

# Rural Practice Education: A Tool for Recruitment and Retention of Health Care Providers

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rural academic health project



# Rural Academic Health Project

- Funded by the **Practice Education Innovation Fund** administered through the BC Academic Health Council, and the BC Ministries of Health and Advanced Education
- **Builds on existing initiatives and existing knowledge** from models in other jurisdictions
- **Fosters dialogue** across a broad range of stakeholders to determine opportunities

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# Purpose

- To increase student placements in rural communities
- To develop a long term sustainable model for strengthening interprofessional student placements in rural BC
- To link education of emerging professionals to rural health services, community needs and research



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# Process

## 1. Data-gathering & communications

- A. Project outline
- B. Literature synthesis paper
- C. Inventory of initiatives
- D. Initial communications

## 2. Multi-stakeholder consultations

- A. Discussion paper
- B. Community/regional forums
- C. Policy-maker interviews
- D. Online submission

## 3. Provincial consensus building

- A. Draft model
- B. Provincial forum
- C. Recommended model & action plan

## 4. Endorsement & implementation

- A. Presented to decision-makers for endorsement
- B. Incorporated into RCC implementation
- C. Final communication back to stakeholders

January – May

June – September

October – November

November 2007

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# Principles

- Community-driven initiative
- Interprofessional education as a key element
- Service delivery elements
- Partnership across communities, health and education
- Focus on improving the health of rural communities

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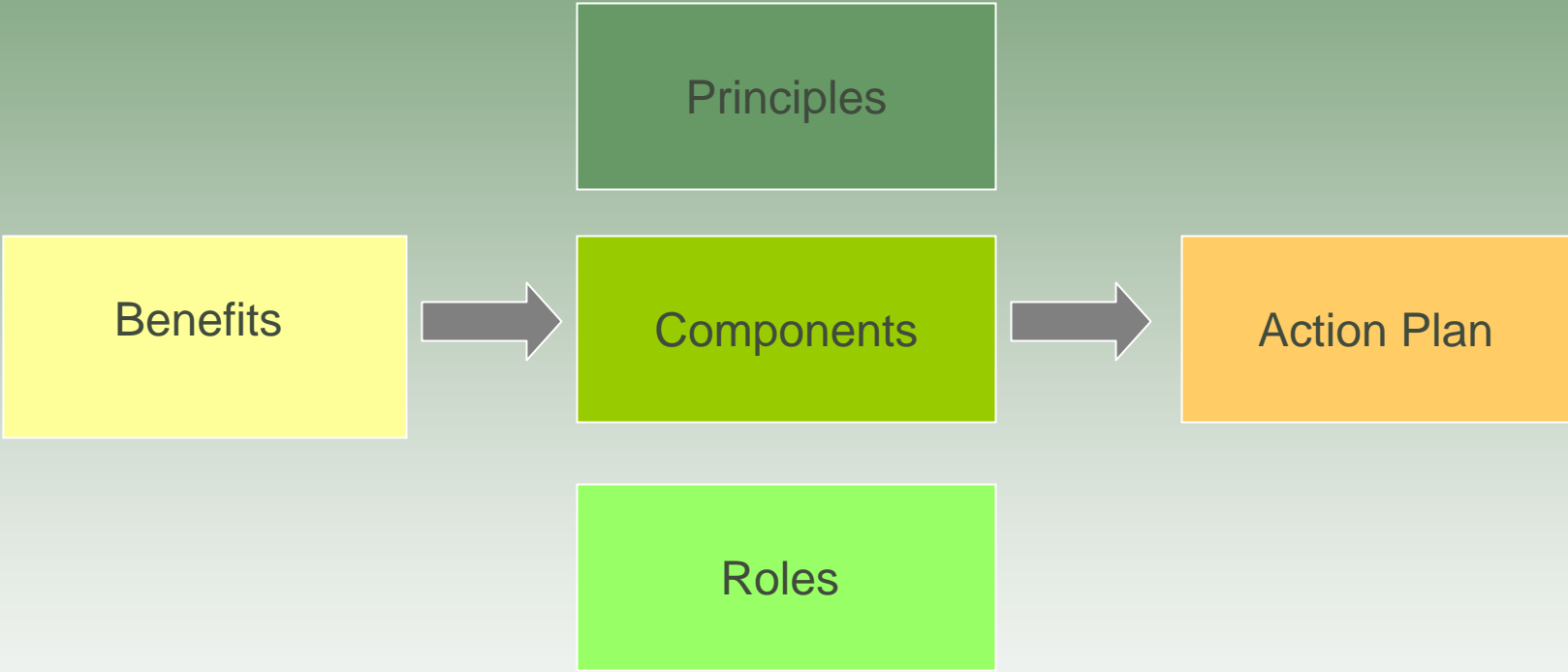
# Components & Roles

- Students
  - **Housing, orientation, incentives**
- Preceptors
  - **Training, recognition, faculty appointments**
- Coordination
  - **Local level**
  - **Placement coordination across organizations**
  - **Marketing of rural practice opportunities**
- Networking across communities and post-secondary education
- Evaluation and research, including knowledge translation
- Funding

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# Model



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# Broad Context

- Shortages of health professionals
- Increasing numbers of students
- Growing placement pressures, especially urban settings
- Shift to educating students in a range of settings along continuum of care

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# Rural Context

- Rural context demands a collaborative approach
- A range of programs place students in rural settings
- No coordinated approach which contributes to gaps, duplication and frustration
- Untapped opportunity for rural communities to participate
- Infrastructure challenges for effective rural placements

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# Benefits of Rural Practice Education

## Rural communities:

- **Improve recruitment & retention**
- **Benefit from students who bring new energy and ideas**
- **Enhanced links to academic institutions**
- **Opportunities for youth to be inspired to pursue health careers**
- **Ultimately, improve health outcomes**



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# Rural Physician Preceptor Comments

- *“I agree strongly with this model and I believe it will become the model of education for health care professionals in the future as it is collaborative.”*
- *“Collaborative team care will be necessary for optimizing patient care in an environment of limited resources.”*

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# Benefits of Rural Practice Education

## Students:

- Experience rural life and practice in a supported environment
- 'Turned on' to teamwork
- Experience continuum of care
- See broader determinants of health
- Interact with Aboriginal communities
- Become leaders
- Have fun!



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- **Medicine, Nursing, Speech Language & Physiotherapy Students Reflecting on their Rural Experience**



- ***“The amount and the quality of information and insight I gained from this experience far exceeded what I could have learned in a traditional learning environment.”***

**IP Rural Student, 2007**

**RAHP**



# Benefits of Rural Practice Education

## Health & Education Systems:

- Recruitment and retention of rural health professionals
- Increase in quantity & quality of students placements
- Facilitation of change through students
- Improved health care and education models

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# Action Plan

- Develop continuum of rural academic health involvement
- Identify infrastructure priorities – short and long term
- Further develop and distribute handbook as a resource
- Confirm provincial coordinating body mandate & funding
- Identify 3-5 year plan for sustainability

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Thank You

For further information, documents and updates, see

<http://www.health-disciplines.ubc.ca/rahp/>

(Click on literature review, discussion paper etc. to view)

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