
COOEE!

July 2020

www.nrhsn.org.au

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the future of rural health



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A big welcome to the
new National Rural
Health Commissioner
Associate Professor
Ruth Stewart



From our Chair

On behalf of the National Rural Health Student Network, we would like to warmly welcome Associate Professor Ruth Stewart as the new National Rural Health Commissioner.

Associate Professor Stewart has had a distinguished career in rural health, both as a practitioner and an academic. She most recently has been working as an Associate

Professor of Rural Medicine, Director of Rural Clinical Training and Support at James Cook University. She lives and works on Thursday Island as a Senior Medical Officer with obstetric credentialing. She has also recently been working as Vice Chair of the Torres and Cape York Hospital and Health Service.

Before 2012, Associate Professor Stewart worked for 22 years as a procedural GP in South West Victoria and was on the Australian College of Rural and Remote Medicine's (ACRRM) Board from 2002 to 2012 as director for Women in Rural Practice, Victorian Director and as Vice President.

She has represented ACRRM on many committees and has exceptional research experience in rural maternity services, rural health and rural medical education.

We are very excited to have the expertise of Associate Professor Stewart and her passion for rural health and rural communities in this role. The NRHSN already has an existing relationship with Associate Professor Stewart and we are extremely excited to continue to work with her in her role as the National Rural Health Commissioner, propelling the student voice to a National level.

Harry Jude – NRHSN Chair



Associate Professor Stewart and NRHSN Chair Harry Jude in Wagga Wagga - July 2020

2020 RACGP AWARDS

RACGP Rural Awards

Rural Medical Student Bursary Award



Are you a medical student with an interest in a career in rural or remote general practice?

The RACGP Rural Medical Student Bursary Award is awarded to a medical student who is a member of a rural health students' club at an Australian university who submits the best essay (maximum 1200 words) on the topic: ***The role of rural GPs in managing disasters such as pandemics, bushfires or floods.***

Each essay nomination is judged on the following criteria:

- demonstrated understanding of rural general practice;
- demonstrated evidence of innovative thinking;
- interest in a career in rural general practice;
- a written statement outlining the ways in which the bursary would support professional development.

The Medical Student Bursary award includes:

- registration to attend the College's annual conference, GP20
- a \$500 cash prize
- presentation of a commemorative trophy at the RACGP Rural annual member event.

Nominations are open nationally across all states and territories and close on 14 August 2020. [Visit the RACGP website](#) for more information and to nominate.



Australian Government

COVIDSafe app

Let's work together to stop the spread of COVID-19

COVIDSafe helps you and all of our communities. Assist health officials to quickly understand and tackle the spread of Coronavirus (COVID-19).





NSW RURAL DOCTORS NETWORK
CELEBRATING 30 YEARS

RDN Cadetships

Rural Resident Medical Officer Cadetship and Rural Resident Medical Officer Cadetship for Indigenous Students

RDN, on behalf of the NSW Ministry of Health, offers cadetships to students interested in a medical career in rural NSW.

Cadets receive a scholarship of \$30,000 during their medical degree and in return, commit to spending two years of their hospital training in an eligible rural NSW hospital.

Your cadetship includes a grant to help with relocation to a rural town and subsidies to attend RDN conferences as well as the annual RDN cadet weekend. You will also be mentored and supported by RDN and its vast network of experienced rural health professionals.

Applications **close 5pm (AEST) Monday 3rd August 2020**

[Eligibility criteria and more information](#)





**2021
NRHSN
Executive Committee**

**Applications open
27 July - 7 Aug**

**VICE CHAIR
SECRETARY
COMMUNITY & ADVOCACY OFFICER
NURSING & MIDWIFERY OFFICER
INDIGENOUS HEALTH OFFICER
MEDICAL OFFICER
ALLIED HEALTH OFFICER**

Voting opens 11 - 17 Aug



STATEMENT

22 July 2020



Black Lives Matter

On 25 May 2020, an African-American man, George Floyd died as a result of police brutality. This tragic event has seen a global outpour of support for the Black Lives Matter movement, which first started in 2013. This movement calls attention to the vast social, economic and political inequalities that exist not only in America but for many people of colour throughout the world. Black Lives Matter is relevant in the Australian context with a shameful account of deaths in custodyⁱ. Aboriginal and Torres Strait Islander People battle with interpersonal, institutional, systemic and social racism, perpetuating and exacerbating poor health and socioeconomic outcomes. These inequalities extend to the Australian Justice system, where Indigenous Australians experience some of the highest incarceration rates globally. Indigenous people are grossly overrepresented in the criminal justice system, often being placed in custody for trivial offences, accounting for 29 per cent of Australia's prison population and 48 per cent of juveniles in custody and yet only 3 per cent of the total populationⁱⁱ.

Health and social determinants, most significantly low levels of educational attainment and low rates of employment further drive up incarceration ratesⁱⁱⁱ. Health also plays a major role with an Australian study finding that 94 per cent of male Indigenous inmates in an NT correctional facility had hearing loss which likely impacted their involvement in the justice system^{iv}. Poor health, educational attainment, employment, low income, poor access to safe water and nutrition and incarceration revolves in this cycle of poor socioeconomic status and disadvantage. The Black Lives Matter movement highlights this humanitarian crisis and calls for action^v.

Interpersonal racism can be stimulated by people forming opinions based on limited experiences or information from the media. A study by Public Health Advocacy Institute Western Australia (PHAIWA) found that 74 per cent of media articles about Indigenous Australian health are negative. When stereotypes are consistently reinforced through the media portraying Indigenous Australians as welfare dependants, violent, drunks, drug addicts and child abusers, this further fuels racist attitudes within the population. Internalised stigma is experienced as shame and a reduced sense of self-worth acting as barrier to integrating within mainstream society and advancing their socioeconomic position^{vi}. This social disadvantage is a product of generational trauma including physical, psychological and financial, which is further compounded by racism perpetuating this cycle of disadvantage.

In 2007, the Council of Australian Governments (COAG) set measurable targets to track and assess developments in the health and wellbeing of Aboriginal and Torres Strait Islanders. At the 10-year review in February 2018 it was determined that the Australian government is not meeting these targets and without further reform will likely not achieve them by 2030^{vii}. The targets aim to enhance educational attainment, reduce the employment gap, reduce child mortality and close the life expectancy gap. Bridging this gap and reducing this social disadvantage is best managed through a strength-based approach, enhancing the capacity of communities and Indigenous Australians.



STATEMENT

22 July 2020

Fortunately, there are many organisations out there determined to close the social and health gap between Indigenous and non-Indigenous Australians through equitable distribution of information. Increasing awareness and distribution of accurate information regarding health and social inequalities may decrease the racism that currently in our society. There are many resources now available to provide relevant information for both the public and health professionals about Indigenous health and optimising service provision.

There are student-based resources, including webinars provided by the NRHSN and rural health clubs around Australia. There are many government organisations including the Australian Institute of Health Welfare (AIHW), and state health services and non-government organisations including NSW Rural Doctors Network (RDN), primary health networks and Healthinfonet who have great health resources to improve health literacy and health outcomes. Additionally, organisations including Indigenous Allied Health Australia (IAHA) and the Australian Indigenous Doctors Association (AIDA) provide resources for health professionals and the public.

We call on the Australian Government to make the reforms to address the ongoing systemic and institutionalised racism that plagues our country and in extension, the inequity of justice. We call on the Australian Government to hear the voices of our communities, making positive change through community consultation. The NRHSN strives for health equity and advocates for the Black Lives Matter movement to encourage our national government to prioritise justice for our Indigenous Australians.

[ENDS]

*The **National Rural Health Student Network (NRHSN)** is Australia's only multi-disciplinary student health network, bringing together people studying medicine, nursing and allied health, encouraging them to pursue rural health careers. With more than 9,000 members who belong to 29 rural health clubs at universities throughout the nation, the NRHSN provides a voice for students who are passionate about improving health outcomes for rural and remote Australians.*

References

- ⁱ Indigenous Deaths in Custody: Chapter 6 Police Practices. In: Commissioner TootAaTSISJ, editor.: Australian Human Rights Commission; 1996.
- ⁱⁱ Korff. Aboriginal prison rates 2020 [Available from: <https://www.creativespirits.info/aboriginalculture/law/aboriginal-prison-rates>.
- ⁱⁱⁱ Shepherd SM, Spivak B, Ashford LJ, Williams I, Trounson J, Paradies Y. Closing the (incarceration) gap: assessing the socio-economic and clinical indicators of Indigenous males by lifetime incarceration status. *BMC Public Health*. 2020;20(1):710.
- ^{iv} Troy Vanderpoll DH. Massive prevalence of hearing loss among Aboriginal inmates in the Northern Territory. *Indigenous Law Bulletin*. 2012;7(28).
- ^v Black Lives Matter 2020 [Available from: <https://blacklivesmatter.com/about/>.
- ^{vi} Stoneham M. Bad news: negative Indigenous health coverage reinforces stigma. 2014.
- ^{vii} Holland C. Close the Gap Strategy and Recommendations for Reset- 10 Year Review (2018) The Close the Gap Campaign Steering Committee in February 2018; 2018.



Life after study in Australia's spectacular NT

If you're in your final year of study, it could be a good time to start thinking about your next step.

Making the transition from student to professional can feel daunting, but it's also an exciting chance for you to embark on something new.

Many young health graduates, like you, take up jobs in the Northern Territory (NT) to enhance their skills and further their careers.

The NT exposes primary health care professionals to many unique, chronic, and tropical diseases, including those in Indigenous and remote health. The challenges are diverse, and the opportunities are immense.

To support up-and-coming primary health care professionals, the Rural Workforce Agency NT (RWA NT) offers two grants to assist those considering a move to the NT and wanting to build their careers.

The first grant is a health professional relocation grant. It supports health professionals wanting to work in primary health care move to the NT, or within the NT to a remote area, through an allocation of funding based on an individual's circumstances.

The second grant is a site visit and orientation grant that includes up to \$2,000 of financial support to enable health professionals to visit remote clinics in the NT so they can experience the location, health services, and lifestyle. It also offers recipients, who are relocating to a regional or remote area of the NT, clinical and cultural orientation.

Finally, it's not all work, and no play, in the NT. The NT is home to tropical landscapes and rocky gorges, filled with wildlife and birdlife, waiting to be explored. Camping, fishing, and four-wheel driving are a few of the activities that will keep you busy! Further south lies the mesmerising red centre desert with weathered mountain ranges and some of Australia's most sacred Aboriginal sites.

For more information

Please visit www.ntphn.org.au/living-working-in-the-nt or email recruitment@ntphn.org.au

Update from our Rural Health Clubs and Rural Workforce Agencies





MURHC held our online Indigenous engagement event on the 14th of July at 5:30pm to 7:30pm. Despite the zoom fatigue many of us were experiencing, we had an impressive turnout of 22 members.



Our event aimed to promote awareness of Indigenous Australian culture and to teach our members about traditional Australian weaving. We had the privilege of learning Indigenous Australian weaving from Akeisha Kelly, who is a primary school teacher and an Aboriginal Education Officer. We also heard from Tyrone Kelly and John Hunter (an Indigenous academic in the FMHS at MQ). They reminded us of the beauty within the Indigenous Australian culture and the importance of listening to others' stories.

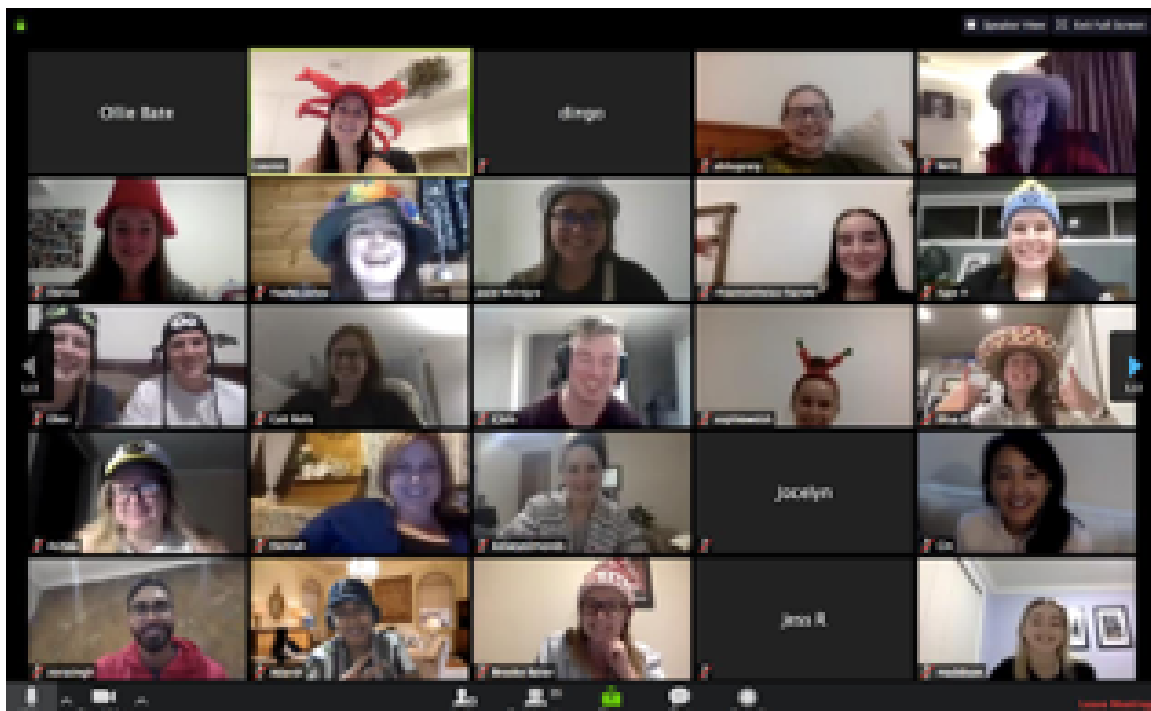
It was an informative evening and everyone's bracelets looked beautiful. We look forward to hosting more events like this in the future.





Despite the limitations on hosting physical events, we have been able to modify and create brand new online events over the past few months. None of this would have been possible without the continued engagement from our members and we're incredibly grateful for the immense support we have continued to see during this time!

On the 29th April, BREATHHE ran an Allied Health Trivia Night via zoom, and to add even more fun to the evening, participants were encouraged to wear a crazy hat! Discussion of the many creative head pieces served as a great icebreaker before the Kahoot trivia rounds commenced, including 'Hats', 'Health', 'Aussie Classic Movies', 'Australian Geography' and 'Music'. There was also a highly competitive 'Household Challenge' during intermission in which participants needed to find each household item on the checklist as quickly as possible (including the more recently elusive roll of toilet paper). The night concluded with multiple voucher prizes being awarded. Overall, the 50+ participants valued connecting with other likeminded health students during isolation and gave very positive event feedback!



In May, we hosted a socially-distanced movie night for our members using ZOOM and Netflix Party. We showed *The Sapphires*, an Australian film, which highlights parts of our Indigenous history with links to rural Australia. We ran a trivia competition throughout the movie, helping our members to stay connected and entertained while in quarantine.

BREAATHHE continued the tradition of our annual Medicine Rural Clinical Schools Information Evening giving pre-clinical medical students the opportunity to hear from 4th and 5th year students regarding their experience of the University of Newcastle's rural clinical schools - Tamworth, Armidale and Taree. This event helps current second year students to inform their clinical school preferences and promotes the real experiences of a rural placement. We had great feedback with over 80 students attending and we're keen to continue this event again in future years.

Later in June, BREAATHHE hosted an Indigenous Health Night with Nicki Turner, proud Kamilaroi woman, Indigenous Allied Health Australia Chairperson and Community Nutritionist, for a conversation about Indigenous Health and cultural competency. We were honoured to have Nicki, a leader in Indigenous health promotion spend this time with us! Over 40 people attended and engaged in an incredibly valuable evening to learn more about how to engage with Aboriginal and Torres Strait Islander health.

With COVID-19 restrictions in place, BREAATHHE successfully completed a Rural High School Visit - virtually! Our President, Lauren, and Executive Councillor for Allied Health, Josie, ran an online RHSV to Frensham School in the Southern Highlands. This provided an amazing opportunity for students to ask questions about university in a difficult time when many other information opportunities have been postponed.

BREAATHHE has also been fostering an active community of members to participate in the Royal Flying Doctor Service's Bondi to Bush charity event. This has been an amazing effort and success by our members, and together, we have been able to raise a massive \$6,500 for the Royal Flying Doctor Service!

Thank you to our amazing members who have taken up this challenge and keep up the physical activity during a time when we can't all be together! We are stunned and extremely proud of the fundraising efforts BREAATHHE members have achieved. Due to its success, we hope to continue more events like this in the future. If you'd like to get involved from anywhere around Australia, join our Facebook page at BREAATHHE Active!

We look forward to the rest of the year and we're excited to see you all at our future events!

- the BREAATHHE team



An update from Health Workforce Queensland

One of the benefits of COVID-19 has been the establishment of monthly virtual meetings to connect and actively engage with Queensland's four Rural Health Clubs. Facilitated by Health Workforce Queensland, the online meetings have been a great way to share information, problem-solve and to identify opportunities to work collaboratively.

We also see virtual RHC meetings playing an important role in making the transition between the 2020 Executive Committees and incoming 2021 Committee members more streamlined. This is especially relevant as Health Workforce Queensland is about to launch several new initiatives that will enhance health student rural experience and strengthen our relationship with the Rural Health Clubs.

We have also enjoyed being part of the Hope4Health Rural Careers Evening 2020 and the NRHSN Rural Health Supper Series and acknowledge the effort the Rural Health Clubs and student bodies have made to keep students connected to rural and remote Queensland.



Health Workforce Queensland



BUSH HEALTH STUDENT SUPPORT CONTINUES THROUGH COVID-19

A record number of health science students have been supported by Australia's hard-working University Departments of Rural Health (UDRHs), according to latest statistics.

As many Rural Health Club members would know, UDRHs offer placements to enable university students from a wide range of health disciplines to experience the many career – and lifestyle – opportunities in rural and remote communities. Their programs offer a wide range of activities, including service-learning in which students deliver clinical care under supervision in student led clinics or in an assisting role. Students are also offered cross-cultural, interprofessional and simulation training.

The UDRH national peak body, the Australian Rural Health Education Network (ARHEN), represents the 16 UDRHs in all states and the NT to achieve better health through a skilled and effective workforce for rural and remote Australia. Thousands of students every year take advantage of the many opportunities offered by UDRHs to get clinical experience outside capital cities.

According to ARHEN, 2018 statistics showed that almost 14,000 nursing, midwifery and allied health students took part in placement programs during that year. The figure was made up of almost 8,000 nursing and midwifery students and just under 6,000 allied health students. And over the past decade, along with an increase in the number of UDRHs and federal government support, total student numbers have increased by an impressive figure of around 400%.

While COVID-19 has since affected many student placements, UDRHs are finding new and innovative ways to keep offering these vital opportunities so that rural and remote communities can get the health care they need. A stocktake undertaken a few months after COVID-19 began to affect universities and health providers has shown that UDRHs have been adapting quickly, although a number of students did have to end placements early because of travel restrictions and other issues.

In some centres placements were completed 'virtually', with students participating in telehealth teaching and learning. In others, placements were shorter with an emphasis on final year students to allow them to graduate. Most UDRHs are expecting that semester 2 in 2020 and semester 1 in 2021 will have an increased number of students competing for places. Each UDRH is working according to local conditions and requirements to offer as many placements, with the safety of students and communities a priority of UDRHs.

High quality UDRH placements in diverse disciplines such as physiotherapy, radiation science, occupational therapy, speech pathology, social work, pharmacy, dentistry, medical imaging and dietetics mean students are well placed to work in rural and remote locations once they graduate. UDRHs also undertake rural health research and enhance the Aboriginal and Torres Strait Islander workforce.

Janine Ramsay and Jane Smith, ARHEN – www.arhen.org.au



Rural Health Pro

POWERED BY RDN

IS LIVE!

Join more than 1,000 members who are using Rural Health Pro to access information and share ideas and support!

Rural Health Pro is a network of healthcare professionals and organisations who care about keeping rural communities healthy. Rural Health Pro connects healthcare professionals and organisations to share information, support, career opportunities, training resources, funding opportunities and events.

Those we support

- ✓ Doctors
- ✓ Nurses
- ✓ Midwives
- ✓ Paramedics
- ✓ Pharmacists
- ✓ Carers
- ✓ Dentists
- ✓ Practice Managers
- ✓ Aboriginal Health Workers
- ✓ Allied health professionals
- ✓ Students
- ✓ Locums
- ✓ Outreach workers
- ✓ Health administrators

Join the active student discussion group or network with practising health professionals

[Join Rural Health Pro](#)

Friday

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EVERY FRIDAY

A showcase of Rural Health Clubs around Australia

ON [FACEBOOK](#) AND [INSTAGRAM](#)

Feature

Rural Health Supper Series



Episode 1: Contributing to Community

During the first session - Contributing to Community - we were joined by Sarah Brown, Chief Executive Officer of Purple House. Sarah has worked alongside the Indigenous Directors to run Purple House since its inception more than sixteen years ago. Purple House provides on Country dialysis services to 18 remote Indigenous communities in Central Australia. Sarah shared her journey from starting as a remote area nurse, fundraising to start Purple House by selling Indigenous artwork and expanding to meet the needs of many communities in Central Australia - as well as receiving the honour of Member of the Order of Australia (AM).

We were also joined by Nic Marchesi, the Co-Founder and Managing Director of Orange Sky - the world's first free mobile laundry service for people experiencing homelessness. Nic talked about the innovation and challenges of fitting a washing machine and dryer in the back of a van in one part of Brisbane to providing the services to 31 communities including the most remote northern communities in Australia - and the important conversations and connections that have come about as a result.

Across June and July, the NRHSN hosted the Rural Health Supper Series a three-part webinar series exploring the concept of community and taking a closer look at those parts of rural health that go beyond the degrees we study or the part of Australia we hail from.

Episode 2: Supporting Communities

In our second session – Supporting Communities – we were joined by Tanya Lehmann, who is the Manager of Organisational Development at Rural Support Service. In this role she supports the six regional Local Health Networks in South Australia in leadership development, has influenced organisational change and established a positive workplace culture. Tanya discussed her journey as a country girl by birth and choice, studying to become a dietician and how a whole-of-system, collaborative approach is needed to transform our national health system to one that is responsive to the needs of all Australians.

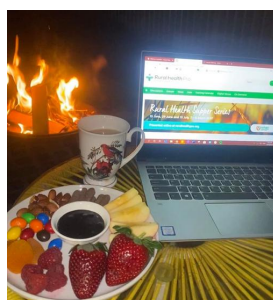
In this instalment, we were also joined by Nicole Turner, one of very few qualified Aboriginal Community Nutritionists in Australia, New South Wales (NSW) Rural Doctor's Network's Aboriginal Workforce Engagement Manager and current IAHA Chairperson. Nicki discussed Indigenous health, cultural competencies and confidence, self-reflective practices and explored where our attitudes and beliefs come from.

Episode 3: Bringing it Home

Our final evening 'Bringing it home' guests were both Fellows of the Churchill Scholarship, Dr Catherine Cosgrave and Dr Shannon Nott. Dr Cath Cosgrave, a social scientist with qualitative research skills has nationally and internationally recognised expertise in rural health workforce retention. Cath shared her research from Australia and Canada of where do allied health professionals' practice rurally and what makes them stay. We were also joined by Dr Shannon Nott, the Rural Director of Medical Services for Western NSW Local Health District. Through this role, he oversees 35 rural and remote hospitals and multipurpose services across western NSW. Shannon was previously Co-Chair of NRHSN twice and shared leadership advice, how to become a rural health advocates, and how as student's we can be involved in and effect change.

Across the evening's we had a Supper Series Setup challenge for participants to share their virtual campfire for watching the series. We were proud to award Josie McIntyre a \$150 R.M.Williams voucher and Abbie Wilesmith a \$200 Akubra voucher for their entries. There were so many great entries and we loved seeing participants from all over Australia.

The recordings are available to watch for free on [Rural Health Pro](#).





In our first episode of the Rural Health Supper Series we heard from Orange Sky's Nic Marchesi. We were so inspired by his story, so the NRHSN is participating in the Sudsy Challenge!

What's the Challenge?

The Sudsy Challenge is about wearing the same clothes for three days, choosing your conversations and raising funds and awareness to support Orange Sky. By taking on the challenge, you'll be helping to positively connect the 1 in 200 Australians experiencing homelessness through free laundry, warm showers and genuine conversation. This September, challenge yourself to keep your kit on, start conversations and help make a difference!

Join the NRHSN team today!



[CLICK HERE](#)



Australian College of Rural & Remote Medicine

WORLD LEADERS IN RURAL PRACTICE



Building a national Rural Generalist pathway

Work continues apace on building the national Rural Generalist (RG) pathway as the COVID-19 pandemic demonstrates how vital RGs are to rural Australia.

An RG workforce puts doctors in our towns with a broad rural practice skillset so they can provide general practice care and support the local hospital services in critical areas such as obstetrics or anaesthetics.

A key part of these developments is the establishment or expansion in each state and territory of their RG programs. These aim to facilitate a supported and structured passage from medical school through to Fellowship.

By 2021, all states and territories should at minimum have a high-level Governance body dedicated to overseeing RG training throughout their health services, of which ACRRM will be a member of. They should also have RG Coordination Units which will support RG trainees, particularly in their prevocational years. The College is actively involved in the development of these programs and structures and looks very much forward to being part of their ongoing operations to give registrars smooth passage through to ACRRM Fellowship and RG careers.



See more, do more and be more as an ACRRM Rural Generalist

So, you've decided to pursue a career in rural generalism? As the only College in Australia dedicated to rural and remote medicine, ACRRM offers tailored services and support so that you can see more, do more, and be more throughout your career as a Rural Generalist (RG).

Kick-start your learning with RG Foundation Skills

Get a taste for education with ACRRM by enrolling in the [RG Foundation Skills](#) series. Created for medical students and rural doctors, the RG series consist of five online modules designed to prepare you for working in rural and remote locations.

RG Foundation Skills series is made up of:

1. [Rural and Remote Context](#)
2. [Self-care and wellbeing](#)
3. [Aboriginal and Torres Strait Islander Health](#)
4. [Population Health](#)
5. [Digital Health](#)

Taking approximately 6 hours to complete the full suite of modules, the RG series is a fantastic opportunity for you to invest in your future career.

The series will introduce you to various digital platforms available to rural doctors and familiarise you with frameworks that have influenced the current health status of Aboriginal and Torres Strait Islander people. From noting the key points of difference between working in a rural versus urban environment, to identifying triggers for workplace stress and burnout experienced by rural doctors, the RG series has your foundational knowledge covered.

ACRRM student members receive access to the RG Foundational Skills series and many more ACRRM [online courses](#) for free. For a one-off payment of \$30, your student membership will cover the duration of your undergraduate or postgraduate degree. [Join today](#) at acrrm.org.au/membership.

Throughout the COVID-19 crisis, the College remains dedicated to allowing members to continue to meet training and assessment requirements virtually. Find out more about the steps we are taking to support our members by visiting our dedicated [COVID-19 resource pages](#).



MEDIA STATEMENT - Thursday 23 July 2020

ACRRM welcomes further investment in Rural Generalist training

The Australian College of Rural and Remote Medicine (ACRRM) welcomes the announcement the government has committed further funding to support Rural Generalist training as part of its commitment to deliver better health outcomes for rural communities.

Regional Health Minister Mark Coulton today committed \$27 million to establish Rural Generalist Coordination Units (RGCUs) across all states and territories as part of the National Rural Generalist Training program.

ACRRM President Dr Ewen McPhee says the College played a key role in the RGPU's establishment and will continue to be part of their governance structure ensuring they focus on high-quality Rural Generalist (RG) training.

"We welcome all investment in a RG workforce and, as the body responsible for setting the standards and national training program for the RG profession, we expect the RGCUs to work closely with the College to deliver the comprehensive training our registrars expect.

"For rural and remote communities to have access to the healthcare they deserve, they need doctors who are trained across hospital and general practice settings to attain the skills to provide primary care alongside specialties such as emergency medicine, obstetrics, anaesthetics and mental health care," Dr McPhee says. "The RGCUs are part of the National Rural Generalist Pathway (NRGP) which is being driven by National Rural Health Commissioner Associate Professor Ruth Stewart.

"The NRG is designed to attract more doctors to rural and remote areas to improve patient access, reduce hospital admissions and local service reliance, and minimise the need to travel for services." It aligns with the College vision of having the right doctors in the right places delivering high quality healthcare to rural and remote communities.

"When fully functional, these RGCUs will also enable ACRRM junior doctors and registrars to move easily between the hospital system, which is mostly run by state health services, and community-based clinics and services.

"While we still have more to learn on their operational strategies, we are looking forward to continuing to be a part of the RGPU implementation process and developing a purpose-built training pipeline," Dr McPhee says

ENDS



nrhsnTM
national rural health
student network

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Contact NRHSN

PO Box 1111, Mascot NSW Australia



info@nrhsn.org.au



02 8337 8100

The NRHSN is an initiative of the Australian Government Department of Health administered as a consortium by the Rural Workforce Agencies.

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