

Rural Generalist Pathway

Name	Claudia Collins
Post Graduate Year	4
Position Title	Rural Generalist Senior Medical Officer (Provisional Fellow)
Location	Longreach
Advanced Skill	Obstetrics

I've been working in both the hospital and private practice Longreach since the end of January 2012. I also do after hours and weekends on-call for the Longreach Hospital. Longreach has five SMOs (four of whom are obstetric or anaesthetic proceduralists) who all work in a shared private/public arrangement and participate in the on-call roster in varying full-time/part-time capacities.

Leah Hatton (in pink) and I (in navy) are Queensland Health Rural Scholarship Scheme holders on the Rural Generalist Pathway. We are both completing ACRRM training following completion of our Advanced Skills Training in 2011; Leah in Hervey Bay in anaesthetics, and myself in Rockhampton in obstetrics. It has worked out that we have now both taken jobs in Longreach to complete our last two years of vocational training, as well as continuing our return of service with Queensland Health. Recently, we were "top and tail" for our first emergency caesarean section together. It was rather a surreal experience for us — we definitely didn't think we would be looking at each other over a surgical drape in this manner when we were first year medical students in 2003!



I love the variety of work in my current position and the huge scope of practice — sometimes this is the challenge as well! I work with a fantastic team of doctors who genuinely respect and value each other both professionally and personally. It has been a real privilege to join this team, and their knowledge and experience is invaluable. I also love that I can indulge my passion for Women's Health and provide a positive primary health care message from my general practice position in the community.

The scope of practice is a challenge! You have to be prepared for just about anything to walk in the door! I think this is incredibly daunting, but it is one of the more enjoyable challenges of rural practice — adrenaline-pumping, but still enjoyable and rewarding in its own way. As I progress in my career and gain further experience I hope that this becomes a little less daunting, but I hope I will still enjoy a challenge!

Isolation is definitely a challenge at times, both professionally and personally. My partner lives on the coast and I moved away to take this job, so that does make my personal life difficult at times.

Isolation is also difficult when you are trying to treat a patient — from a medical viewpoint as well as a social viewpoint. It is hard for patients to be transferred so far away from home, their families, and their support network if we decide that their care is better managed in a larger centre.

The ability to recognise and understand that sometimes you just can't "fix" everything is also a challenge! I think this is a life-long medical lesson but it seems to hit home more in the rural setting when resources are somewhat limited.

I think my Rural Generalist Training prepared me for rural clinical practice due to its broad learning goals and wide range of mandatory experience required before progressing. This is important when moving into Primary Care settings.

The senior Rural Generalists in the Longreach area have been able to give me huge support and encouragement since I have started in this position! They are incredible clinicians: realistic, experienced, hardworking, dedicated doctors — and actually really nice people to boot! I don't think I would enjoy myself in Longreach and my job anywhere near as much if I wasn't part of such a great team. They support each other, and I hope that as I continue to grow in my knowledge and experience, I can provide increased support to them and the way we deliver services to the community.

The doctors here are eager to share their experiences — both good and bad, and provide on-the-job informal teaching as well dedicated educational time. They are big on professional development and understand the importance of providing up to date care to patients: being in the bush doesn't mean you should have outdated care!

I enjoy living in Longreach because people are so friendly! Everyone knows who you are, and to walk up the street to the bakery to get lunch on a weekday is a social mission! But I think from having long-term doctors within the community for a number of years now, the community have learnt to separate social and professional relationships surprisingly well! With that friendliness comes lots of invitations — camping, dinners, 4WDing, coffee, and trips out to properties. It is great that people are so welcoming and want to get to know you on a social level and have you become part of their community.



There are plenty of social activities to get involved in including sports, a gym and art classes. There are also lots of events in the area (Longreach Show, Murrumbidgee Sheep Show and Easter in the Outback, just to name a few!) and a couple of GREAT coffee shops (thank goodness!). We even have a movie theatre in the main street which is very popular on Sunday afternoons!

An unforgettable moment I have experienced while being in Longreach was being told with great authority by a patient that they had “Pig Chiggers”. Thinking that I was missing some local Longreach knowledge about how to deal with this terrible-sounding mite that burrows into your skin and gives you a terrible rash, I very seriously acknowledged my patient and went to find out from my senior colleagues exactly how to treat these “Pig Chiggers” — only to be told that they have never heard of it before and didn't even think it existed!

We are living the dream out here in Longreach! We have great support from our colleagues and supervisors. John Douyere, Claire Walker and David Walker are absolute gems and the epitome of capable, confident proceduralist generalists who are actually making a huge difference to the community that they belong to. We only hope that we will be that lucky.

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