At the October 2013 Australian Nursing and Midwifery Conference, Jeremy Hatfield, Maryanne Dieckmann, Jessica Nixon, and Raeketta Smallwood—then 3rd year nursing students at the University of New England (UNE) described their work in founding the UNE/Coledale Student-led Clinic. Their presentation earned widespread recognition for the innovative and responsive development of a community-driven, student-led integrated health and wellness service in an underserved high crime and unemployment community of 3,000 residents in West Tamworth, who due to lack of General Practitioners, have little or no access to health care.

The project, funded by Health Workforce Australia, is supported in partnership by Karen Kelly (HNELHD), Karen Patterson (NSW Justice Health), and Cynthia Stuhlmiller (UNE). It is directed by Stuhlmiller and a core team of Kristi Latimore (UNE and Justice Health), Zeta Knight, Jodie Gaffney, Dianna Knox, Helen Cameron, Nicole Smith (UNE), Lesley Salem (Walhallow Health), Racheal Peake, Joe Miller, Alan Avery, Aditya Menon, Narelle Crossley, Matthew Crawford, and Hannah Briggs (HNELHD). Along with students, elders and volunteers, the clinic has firmly established itself as a place of safety, education, and comprehensive help.

The following reflection from Dieckmann describes student development of the clinic.

‘After attending the initial meeting, I felt; inspired, awake, excited and a little afraid. Excitement came from the ability to make change and do things differently, but it held close value to my own heart as a former resident of Coledale. I remember thinking, we have the chance to change everything and to do it all with the elements we are taught but rarely are able to action in regular placements due to our student status. Prof. Stuhlmiller has always said to us, that ‘the foundation for good health is having food in your belly, a roof over your head, clean water and meaningful activity’. At Coledale, we as students have taken this to mean that ill health is not only disability and sickness, but also having the prospect to provide for one’s family through social and financial means. We found that people had a very broad range of ailments that affected their health class, Auntie’s Place Soup Kitchen, and Community Mural Story Board—which have laid the foundation for what has now become a bustling five day operation with expanded programs in mental health and tele-health.

Involvement of 24 programs and agencies such as Tamworth Family Support Services, Joblink Plus, Anglicare, TAFE, HNEH, New England Medicare Locals enables students to connect individuals and families with tailor made help, the clinic operating as a one stop shop. The program is underpinned by an integrated model of care, specifically using the New England 4G Framework of Guided Self-health (Stuhlmiller & Tolchard, 2012) students gather assessment data, generate a cognitive behavioral based plan, Give self-help education and materials and Guide client self-management of physical and psychological conditions. Data is collected on every occasion of care and on every event. Routine measures of anxiety, depression and physical health help clients track changes over time. For example, preliminary data from the follow up study of Eye and Ear Screening of Children indicates improvements in school performance and reduced bullying.

The atmosphere at the clinic is warm and welcoming as the students work with community members starting with a cup of tea, Eye and Ear Screening of Children indicates improvements in school performance and reduced bullying.'
of tea and moving on to comprehensive assessment, testing, treatments, health education, monitoring, coaching and follow up.

As described by Hatfield:

‘All too often within healthcare, the majority of professional interactions with clients are atomistic and simply focus on the physical or psychosocial issue of immediate concern, with blatant disregard of any other wellbeing aspect. As a consequence, frequent readmission of such clients greatly contributes to government healthcare costs and further perpetuates the continuity of a ‘revolving door’ healthcare system….the ability for such community projects to support the future of healthcare through utilisation of young leaders and innovative ideas.’

In a recent letter Health Minister Jillian Skinner wrote:

*The University of New England, together with Hunter New England Local Health District, are to be congratulated on the program that has been developed to increase the opportunity and capacity for student clinical placements from your School of Health whilst simultaneously making such a positive impact on the community.*

**References**


**Acknowledgements**

The authors wish to acknowledge the late Michael Griffiths, Aboriginal CNC, whose inspiration and extraordinary teaching contribution to the founding of the clinic remains a guiding force.

The Coledale team extends a welcome to visit the clinic and our website [http://unecoledaleclinic.org.au/](http://unecoledaleclinic.org.au/)