

# Civilian university and military collaborative partnerships: bridging the divide between healthcare professionals and practices

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## Introduction

Many Defence organisations have demonstrated the beneficial outcomes of effective collaboration with external agencies.<sup>1, 2</sup> Research undertaken in 2017 by the Major Extremity Trauma Research Consortium (METRC) advocates for the recognition and adoption of more collaborative engagement between Defence and civilian health professionals.<sup>2</sup> While Defence has a long-standing tradition of senior medical Reserve appointments, which facilitate civilian/Defence clinical exchange, opportunities for interagency training for medics and nurses are less common. The possibility of interagency operations either in the event of domestic crises or offshore humanitarian and disaster response appears to be increasing. In the light of this, interoperability becomes increasingly important. While the initiatives described here are small-scale, they do respond to this environment and demonstrate the transferability of skillsets and the importance of interagency understanding.

## Civilian University-Defence collaboration

In recognition of the significance and importance of collaborative engagement, the author, an academic from Queensland University of Technology (QUT), School of Clinical Sciences and former Nursing Officer in the Australian Army, facilitated and led an interagency clinical training opportunity between paramedic science students studying at QUT and clinical personnel of the Australian Army posted to 2<sup>nd</sup> General Health Battalion (2GHB). This interagency training is outlined in Table 1.

**Table 1. Interagency training exercises and opportunities between QUT & 2GHB**

- QUT students being clinical role players for TAJI medical certification activities. These were clinical certification exercises necessary for the ADF and NZDF clinicians who were deploying to Iraq as part of Task Group Taji.
- 2GHB clinical personnel assisting in the facilitation of clinical tutorials for QUT students
- 2GHB personnel being afforded an invitation to attend paramedic clinical lectures of interest at QUT
- 2GHB personnel being clinical role players and participants in QUT paramedic activities at the Queensland Emergency Services Whyte Island facility
- QUT students being clinical role players for EX Giant Viper. This was a minor certification exercise for 2GHB, to certify the Battalion to support exercises to a specified level.

In the first instance, the training was facilitated on a casual and ad hoc basis, whenever 2GHB had the need for role players, or QUT had relevant reciprocal opportunities available. In 2017, funding was secured to legitimise and further develop shared educational opportunities between 2GHB and QUT.

The funding was awarded to develop collaborative clinical training, education and research opportunities between the University and Defence health personnel. In concert with the activities outlined in Table 1, a major component of the funding involved the development and initiation of an inaugural QUT & Military: future health directions symposium, which was held in September 2018 ([www.qutmfh.com](http://www.qutmfh.com)).

## Key relationships

High level collaborative agreements were negotiated, and interagency planning of the symposium activities was instigated in early 2018.

The symposium was hosted at QUT Kelvin Grove campus, where speakers from both Defence and the paramedic program presented interactive, conversational talks about their field of speciality, professional interest or emerging issues in health. The day ended with a clinical and operational capability demonstration. This involved the deployment of

2GHBs evacuation and resuscitation assets to the QUT campus, in order to facilitate an interagency clinical response. This involved QUT paramedic science students working alongside 2GHB medics in a clinical scenario involving stabilisation and transport of a patient from the point of injury to the resuscitation bay for continued treatment. Clinical skills exchange was facilitated by the conduct of these scenarios, which involved QUT paramedic science students working with 2GHB clinical personnel to demonstrate health interoperability across professions, as illustrated in Figure 1. The scenarios were live streamed to the lecture theatre, recorded for future training and watched live by symposium participants on site.

The symposium's intent was to bring together practicing health professionals from multiple settings: Defence, emerging health professionals undertaking study at QUT, and civilian health practitioners interested in the interface of health between Defence and civilian sectors. Three broad areas of interest were addressed by 19 presenters (see Table 2 for details).

### Implications and future directions

Feedback from the symposium was overwhelmingly positive and provided constructive suggestions for future development opportunities. Future iterations of the symposium would encourage a better balance of presenters, to ensure the voices of a wider range of ranks of Defence military personnel were heard. In addition, the symposium would be open to all ADF health personnel; RAAF were present at the 2018 symposium, and we would welcome and encourage their and Navy's attendance and participation at future symposiums.

### Conclusion and recommendations

Defence and civilian health sectors do not work in isolation. During disaster response and recovery, for example, there is often overlap in their efforts. In addition, best clinical practice is vital to all health practitioners, and opportunities to share best contemporary practice and explore the application of novel ideas is imperative to the best clinical outcomes for our patients, whether Defence or civilian.

The QUT & Military: future health directions symposium has the ability to bring together health practitioners from all fields with various levels of skills and knowledge, to learn from each other. Importantly, it also gives a voice to emerging and

Figure 1.



Table 2. Broad areas of interest and specific topics presented at the QUTMFHD symposium

CLINICAL EDUCATION & TRAINING	
• Why we need collaboration and integration	QUT
• Clinical competency, currency and collaboration	ADF
• Mindset of a learner	QUT
• Army medic to civilian paramedic	QUT
• Finger thoracotomy	QUT
• Land based trauma system	ADF
• Real learning comes from clinical placement	QUT
• Epigenetics of PTSD	QUT
RESEARCH & CLINICAL INNOVATION	
• Tribes and finding our 'why'	ADF
• CPR induced consciousness	QUT
• 8/9 RAR rehabilitation	ADF
• AACAP	ADF
• HEADS: acronym for TBI patient handover	QUT
• Female to female learning in Iraq	ADF
• Literature review of patient cooling in cardiac arrest	QUT
MENTAL HEALTH, HOLISTIC PATIENT CARE & HEALTH CARE CONTINUUM	
• Life threatening critical bleeding	QAS
• Role of a paramedic: what is reality?	QUT
• Double degree: paramedic and nursing	QUT
• Resilience	ADF

new clinicians in a supportive and collaborative environment.

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