

# Community based podiatry student clinics: Leading the way for engaged community health care and training Enhancing accessible and cultural responsive care

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## Background/Aim

Indigenous Australians experience a disproportionate level of chronic disease. Inadequate foot care can lead to significant impacts on morbidity and quality of life.

Aboriginal people with diabetes aged 25-49 years, compared to non-aboriginal counterparts

- 27 times more likely to have minor lower limb amputations
- 38 times more likely to have major foot lower limb amputations
- Education and access to diabetic foot care programs can significantly reduce the rate of lower limb complications.
  - Access to culturally responsive foot care services and sufficiently trained professionals can be challenging.
- To address, the need for culturally responsive trained professionals
  - Western Sydney University podiatry program, trialled a half day a month clinic with the local Indigenous community.
  - This latter expanded to an embedded clinic at local indigenous medical service, a ten to fifteen minute drive from the existing service.
  - This change alone increased the patronage of the foot care clinic to a one day a week service.
  - Focus groups with students were undertaken to investigate their experience.

## Planning/Implementation



- One day a week student led podiatry foot care clinic
- Established in the local indigenous community medical service rooms
- Consultation with the board of directors and medical and nursing staff.
- Existing administration services managed patient bookings.
- A concurrent three patient list was booked for each day
- 4 to 5 students were rostered for each clinic,
- 4 week rotating basis.
- Online medical record reporting was adapted for foot care specific data.
- A staff member from the University supervised the clinic.

## Outcomes & Sustainability

The success of the clinic has been the trust developed with the local community and the 'word of mouth' acknowledgement.

- *'There is a big sense of trust with the indigenous population .... someone of that population says you should go down to this place. That word of mouth, is like gold to them. They listen... they trust it. You get more people coming back in, or new people coming in'.*

Students developed a sense of the importance of 'community'.

- *'Be a part of their community, be seen as part of their community. Engage with them as part of their community'*

Students also indicated they gained from the experience.

- *'I never had a passion for Indigenous Health coming into this course. However, now it's not something that I would shy away from. If I was offered a role, and it involved Indigenous Health, no worries, I would do it'. And*
- *'It influences you, helps you, improves you to become a more whole practitioner. That's what is important about this program'.*

## Take Home Message

Embedding student training clinics in Indigenous communities have benefits for onsite training and community engagement.

A Win/Win situation approach can be achieved by providing accessible community based services and workplace training opportunities.

## Conclusions

- Establishing sufficient work-based training to meet registration requirements is an issue for many health professional training programs.
- Establishing community embedded clinics can address both Close the Gap and workplace training needs.

### Acknowledgements

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