long ago in the Midwest and we actually found that a quite a high percentage of our supervisors have been working for less than five years. And I think that those supervisors are excellent supervisors because they were keen to have students. They had maybe more recent learning experience than people like you or I, Abigail, as well. And I think it just needs to be the basic fundamentals as a supervisor. You need to have, you need to think about have I got the right caseload for a student? How would a student fit into our practice model? Both things like funding or complexity of clients or the type of service you order. Even for some people thinking about how the funding works is really important. Some fundamental things like have you actually physically got a space to have a student because they do need somewhere to work that's not always right next to you and think about if the caseload sort of number is appropriate for a student. That's something I found really hard for quite a long time is to work out the right balance of how much work should a student be doing. So that's where the universities can be actually super helpful about giving supervisors or potential supervisors information about what they can do. And I think if I just add there, that's actually a really important point is for anyone thinking of taking a student, the universities are very helpful. They will give you lots of information about what the students require, but also equally important is for you to tell the university what it is that you can offer in your placement so that they know what type of experiences the students will have and also how valuable it will be for them to learn to be a professional in the discipline that they're in. Another factor that we often talk about are getting the right student at the right time in their training going to the right place. So students who are interested in rural practice are the ones that we really want to come on rural placements. We want students to have an interest or think that they may want to work rurally or in fact they may be dead set that they're going to work rurally. But it's important that they have an interest in coming to a rural area. We also find that, and students tell us this as well, it's quite a different experience because you're away from home for a while for a placement. So a lot of placements can be, you know, eight weeks or more. And so you have to be able to be able to be resilient to support yourself without having your family around all the time or your usual support networks or even not having the usual things like work responsibilities or routines that you would not normally have. So we don't think that rural placements are

necessarily for all students but there are certainly a lot of students that are interested in rural placements and really have a wonderful time when they come on rural practice.

Abigail Lewis

Yeah, I always used to say to students that they're not, they won't come back saying, I wish I hadn't gone. Even though they're nervous about going, they always do really enjoy it. And for some of them, it is the first time that they've lived away from home. Yeah.

Kathryn Fitzgerald

Because you had a lot of students, Abigail, that you would send on placement. So what other sort of feedback did they give you, particularly ones that hadn't maybe been sure about a rural placement?

Abigail Lewis

I think they always, it was always less scary than they thought. So they were often very nervous about going away. When we were sending them to Geraldton, we were sending them at least in pairs, sometimes four. So they had friends with them, which I think did make a big difference. Even though they weren't living in the same two bed place as their friends, they were having their friends around them and lots of other young people on placement. And they really enjoyed that. The students, some of the early students stayed in nursing quarters and they loved meeting young new graduate professionals as well and you know just enjoying being out of the metro area and engaging in what's going on in the community students really enjoyed that and a lot of our students did then choose to work. I think from that first year four of those graduates worked at Geraldton and since then we've obviously had other students as well who've chosen to work really which is why the UDRHs are in existence.

Kathryn Fitzgerald

Yeah, because I think it's a real transition for students isn't it to that rural life but it's an important one the transition that they have to make to professional life but you mentioned the UDRHs and certainly weren't around in our days of training Abigail but I think the UDRHs are a little bit of a game changer could be biased there but maybe you could tell the listeners a little bit about what a university department of rural health is and where we find them.

Abigail Lewis

Yep, so the University Departments of Rural Health, there are 19 across the country and they are federally funded and they are really funded to increase the rural health workforce. That's our mandate and the main way we do that is by supporting students on placement. As we said earlier on, there are four in Western Australia and we offer fairly similar supports and services. There's a little bit of difference.

Some of us do specific things because we try and tailor what we offer to the local population and what's available. So all the UDRHs do offer accommodation to support placements because that's often the critical difficulty with going on a placement in a rural area is finding somewhere to live. So certainly the four West Australian ones all offer accommodation. I can't talk about all 19, but I'm pretty sure that that's one of the main things. We also offer other supports like cultural orientation training, some orientation and also often ongoing supports in terms of interprofessional learning, networking, tutorials, that kind of thing. They're all under the same funding. Our peak body is called AREN and AREN supports all 19 UDRHs and we offer support to all allied health nursing and midwifery students who are coming on placement. We have academic staff who are also clinicians who are experienced in working in the rural area and they are the ones who are offering those supports to students. you know, you can guarantee that their people who are supporting the students know what it's like to work really. We can also coordinate offers to universities for you if that's what you wish. And we can also do other tasks as well that can save you time. things like.

Like I said, we've got some orientation material and we offer ongoing supervisor training and also other interprofessional experiences and simulation. So if you want to find out about any of the WA UDRHs, there'll be links on our webpage and in our show notes. And also there'll be links to ARHEN where you can find the location of the other 15 UDRHs across Australia and all the states, I'm pretty sure all the states and territories are covered, but

they're not all rural areas are covered so just be aware of that. So just to pass back to you for any health professionals who are interested in taking students but haven't yet, how can they start?

Kathryn Fitzgerald

Okay, well hopefully we've piqued a bit of interest with people listening who maybe haven't had a student and might be thinking that they could take a student. And I think the first place to start is to chat to colleagues even in your own workplace or colleagues that you know in the community you might have taken students and get a bit of a sense from them of what their experience has been like. Because we often talk a lot about the experience for the student on these placements, but I think the experience for the supervisor is also really important to consider and make sure that it's a good experience for the supervisor of the students. So have a chat to colleagues whether they think having a student would be a good fit for you in your practice. It could also impact colleagues because you might share supervision of a student or two. And then look at the practical aspects we mentioned before like the logistics. Have you got a space to have a student? So they actually kind of feel part of the organization, I think that's really important as well. What does your caseload look like as well? Does that fit into the type of learning that the student needs to have and the university will be helpful as I said before in working that out. But honestly it really comes down to the interest in and we find this is a huge interest in our rural health professionals is supporting the next generation of rural health professionals and to be honest some teams even use student placements a little bit of an recruitment strategy

So if you have a student who's been on a successful placement, quite often we've seen several examples where students have been offered jobs and then worked in that practice the next year. Have you found that too, Abigail? Yeah, yeah. So if anyone listening is feeling a little bit positive about thinking, maybe this is something I could have a look at taking a student, the first thing I'd suggest is once you've sort of looked after those basic things and thought, yes, I want to go ahead with it, see if you have one of our UDRHs in your region. And if you're in WA, Abigail has mentioned the four that we already have. And make contact with them to see what they can offer you in terms of support, accommodation for students, organization of placements. And they can also help with the interaction with the university if that's easier, although some practices do do that themselves. And then I think if that's something you can then go ahead with, then looking in your own practice, some of the things that you might need to consider that might actually take time out from your usual activities. And I think we need to be all upfront saying that students do take additional time. So it isn't really a commitment that needs to be made. But so things like looking, have a good orientation, access to your records that you use and your practice software, who's actually going to be their main supervisor so they don't sort of spread themselves over a number of people. And then

Also having that regular time for supervision and catch-ups. And again, it doesn't have to be the main supervisor that does all the activities. So it could be you have an admin coordinator who can look after orientation, getting access to record systems, et cetera. And then again, I think Abigail mentioned earlier, the UDRH has, we've got templates that you can use and also some training for you as a supervisor. So, it's not always just the students are a bit nervous about placement. Sometimes the supervisors, if they knew they can be as well. So there can be some training online or face to face that can be quite useful as well to help you get ready for a student. And the other thing that probably is really important and it's not truly clinical supervision per se, but we know that linking the student into the community is really important. And we often find our supervisors and health professionals in the rural areas are so generous with linking students in. So finding out what their interests are. You know, sometimes it's sporting or in Geraldton we have free yoga. So they go along to free yoga. We kind of like help link them into what they want to do. So a really simple thing we do at our UDRH and I'm sure all of them do is we have a meeting with a student before the placement. Often it's a group of students, not just to give them information about their clinical work and all those things that they need to prepare, but also just to kind of get to know them a little bit and let them get to know us a little bit as well and find out what they're interested in. So hopefully some of those tips will help in thinking about what you might want to consider in taking a student. And some of the future series in our podcast will actually cover some of the more detailed aspects of what it's like when you're preparing for the student and actually what it's like to have a student and how to look at different clinical supervision techniques. So I think we're probably nearing the end of our time today, Abigail. I just wondered if you had maybe a couple of key messages for our listeners about what you think is important in thinking about whether you want to take a student.

Abigail Lewis

Yeah, I think it would be important to draw on your whole interprofessional team. Don't think that you have to manage the student on your own, but get all the people that you work with involved in supporting you and in having activities for the student.

I think the other thing is really preparing your orientation really well. What can you send the student before they even come so that they come fully prepared and what things you need to get together in terms of templates and things like that. And so that you're actually getting organized before the student arrives with you. That would be my key tip. What about you? What would be your key takeaways?

Kathryn Fitzgerald

Probably for me that for the students rural placements can just often experience much broader than clinical learning. And they often learn so much about themselves personally as well as professionally. And I think as a supervisor, that's a really lovely thing to see grow in over the weeks of having a student placement. And I think my best message for supervisors or people thinking about supervision is that there really are a lot of supports available that can help make that role of the supervisor much less time consuming. And again, that's a basic plug for the UDRHs. But when we do our job, it makes the job of the supervisor a lot less complicated. So that's probably my two. So I think that brings us to the end of this episode, our first episode of Rural Health Conversations. So if you're interested in learning more, we'll put some links in our show notes so you can find some more information there.

If you enjoy this episode, please subscribe and leave us a review for us. This helps others find the podcast and helps us grow the conversation on rural health education in Australia. So until next time, thanks Abigail for having a chat with me today. It's always good to catch up with you, but let's keep the rural health conversations going.

Absolutely. See you next time.