

MONASH University
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Clinical Placements: an educational perspective
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WHY do students need clinical placements?

- **Workplace learning contexts**
- **Situational learning**
- **Access to practicing clinicians**
- **Education aligned with service needs**
- **Curriculum relevance and currency**
- **Clinical skills in clinical environment**
- **Professionalism**
- **Health system awareness**



Where are students placed?

- **Public hospitals**
- **Private hospitals**
- **Community health clinics**
- **Allied health workplaces**
- **GP practices**
- **Medical specialists rooms**
- **Military healthcare facilities**

Who places people into clinics for education?

- **Universities**
- **Prevocational training providers**
- **Professional Colleges**
- **Vocational training organisations**
- **Workforce agencies**

Who needs education and training?

- **Students**
- **Interns**
- **Residents**
- **Registrars**
- **Advanced trainees**
- **IMGs**
- **All Clinical Staff**

What are the **benefits** for the **universities**?

- **Access to clinical linkages for**
 - Education
 - Training
 - Research
- **Access to active practitioners**
- **Understanding health services needs**
- **Sharing of resources**

What are the **benefits** for the **health services**?

- **Access to intellectual capital**
- **Access to new workforce**
- **Enhanced prestige**
- **Research training**
- **Research awareness**
- **Access to quality and evaluation expertise**
- **Access to national / international thinking**
- **Sharing of resources**
- **Professional development**

Why are there tension points?

- Both education and health are under-funded
- Both education and health workforces are overworked
- Different funding sources and funding models
- Different KPIs and expectations
- Different governance situations
- More students competing for limited clinical resources
- Competing Federal vs State government drivers

TRUE or FALSE?

- Placements are expensive and costs can be recovered from universities.
- Students in clinical placements do **not** contribute to the care of patients.
- Training of future health professionals is not the concern of DHS
- New programs can not find clinical placements for their health students
- Much unused capacity for clinical placements exists in health services
- Clinical teaching capacity can be measured by bed count

ALL FALSE

Question1 ?

- **Can placements from more than one university program co-exist in a specific area of health profession education in an individual health service?**
- **If yes, how are these best managed?**

Question 2 ?

- Will **centralised** coordination of these placements add efficiency, equity of access and volume of placements to allow better matching of demand?
- If so, who should provide the coordination function?

Question 3 ?

- Will **local/regional** coordination of these placements add efficiency, equity of access and volume of placements to allow better matching of demand?
- If so, who should provide the coordination function?



Question 4 ?

- How do we best determine clinical placement **capacity** and **quality**?
- How do we prioritise access and use? (and should we?)
- What are the determinants?
 - Space ... amount, type and quality
 - Beds ... number, type and quality
 - Patients... number, type and quality
 - Staff ... number, type and quality
 - Infrastructure... amount, type and quality
 - Students... number, type and quality
 - Money... amount, source and purpose
 - Time... amount, pattern and continuity
 - Others...



Challenge

- (How) (Can) Gippsland provide a model or template to provide a better system and understanding of how to **manage** clinical placements in all of their complexity to the best possible advantage of **ALL** Victorians ??????



Envoi...

- The foundation of every state is the education of its youth.
- Education is the best provision for old age.
 - **Aristotle**, *from Diogenes Laertius*

And a warning....

**Education is when you read the fine print.
Experience is what you get if you don't.**

– Pete Seeger

... and a clinical context

Don't live in a town where there are no doctors.

– Ancient Jewish Proverb

Thanks for your attention

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