



Rural Health and Research **Congress** #RHRC2019

Postgraduate Emergency Medicine Education for Rural Generalists

Addressing a Local Educational and Workforce Gap

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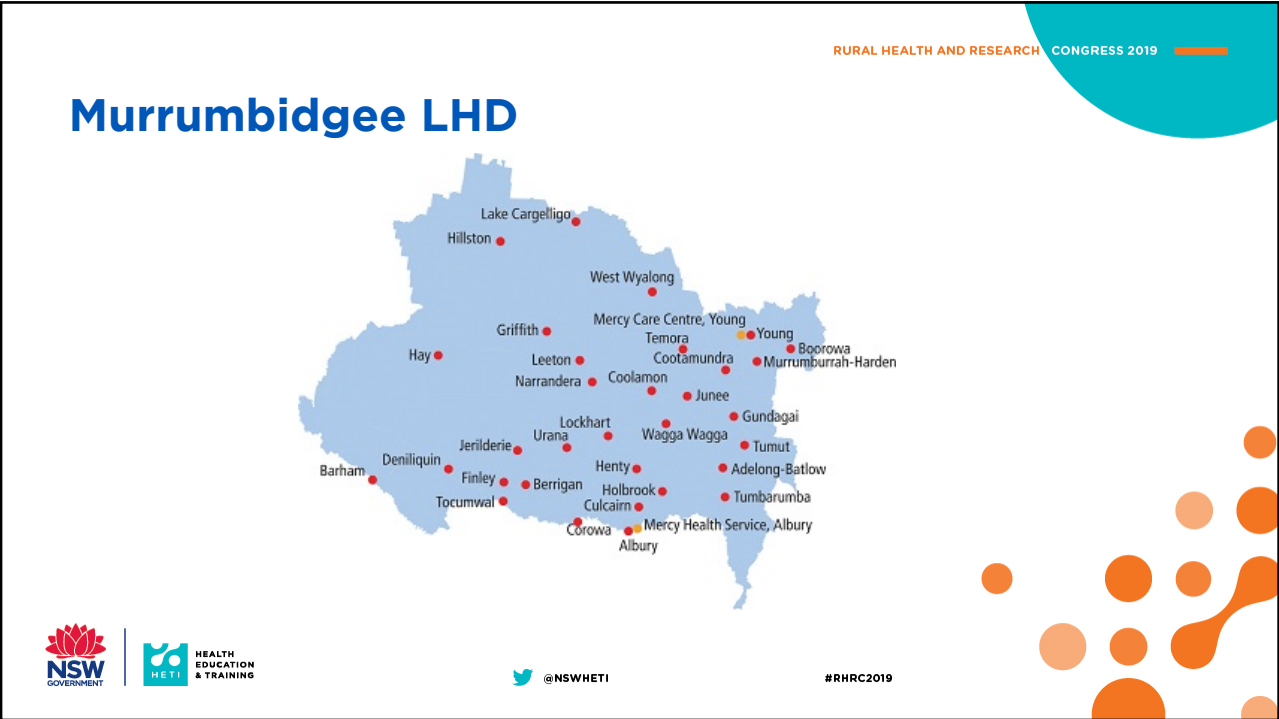
Murrumbidgee LHD



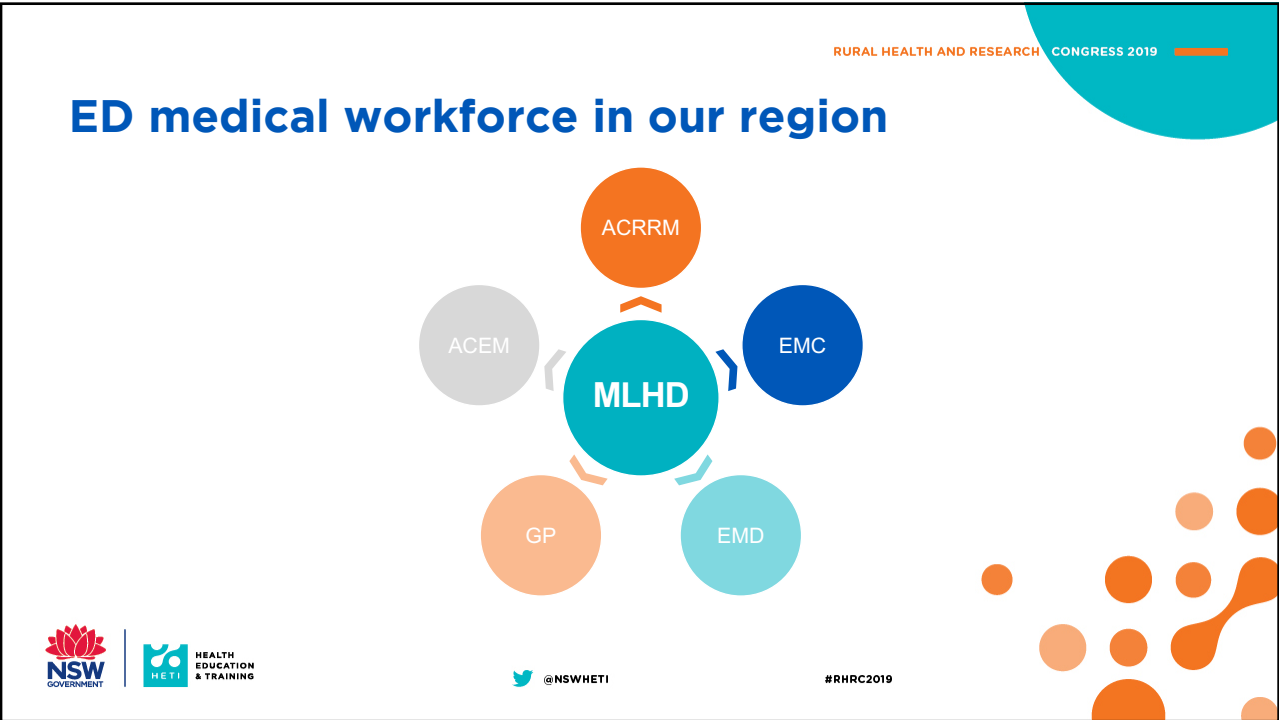
Population ~240,000
WWBH - 45,000 ED presentations annually
2nd ED with FACEM cover
>30 peripheral hospitals (RN / NP / GP cover)

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The Problem...

Most of our peripheral EDs are not staffed by FACEMs

Delivering an education program that is relevant to the needs of

- *GP's / Rural Generalists working in the peripheral EDs*
- *ED CMO's working in our own ED*

Program needed to be robust:

- *Meeting the educational requirements for CPD for GPs*
- *Potential for attainment of recognised qualifications in EM*
- *Skills maintenance or attainment*



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Dr McGirr questioned whether current training programs were producing doctors with the skills to become what has become known as "rural generalist" and said it was a statewide issue.

"To be a doctor working in a district or smaller hospital in a rural area, you actually have to have a range of skills. You've got to be a general practitioner, but you've also got to be able to work in a hospital, you've got to also be able to work in a rural community and you've got to have a reasonably high level of skills in relation to emergency medicine or anaesthesia," he said.

Dr McGirr said he believed the key was to train doctors in rural areas. He said a training program was currently being developed by the MLHD to do exactly this.



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Previously.

- *Outreach education to multiple sites...*

AND

- *WWBH ED education for CMO group (n=3)*



- *Expensive*
- *Not cost or time effective*
- *Travel*
- *Accommodation*
- *Limited number of doctors receiving regular education*


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Our Solution...



= The **WESTEND Program**

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WESTEND

(W)agga (E)mergency (S)kills (T)raining for
(E)MC/EMD and (N)on Emergency (D)octors



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The Now... The WESTEND Program

12 month program with "themed" sessions

- Electronic weekly pre-reading materials and links for self directed learning
- Fortnightly FACEM-led whole day face-to-face training
- Content based on the ACEM Emergency Medicine Diploma Curriculum / ACRRM curriculum
- ACRRM Stamps exam practice incorporated



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Date	Theme	Topics
12 July	Neurology	Seizures Headache Altered mental state Vertigo and weakness
27-28 July	Ultrasound	Physics and knobology eFAST AAA Early pregnancy & Lung ultrasound Peripheral IV access & nerve blocks
9 Aug	Paediatrics	Expert presenters Dr Khalil Soniwalla and Dr Megan Suthern Neonatal and infant resuscitation Fever Rashes
23 Aug	Geriatrics	Falls and trauma Delirium End of life care
6 Sept	Psycho behavioural	Expert presenters from mental health and security Acute behavioural disturbance Mental state assessment Drug and alcohol related presentations Legal and forensic issues
20 Sept	Communication	Expert presenter Dr Hansel Addae FACEM Breaking bad news Goals of care Managing conflict and rudeness
4 Oct	Dental, Eye and ENT	Expert presenter Dr Tony Skapetis Dental pain and dental trauma Eye and slit lamp examination Epistaxis Eye and ENT removal of foreign bodies
18 Oct	Trauma	More trauma! Head and spinal trauma, including when to image Paediatric trauma Environmental emergencies
1 Nov	Obstetric & Gynae	Pelvic pain Early pregnancy pain and bleeding Obstetric trauma Obstetric emergencies including delivery in ED and complications
15 Nov	Revision	
29 Nov	SIM WARS	Start planning your team now! More details coming soon.

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Our attendees




GP VMOs

ACRRM Registrars

RACGP Registrars

ED CMOs

Medical students on ED rotation

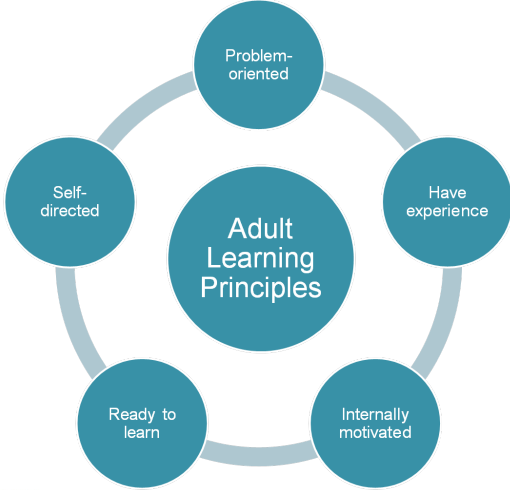


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Adult learning principles



The diagram illustrates the Adult Learning Principles. At the center is a circle labeled "Adult Learning Principles". Surrounding this central circle are five smaller circles, each containing a principle: "Problem-oriented" (top), "Have experience" (top-right), "Internally motivated" (bottom-right), "Ready to learn" (bottom-left), and "Self-directed" (top-left). These five circles are connected by a light blue circular line.



A photograph showing three men in a clinical setting. One man in a green shirt is standing next to a medical training mannequin lying on a gurney. Two other men, one in a dark shirt and one in a light blue shirt, are standing nearby, looking at the mannequin. A medical monitor is visible in the background.

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Is it working?

YES!

- 2 doctors have completed the Emergency Medicine Certificate
- 1 doctor is working towards the Emergency Medicine Diploma
- Pre- and Post- SAQ assessments at 6 months – improved knowledge and understanding of topics covered
- Post session "Survey Monkey" – feedback positive from attendees

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Is it sustainable?

We think so!

- 12 month program
- Already attracting doctors to work in Murrumbidgee LHD
- Building our local workforce in WWBH and peripheral site

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The Future...

Already expanding the program

- Additional faculty
 - Nurse Practitioner with educational and simulation expertise
 - EM Registrar / Fellow
 - Further EM Consultant support
- 'Virtual WESTEND'
 - Successful trial of video-conferenced sessions for more remote learners
 - Will be incorporated as regular component of 2020 program

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