Enhancing the interface between visiting medical practitioners and hospital staff in Kalgoorlie

Philip Reid, Rural Clinical School, University of Western Australia, Sally Roach, Western Australian Centre for Remote and Rural Medicine

ABSTRACT

This paper will outline the local hospital staff recruitment and retention issues and the impact this has on the doctors in Kalgoorlie in Western Australia.

The aims of the study are to:

- examine the issues of recruitment and retention of nursing and allied health staff at the Kalgoorlie Regional Hospital (KRH)
- determine the impact of a changing hospital staff on the doctors in the town
- recommend possible solutions to improve the interface between the doctors and the staff of KRH

Method

Individual semi-structured qualitative interviews and key informant interviews are being used to determine the issues and possible solutions. Staff at the hospital, doctors and consumers, as well as other stakeholders are being interviewed. The interviews are audiotaped, transcribed verbatim and then analysed using NUD*IST software to identify themes and categories. Exit information already held by Nursing Administration at KRH is used to contribute to the data.

Results

This is a work in progress and this presentation will outline the process issues as well as the interim results of the qualitative analysis. Reasons for high staff turnover are believed to include “moving on”, maternity leave, financial reasons and working relations with the Visiting Medical Practitioners (VMPs).

Conclusions

This research has arisen following concern by some Kalgoorlie doctors that frequent changes to the hospital workforce result in less efficient and effective practices for the VMPs. There is a paucity of literature on the topic and little being done in rural Australia to address the interactions of the health workforce.

Allied health staff are an interesting subset where reduced availability causes an overall devaluation of the service at KRH and impacts on the quality of the medical service.
Implications

As this is a relatively new area of study, it is hoped that this research will have implications for change across Australia.

INTRODUCTION

The presenting author is a GP who has lived and worked in Kalgoorlie-Boulder, WA for 33 years. The impetus to initiate this project came from a desire to enhance the interface between Visiting Medical Practitioners (VMPs) and the Nursing staff at the Kalgoorlie Regional Hospital.

A literature search has been conducted and demonstrates a worldwide phenomenon of difficulty in attracting and retaining Medical and Nursing Staff in rural and remote areas.

More recently the presenting author has taken up a position with the Rural Clinical School, at the University of Western Australia (UWA). The curriculum for 5th Year Medical Students will involve contact with GPs and medical specialists both resident and visiting. It is clear that the stability of Medical Practitioners in this setting will influence the success of the student contact and experience.

The hospital-based experience in Obstetrics and Gynaecology, Medicine, Paediatrics and Aboriginal Health together with Oncology and Musculoskeletal Medicine as well as General Practice relies on a robust hospital environment and a stable Nursing staff complement.

BACKGROUND

Much has been written about rural recruitment of Medical practitioners. Federal retention incentives were initiated in the late 1990s.

The UWAs Faculty of Medicine and Dentistry has provided a number of places for undergraduates who have lived and studied in rural communities for the last two years of their high school education. The concept of a student who has lived in a country town and who will return to practice as a doctor in a country town is well known. (4)

The current situation in Western Australia is that over 600 Overseas Trained Doctors (OTDs) are supporting staffing arrangements in the Perth teaching hospitals and around 70..? OTDs are filling positions of unmet need in rural Western Australia. Recent communication suggests that 30 extra places in the undergraduate intake at the UWA Medical School need to be generated to fill the gaps in the future.

Nursing staff

The shortage of nurses in today’s world deserves an innovative solution. Without nursing staff with the necessary experience for rural and remote areas we may see the potential demise of rural hospitals.
This project hopes to provide some solutions, which will be acceptable to those institutions, departments and organisations that are usually (but not always) city based to make a career in country nursing an exciting and rewarding career.

**Career paths**

The foundation of Rural Clinical Schools as a Federal Government initiative will I believe have a knock on effect if the concept is embraced for what it is. Rural Western Australia is a geographically vast environment. Approximately 75% of the WA population lives in the capital, of a State that covers an area the size of 1/3 of Australia. This means that about 450,000 people live in an area of 2.5 million square kilometres, with many of those living in small isolated communities.

One of the directions this project will take is to look at ways of inspiring.

**METHOD**

This study proposes to use a qualitative methodology to examine the issues related to nurses and doctors at the Kalgoorlie Regional Hospital.

Individual semi-structured qualitative interviews and key informant interviews will be used to determine these issues and also possible solutions. Nursing staff and doctors at the hospital will be interviewed. The interviews will be audiotaped, transcribed verbatim and then analysed using QSR N6 software to identify themes and categories. Exit interview information already held by Nursing Administration at KRH will be used to contribute to the data.

In line with the qualitative methodology of this research a semi-structured interview technique will be used. The questions or prompts will reflect the literature and the issues raised in the interviews.

The study may include interviews with consumers and other stakeholders should the data reflect a need in this area.

**RESULTS**

This is a work in progress and this presentation will outline the process issues to date as well as the interim results of the qualitative analysis. Anecdotal evidence indicates that the reasons for high staff turnover include “moving on”, maternity leave, financial reasons and working relations with the VMPs.

There are currently 130 nurses and ...30 VMPs at KRH. The ideal nursing staff numbers are believed to be ...170. Interviews will be conducted with as many staff as possible until saturation of data is achieved. That is, that there is no more information to be gained.
CONCLUSIONS

This research has arisen following concern by some Kalgoorlie doctors that frequent changes to the hospital workforce result in less efficient and effective practices for the VMPs. There is a paucity of literature on the topic and little being done in rural Australia to address the interactions of the health workforce.

Allied health staff are an interesting subset where reduced availability causes an overall devaluation of the service at KRH and impacts on the quality of the medical service.

REFERENCES


Phil Reid arrived in Boulder in 1956 (now the City of Kalgoorlie-Boulder), aged 2½ years with his parents and older brother. They were ten pound tourists. His Dad answered an ad in the BMJ and came to Kalgoorlie as a GP anaesthetist, obstetrician and surgeon. In 1977 Phil graduated from UWA and came to Kalgoorlie as an Intern at Kalgoorlie Regional Hospital. There followed sojourns to Kellerberrin in the WA wheatbelt and a year as a Paediatric Registrar at Hastings and Napier in New Zealand.

Phil returned to Kalgoorlie as a GP in 1980, and left to take up a position as medical Superintendent at Christmas Island (Indian Ocean) in July 1989. He returned to Kalgoorlie in October 1991 as Medical Director at Kalgoorlie Regional Hospital. In 1993 he returned to general practice full time.

In April 2002 Phil took a half-time position as Medical Co-ordinator and Senior Lecturer with the UWA, Rural Clinical School, Kalgoorlie. He currently practises as a GP and is doing GP Obstetrics. The Rural Clinical School came along at just the right time in his career. The chance to teach Medical Students is a bonus and a chance for him to give something back. This paper comes out of Phil’s concern to try and begin to answer some of the questions surrounding the recruitment and retention of health care professionals in rural and remote areas. Western Australia has special challenges in this respect. This paper is a work in progress and seeks to give some feedback from research with medical and nursing colleagues.