

Centre for Rural Health – 2016 Primary Health Care Practitioner Program (PHCPP-CRH)

A Call for Expressions of Interest

Each year the University of Tasmania Centre for Rural Health (CRH) offers a small number of project-based research training opportunities linked to CRH research projects. These involve primary health care professionals working in short-term, remunerated, casual placements. These placements provide an opportunity for primary health care professionals with an interest in research to build their research skills, experience and track record through hands-on involvement under the guidance of an experienced researcher.

Many previous participants in this program have moved on to study for higher degrees, have found positions with a research component or have done further research as practitioners.

The total hours available in each project will vary depending on the demands of projects, applicant availability and the number of appointments. They are capped at 140 hours total per placement at a casual hourly rate commensurate with casual research assistant level 2.

Exact conditions of involvement will be negotiated at the time of appointment depending on the needs of the individual project and the availability and preferences of the successful applicant(s). The exact scope of the training will also depend on the particular project but will likely cover many of the basic skills required to undertake research and/or evaluation within primary health care such as research design, data collection methodologies, data analysis and reporting.

Selection Criteria

- A university degree in an area related to primary health care.
- An understanding of, and experience in, primary health care.
- A demonstrated interest in research.
- The good fit between the applicant's skills and interests and the available projects.

Expressions of Interest: Expressions of Interest including a current CV and a covering letter briefly addressing the selection criteria and any other supporting material should reach.

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by the close of business on 15th February 2016

Please indicate which project(s) are of primary interest to you.

Topics

The topic areas have been proposed by supervisors and decided by an independent panel targeting strategic priority research areas of the CRH. In 2016 these topics will be within the following areas, subject to ethics approval being obtained, where necessary:

1. Clinical education in the rural areas

Smaller rural and remote health teaching sites such as GP practices, community pharmacies, small hospitals, and multi-purpose and community health care centres provide a wide variety of valuable learning experiences for students. These settings often represent the primary source of health care for a community though often struggle to recruit and retain staff. This impacts on their ability to accept students for clinical placements. In this project, we aim to develop a clearer understanding of the barriers and enablers for placements at these sites so that we can improve the utilisation of these facilities in terms of: the number of students placed, average placement length, placement duration and the number of health disciplines represented. The outcomes from this work will directly inform student placement planning in the future.

For more information contact Associate Professor Tony Barnett: Tony.Barnett@utas.edu.au

2. The Life Support (LS) program

This project aims to provide substantive baseline data and contribute to better informed national and international debate on LS training requirements and best practice guidelines for health professionals. The results will assist determinations around the allocation of training resources so that these may be directed to areas of greatest need and benefit to improve patient outcomes.

For more information contact Associate Professor Tony Barnett: Tony.Barnett@utas.edu.au

3. Oral health in isolated areas

Rural and remote residents have poorer oral health outcomes and access than city residents. In the absence of oral health services, rural and remote people present to primary care providers such as GPs and pharmacists with oral health problems for advice and treatment. The project aims to investigate the roles that rural and remote pharmacists could play to improve the provision of oral health services to their communities. The project will involve interviews with rural and remote pharmacists in Tasmania. The successful applicant will join our oral health project team and assist in the data collection and analysis of the interview data.

For more information contact Dr Ha Hoang: Ha.Hoang@utas.edu.au

4. Scoping for education needs in clinical psychology

5+1 Psychology Training Workforce Study. The 5+1 training pathway for psychologists has been growing momentum in the past few years, however little is known about the experiences, barriers and enablers of provisional psychologists undertaking this pathway and impact on the wider workforce. In collaboration with three other universities, this pilot study will examine such variables as lengths of time taken, cost, location, supervision arrangements, and satisfaction of training experience using quantitative and qualitative methods of a cohort of 5+1 training and trained provisional psychologists. The successful practitioner will have the opportunity to assist in the design, ethics application, recruitment and analysis of the study data.

For more information contact Dr Heather Bridgman: Heather.Bridgman@utas.edu.au

5. Bowel cancer screening

Bowel cancer is a highly preventable chronic condition, yet it's the second most common cancer after prostate cancer, with one in 12 Australians developing the disease by age 85. Currently, Tasmania has the highest bowel cancer incidence and mortality rates in Australia.

When bowel cancer is detected early, the 5-year survival rate is as high as 93%. Yet, participation rates in the National Bowel Cancer Screening Program (NBCSP) currently sit at only 36%. Tasmanian participation rates rank second highest in the nation at 41%, however marked geographical differences have been observed across the state, ranging from 49.7% to 24.4%. The reasons for these marked differences are unclear. This research will use case studies to explore these inconsistencies at a community and health service level.

For more information contact Dr Simone Lee: Simone.Lee@utas.edu.au