



| CASE STUDY

HEALING TOGETHER: INTEGRATING HEALTH EXPERTISE INTO OUR COMMUNITY DURING TIMES OF NEED

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As health students you have special responsibilities during the emerging situation with the COVID-19

virus. Health professionals are trusted members of the community, and at times like this we are required to utilise our expertise and professionalism at the highest levels. (Professor Michelle Lincoln, Dean, Faculty of Health, University of Canberra)

With these words, health students from the University of Canberra (UC) were charged to support our community through considerable challenges. The beginning of 2020 saw an unfolding

of local, national and global disasters; catastrophic bushfires across our region, enveloping smoke resulting in air quality 25 times above hazardous levels, widespread hailstorm damage and the emerging global COVID-19 pandemic.

A critical function of the University of Canberra, as defined by our legislative act, outlines that we “must pay special attention to the needs of the ACT and the surrounding regions”. Our community extends through Ngunnawal Country, the Australian Capital Territory (ACT), across the Snowy Valley and through the south coast of NSW. This case study examines how universities may draw on our broad capabilities to rapidly and responsively integrate health expertise to support communities during times of need, and our own capabilities may reflexively grow through this.

Connecting our community with student capability

UC shares a close relationship with the ACT Health Directorate and Canberra Health Services (CHS) and our students and graduates are well-represented throughout these services. In the early stages of the COVID-19 pandemic, CHS approached UC to assemble a surge workforce comprised of our students, to support and reduce pressure on health services during this crisis. Health discipline students were offered the opportunity for employment as assistants in nursing, diagnostic radiography, pharmacy, pathology and other allied health areas. In this way our students were in a position to provide relief to health services, in a heightened, real-world and paid environment in a time where many casual jobs were ceasing.

Applied expertise of clinical academics

For our academic staff, the pull of their clinical backgrounds was amplified when it became apparent that an increased health workforce may be required to handle the number of cases of coronavirus in the ACT. An agreement was reached to allow senior, skilled health academic staff to be seconded into CHS to support the COVID-19 health services response. This included the secondment of a key nursing academic into the role of deputy director of the trauma unit at the Canberra Hospital.

Immediate support to communities

Through the bushfires, our internal population was mobilised to deliver practical and meaningful activities, as defined by community need. We were able to donate a vaccine fridge to the Cobargo Pharmacy, which allowed their staff to restock and supply essential medication to the community. We offered affected families use of UC’s coastal properties, typically used by students on placement, when homes were destroyed. Our students also volunteered, with the president of the UC Public Health Society supporting the distribution of donated goods on the south coast of NSW.

Our student-led health clinics deliver services across nine health disciplines. Ordinarily, their services are delivered face to face. These clinics rapidly pivoted services to comply with COVID-19 social distancing restrictions and fully transitioned to telehealth services, to maintain service continuity. This shift was not without challenges: clinical educators

and students alike were upskilled in service delivery and comprehensive compliance with Australian guidelines was conducted.

The importance of continuity of service to our clients cannot be underestimated. For example, in March, the neurological physiotherapy clinic ceased face-to-face classes in response to the directive for people over the age of 70 to remain at home. This student-led clinic supports community members with Parkinson’s disease to exercise or move safely. Clients were quickly transitioned to a telehealth model of exercise delivery. Under supervision, students assessed their client’s willingness and suitability to exercise via telehealth through a telephone screening, including understanding their current physical activity, self-efficacy for exercise and emotional effect of this approach. Once deemed suitable to be involved, and if they were interested, individualised home exercise programs were developed and emailed or mailed to the client. The home exercise program was updated every three weeks based on feedback from the clients. These community members were monitored weekly via a personal telephone call with a physiotherapy student or by group video call for up to five clients, where participants completed exercise in their home led by these students.

Whilst our clients value the social interaction and engagement of our regular face-to-face classes, the move to telehealth enabled continuity of therapy, keeping this vulnerable group within our community both safe and moving. This mandatory innovation has resulted in unanticipated benefits. On returning to the delivery of regular services, we will also maintain delivery through telehealth, providing



inclusive therapy for clients who may have safety concerns based on their level of disease severity, cognitive impairments and support networks.

Research and our longer-term commitment to Canberra and surrounds

Our recovery efforts extend to our areas of research expertise, which will deliver reciprocal benefit to the community and our institution in the longer term. Our researchers have received a Medical Research Future Fund grant for the project ‘Supporting mental health through building resilience during and after bushfires: lessons from the 2019-20 bushfires in southern NSW and the ACT’.

Our health research staff continue to support efforts to understand, manage and support the global response to COVID-19. For example, UC staff at Australian Geospatial Health Lab (AGeoH-L is located at UC) are investigating the prevalence, incidence, and attack rates for COVID-19 across the ACT to inform public health strategies around interventions to apply. As this pandemic evolves, our health researchers remain engaged in the global response.

In times of uncertainty, universities have broad and deep capabilities that may be drawn on to understand and respond to community needs. While supporting our community through these crises, our staff, students and their families also experience these catastrophic conditions as they

unfold. In looking across our capabilities and finding small or large ways to support our communities, we are not only helping our communities heal, but also reflexively improving ourselves, through capability uplift, responsive innovation and our own healing.

Heartfelt thanks to our community for their tireless work throughout these times of challenge.