This blog is made up of excerpts from U of S nursing student journals. Together with pictures we will continue to add, we have tried to describe our student clinical exchange here in Australia 2010.

1st Clinical Placement, located in Berri in the Riverland – Jan 11-22

The township of Berri is located 236 kms northeast of Adelaide on the banks of the Murray River. It has a population of 7500.

Blog #2, Berri, The Riverland
- On Saturday, January 9, 2010, we left Adelaide at 1215 pm and traveled by Premier Stateliner bus (like our Greyhound) to our first clinical placement in Berri, in the Riverland located about 3 ½ hours north/east of Adelaide. We arrived at about 1600 hrs would be here for 2 weeks at the Berri Hospital and living in the accommodations of individual houses located just behind the hospital.
- I found some of the areas around Berri on our way to Berri very similar to Saskatchewan...(flat, and dry land) [Rachelle W].

Initial Impression
“Initial impression of Berri was that it seemed like a small, but nice town of approximately 7 to 9,000 with friendly people and beautiful scenery.

The River was amazing. I took note of how the people in the community talked a lot about the drought and just how important the river is for them. The land around Berri was really dry due to the drought. I also found it interesting how the community all seems to be coming together to try and solve the problem. It’s good to see people being very environmentally aware of their surroundings. [Rachelle W]

Initial Feelings

- I was somewhat nervous to arrive and begin the official clinical portion of the trip. There is something about going to an unfamiliar place to meet new people and be expected to perform nursing skills at an appropriate level that is more than a bit intimidating! [Shanda S]

Similarities/ Differences

- “During my first day I found that even the simplest things were difficult because the equipment looked different, sounded different, and was stored in different areas with a different name”. [Emily H].
- “I spent the first week on the med/surg units, and I found more similarities than differences to Canadian hospitals” [Deanna C].
- “There were many things that were very similar, but so many little things were different I felt like I was starting all over again in first year. An example of how the smallest things can make working in a different country so challenging, was at the nurses station one day and a nurse came up to me and said “If you see a gopher go by, let me know.” My immediate reaction was “WHAT?” I didn’t think they had gophers down here, and even if they did, why would on be in a hospital and how would I see it if it went by? Well, a gopher here is
one of those electric wheelchairs... how was I supposed to know? [Tanya S]

Charting Differences

- “Even things like the colour of pen they use when they chart is different. At home a blue pen is acceptable, but here they only use black.” [Tanya S]

Health Policy - Differences

National Health Campaign - Australian Cancer Council

- “I was very impressed by their efforts to reduce skin cancer. There is a national health campaign by the Australian Cancer Council called “Slip, Slap, Slop”, reminding people to slip on a shirt or in the shade, slap on a hat, and slop on sunscreen. All children in Australia must wear a hat in order to play outside for recess at school. They also must wear the sunscreen provided by the school before swimming or playing outside. I was also told that there is discussion of changing the lowest level of sunscreen sold in stores to SPF 50. During my two days in the operating room, I watched six people have lesions removed from their bodies, and the staff told me is what Tuesday afternoons are scheduled for.” [Deanna C]

Infections Control - Differences

- “The major difference we noticed in the first week was the infection control. Hand washing in Australia is not nearly as enforced as it is in Canada. It was common in public washrooms to be missing soap, hot water, or paper towels.” [Deanna C, Shanda S]

- “I noticed like some of the other hospitals we had toured, carpets line the ward halls and extend into the private rooms”. [Emily H]
- Many of the patients rooms are carpeted instead of tiled, and there are few hand sanitizers around the unit. [Deanna C].
• I thought this infection control business was intriguing, but I was informed that Canada has only had such rigorous standards in the last few years.” [Deanna C].  
• Australia did not have the same SARS (Severe Acute Respiratory Syndrome) pandemic experience in 2002-2003 as Canada. Since then Canada has been more vigilant re infection control – this may well be the difference.

Immunizations/ Vaccinations- Differences

• “We observed some community members receiving the H1N1 vaccination - differences noted during the vaccinations: the use of alcohol swabs and the aspiration rule have been discredited and are no longer used. [Emily H].
• “At the Peelies clinic, the public health nurse Annie explained to us about the Australian system to immunize, which varies slightly from Canada. Nurses do not aspirate for blood, do not push the medication to the end of the needle, and they give Hep B to all newborns, which is not done in Canada, unless the baby is predisposed to the virus.” [Deanna C].

Labour and Delivery Ward-& Length of Stay Differences

• Comparing this ward to the labour and delivery ward in Canada I found that Australia fosters a much more natural atmosphere and attitude about pre, intra, and post partum situations. In Canada, normally moms and babies stay maybe two days on the mother baby unit after a section, and moms who delivery vaginally will only stay one night. Here, moms will stay routinely up to 5 nights. The midwives explained how they believe that mothers need support in the first days with breastfeeding, bathing, changing and dealing with their new baby. The long admission stay may simply be because Berri is a small town hospital and can afford to keep mothers longer than bigger centers, but it seems to be a successful approach”. [Emily H].

Medication Differences

• “One major difference on the ward was how they do medications. Where our meds all come pre-packaged and we will call down to the pharmacy if we need anything, here they have a pharmacy on the ward and meds are not pre-packaged.”[Tanya S]

Midwifery - Differences

• “I am really interested in the role that midwives play here in Australia. They really seem to take the idea of holistic patient care to its greater potential working with each patient to achieve the best possible birthing experience possible.” [Shanda S].
• “I found the overall care for the patients to be much the same as Canada but the way things were done in Midwifery seemed to be much more personal.” [Rachelle W].
• **Community Midwifery – Differences.** "Community midwifery was fantastic! We traveled over 100 km with midwife Kylie Smith, from one town to the next, assessing new moms and their babies. We visited many women who were having trouble breast feeding and many young mothers who need support and a shoulder to cry on. I thoroughly enjoyed the experience of seeing patients in their own home and environment". [Emily H].

• It was interesting to see that mothers here generally have the same questions and difficulties as in Canada but there are huge differences also. We went out on a day that was 45 degrees and the major concern that day was ensuring each baby was not over dressed, where as in Canada we have to ensure each infant is warm enough.” [Tanya S]

“Everything just seemed so natural with midwives, one example, they don’t clean the cord with alcohol swabs, or anything for that matter. When the babies are given a bath all they say is to make sure it is dry. In Canada, our practice is to clean the cord with alcohol swabs after each activity (bath, diaper change). Also another thing I noticed was they don’t give the babies Erythromycin in the eyes after birth, where as Canada does.” [Rachelle W].

**Nursing Salary/Benefits - Differences**

• “Talking with the nurses over our lunch break they explained to me that nurses are not only paid less here, but they do not receive any health or dental benefits either. The most inexpensive health care insurance is around $3000 dollars/year/family which is fairly significant. [Tanya S]

**Terminology = Differences**

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<tr>
<th>Australia</th>
<th>Canada</th>
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<td>A+E (Accident &amp; Emergency)</td>
<td>Emergency department</td>
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<td>Boot</td>
<td>Trunk</td>
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<td>Chronic obstructive Airway Disease (COAD)</td>
<td>Chronic Obstructive Pulmonary Disease (COPD)</td>
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<td>Cuppa</td>
<td>Break</td>
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<td>Gopher</td>
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<td>Jelcos</td>
<td>IVs</td>
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<td>OBS</td>
<td>monitor vitals</td>
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<td>‘recess’ room</td>
<td>trauma room</td>
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<td>Theater</td>
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Emily H.  
Tanya S  
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Rachelle W, Tanya S  
Emily H.  
Tanya S
Theatre (OR) Culture - Similarities

“A few things that I found very similar is that the theatre (OR) staff keeps quite separate from the rest of the hospital staff, there is certainly a distinct culture to any theatre and with a definite hierarchy with the surgeon at the head of the team.” [Shanda S].

Public and Private Health Care - Differences

• “The difference between public and private rooms/patients was very blurry. The only noticeable thing was that there seemed to be more paper work involved with a patient with private insurance and this was usually at the inconvenience of the registered nurse.” [Shanda S].

Uniforms - Differences

“They all have uniforms that distinguish what role they play. They still however, are not very obvious. It is difficult to tell the difference between an RN (navy) and LPN (or enrolled nurse) (lighter blue). The main thing that distinguishes their profession is the colour of stitching on their shirt. RNs have teal when LPN’s have yellow stitching. Midwives wear an orange coloured shirt so they are easily distinguished and I think it is great that you know right away what their role is.” [Tanya S]

Water and Electric Conservation

• “Sandra talked to us about their water sources and conservation. Most houses have huge rain barrels in their yards that collect the water that runs off their roofs (which are mainly tin/metal for this reason). They use this water for drinking, showering, cleaning and everything. They have a back up plan in which they hook up to river water if they run out of rain water. It made me wonder why we do not do that in North America. I know we are not in a water shortage, but why not conserve what we have? It seems to be a very effective and conservative way to use this valuable resource. All of Australia seems to be very environmentally friendly. All the toilets have a half and a full flush option, They use their rain water for everything,
• **Electric Conservation.** All the electrical outlets have an on/off switch, and most of the lights in public places have motion sensors and only come on when you walk in. This is definitely an approach that is something to work towards in North America.”[Tanya S]

Learning Opportunities in Berri

Here below are in alpha order are some of the learning opportunities we had in Berri.

**Ambulance services (Ride Along)**

• “The ambulance service seems to be very effective, as the 6 different towns in this area work well together and coordinate services. [Tanya S]

• “I have a greater respect for the role that paramedics and EMTs play in health care!” [Shanda S].

**Royal Flying Doctor Service of Australia**

• “The Royal Flying Doctor Service of Australia, which is both a medical aid airplane and air ambulance. In the outback, doctors fly into remote locations, and in Renmark, patients from Berri and the surrounding area can be airlifted to Adelaide. This saves the ambulance time and money spent on wages. When the ambulance brought patients to the airplane, the nurse and pilot on board were very gracious and let me look on the plane. I don’t have any experience with the flying health care in Northern Saskatchewan, but I think it is a great way to promote accessibility.” [Deanna C].

**Nursing Practice Procedures**

• “I learned how to place ECG leads, and how to check for the enzyme troponin that would indicate heart damage. “Andrew, the RN, taught me about reading ECGs”. [Emily H]

• “I’ve been able to get some good experience as refreshers. I’ve assisted with discontinuing IVs, hanging antibiotics, giving injections, assisting with physio, showers, and also helping with
PEELIES Bus
(PEELIES meaning “eyes” that watch over the community)

- “The Pealie Bus is a bus that has been designed for nurses to provide immunizations, tests, assessments, and treatment in rural communities. The bus travels to communities with large Aboriginal populations and areas where healthcare is less accessible.” [Emily H]
- We were able to explore the bus and I was surprised to see three computers, a functional cot and many supplies that allowed for extensive services. The staff that usually work on the bus were running a community immunization clinic today. We helped set up the clinic and we observed some community members receiving the H1N1 vaccination.” [Emily H].

Riverland Experience - Vineyards

- “The weekend and free time in Berri were filled by trips to Wineries and neighboring towns to see some of the sights of the Riverland. The sheer size of some of the fields of grape vines and the grandness of the Murray River was amazing! Further from Berri the landscape reminded me very much of home and I really found that although it was dry, for the most part the scenery was breathtaking. It had a certain charm that only a Saskatchewan resident can appreciate.” [Shanda S].

- “Sunday morning we went for breakfast at a gorgeous winery called Banrock Station. We had an amazing view of the vineyards and the surrounding wildlife. After eating we took a walk around the vineyards and around the wetlands that Australia is fighting to protect and maintain. We visited two other wineries and were able to talk to their owners about the wine making process. Through this outing we were able
to get more of a sense of the Riverland and its inhabitants”. [Emily H].

Student Presentation to Berri Staff on Canada

(health care, nursing, Aboriginal health)

- “Monday, Jan 18 of the second week we did our Canadian presentation. We had a wonderful turnout (about 15 staff) as there were some other students on the ward that came to watch us. Everyone had a lot of questions and were really interested in the differences in nursing between the two countries (especially the pay). It was a great experience to talk about where we come from and offer the staff some understanding of our background. We had a few snacks and Canadian goodies to share with the staff as well.” [Tanya S]

Impressive services

- “I was impressed with all of the services Berri’s hospital is able to offer despite its small size and limited staff”. [Emily H]

Summary

Berri Hospitality

- “The staff in Berri were absolutely amazing: Sally Cameron and Sandra Crockett in particular and Peter Mallor were just wonderful to us! [Shanda S].
- “The staff here have been wonderful to work with and really enhanced the experience. It was great to be able to spend a few days on a few different wards to really get a feel for the hospital” [Tanya S]
- It was the experience of a lifetime to work with people from a different culture. .“[Tanya S]

Overall Experience

- “Berri was an excellent placement, and it was beneficial to be on several units, to experience what a typical day might be like. It is difficult to compare South Australian rural health with Saskatchewan, because I have only worked in Regina and Moose Jaw. The staff at Berri was excellent, and all of us felt at home. It was tough to live in a place without internet, and Sally Cameron was very gracious to lend us her computers and open up her home to us. Rural nursing in Australia seems very similar to Canada, with a few differences and I think that Berri has many positive attributes to recruit young nurses.” [Deanna C].
- “Tonight we will go out for supper with the wonderful Berri staff, and tomorrow we will take a bus back to Adelaide. Soon we will be heading off to Whyalla for a new adventure. “ [Emily H]

On Saturday Jan 23 we took the State Liner bus back to Adelaide, and stayed again at Glenelg Beach Hostel. As January 26 is Australia Day (similar to our Canada Day on July 1) there were lots of celebrations this long weekend that we took part in.

Australia Day, 26 January, is the anniversary of the arrival of the First Fleet of 11 convict ships from Great Britain, and the raising of the Union Jack at Sydney Cove by its commander Captain Arthur Phillip, in 1788.

On Australia Day, Australians come together as a nation to celebrate what's great about Australia and being Australian. It's the day to reflect on what they have achieved and what they can be proud of in their great nation. It's the day for Australians to re-commit to making Australia an even better place for the future.

On Australia Day, over half of the nation’s population of 21 million attend either an organised community event, or get together with family and friends with the intention of celebrating their national day. Many more spend the public holiday relaxing with family and friends.