

The regional hospital

Even relatively large regional towns in Australia can suffer from workforce shortages and geographical isolation. If you are working in a large regional centre, your clinical experience may be similar to that in a city. However, you are still likely to find the work environment differs in several key ways.

- Many regional centres will provide outreach services to smaller communities, meaning that your role may involve regular travel. This highlights the need to consider your own transport requirements (e.g. having a driver's license, fly-in/fly-out). A number of patients will also have travelled in from outlying regions. Consider public transport and travel options in relation to appointments and patient management plans.
- Regional hospitals are more likely to be under-staffed and/or under-resourced, meaning that workloads can be higher. However, this provides an opportunity for registrars to find themselves in positions of greater responsibility and with more autonomy than they would in a city hospital.
- Patients from remote areas requiring an inpatient admission are often transferred to regional centres. This provides challenges around clinical responsibility as well as admission and discharge planning. Additionally, your patients may come from a range of areas, some with quite different population characteristics and health determinants from the area that you work in.
- Access to specialist services and professional support may be more difficult in regional towns. Communication technology may play a greater role in accessing your support network as well as in your clinical work.
- As there are fewer private specialists in regional towns, hospitals see more moderately disabled patients, such as people with anxiety and depression, than do city hospitals.