

# Annie PHYSIOTHERAPIST Temora, NSW.



“I love rural because I enjoy the autonomy and the many challenges associated with rural practice that allow me to constantly grow as a clinician”.

This allied health workforce story is from Annie, working in the Temora region in NSW. Annie’s story highlights the challenges of being a sole practitioner in a discipline in country health service, but that these challenges are not insurmountable, they have solutions. Having access

to the Allied Health Rural Generalist Program is one solution that has enabled her to keep up to date with physio practice but also to keep in touch with fellow physiotherapists.

### Annie’s story:

I works as a physiotherapist in the Allied Health Rural Generalist Program, based in Temora, NSW. My job is different every day and as a rural generalist I work across a variety of settings including inpatient wards, the Transitional Aged Care Program, outpatient clinics, home visits, pulmonary rehabilitation, falls programs and virtual fracture clinic. In between the programs and clients I am called to the Emergency Department frequently. Every Wednesday, I visit the neighbouring town of West Wyalong (about 70km drive) to provide similar services to those I run in Temora as I am the only public physio for both towns.

I face several challenges associated with working as a physiotherapist in rural Australia. The scope of practice is very broad and encompasses care for people with both acute and chronic health issues in addition to maintenance. I also cover administration and stores ordering within my role which can be a constraint on the

time that can be allocated to clinical work. The only way to manage the workload is to prioritise care according to the highest need. Fortunately, there are a couple of private physiotherapists in Temora who are able to see other people in the community.

As the solo public physiotherapist in Temora, I am only able to outreach to West Wyalong once a week which has an effect on the service that is able to be delivered there. For example, the pulmonary rehabilitation program can only be provided one day per week (best practice would be two days) and many patients have delayed discharge dates as they are waiting for physio clearance which I can only assess on Wednesdays. To meet the needs of the community, I would love to be able to grow the capacity of the service delivered in West Wyalong, which could be done in ways such as employing an allied health assistant who could follow up treatment plans and video link with me remotely.

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...good health and wellbeing in rural and remote Australia

## ALLIED HEALTH PERSONAL STORY

Another challenge is the isolation associated with working in a facility where there is physically no allied health team and my manager is from a different disciplinary background. This is particularly important for trouble shooting or getting a second opinion on treatments. Being a part of the Allied Health Rural Generalist Program has been really helpful in overcoming geographical isolation as the Program Coordinator visits me onsite once a week and is available for advice in between. The Program group also have team meetings fortnightly where we can discuss any issues with other Allied Health Rural Generalist physiotherapists who are in similar situations. Telehealth has been able to address a lot of the issues with geographical isolation and is used frequently so I can link in with other clinicians.

I #loverural because I can provide a service to people locally when they would otherwise have to travel. Small country towns are beautiful and full of beautiful people. There is such a strong sense of community and people truly value the service. I enjoy the autonomy and the many challenges associated with rural practice that allow me to constantly grow as a clinician.

