



THE UNIVERSITY OF
MELBOURNE

—
Going Rural Health

Executive Report

Skills and attributes of quality clinical supervision in a rural context: Allied Health students' perspectives.

Rebecca Oates

Associate Professor Jennifer Weller-Newton

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Executive Summary

Clinical placements provide students with an opportunity to develop their clinical and professional skills in preparation for practice, and it is known that a positive placement experience in the rural setting has the potential to influence a students' intention to practice. This qualitative case study sought to explore the skills and attributes of quality Allied Health (AH) supervision in the rural placement context. Drawing upon the experiences and perspectives of AH students who had undertaken a rural placement, questions focused on the desirable skills and attributes of a rural supervisor; their less than satisfactory supervisory experiences; and suggestions regarding the skill and/or attributes that supervisors needed to develop to better support AH students.

Eligible AH students were invited to participate via the StarRez platform. Semi-structured individual interviews were undertaken with two Social Work (SW) students to explore their perceptions in relation to the skills and attributes of a 'quality' AH supervisor within the rural placement setting.

Four themes emerged from the analysis:

- (i) creating a safe learning environment which centres on the notion that supervisors are pivotal in the creation of a safe environment, an environment that is conducive to and optimises students' learning;
- (ii) being present which reflects the need for supervisors to be responsive to the degree of supervision required;
- (iii) student centered focuses on the need for supervisory practices to align with students' individuality; and,
- (iv) sound time management which encapsulates students' desire for rural supervisors to operate in a structured and organised manner. It is acknowledged that the small sample size and the participation of only social work students was a limitation of this study.

Recommendations

- Further research is required to explore the skills and attributes of 'quality' clinical supervision in a rural context.
- Gaps in AH supervisory practices within the rural sector also need to be addressed to challenge the perception that rurally based placements offer a sub-optimal experience.
- A cross-sector, multi-faceted and systematic approach needs to be adopted engaging with Australia's sixteen UDRHs, AH peak bodies, education providers and rural AH employers to address the challenges of rural placed placements.

Background information

Access to AH services are problematic for people living in non-metropolitan areas of Australia (Cosgrave et al., 2018; Spiers & Harris, 2015), issues regarding the recruitment and retention of adequately qualified staff add to these inequities (Brown et al., 2015; Cosgrave et al., 2019; Jones et al., 2018). A quality supervision experience in the rural placement context has the potential to influence a student's intention to practice rurally upon graduation (Smith et al., 2018). There is an unfortunate perception that rurally based placements do not provide students with a viable learning opportunity (Furness & Kaltner, 2015). Building the capacity of our rural healthcare workforce via the provision of quality rural placement experiences is a critical issue.

This research project sought to explore what are the skills and attributes of a quality AH supervisor in the rural placement context. In doing so it specifically sought to address the following:

- To identify the supervisory skills and/or attributes that create positive learning environments.
- To explore the differences, if any, of supervisory needs for students undertaking a rural clinical placement.
- To identify the skills or attributes, if any, that AH supervisors need to develop to improve the support provided to students whilst undertaking a rural placement.

The project used a qualitative case study design entailing semi-structured individual interviews to explore students' perceptions of 'quality' AH supervision, and Thematic Analysis (TA) methodology (Braun & Clarke, 2006). Unfortunately, only two Social Work (SW) students volunteered to participate. This may have been a reflection of the impact that COVID-19 was having on clinical placements at the time the project was undertaken, and AH students possibly did not deem participation a priority.

Findings

Four themes emerged from the interviews providing a deeper insight into AH students' perceptions regarding the desired skills and attributes of a rurally based AH supervisor. The themes are described below:

1. Creating a safe learning environment

Creating a safe learning environment emphasises the notion that supervisors are pivotal in the creation of a safe environment, an environment that is conducive to and optimises students' learning. Characteristics of this theme included socially inclusivity, cultural sensitivity, and empathy towards the students' learning journey. A preference for supervisors to be approachable and flexible was an underpinning sub-theme in creating a safe learning environment. Issues relating to trust and anonymity required to raise challenges or concerns without the fear of identification and/or retribution within the rural placement context was raised. The desire for an ongoing commitment to students' occupational health and safety was also referenced. Illustrative quotes that encapsulate this theme are:

"... sometimes you feel a bit left out [because] you are only there temporarily" (Robin),

"... sometimes the staff can say things that they don't realise can be a bit ignorant [in regard to cultural diversity]" (Robin) and

"... it also helped supervisor B to remember her time when she was a student" (Leslie).

2. Being present

An important aspect identified was that there was a perception that supervisors needed to be present. This theme was characterised by students' preferences for supervisors to be responsive to the degree of supervision required; offer graded support; actively source appropriate professional development opportunities; and, a willingness to prioritise their supervision responsibilities despite the busyness of the workplace setting. It emerged that student motivation appeared to be based on a relationship of reciprocity between the supervisor and the supervisee. Students were motivated when their supervisors were passionate and enthusiastic about their profession and role as a student supervisor.

The importance of supervisors being able to establish an appropriate balance between the diverse range of learning opportunities that are unique to rural practice, the need for a structured learning environment and enabling student autonomy became apparent. Indicative reflections from participants included:

"It's really important to still have some of that passion, especially if you're going to be passing on the skills of that field onto another student" (Leslie) and

"it was good because I got to see examples" (Robin) and

"[supervision] wasn't a priority" (Robin).

3. Student centered

Supervision practices that were adapted to align with students' individuality emerged as a preference. Students reported that it was important for their supervisor to value their contributions in the workplace setting; a genuine appreciation of students' time and contributions was held in high regard. Supervision that was student centered and complementary to students' individual strengths was apparent in this theme. A supervisor's availability, level of engagement and an ongoing commitment to effective communication practices in the supervision context was also central to this theme.

Preferences for more student-centered practices were reflected by the following quotes:

"it just kind of made me feel like a cog in the machine" (Robin),

"I'd put things on hold in my own life to be able to do this" (Leslie),

"I just didn't feel like there was much effort being put into my placement" (Robin) and

"because my supervision was booked in a couple of days later, I felt like I had to bottle that up" (Robin).

4. Sound time management

Preparedness for clinical placement was identified to be a 'quality' supervision practice in the rural setting, as were effective time management skills. The desire for rural supervisors to operate in a structured and organised manner emerged, adequate preparation prior to placement commencement was also identified as being ideal. Participants shared the following comments:

"I really like structure and knowing what I am going to be doing everyday" (Robin),

"...my supervision wasn't as consistent as other people that I knew that are doing more metro [placements]" (Robin),

"... there is real lack of structure" (Leslie) and

"... make sure that's implemented before the student is onboard" (Leslie).

It is acknowledged that the small sample size and the participation of only social work students was a limitation, hence broader generalisations of these findings cannot be made.

Overall Summary

Whilst there were similarities, perceptions of 'quality' supervision practices were individual to each participant according to their own values, needs and experiences within the rural context. Given the rural workforce issues and growing placement demands on the sector, further research is required in regard to exploring the core skills and attributes required of AH supervisors to guide practice (including professional development needs) and increase the attractiveness of rurally based placements.

The perception that rurally based placements offer a sub-optimal experience needs to be challenged and gaps in AH supervisory practices within the rural sector also need to be addressed for this challenge to be successful. This requires the ongoing attention of Australia's sixteen UDRHs, AH peak bodies, education providers and rural AH employers to ensure a cross-sector, multi-faceted and systemic approach is adopted.

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Appendix 1:

Semi-structured interview questions.

Main Questions	Probing questions
What allied health profession are you studying?	What skills and/or attributes did the supervisor/s demonstrate?
Think about a time when you have experienced quality supervision in a rural placement. From your perspective, what made the supervision 'quality'?	What did you find beneficial about it?
Have you participated in a metro-based placement? If so, think back to the time when you received quality supervision within a rural placement. Were there any differences in the skills and/or attributes demonstrated by the rural supervisor/s?	Can you give an example? How did that occur?
If you haven't participated in a metro-based placement, think back to the time when you received quality supervision in a rural placement. Do you think there would be any differences in the skills and/or attributes demonstrated by a rural supervisor/s?	Can you tell me more about that? What made it different or similar?
We have talked about the skills and attributes you have experienced within good supervision practices within your rural placements. Think about a time when you have experienced less than satisfactory supervision in a rural placement. From your perspective, what made the supervision 'less than satisfactory'? Do you have any other suggestions as to what skill sets and/or attributes allied health supervisors need to develop to better support their students in the rural context?	What was that like for you? Where there any skills and/or attributes that you would have liked to see more of from rural student supervisors?
Is there anything else that you would like to add that may be relevant to this research?	Is there anything else you would like to add? Tell me about when that happened?

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University Department of Rural Health

going-ruralhealth.unimelb.edu.au

+61 3 5823 4500

49 Graham Street Shepparton Vic 3630

