



Specialist training in rural settings – does setting impact on quality of training?

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STP Aims and Objectives

The Specialist Training Program (STP) provides support to enable medical specialist trainees to rotate through an expanded range of settings beyond public teaching hospitals.

- increase the capacity of the health care sector to provide high quality, appropriate training opportunities to facilitate the required educational experiences for specialists in training;
- supplement the available specialist workforce in outer metropolitan, rural and remote locations; and
- develop specialist training arrangements beyond traditional teaching hospitals.

STP

- How will the expansion of post graduate medical training into new settings influence the quality of training and the working conditions of trainees and their supervisors?
- How can we ensure that clinical placements and other aspects of medical education are of consistently high quality? What key factors determine quality?
- What impact will changes in medical training have on quality of care?



Focus of study



Does setting impact on the quality of training

Identify issues of training in expanded settings for anaesthetists

Themes

Theme	Sub theme
Clinical Experience	<ul style="list-style-type: none">• There are differences between experiences in private versus public setting, relating to: volume; elective versus emergency work.• Rural rotations are viewed as valuable for gaining 'bread and butter' skills.
Supervision	* Supervision on rural rotations is very positive
Quality of education	Co-location of private facility and interaction with training program in public setting is viewed as preferable to stand alone private facility.
Training/Service interface	There are differences in service load, including on-call requirements between private, rural and tertiary facilities.
Attitude of patients & consultants	<ul style="list-style-type: none">• There are differences between experiences in private versus public setting, relating to level of involvement in patient care & attitude of consultants* Attitude of rural patients to registrars is very positive
Employment issues	Access to training infrastructure and resources in rural settings is a concern.

Rural Specific

- Rural Hospitals are punching above their weight in training
 - Access to supervisors and engagement rated better than large metro teaching hospitals
 - Good involvement of trainees in direct clinical care involvement
 - High volume, low acuity experience
- Concerns
 - Resources and infrastructure poorer than metro facilities
 - Financially worse off for rural rotations



Concluding thoughts

The broader opportunities offered through STP are seen as potentially making a valuable contribution to specialist medical training and most trainees and supervisors involved with the program express support for further development in this area

To improve the quality of the training experience more thinking needs to go into the timing of rural rotations in the training pathway