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Edited by

Greg Ryan

Professional Development Centre
The University of New South Wales

Penny Little

PROBLARC
University of Western Sydney, Macarthur

Ian Dunn

School of Physics
The University of New South Wales



FACILITATING RURAL CLINICAL EXPERIENCE FOR PRE-REGISTRATION NURSING STUDENTS

A Preliminary Report

Prof Amy E Zelmer

Faculty of Health Science, University of Central Queensland, Rockhampton, Qld

Placement of students in rural areas for clinical experience is often difficult because of the costs involved -- both for the program and for the individual students. However, there is a growing awareness that the "city-trained" nurse or other health practitioner is often reluctant to move to rural areas -- and ill-equipped to work, and perhaps to live, in rural settings. In addition, student experience has been demonstrated to be a relevant factor in selection of employees (Singer, 1991).

The University of Central Queensland (UCQ) serves an area approximately the same size as New Zealand, with a population of approx 300,000, unevenly distributed between coastal small cities and a rural hinterland devoted to primary industry. Health services are provided primarily through public hospitals and clinics with some private practitioners in the coastal areas.

It should be noted that this study has not attempted to address the issue of preparation of nurses for independent practice in remote areas. This is a different issue which has been the subject of recent debate in the Australian Parliament (Hansard, 1993).

The Faculty of Health Science at UCQ received special funding to enable the placement of students in the pre-registration nursing program in rural areas for both hospital and community experience. A condition of the grant was that the program be evaluated and that the impact of the grant on student placement and later career choice be assessed. This paper presents the preliminary results of that evaluation.

BACKGROUND

Clinical placements for the B.Nurs. program are arranged with partial "concurrent" clinical experience during all weeks of the regular teaching semester and a period of two weeks' concentrated clinical experience in each semester. Most of the concurrent clinical experience is arranged in the Rockhampton area, but a few students are placed further afield in their third year, with external studies strategies being used to support the theoretical portion of their studies. Students in both second and third years are placed outside of the Rockhampton area for their two week "block" experience.

Funding of \$30,000 was sought to enable more students in the pre-registration Bachelor of Nursing program to undertake rural clinical placements in the second and third years of their programs. Notification of award of the grant was received at UCQ in June, 1992.

ACTIVITIES UNDER THE PROGRAM

Clinical Experience

By June/92 many of the arrangements for clinical experience for second semester (July-Nov) had already been completed; however, in response to the new opportunities, some changes were made in the students' programs and 17 students were provided with some subsidy to enable them to undertake a rural clinical placement which they would probably not otherwise have been able to take up.

With a greater lead time for 1993 it has been possible to negotiate more rural placements for students currently in the second and third years of their programs. However, the 1993 experiences are still in process and this report covers only the 1992 placements.

Financial Support

Students who wished to undertake rural clinical experience were offered financial support to assist with travel and accommodation. Travel was supported to the extent of bus or train fare (or equivalent cash to cover petrol etc. where a car was used).

Where hospitals provided accommodation, they generally did so on a gratis basis for the room with students being required only to provide for the cost of meals. In one case where the cost of hospital-provided meals was substantially higher than at other hospitals the students received a subsidy to cover the difference.

Where students were not able to live in hospital quarters a subsidy to cover the costs of accommodation was provided.

All of the costs of travel and accommodation for the UCQ staff providing student support on this program were covered from UCQ regular funds and were not a part of the RHSET grant. There is some question about how these costs can be covered should the program increase and thus require either more UCQ staff travel or different arrangements for local preceptors.

Evaluation of the Experience

The original proposal called for evaluation of the experience by each participating student and agency at the completion of the experience and six months following graduation.

The first group of students were sent follow-up questionnaires and almost all were completed and returned. Compilation of this information is now underway, along with interviews of key instructors and clinical agencies is reported below.

The "six months after graduation" and questionnaires to students currently receiving subsidies will be carried out later this year.

Once all of the data has been received it will be analysed to determine factors determining new graduates' willingness and ability to practice in rural areas, and the effectiveness of the period of rural practice in influencing their decisions.

Information from this small sample is at yet primarily anecdotal but can be summarised as:

- most students worked 'regular' shifts with their preceptor in a variety of situations and obtained a variety of experience relevant to a generalised rural practice which they would not otherwise likely have had. For example:
 - from A & E through theatre & co-conducting the weekly blood bank night. - transfer of patients
 - going on community visits with the nurses, planning care, counselling etc. - pharmacy, X-ray and handling of lab samples. Knowledge in how things operate when away from other allied health professionals
 - Worked as 'real' RN, in charge of patients. Preceptor was there but own decision making etc. - Became familiar to time management & decision making skills (theory & prac.)
- most students were able to use their own cars for transportation
- most were accommodated in nurses' quarters at the rural hospitals, but about a third needed to make other arrangements

- two students indicated that the financial help was not crucial to their decision to undertake a rural experience, but for the others it was. This may be a reflection of the socio-economic status of students who are in the program overall, since UCQ tends to attract students from a lower socio-economic group than average.
- the majority rated their clinical experience as "vital" in determining their choice of their first professional employment. It should be noted that one of the students indicated that she had made a decision not to seek rural experience at this time based on her experience; however, this should not be deemed as a 'failure' of the experience, but rather an acknowledgment of the realities of the situation and her own abilities.
- a majority indicated that they would be 'more willing' to undertake rural experience in future;

As might be expected both the students and preceptors as well as the UCQ staff have made some suggestions for improvement of the experience, based on this initial placement. These suggestions are largely being implemented in the next round of placements and will be subject to further evaluation. In general the desire was for more rural experience.

Instructors who participated in the program have generally rated it as positive. Their views are that the students benefited significantly from the exposure to new situations; the rural hospitals and community agencies were generally very co-operative about arranging appropriate experience, although this may have been due in part to the novelty of having students in some places.

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