National Rural Health Student Network (NRHSN) 2024 Business Plan

The Future of Rural Health!

About Us

The National Rural Health Student Network (NRHSN)

The National Rural Health Student Network (NRHSN) represents the future of rural health in Australia. It has more than 11,000 members who belong to 28 university Rural Health Clubs from all states and territories.

The NRHSN is Australia's only multi-disciplinary student health network, bringing together those studying medicine, nursing, paramedicine, midwifery and allied health, and encouraging them to pursue rural health careers.

The NRHSN aims to:

- Instill culturally safe practices regarding First Nation's peoples within the future regional, rural and remote health workforce.
- Promote health careers to students who are interested in practicing in regional, rural and remote settings.
- Advocate for the future regional, rural and remote health workforce in both State and Federal policy discussions and development.

The NRHSN executive is strategically structured to facilitate seamless flow of information from grassroots levels within our Rural Health Clubs (RHCs) to external advocacy. This ensures a comprehensive and well-informed approach to addressing rural healthcare challenges.

The RHCs are at the core of our organisation and are our most valuable assets. These clubs operate at a local level providing leadership, rural immersion programs, career information sessions and rural outreach visits to secondary school students for university cohorts. They also serve as a social base to connect students interested in pursuing rural health careers, or who are on rural health placements. The NRHSN supports our RHCs via mentorship programs, ongoing training and upskilling of RHC presidents. These processes are facilitated via the strategically crafted Internal team.

The NRHSN also advocates at a State and Federal level for all members of the future rural health workforce, especially regarding rural placement support and training opportunities. The NRHSN External team strategically plan and drive these efforts.

The NRHSN executive committee was restructured in 2024 to allow us to operate more effectively in the execution of our goals. The formal restructuring saw the creation of co-chair positions, with each position having an internal or external bias. The Co-Chair Internal is

responsible for all things pertaining to RHCs and the NRHSN's role in supporting RHCs and the healthcare student cohort. The Co-Chair External is responsible for advocacy and stakeholder engagement. This change in leadership facilitates clear communication lines and appropriate line management and delegation throughout the committee.

Two new roles were also introduced to the committee this year, with the role of Indigenous Representative being elevated to a Vice Chair First Nations position. Paramedicine was introduced into the Nursing and Midwifery Project Officer role, and the Social Media and Communications roles were amalgamated.

The structure of the NRHSN executive following the 2024 restructure is depicted in the graphic below.



You can find the 2024 NRHSN Executive Committee and the RHCs that we represent on our website.

Rural Workforce Agencies

The NRHSN is an initiative of the Australian Government Department of Health, administered by the Consortium of Rural Workforce Agencies (RWAs). The Rural Doctors Network (RDN) is the RWA managing the NRHSN on behalf of the Consortium.

Each Australian State and the Northern Territory is served by a government-designated RWA that works to improve access to high-quality healthcare for people in regional, rural and remote Australia. RWAs do this through a range of programs, services and initiatives that attract, recruit, retain and support GPs, nurses, midwives, paramedics and allied health professionals in regional, rural and remote communities.

Contact us

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Acronyms

| NRHSN | National Rural Health Student Network |
|-------|--|
| RWAN | Rural Workforce Agency Network |
| RWAs | Rural Workforce Agencies |
| RDN | Rural Doctors Network |
| RHCs | Rural Health Clubs that form the Network |
| Rural | In this business plan the term 'rural' encompasses all areas |
| | MM2-MM7 |

Background

Vision

To be the future of rural health!

Mission

To be a vibrant multidisciplinary student network that connects, inspires and empowers Australian healthcare students to affect change towards Indigenous and regional, rural and remote health equity in Australia.

In light of the disappointing outcome of the 2023 Australian Indigenous Voice referendum, the NRHSN is seeking to "Become the Voice" and place a greater degree of emphasis on our contribution to the healthcare outcomes of First Nation's peoples.

2024 Goals:

- Become the voice for students who want to improve health outcomes for Aboriginal and Torres Strait Islander peoples and those in rural communities.
- Support RHCs and the work they do in promoting rural health careers and opportunities to all, including primary and secondary school students, and vocational and tertiary students across Australia.
- Utilise evidence-based research to inform, plan and evaluate current and future initiatives, policies and legislation, both government and non-government.
- Advocate for our members' views to inform and influence national rural health workforce priorities.
- Represent the NRHSN with consistent communication to external organisations and stakeholders.

To achieve these goals, we have 5 key strategic priorities:

- Priority 1: Equity in First Nations Healthcare
- Priority 2: Rural Health Club Support
- Priority 3: Attraction, Recruitment and Retention of Future Rural Health Workforce
- Priority 4: External Visibility of the NRHSN
- Priority 5: Sustainability of the NRHSN

In pursuing these strategic priorities, we hope to achieve a National Rural Health Student Network that, overall:

- Raises awareness and increases knowledge around First Nations health and wellbeing and supports the implementation of culturally safe practice in rural healthcare.
- Supports students interested in a career in rural health, and empowers RHCs to succeed.
- Develops interest and engagement in rural healthcare, and assists in the facilitation of positive placement experiences.
- Is visible and present in all conversations at all levels concerning regional, rural and remote health.
- Ensures its sustainability and ongoing positive contribution beyond 2024.

Key Activities:

- Provide governance to all RHCs in Australia
- Conduct election for the NRHSN Executive Committee
- Maintain a national database for all RHCs
- Undertake two National Councils for RHC executive members each year
- Engage with external stakeholders regarding rural health matters in Australia
- Work with the administrator to realise a shared vision (Rural Doctors Network)

Priority 1: Equity in First Nations Healthcare

Priority 2: Rural Health Club Support

| Goal | Strategies to achieve this |
|---|---|
| Support students interested in a career in rural health, and empower RHCs to succeed. | Promote a "door is always open" mentality between the NRHSN and the RHCs to provide support and mentorship. This positive working relationship will be fostered through regular one-on-one meetings, phone calls, text, WhatsApp and Facebook. Monthly state-based meetings (WA, QLD and NT, NSW and ACT, VIC and TAS, SA) chaired by one member from the NRHSN Internals Team to promote partnerships and the potential for collaborative inter-university events and programs. Quarterly meetings with all RHC presidents to provide support and troubleshoot solutions to operation barriers. Continuation of a centralised group space over WhatsApp for all RHC executive members, chaired by the NRHSN Internal team, to facilitate RHC collaboration and comradery. NRHSN Internal team continuously works alongside the administrator to support matters concerning the RHCs. NRHSN Internal team provide a link between RHCs, universities and the NRHSN administrator to maintain RHC and NRHSN funding. NRHSN Internal team provide advocacy for RHCs in relation to funding, multi-disciplinary team engagement and KPI requirements. |

Priority 3: Attraction, Recruitment and Retention of Future Rural Health Workforce

| Goal | Strategies to achieve this |
|--|--|
| Develop interest and engagement in rural healthcare, and assist in the facilitation of positive placement experiences. | Promote students as the initial touch point to address rural health workforce shortcomings. Overcome workforce shortages by encouraging positive rural placements and immersion experiences. Ensure RHCs successfully execute at least two rural high school visits each year, which promote careers in rural health. Provide access to and support during rural clinical placements. Advocate for financial, transport and social supports for students on rural clinical placements. |

| Link pre-university students, with information regarding rural healthcare opportunities, placements and careers. Promote rural health careers, pathways and |
|--|
| role models to NRHSN and RHC members to inspire future placements and/or employment in rural areas. |

Priority 4: External Visibility of the NRHSN

| Goal | Strategies to achieve this |
|---|--|
| Be visible and present in all conversations at all levels concerning regional, rural and remote health. | Modification of the structure of the NRHSN Executive to allow for a Co-Chair to facilitate the External team more effectively. Reassignment of key external stakeholders to the External Officers, to allow a closer and more personal relationship. Development and implementation of an External Stakeholder Engagement and Management Plan. Monthly meetings with RDN regarding opportunities to engage with External Stakeholders. Annual meetings with the Department of Health and Aged Care to aid in cohesion and achievement of goals. Monitoring of media for topics on which the NRHSN can comment on publicly. Continue to participate in high level policy discussions with the Office of the National Rural Health Commissioner and other government bodies. |

Priority 5: Sustainability of the NRHSN

| Goal | Strategies to achieve this |
|---|--|
| Ensure the NRHSN is sustainable and continues positive contributions beyond 2024. | Develop a short-, mid- and long-term strategic plans for the NRHSN. Short-term = 3-6 months Mid-term = 1-2 years Long-term = 3-5 years Restructure of the NRHSN executive board to better distribute workload and strategic focus. Develop a comprehensive succession plan for the NRHSN. |

Addendum: First Nations Future Rural Health Professional Program

| Purpose | To provide First Nations primary and secondary children in isolated communities the opportunities to engage in programs aligned with the Rural High School Visit (RHSV) model. To provide First Nations children with the opportunities to partake in practical workshops facilitated by current healthcare students with focused stations run by Indigenous health professionals. To provide the opportunity for health students from across the country to come together, share knowledge and teach First Nations children, whilst learning with and from First Nations communities. Provide a culturally safe and responsive initiative for students by students with local, state, and national exposure. Aiming to raise awareness around the importance of rural health professions and pathways for the future workforce of young Indigenous Australians |
|----------|--|
| Goals | To provide clinical case-based training focused on the unique needs of rural and Indigenous Australia and inspire children and adolescents to consider a career in healthcare. To provide an event for RHC members from across Australia to network, creating the opportunity for RHC members and the NRHSN to collaborate for increased membership engagement and networking. Engage with media coverage to promote the event, and the NRHSN. Leverage the overarching role of NRHSN to support all the needs of RHC members and our communities, in this case First Nations community members – children and adults by providing opportunities for leadership, professional development and growth. Recognise the impact of Colonisation and ensure all components of the proposal and ongoing project development occurs in consultations with First Nations advisors. Provide culturally safe training for all attending – facilitated by the Indigenous Allied Health Australia, or similar Indigenous education provider. |
| Audience | Children (particularly 8-14 years) – primary and secondary school age living in rural and remote Indigenous communities. Initiate the consideration of a career in health for First Nations community members and families, with the mantra of "you can't be what you can't see" as our directive. |
| | Specific focus on empowering girls and young women. |

2024 Projects and Position Papers

Project Updates and Development

The National Rural Health Student Network (NRHSN) is launching a groundbreaking project spearheaded by our Allied Health Officer focusing on the National Disability Insurance Scheme (NDIS). Our Allied Health Officer will not only be creating a position statement on the NDIS but also advocating for the program and its rural implementation at a Federal Government level. Through targeted advocacy efforts and strategic engagement with the Federal Government of Australia, the NRHSN aims to drive policy changes that foster inclusivity, empowerment, and improved healthcare outcomes for all Australians living with disabilities in rural areas.

The second project of the NRHSN for 2024 will be led by our Medical Officer. This project will be the development of a position statement regarding the HELP-Debt reduction scheme. The formation of this position statement will aid the NRHSN in our advocacy for our members as well as provide feedback for the Department of Health on the student opinion of the program.

Finally, our Nursing, Midwifery and Paramedicine officer is developing the Paramedicine Engagement Strategy for the NRHSN. This strategy will aim to guide RHCs on how they can better align with the needs of paramedicine students, an increase representation of the cohort within their clubs.

Reporting

Executive members report to the NRHSN Executive Team on activities throughout the year, this will include:

- Registry of external and internal meetings
- Internal reporting through line management channels
- Reporting to the Department of Health and the Administrator as per requirements of the funding agreement.