Redwoods Rural Health Center resides in Redway, California, home to 2,000 people in rural Humboldt County. Residents traverse through mountainous roadways to seek primary care. There are no stop signs or traffic lights on the main road through town and the nearest hospital is 45 minutes away.

“We’re unique because we’re really remote,” said Tina Tvedt, Redwoods’ executive director. “It may take people 45 minutes to an hour just to get to our clinic, which creates tremendous barriers for people who need services.”

Those challenges, along with an incredible diversity of health issues, present opportunities for nurse practitioner and physician assistant graduate students at the Betty Irene Moore School of Nursing at UC Davis. Requirements mandate graduate students complete 720 hours of clinical rotation time in primary-care settings. A partnership developed between the clinic and the school goes one step further, offering students the chance to fulfill their required four-week rotation in an underserved area. The experience enables clinic operators to engage future providers who might want to call Redway home.

“Learning is a two-way street. Sharing with others spurs a dynamic ripple effect,” Riley explained. “I hope they learn as much as they can from all members of our team to gain perspective and introduces these future scenarios and conditions that run the gamut of health care,” Tvedt added.

Central to this partnership are providers who serve as preceptors, experienced practitioners who provide role support and learning experiences to students as they acquire new competencies required for safe, ethical and quality practice. At Redwoods, Maryanne Riley, a family nurse practitioner for the past 17 years, shares her knowledge with and learns from the School of Nursing students.

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awareness of their potential roles in a primary-care setting.”

Riley welcomes the new knowledge students bring, admitting that being a preceptor makes her more astute and efficient. At Redwoods, students also interact with physicians, nurses, a dietitian, a counselor, lab technicians, insurance specialists, even a holistic practitioner. Caregivers in a rural community like this see people who have not received care in a long time, have advanced diseases, arrive with injuries better suited for an emergency department, as well as social, nutritional and mental health needs.

“It made me appreciate the services available in the San Joaquin Central Valley where I’m from,” added Maribel Manriquez, a physician assistant graduate student. “The limited access to a specialist, such as a cardiologist, oncologist, or psychiatrist, provided me a unique experience unlike other clinical rotations and I experienced the challenges to providing quality care.”

“The overall environment fostered cooperation, centered on the person receiving care and brought a cultural experience that enriches my understanding of the world,” said Christopher Jensen, who is also pursuing a master’s degree in physician assistant studies. “I realize we must balance the health care ideal with the practical when people are unable or unwilling to travel the distance required for specialized care.”

With partnerships like this one in Humboldt County, School of Nursing educators hope to continue a trend — 67 percent of UC Davis nurse practitioner and physician assistant graduates work in underserved areas. While a preceptor’s role requires additional effort initially, from a business perspective, the partnership makes sense in the long run.

“We pay recruitment firms up to $30,000 to find providers to work in our community,” Tvedt said. “If we can save that money because we’ve mentored students and developed a career opportunity they want, it’s worth the time and energy that went into precepting that student.”

“This rotation reinforced my desire to serve in a rural environment,” Jensen added.