

# COOEE



ISSUE 1

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Want to get in touch with the executive committee?

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[executivecommittee@nrhsn.org.au](mailto:executivecommittee@nrhsn.org.au)

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# From the Chair



April has been another exciting month for the National Rural Health Student Network. From meetings in Canberra, to presentations at the United Nations, to hosting some amazing cultural events; our rural health clubs and executive committee members have been busy.

Our Community and Advocacy Officer, Ashley Brown, was fortunate enough to present at the Federation of Rural Australian Medical Educators (FRAME) meeting in Canberra this month. Ashley gave members of FRAME an overview of who we are as the NRHSN, and some of the projects we are running this year. Opportunities such as these to meet with our stakeholders and give input is always important to us.

Engagement and awareness around Aboriginal and Torres Strait Islander health and culture is a big focus for our rural health clubs. This past month we had rural health clubs across the country host a variety of cultural events. ARMS, Australian National University, brought individuals across the country together for their annual Close the Gap Conference in Canberra. RHINO, James Cook University/Central Queensland University, took members to a station for a day of learning about local Aboriginal culture. This year our Indigenous Health Officer Rebecca is leading a working party that will create a guide around Aboriginal and Torres Strait Islander Engagement activities, which we will release later this year.

It was an honour to attend the 2018-19 Department of Health Budget Briefing in Canberra this past Tuesday. The strategies that are created in the Budget around rural, remote, Indigenous and mental health are positive and progressive. We are excited to see the development of the Stronger Rural Health Strategy in the years to come. As always we will continue to advocate for better health outcomes for those living and working in rural and remote areas.

Carolyn Reimann  
NRHSN Chair



# Our Response to the Federal Budget

The 2018–19 Budget addresses all three of the NRHSN’s 2018 key advocacy areas – Rural Pathways, Aboriginal and Torres Strait Islander Health and Mental Health – with the \$550 million Stronger Rural Health Strategy. This is a multifaceted model that aims to improve health care for those living and working in rural and remote Australia and reflects recommendations that the NRHSN and many of our stakeholders have put forward.

The NRHSN is pleased to see that 3,000 primary health care nurses and hundreds of allied health workers are planned for rural Australia. This initiative aligns with the NRHSN Nurse Practitioner Position paper, which advocates for strengthening the role of nursing and allied health professionals to create a stronger rural health workforce.

The Government has announced it will establish a Murray Darling Medical School Network to retain doctors in rural locations. The NRHSN supports this approach to providing end-to-end rural training for medical students, and encourages a more national approach to rural training places located outside of New South Wales and Victoria. The additional 100 Rural Generalist training positions to be created by 2021 demonstrates the Government’s commitment to the National Rural Generalist Pathway currently being developed.

The NRHSN has been a long-time advocate for improvements to the Bonded Medical Places Scheme (BMPS) and supports the positive changes to BMPS announced in the Budget. The Government’s changes will allow for a more standardised approach and increased support for those students who hold a BMPS contract. The BMPS will evolve to provide better support to students and doctors to improve retention and encourage doctors to remain practicing in rural Australia.

The NRHSN welcomes the Government’s promise to support Aboriginal and Torres Strait Islander Health Professional Organisations through priorities around mentoring, strengthening cultural safety and supporting students. This Budget commitment strongly aligns with the NRHSN Indigenous Health Position Paper published in 2017.

The NRHSN believes that the Stronger Rural Health Strategy to be delivered as part of the Government’s 2018–19 Budget is a positive step in supporting the next generation of health professionals and improving the health of rural Australians. .

# MEET THE EXECUTIVE



## 2018 NRHSN Executive Team

- Chair - Carolyn Reimann
- Vice Chair - Digby Allen
- Secretary - Amy Wenham
- Allied Health Officer - Simon Whelan
- Community and Advocacy Officer - Ashley Brown
- Indigenous Health Officer - Rebecca Fatnowna
- Medical Officer - David Trench
- Nursing and Midwifery Officer - James Tsakisiris

If you would like to get in touch with the committee, please send an email to [executivecommittee@nrhsn.org.au](mailto:executivecommittee@nrhsn.org.au)

## NRHSN Vice-Chair

Name: Digby Allen

University and Degree: University of New South Wales - Medicine

Rural Health Club: RAHMS

Digby has always held a genuine passion for rural health, having grown up in a small town of 600 people. He has undertaken placements in Birdsville, Camooweal, Burketown, Dajarra and Wagga Wagga throughout his time at the University of New South Wales/ Digby is a Rural Australian Undergraduate Medical Scholar and recently completed the John Flynn Placement Program with the Royal Flying Doctor Service in Mount Isa. He was the Medical Officer of the NRHSN last year and has been involved with his universities rural health Club, RAHMS, since 2014, most recently as the outgoing president.

Rural Health has seen Digby travel to visit high schools from Armadale to Bega, champion the need for better rural training pathways at conferences, and advocate for improved access standards for rural, remote and Indigenous Australians in Canberra.

It was in Cairns that Digby was acquainted with the amazing work of the Indigenous Diabetes Eyes and Screening Van. It was this experience and time spent with ophthalmologists in regional Australia that led Digby to fall in love with ophthalmology. He aspires to become a rural ophthalmologist and work throughout regional and remote Australia to improve access to vital eye care. Digby also aims to provide this care overseas to Australia's neighbours as a volunteer.

**Random fun facts:** Has working on a pearl farm in the Kimberly, travelled to six of the seven continents, dived with great whites and is the current Boulia Camel tagging Champion. You can find him scuba diving or drawing in his spare time.



# Executive News



## SCHOLARSHIPS!

Our NRHSN team have been working hard to create a central location for rural scholarships. Take a look and let us know if you know of any others!

### Rural Health West

Our NRHSN Chair, Carolyn Reimann, was fortunate enough to attend the Rural Health West Conference in Perth from March 25-26th. This conference gave her the opportunity to meet with medical students who are based in Western Australia. She was also able to meet with individuals to discuss placement opportunities for students in all health disciplines. It is always a great opportunity to learn about some of the challenges that are being faced in the world of rural health workforce in different states. By understanding these challenges it makes coming up with a plan or idea how to address them much easier. Hopefully through the contacts that were made at this conference we will be able to better represent our students in Western Australia.



### Federation of Rural Australian Medical Educators (FRAME)



Our Community and Advocacy Officer, Ashley, attended the Federation of Rural Australian Medical Educators (FRAME) meeting held in Canberra in April. The meeting was attended by about 80 representatives from different Rural Health Multidisciplinary Training programs and Rural Clinical Schools around Australia. Ashley was given the opportunity to present at the meeting and she discussed how Rural Health Clubs (RHCs) have transitioned to the recent changes in administrators and funding. Overall clubs have found this change positive and are benefiting from having increased and more streamlined support from their Universities.

We made some suggestions of areas to address to allow RHCs to continue improving, these were based on feedback from Rural Health Clubs.

# Executive News

## FRAME Continued



Areas brought forward and solutions:

- **Autonomy:** It is important that, as student led organisations, RHCs are in charge of deciding how to spend their funds. The role of the administrator should be to support and advise where necessary to ensure clubs meet government funding requirements. **Solution:** Clubs should be the core business team for the running of their organisation. The Administrator should act as a support network and provide assistance when required.

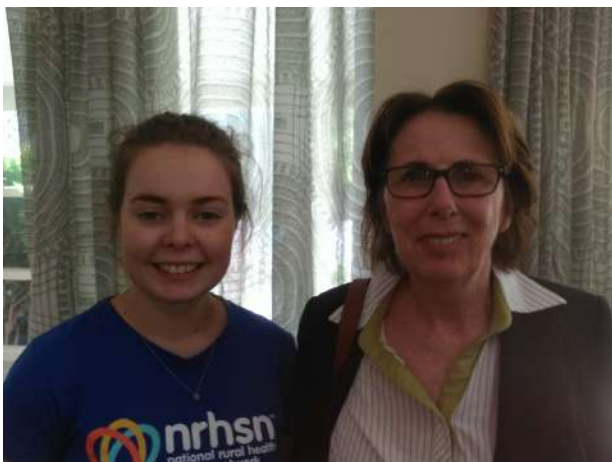
**-Continuity:** Universities have to return unspent Government funds at the end of each funding cycle, and with most RHCs now falling under a University this principle has been applied to them. This is a new system for most clubs and makes their day-to-day functioning difficult. Many clubs rely on being able to have savings in order to run bigger events, and also to have funds to fall back on if something unexpected were to happen. **Solution:** All efforts should be made to allow clubs to roll over all unspent funds from year to year. If this is not possible perhaps a percentage of Government funds can be rolled over.

**-Access:** Most clubs now have their funds held by their Administrator. Clubs need to be able to access their funds in a timely manner. We need to remember that students usually cannot afford to pay large expenses for events and then wait weeks to be reimbursed. It is also important that invoices are processed in a timely manner, particularly as our RHCs try to work with small local businesses wherever possible and often these businesses also struggle to wait weeks for invoice payment. **Solution:** Expedite reimbursement and invoice payments. Giving committee members funds in advance for big purchases (with



appropriate reconciliation afterwards), with clubs being able to access this within two weeks of an upcoming purchase. Continuing good relationships between finance and the Club and ensuring the Club has a main contact person helps to ensure timely replies and better understanding of the finance systems.

It was a fantastic opportunity to talk to the people who are providing so much support to our RHCs and the NRHSN really appreciated the opportunity to attend!





# STUDENT EXPERIENCE

Name: Emily Neville

University: University of Notre Dame

Rural Health Club: ROUNDS



I recently attended the United Nations 62nd Commission on the Status of Women in New York. This year the priority theme was challenges and opportunities in achieving gender equality and the empowerment of rural women and girls and I was fortunate to be able to present my poster 'Who's Your Token Modern Rural Woman'.

It is an interactive poster with the purpose of highlighting the diversity of Australian modern rural women and the common barriers to health care faced. I took inspiration my rural family, friends and colleagues and the hardships that we have faced throughout our lives such as drought, farming accidents and mental illness.

Rural women have traditionally been stereotyped as one type of woman, this poster highlights that the modern rural woman faces any number and combination of barriers to health care. She may be Indigenous, non-Indigenous, a refugee, live in the local community or on a farm. No matter her circumstances she cares about the future of healthcare for her community, family and herself.

With the help of my friend and graphic designer Joy Li I have put together a character quiz that raises awareness in a light hearted Australian way.



# WHO'S YOUR TOKEN MODERN RURAL WOMAN?

## BARRIERS TO HEALTH CARE

Start Here



### JILLAROO

Female novice on a cattle or sheep station

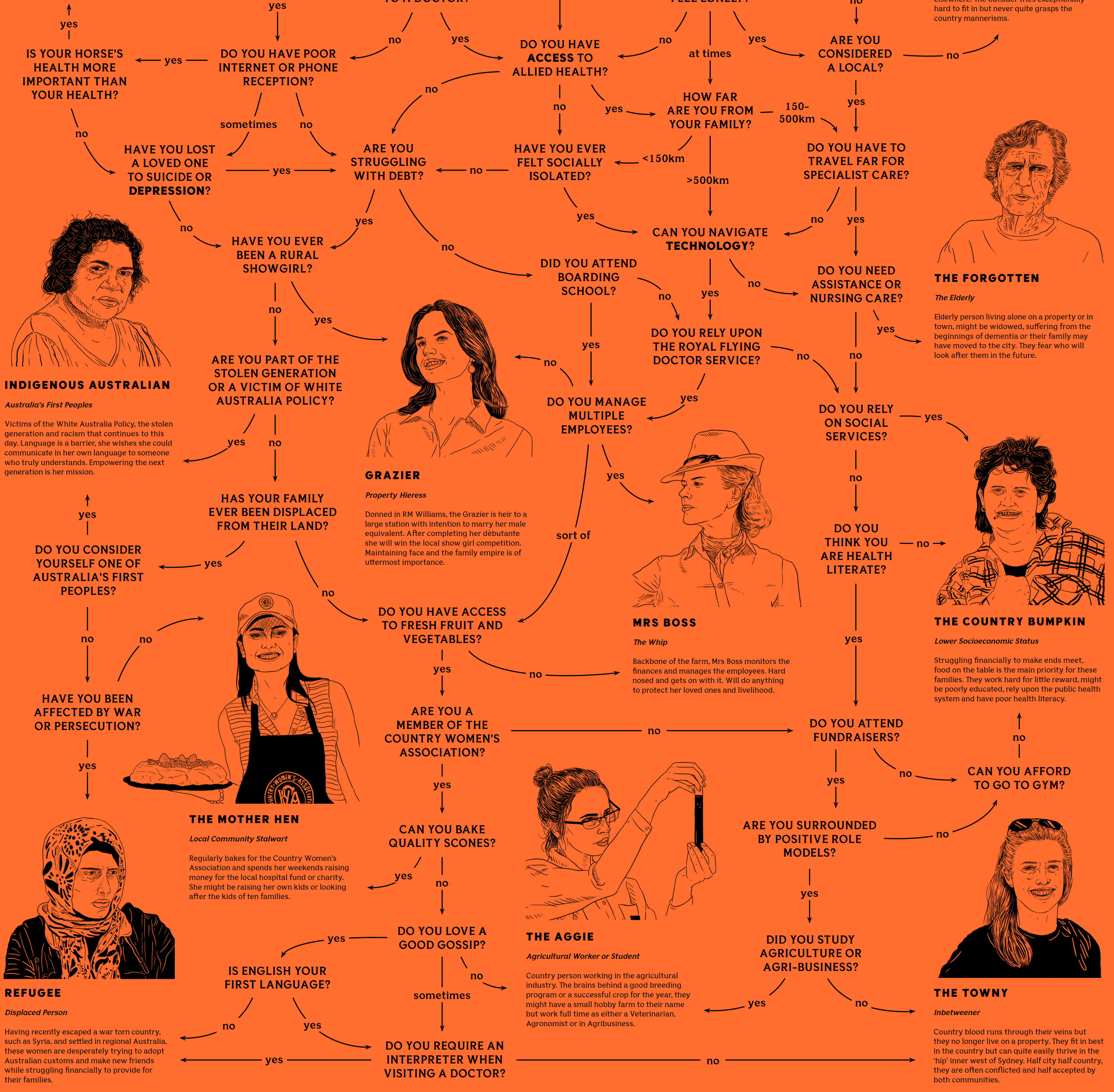
Born and bred on a large farm these women travel far and wide mustering, tending to animals and roughing it in general. They live and breathe the outback and have no dramas rolling a swag.



### THE OUTSIDER

City Dweller

City slicker, entertains the thought of a life in the country. Temporarily working in town and would love to move but has family ties elsewhere. The outsider tries exceptionally hard to fit in but never quite grasps the country mannerisms.



## THE MODERN RURAL WOMAN

Health care barriers that rural women and girls face

The Modern Rural Woman faces any number and combination of barriers to health care. She may be Indigenous, non-Indigenous, a refugee, live in the local community or on a farm. No matter her circumstances she cares about the future of healthcare for her community, family and herself.

This poster is a collaboration between Emily Neville and Joy Li, supported by the University of Notre Dame Australia. Printed by Darkstar Digital.

AUTHOR  
Emily Neville  
School of Medicine  
UNDA

DESIGN & ILLUSTRATION  
Joy Li  
joyli.com.au



THE UNIVERSITY OF NOTRE DAME AUSTRALIA



# RURAL HEALTH CLUB HIGHLIGHTS

## ARMS

### ARMS Close the Gap Conference 2018

The 2018 Close the Gap Conference was an action packed weekend full of speakers, workshops, dancing and cultural walks. The conference brought students from across ACT and NSW to the ANU to discuss Indigenous health.

Day one of the conference was packed full of speakers. Dr Danielle Dries, the creator of the Close the Gap Conference was involved not only as the MC of the event but also shared her own experience as a speaker. She

shared her family history, as well as the lessons she has learnt from four unique Aboriginal cultures she has experienced through her work.

In the afternoon Don Palmer, the CEO of Malpa, shared with the conference his unique program for engaging with Indigenous students in healthcare - the Young Doctor's program. He demonstrated the power of community engagement, working with elders and presenting health in a fun way to empower young Indigenous children.



The bush dance is always a particular highlight of the conference. The Polka Pigs returned for another great year of do-si-doing, Hokey Pokey and a new favourite: the Gang-gang style (named after the cockatoo but seemed eerily like a famous K-pop dance).

The workshop was a highlight of the second day. Run by Dani and Nicola from AIHA, the workshop focused on understanding our own culture and how we can identify our own biases. This involved

reflecting on our values and how these may differ from the person next to us, and learning how to recognise and address discomfort in ourselves to ensure we practice in a culturally safe manner.



Thank you to all the delegates who made the weekend such a success!

# RURAL HEALTH CLUB HIGHLIGHTS

## RHINO



Club RHINO has been in full swing this year with events happening across all three of our sites!

Our committee decided to combine our love for rural health and footy for the night and attend the Cowboys vs Panthers Game on March 29th at Smiles Stadium here in Townsville! Even our Mascot was able to take in the game!

Club RHINO was able to secure 30 tickets for our committee members and general members to attend this event at a heavily subsidized cost. This was an amazing chance for our general committee members to get to know our exec and committee and let us know what they would like from the club for the 2018 year!

It was a hard fought battle but our team ending up losing the game. Regardless, we all had a great time supporting the boys for a night of footy! Hooroo!



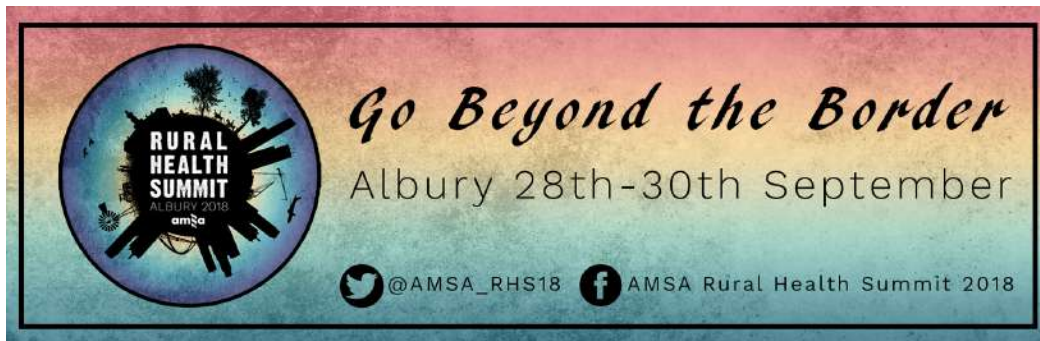


# FROM THE STAKEHOLDERS

## AMSA

Get ready to go beyond the border! Come and join us in the wonderful town of Albury for AMSA Rural Health's national event – the 2018 Rural Health Summit (RHS). This spectacular event is running from the 28–30th September.

Over the duration of the weekend there will be phenomenal speakers, engaging workshops, exhilarating skills sessions, thought-provoking panel discussions and spectacular social events. This national event is uniquely designed to bring medical students from across the country together to share in a passion for rural health.



## SARRAH

SARRAH's national conference from 12 – 14 September 2018 is taking place at the Darwin Convention Centre. Concession and student members receive special registration rates!

SARRAH is inviting abstracts that relate to the theme of "Changing Landscapes, Changing Lives" in contexts across workforce; training and professional development; needs of specific consumers or consumer groups; service delivery models; policy development, implementation and impact; clinical practices and service delivery; health economics and financing; community engagement; rural generalism; interprofessional practice, training and education; cross cultural service provision; aboriginal health; technology and digital health system.

To submit an abstract, sponsor or attend the SARRAH Conference in Darwin from 12–14 September 2018, click below: [https://www.sarra.org.au/2018\\_SARRAH\\_Conference](https://www.sarra.org.au/2018_SARRAH_Conference)



# CRANAplus

Links Mentoring Program – for Rural and Remote Health Professionals

# LINKS

ACCELERATES **L**EARNING  
ABILITY TO **I**NTEGRATE CLINICAL SKILLS  
OPPORTUNITIES FOR **N**ETWORKS  
ENHANCE **K**NOWLEDGE BASE  
RECEIVE PROFESSIONAL **S**UPPORT

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Improving  
remote health



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Links Mentoring Program – for Rural and Remote Health Professionals

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# Remote Emergency Care - Students



**Are you prepared for a critically ill or injured patient?**

**Would you like to develop a systematic approach to trauma assessment and prioritising care?**

**Are you required to stabilise a patient before transporting?**

## The CRANAplus Remote Emergency Care (REC) course is for you

The Remote Emergency Care (REC) course is designed to enable the health workforce to develop the knowledge and skills necessary to respond with confidence to emergency situations and to deliver safe, evidence based quality care in the remote and isolated setting.

The REC course is designed to meet the learning needs of the remote and isolated health workforce (Nurses, Midwives, Aboriginal & Torres Strait Islander Health Workers/ Practitioners, Paramedics and Medical Officers) who may be required to provide emergency care to the critically ill or injured patient.

### Cost

CRANAplus Members \$700

Non-members \$800

Cost to Rural Health Club Members \$160 which is to be paid to ROUSTAH

### Course Dates and Locations

University of SA, City East Campus North Terrace  
Adelaide, 7-9 Dec 2018

### Course Delivery

The REC course consists of the following components:

- Online pre-course learning and assessments that must be completed one week before the course;
- Remote Emergency Care Manual and assessment - approx. 12 hours of study & Basic Life Support readings and assessment - approx. 1 hour of study
- Attendance at a two and a half day face to face workshop consisting of lectures, skill stations and practical based scenarios.

### Registration

Registrations by application and payment to:  
emma.milanese@unisa.edu.au or (08) 8302 1186

This is a private course for 3rd year nursing students and 5th year medical students and is supported by the National Rural Student Network

Applications close 30 September 2018.

## The Remote Emergency Care course is endorsed by:



For more information on this course, call us on 08 8408 8200, email [courses@crana.org.au](mailto:courses@crana.org.au) or visit our website: [crana.org.au/education](http://crana.org.au/education)