The interprofessional student-led clinic: supporting older people after discharge from acute hospital admission

Project summary
The aim of this project was to establish a sustainable student-led clinic for authentic interprofessional learning and practice at Peninsula Health Community Rehabilitation Centre. This project also aimed to investigate the patient, student and educator outcomes from the student clinic.

Drivers and challenges
In 2011, the Mornington Peninsula Clinical Placement Network (CPN) proposed to study the viability and merit of a student-led clinic as a means of increasing capacity and quality of clinical placements for entry-level health professionals. A key to the success of previous student-led clinics had been the ability of students to address gaps in the current health services, so a gap analysis of Mornington Peninsula CPN was undertaken which revealed that the most appropriate clinic focus for student-led interprofessional care within the region would be a post-discharge review of older people after acute hospital admissions.

An interprofessional working party facilitated the successful operation of the student clinic. Difficulty recruiting patients to attend a student clinic and the lack of operational structure for interprofessional activities were ongoing hurdles. However, achieving financial independence remains the most significant challenge to student clinic sustainability. To ensure clinical governance, clinical staff need to be employed to oversee student-led care; a student clinic therefore needed to be able to generate an income from the patient consultations to cover staff costs.

Arriving at a solution
To ensure sufficient recruitment of patients to the clinic, the project officer continued to visit the acute hospital wards to prompt staff for referrals throughout the duration of the project. Although time consuming, this was essential due to the frequent turnover of staff on the acute medical wards and low level of priority of our project to their core business.

Consultation with both local and national representatives for the operational governance of the Medicare Benefits Schedule (MBS) was undertaken to determine the potential for our general practitioner to bill patients under this scheme for student-led consultations. It was revealed that although the general practitioner may bill for their contribution to the patient consultation, legislation prevents the billing for any care undertaken by a student under the supervision of the general practitioner. Within the structure of a student clinic, students take
on most aspects of the consultation, so minimal billing could occur. We therefore did not resolve the issue of financial sustainability.

**Implementation process**

The interprofessional working party that was established in 2011 continued to support the student clinic in 2012 and 2013. The clinic operated on Thursday afternoons during student periods at the Peninsula Health Community Rehabilitation Centre. Within each clinic session students were placed in mixed-discipline teams of two to four students, and up to three patient consultations were undertaken simultaneously. Two educators oversaw each clinic session, a general practitioner and an educator from one other discipline.

Final-year students were invited to attend the clinic by their clinical supervisors at Peninsula Health and rostered on during their usual Peninsula Health clinical placement. Students were also invited to participate in the research component of the study. Student learning was measured qualitatively by a facilitated focus group discussion.

Patients were invited to attend the clinic at the point of hospital discharge. Consenting patients were phoned several weeks after their hospital discharge to arrange a suitable clinic time. After each consultation, patients were provided with a paper survey, asking their perceptions of the experience.

**Outcomes**

- A total of 100.5 clinical placement days were delivered by the student clinic (201 half-day clinic sessions were attended);
- A total of 78 students participated in the interprofessional student clinic from a range of health disciplines;
- Students reported developing a broader perspective of the issues affecting an older person’s health, an increased knowledge of the roles and referral pathways for other disciplines and improved interprofessional communication skills;
- During 2012/13, 73 patients attended the interprofessional student clinic;
- About a third of all patients that attended the clinic were readmitted to hospital within six months of discharge;
- A total of 74 referrals were generated for follow-up care to services such as physiotherapy, podiatry and general practitioner review;
- The patients rated the program positively, with the communication domain rating the most highly;
- Twenty educators were engaged in interprofessional teaching and/or workshops;
- Educators valued the interprofessional teaching experience but require training to prepare themselves for the unique challenges of interprofessional teaching;
- An interprofessional student clinic is a more expensive educational opportunity than traditional discipline specific clinical immersion in the hospital setting.

**Future directions**

Traditionally, student clinics struggle to achieve financial independence and rely upon volunteer staffing or ongoing funding. Under existing legislation, external funding is required to cover the cost of operation due to the inability to generate sufficient fees through patient consultations. We propose that the cost of running a clinic could be reduced in the future, by operation within an existing general or community practice, to remove the cost of patient recruitment.

**Further information**

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2. Kent F, Keating JL. Services and supports for older people through a student led clinic (for publication)

3. Haines T, Kent F, Keating JL. Interprofessional student clinics: An economic evaluation of collaborative clinical placement education Journal of Interprofessional Care (Accepted for publication 2013)