

## CONFERENCE ABSTRACT

# Preparing the future workforce to address the health needs of rural communities – Excellence in Multidisciplinary Education

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**Introduction:** A weekly multidisciplinary program provides regular structured opportunities for students from a wide range of health disciplines and universities across Australia to learn about, from and with each other, and to understand the strengths and limitations of various health disciplines with a focus on primary health care settings.

The program prepares students to respond to rural health needs, through enhanced understanding of rural primary health care models and team approaches to the management of chronic conditions.

**Short description of practice change implemented:** Health students from various Australian universities are placed in rural community settings throughout the year. The students attend a weekly multidisciplinary program. The practice changes are: 1 Students gain an awareness of additional support services for people living in rural areas e.g. non-government and not for profit organisations, how they work and the services they provide. 2 gaps in services and barriers to accessing health services in rural areas 3 multidisciplinary collaboration, networking and development of professional partnerships 4 the importance of allied health professionals supporting the health and wellbeing of Australians living in rural communities 5 share resources and ideas, learn about each other's roles and problem solve as a group 6 practical examples of a team approach to the management of chronic conditions

**Aim and theory of change:** The primary aim of the program are for students to experience: Well supported rural experiential learning experiences which positively influence student perceptions of rural practice

Innovation and critical thinking, and develop students' confidence and leadership skills

**Targeted population and stakeholders:** Health students from a number of disciplines and universities.

Stakeholders are universities, community services and organisations

**Timeline:** The program has been in place for 18 months

**Highlights innovation, Impact and outcomes:** The innovation aspects are 1 Real authentic multidisciplinary learning 2 community based 3 regular structured program 4 range of disciplines

**This program leads to students reporting:**

increased confidence to work with other disciplines and services in a rural environment

increased understanding of the role of other disciplines and services outside of the traditional acute care settings

**Sustainability:** The universities have expressed a commitment for the program to continue as they recognise the value of having their students participate.

**Transferability:** The model could be rolled out across other institutions

**Conclusions:** Students get to experience a real-life application of multidisciplinary training in a real community context, that cannot be replicated in a hospital or university setting.

**Discussions:**

Integrated care.

Workforce readiness.

Ability to work interprofessionally, interdisciplinary and intersectoral.

**Lessons learned:** These program can provide an opportunity to increase students' capability to work in rural settings and provide a solution to addressing:

the lack of understanding of each other's roles and how they work together

the lack of understanding of how community services work together in rural communities

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**Keywords:** health education; multidisciplinary; intersectoral; workforce readiness; rural; integrated

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