Teaching Agricultural Medicine to Rural-based Medical Students and General Practice Registrars

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Why teach doctors Ag Health

- Farming Australians see their doctor
 - Opportunity for Preventive Health in GP
 - Understanding social circumstances WRT illness and management
- Agriculture is dangerous
 - ~ 1/50 of GP presentations are OHS
 - Under estimate in rural practice
 - CQ 68.5/1000 males injured yearly

Ag Med teaching?

- Limited dedicated teaching in MBBS
- Very limited or no teaching in GP training

- QRME Rural and Agricultural Medicine
 - Qld Rural Medical Longlook program
 - Rural Prevocational GP Placement program
 - QRME GP training program

Vertical integration of Rural Medical Education at QRME

Recruited 47 new Rural medicine Registrars for 2012

Placing >150
Rural registrars
annually

Producing
~ 70 FTE in rural
practices

Medical Students

Interns

(Preregistration training)

Residents

(Prevocational training)

Registrars

(Vocational training)

Senior Registrars

(Advanced Rural Skills)

Specialist Rural Practitioners

(Post-Fellowship training)

Vertical integration of Rural Medical Education at QRME

Approximately half of QRME Registrars are ACRRM

~20% are in advanced training in any year

Medical Students

Interns

(Preregistration training)

Residents

(Prevocational training)

Registrars

(Vocational training)

Senior Registrars

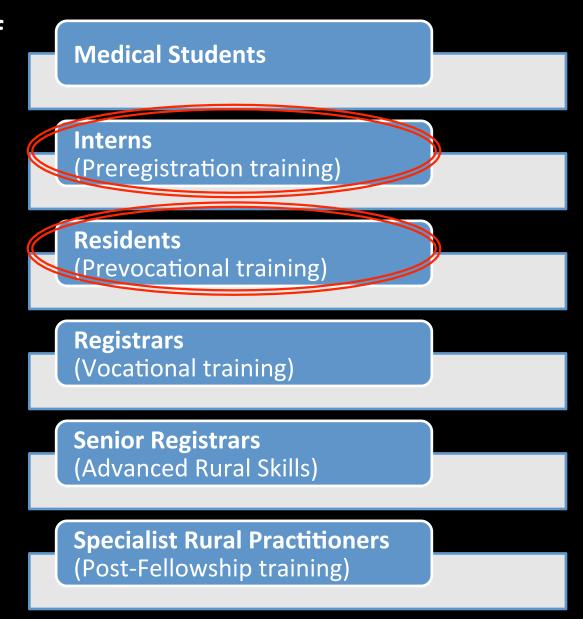
(Advanced Rural Skills)

Specialist Rural Practitioners

(Post-Fellowship training)

Vertical integration of Rural Medical Education at QRME

Prevocational
General Practice
Placement
Program



Vertical integration of **Rural Medical Education at QRME**

Medical Students

Interns

(Preregistration training)

Griffith and UQ 3rd year longitudinal

placements

Griffith 4th year placements

Residents

(Prevocational training)

Registrars

(Vocational training)

Senior Registrars

(Advanced Rural Skills)

Specialist Rural Practitioners

(Post-Fellowship training)

Rural and Agricultural Medicine lecture series – by year

Prof Scott Kitchener Clinical and Academic Lead, Rural Health

Griffith University Centre for Oral Health and Medicine

Learning objectives

- Introduction to Rural and Agricultural Medicine
 - Define Rural and Agricultural Medicine
 - Appreciate the epidemiology of Rural Australians and agricultural communities
 - Understand the nature of health care in Rural Australia including briefly discussing current issues
 - Outline of further lectures
 - Brief outline of QRMLP and training pathways to Rural Medicine
 - Agricultural health and medicine

Learning objectives

- Rural Medicine in practice
 - Social issues of rural and agricultural health
 - Contemporary issues in Rural Medicine & health care delivery
 - Cancer in Rural Australia agricultural exposures
 - Rural Mental Health influence of ag industry
 - QRMLP

Learning objectives

- Introduction to Agricultural Medicine
 - Issues for Rural doctors in practice
 - Agricultural occupational health and safety
 - Clinical agricultural medicine
 - Zoonoses
 - Agricultural Respiratory disease
 - Preventive health in rural generalist practice
 - Training pathways to Rural Medical practice
 - The Rural Generalist Pathway

Longlook Placements

Longitudinal placements in agricultrual communities



Australian General Practice Training (AGPT) Program

	Workshops	Placement
		Hospital-based
Year One	Preparatory workshop	
	Orientation workshop	Dua etta a la a a al
QRMe-learning local group meeting Medicine Advanced Research project	Agricultural H&M	Practice-based
	Clinical R&A Medicine	Dunation has a
	Exam prep	Practice-based
Year Four	Advanced Rural Skill Training in Ag. Health AND/OR	

Advanced Skill Training in Pop. Health

- Credit given for AGPT training already undertaken towards one Fellowship, prior to undertaking a second or third Fellowship
- † Can be achieved in dual accredited practices or posts

Note: Fourth year is for FACREM & FARGE

candidates.

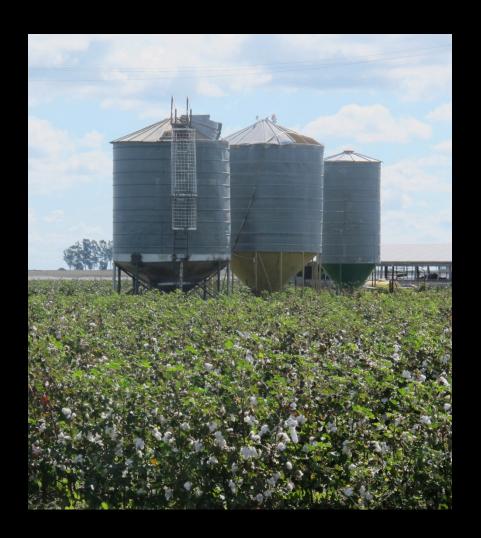
Year Two

Year Three

Rural

Orientation to R&A practice (January)

- Context of practice
- Population health
- Cultural competence in R&A communities
- Mental health training for R&A practice



Agricultural Medicine Teaching (July)

- Epi of Ag Health issues
- Physical OHS and EH on farms
- R&A mental health
- Rural cancers
- Respiratory disease of agriculture
- Australian zoonoses
- Skin cancer!!!



Multiple teaching modes

- Lectures
- Small group discussions
- Case discussions
- Interviews
- QRMe-learning linked resources
- Lecture notes provided online

Textbook drafted Field day



Large machinery

- Specific dangers of common farming larger equipment,
- Relevance and maintenance of safety fittings.
- Specific injuries discussed are related to quad bike and tractor roll-overs, tractor power-take offs, limb injuries from augurs and silo falls.





The workshop

- Smaller equipment and fencing safety
- Chemicals storage exposure and hazards
- Personal protection use
- Proximity of the family environment





The sheering shed

- Sheep drafted
- Shearing both mechanical and hand sheers with and without a sling.
- Ergonomics, physical hazards.
- Larger animal handling in yards with horses.







At the yards

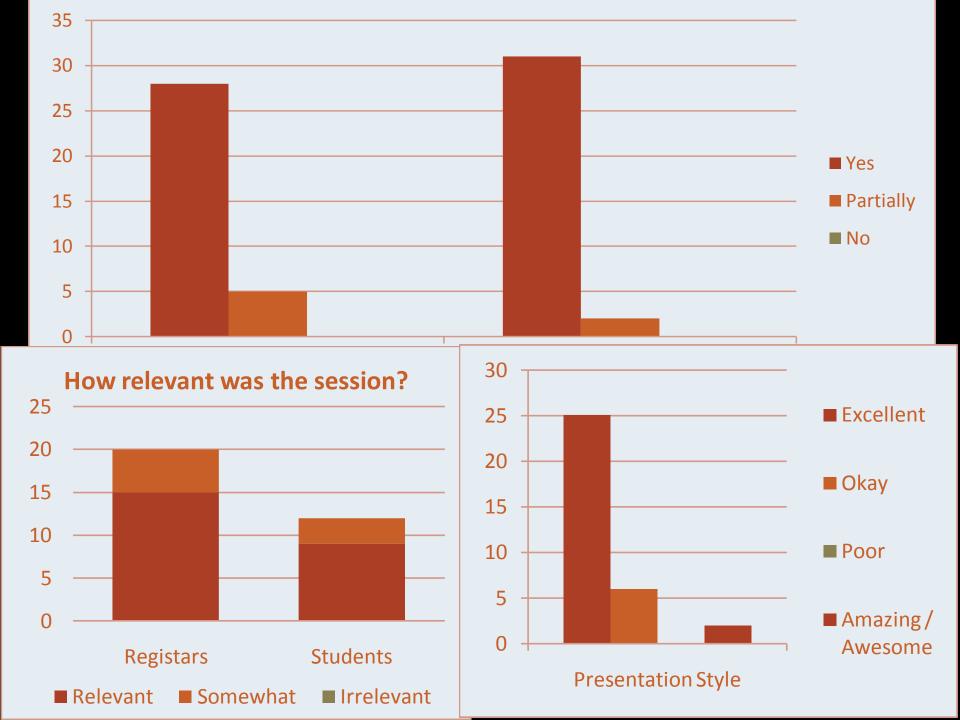
- Respiratory hazards from dust
- Cattle drafting into a crush for drenching.
- Timber and metal gates.

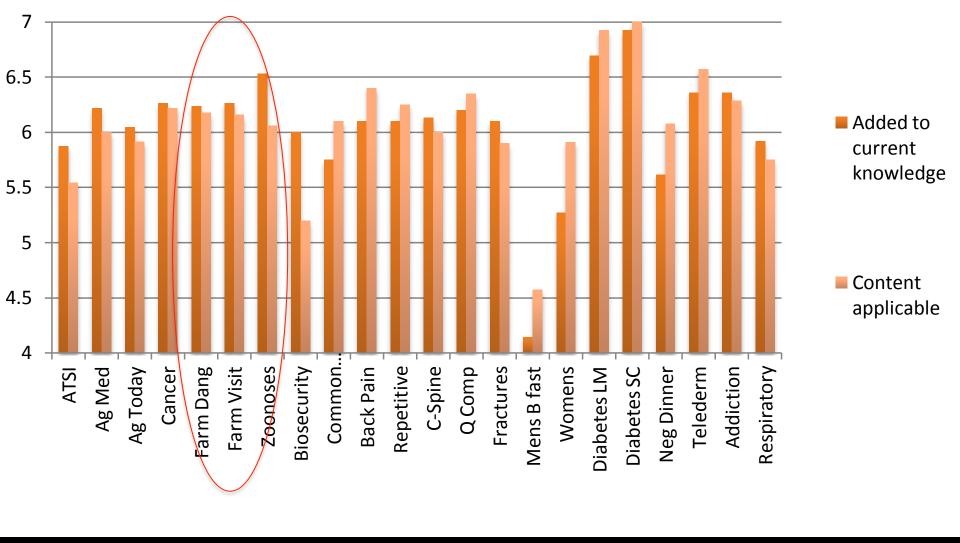




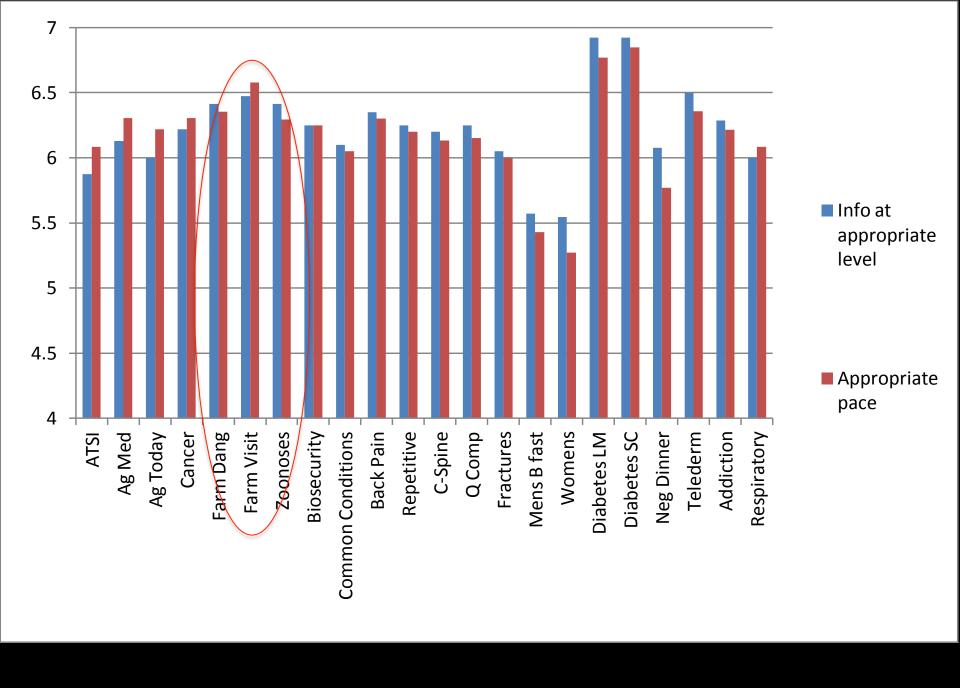
Farmers unplugged

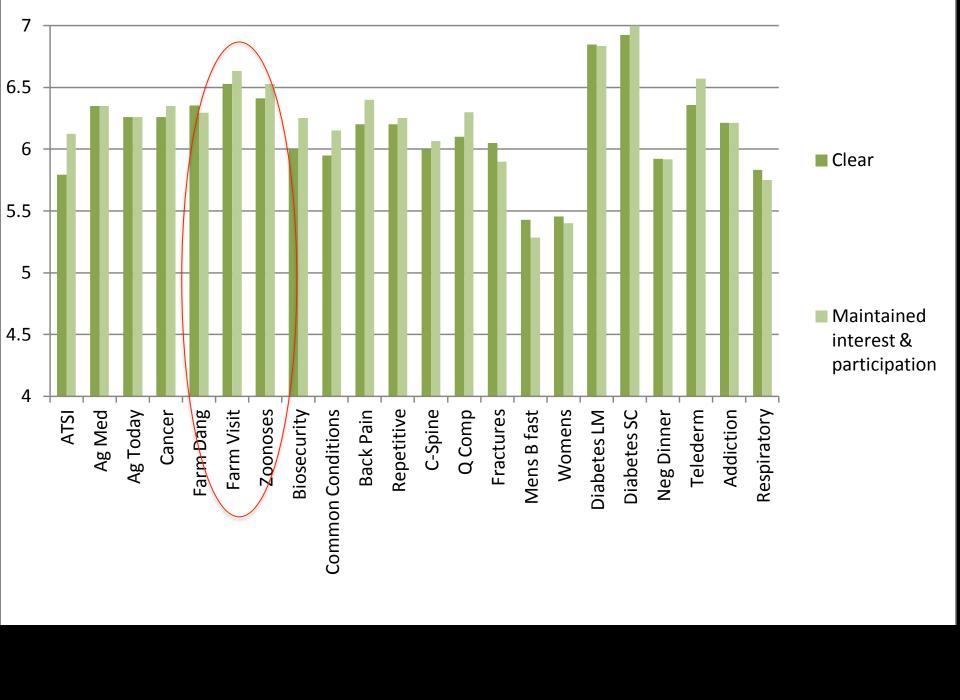


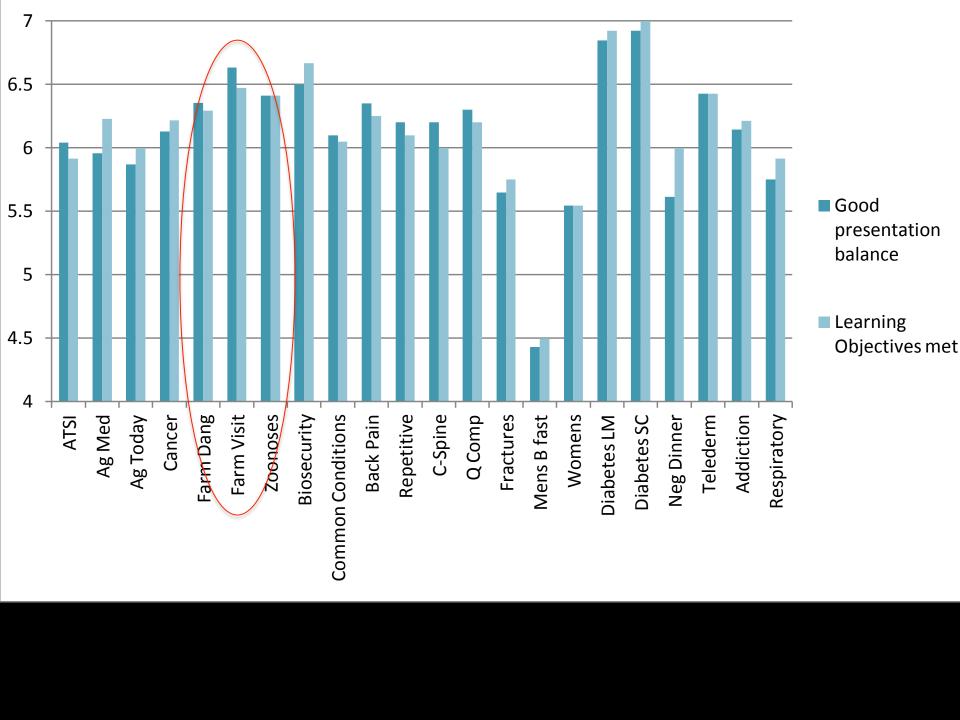




Toowoomba Registrar Education Release June 2012

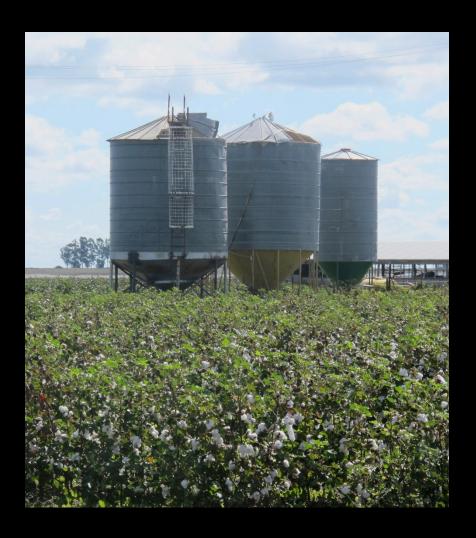






Content issues

- Breadth of farming demonstrated
 - No broad acre cropping,
 - No horticulture,
 - No aquaculture
- Visiting abattoirs, sale yards



Cultural competency issues



How do you teach the extremes of R&A culture?

Issues – possible expansion



- More experiences
 - Quad bike safety
 - Operating machinery
- Incorporating more teaching
 - Emergency scenarios onsite
 - More experience speaking with farmers

