GREAT NEWS FOR RURAL AND REMOTE ALLIED HEALTH

The announcement by Minister Abbott of a new undergraduate scholarship for allied health disciplines is great news for people in rural and remote areas. The full text of the Alliance statement is at http://www.ruralhealth.org.au/nrhapublic/Index.cfm?Category=MediaReleases&Year=2005 and is reprinted below.


JOHN WAKERMAN LEADS NEW ALLIANCE EXECUTIVE

John Wakerman, Director of the Centre for Remote Health in Alice Springs, is the new Chairperson of the National Rural Health Alliance. The full text of the Alliance announcement is at http://www.ruralhealth.org.au/nrhapublic/Index.cfm?Category=MediaReleases&Year=2005 and is reprinted below.

From: Jenny Fleming
Subject: Improving After Hours medical Services in Rural and Remote Australia

The Rural After Hours Triage Education Resource (RAHTER) is the result of the highly successful SA Rural After Hours Triage Education and Training Program conducted by the Rural Doctors Workforce Agency (RDWA), South Australia and is a resource that will assist rural and remote communities throughout Australia to implement training and education programs relevant to local GPs and nurses who manage the after hours primary medical care service.

The Program was the first of its kind nationally and importantly, focused on a number of key and innovative aspects. It acknowledged both GPs and nurses in the management and delivery of after hours services in rural and remote areas and also integrated knowledge and skills training with relationship/communication system development. The Program delivered a very high quality after hours triage training intervention in over 20 rural and remote communities in SA, involving nearly 200 rural nurses and 80 rural GPs.

The RAHTER is a practical resource and includes all information and material developed for the Program, including program objectives, workshop outlines, templates and evaluation processes. A CD is also enclosed with a full copy of the resource and all accompanying readings and workshop activities.

For a copy of the RAHTER:
Ms Roberta Morris, After Hours Program Manager
Rural Doctors Workforce Agency
Phone: 08 8357 7444, Fax: 08 8357 7088
Email: afterhours@ruraldoc.com.au

The SA Rural After Hours Triage Education and Training Program and Rural After Hours Triage Education Resource was funded by the Australian Government, Department of Health and Ageing

From: Clair North
Subject: “Obesity and Overweight – It CAN be Managed”

Obesity and Overweight – It CAN be Managed

Tuesday 13th December 2005
The program aims to improve the capacity of health care providers in rural and remote areas to treat and manage overweight and obesity issues confidently through the:

— provision of up-to-date evidence based information and resources on treating and managing overweight and obesity in individuals and families; and

— promotion of the NHMRC clinical guidelines on the management of overweight and obesity and the accompanying GP Guide.

Program information can be found by clicking http://www.rhef.com.au/programs/408/408.html

Contact: Rural Health Education Foundation via email rhef@rhef.com.au or telephone (02) 6232-5480.

8th NATIONAL RURAL HEALTH CONFERENCE

The full text of all available papers can now be seen in the Program & Papers page on this website - go to http://www.ruralhealth.org.au/nhrapublic/publicdocs/conferences/8thNRHC/Program.htm

The ten Key Recommendations are on the Conference Recommendations page. Also available on that page is the Full Set of Recommendations, which provides a useful 'snapshot' of people's plans and proposals for better health. The full set was not formally endorsed or prioritised at the conference. Go to http://www.ruralhealth.org.au/nhrapublic/publicdocs/conferences/8thNRHC/RecsProcess.htm

AMA SETS OUT STRATEGY TO GET MORE DOCTORS WORKING IN RURAL AND REGIONAL AUSTRALIA

AMA President, Dr Mukesh Haikerwal, has warned that country Australians are experiencing a severe inequity of access to medical services that could last generations unless urgent concerted coordinated action is taken to address the rural medical workforce crisis.

"The medical workforce solutions for the long term must be all about making living and working in rural and remote communities more attractive now and into the future," Dr Haikerwal said.

Around 80% of the medical workforce lives and works in our major capital cities, compared with 66% of the population.

The AMA Position Statement on Regional/Rural Workforce Initiatives includes a range of proposals covering Education and Training, Postgraduate Medical Education, Continuing Medical Education, Remuneration and Incentives, Family Support, Hospital Work Practices and Infrastructure, Community Funded Facilities, Outreach Programs, Red Tape, Nurses, Rosters, Locum Services, Overseas Trained Doctors, Telemedicine, Benefits of Regional/Rural Practice, and Access To Community Services.

The AMA strategy for all these areas is based on key principles, including:

— the early and continuing exposure of medical school students to regional/rural medicine and measures to encourage students from regional/rural areas to enrol in medical schools are the most likely of all initiatives to increase the workforce in these areas

— proper medical infrastructure, a strong training experience, and access to community and professional resources, and continuing medical education are essential to the provision of a rewarding professional and personal experience

— consideration must be given to not only the needs of the medical practitioner, but also their family – particularly with respect to access to employment opportunities, health and education, and social amenities

— a critical mass of doctors within a region is important in improving the viability of a practice, as well as enhancing professional development

— appropriate remuneration and incentives are essential to attract and retain medical practitioners.


The Australian Journal of Rural Health invites you to contribute to the ongoing development of rural health in Australia, and submit your manuscripts for publication. Send your papers to AJRH@newcastle.edu.au and be pleasantly surprised at how quickly you can be in print. Author guidelines and sample issues of the AJRH are available at http://www.blackwellpublishing.com/submit.asp?ref=1038-5282 or email ajrh@newcastle.edu.au for further information. The October 2005 issue of the journal is available online now at http://www.blackwell-synergy.com/links/toc/ajr

The National SARRAH Conference

Building bridges … Crossing borders
A Conference for Rural and Remote Allied Health Professionals

13 – 16 September 2006
Albury Convention Centre, ALBURY, NSW

CALL FOR PAPERS NOW OPEN
Information available on the website – www.sarrah.org.au
Deadline for abstracts: 30 November 2005

The 2006 National SARRAH Conference
C/- National Rural Health Alliance
PO Box 280
DEAKIN WEST ACT 2600
Phone: 02 6285 4660
7th WONCA RURAL HEALTH CONFERENCE

Transforming Rural Practice Through Education
8-15 September 2006
Seattle, WA, USA
http://www.ruralwonca2006.com

Wonca is the World Organisation of Family Doctors, which has a specific Working Party on Rural Practice. This Working Party holds an annual conference on rural health and has produced a number of policy documents regarding rural health (for more information about Wonca, go to http://www.globalfamilydoctor.com).

The deadline for submitting abstracts is 17 February 2006.

WONCA Rural Conference
8-10 September 2006
University of Washington campus
Clinical Conference
11-13 September 2006
34th Annual Advances in Family Practice and Primary Care
University of Washington campus
Post Conference
13-15 September 2006
Talkeetna Alaskan Lodge - Anchorage, Alaska

RURAL HEALTH ON THE ABC

ABORIGINAL HEALTH (Health Report: 07/11/2005)
The largest ever study of wellbeing of Aboriginal children and adolescents has been performed in Western Australia. The results contradict some assumptions about Aboriginal health. And changes in a chronic disease treatment program in an Australian Aboriginal community. http://www.abc.net.au/rn/talks/8.30/healthrt/stories/s1496205.htm

GETTING THE REGIONAL BLUES - POST NATAL DEPRESSION AND THE RURAL MUM (All In The Mind: 05/11/2005)
Nambucca Heads is a beautiful seaside town on the mid north coast of New South Wales. But despite the tranquil environment, figures for postnatal depression in new mothers appear, at first glance, to be astronomical. Early research suggests half of new mothers suffer postnatal depression - five times the rate of their city sisters. The possible reasons for this includes the 15% unemployment rate, poverty, limited medical help and a claustrophobic and watchful social environment. Liz Keen investigates the incidence, diagnosis and treatment of postnatal depression in Nambucca. http://www.abc.net.au/rn/science/mind/stories/s1492613.htm

ARTICLES IN 'RURAL AND REMOTE HEALTH'

'Special issue in collaboration with 'Education for Health': on this joint issue'
Two international Journals, Education for Health and Rural and Remote Health, have joined forces to publish a joint edition focusing on rural and remote health education initiatives. Ten peer-reviewed articles have been chosen from a large pool of submissions. The articles can be found at either Rural and Remote Health or Education for Health and will be published in hard copy by Education for Health. Together, they provide an international snapshot of innovation in this field.

If collaboration can be achieved by two high profile journals, just imagine what could be achieved if more organisations decided to join forces! An editorial by Art Kaufman, written especially for this joint edition, explores such opportunities. Many thanks to the staff and reviewers from both journals who have worked so selflessly to see this work come to fruition. Enjoy the articles and keep up your own good work!

The ten articles plus two editorials that make up this joint issue are listed below:
Editorials
The Network: Towards Unity for Health, building a 'Star Alliance' among kindred organizations
Special issue in collaboration with 'Education for Health': on this joint issue
Project Reports
Seeing, thinking and acting against Malaria: a new approach to health worker training for community empowerment in rural Gambia
The rural physician associate program: new directions in education for competency
Combined research and clinical learning make rural summer studentship program a successful model
Educational and health services innovation to improve care for rural Hispanic communities in the USA
Evaluation of a required statewide interdisciplinary rural health education program: student attitudes, career intents and perceived quality
Implementing the CanMEDSTM Physician roles in rural specialist education: the multi-speciality community training network
Original Research
Advances in rural medical education in three countries: Canada, The United States and Australia
Student-developed problem-based learning cases: preparing for rural healthcare practice
Review Article
The impact of medical students on rural general practitioner perceptors
Short Communication
The education part of telehealth

'Medical family support needs and experiences in rural Queensland'
Do you want to know how to support the families of rural health professionals? This article from Australia provides useful data to inform your support strategies.
'The determinants of quality in procedural rural medical care'
What factors would you include to determine the quality of your rural or remote health care? Whose views would you seek? This research from Australia provides a valuable contribution to the debate.

'Tradition and technology: teaching rural medicine using an internet discussion board'
Can IT effectively overcome the isolation of students undertaking rural placements? This preliminary evidence from Australia helps answer the question.

'A compulsory experiential and inter-professional rural health subject for undergraduate students'
Teamwork is important in rural practice. It therefore makes intuitive sense that learning in teams would be good preparation for rural practice. This article from Australia provides insight into the issues you may face in developing such a program.

PARTYline is the official newsletter of the National Rural Health Alliance. Keep up to date with rural health policy information and good news stories on living and working in the rural health community. The August edition (No. 23) of PARTYline is available now. Available online at http://www.ruralhealth.org.au/nrhapublic/index.cfm?Category=PartyLine or receive a hard copy by emailing partyline@ruralhealth.org.au

LIFELINE'S JUST ASK - 1 300 13 11 14

HEALTH SPENDING INCREASES AS AUSTRALIANS LIVE LONGER

A new report, Health at a glance- OECD indicators 2005 is the Organisation for Economic Cooperation and Development's third biennial report comparing key health data across its 30 member countries. Australian data for the report were supplied by the Australian Institute of Health and Welfare (AIHW).

The report shows that in 2002, Australia's mortality rate of 526 per 100,000 (OECD age standardised) was the second lowest among OECD countries and well below the OECD average of 650 per 100,000. Only Japan at 449 per 100,000 had a lower rate. Substantial declines in cardiovascular disease mortality in recent decades have contributed to Australia's low rate.

The amount of resources Australia devotes to health expenditure has increased from 7.8% of gross domestic product (GDP) in 1990, to 9.3% in 2002 (more recent Australian data shows that the ratio rose to 9.7% in 2003). This trend of rising expenditure on health care was also evident in other OECD countries.

Australia ranked 10th in terms of per capita health expenditure in 2002, spending about half of what the United States spends per person (AUD $3,678, equivalent to USD $2,699 per person).

The AIHW statement is at http://www.aihw.gov.au/mediacentre/2005/mr20051109.cfm and the report is at http://www.oecd.org/document/11/0,2340,en_2649_33929_16502667_1_1_1_1,00.html

CHRONIC KIDNEY DISEASE ON THE RISE

An increasing number of Australians are at risk of chronic kidney disease—the long-term and usually irreversible loss of kidney function, a new report released by the Australian Institute of Health and Welfare (AIHW) has found. Indigenous Australians in particular are disproportionately affected.


OVERALL CERVICAL CANCER RATES DECLINING, BUT STILL HIGHER FOR INDIGENOUS WOMEN

Successful early detection and treatment have contributed to a decline in the incidence of cervical cancer, but there is still room for improvement, particularly for younger and Indigenous women, according to a report by the Australian Institute of Health and Welfare (AIHW).

Across all age groups there were 736 new cases of cervical cancer detected in Australia in 2001, a sharp decline from 1,089 in 1991 when organised screening started. During this same period the number of deaths also declined from 329 to 262. Cervical cancer is now the 18th most common cause of cancer death in women.

While there is room for improvement in overall screening participation, this is particularly important for Indigenous women who experience higher incidence of cervical cancer than other Australian women in Queensland, Northern Territory, Western Australia and South Australia (the only jurisdictions for which adequate data were available). Cervical cancer was also responsible for mortality rates in Indigenous women that were almost five times higher than that for other Australian women.


http://www.oecd.org/document/11/0,2340,en_2649_33929_16502667_1_1_1_1,00.html


http://www.oecd.org/document/11/0,2340,en_2649_33929_16502667_1_1_1_1,00.html


http://www.oecd.org/document/11/0,2340,en_2649_33929_16502667_1_1_1_1,00.html


http://www.oecd.org/document/11/0,2340,en_2649_33929_16502667_1_1_1_1,00.html


BUSH CRISIS LINE - 1800 805 391

Bush Crisis Line is a twenty-four hour confidential telephone support and debriefing service for multi-disciplinary remote and rural health practitioners and their families. It is staffed by qualified psychologists with remote and cross-cultural experience, is toll free and available from anywhere in Australia. For more information http://www.bushcrisisline.org.au

ALGA STATE OF THE REGIONS REPORT

This year's State of the Regions report theme is at the very core of the issues that may well shape the economic development opportunities and competitiveness of Australia's regions. The Report explores the case for the use of telecommunications infrastructure, to assist regions improve their performance.

How can regions protect their own futures and sustain competitiveness in a global and increasingly knowledge based economy?
What are the real issues and facts relating to the telecommunications debate?
What are the consequences of getting it wrong?
These critical questions are tackled in this year’s State of the Regions report.

The report argues that investment of as little as $3bn to extend broadband cover could create more than 10,000 jobs and provide an annual benefit to the nation of more than $920m a year, or more than $276bn over 30 years (in 2004 dollar terms).

As well as the analysis of telecommunications infrastructure, the Report also continues to review how regions are performing by:
* presenting the latest statistical indicators of how Australian regions are performing
* analysing the indicator trends in terms of growing equality and inequality between Australian regions
* considering the policy implications of current Australian regional performance
* expanding the indicators used to measure regional performance.


'RURAL AND REMOTE HEALTH PAPERS 1991 - 2005' CD

This CD is a valuable resource for students, academics, researchers and policy writers in the field of rural, regional and remote health. The 1,800 separate authored documents contain 17,000 pages of information and are searchable by key words and phrases.

The CD includes:
* Full proceedings of the 8th National Rural Health Conference, Alice Springs, March 2005
* Healthy Horizons Outlook 2003–2007
* PARTYline newsletters
* Full proceedings of the Infront Outback Rural Health Scientific Conferences
* The Alliance's Rural Health Information Papers
* The Alliance's Annual reports

The CD is provided free of charge to all friends of the Alliance. If you would like to receive a copy of the CD go to the friends page at http://www.ruralhealth.org.au/nrhapublic/index.cfm?Category=Friendsand fill in the membership form and return it with your payment to: National Rural Health Alliance, PO Box 280, DEAKIN WEST ACT 2600.

RURAL LOADINGS VITAL FOR RECRUITMENT (9-Nov-2005)
Newly elected RDAA president Dr Ross Maxwell has vowed to continue the push for rural GPs to receive rural-specific complexity and after-hours loadings on MBS rebates, saying it is the key to keeping doctors in country practice.
http://www.australiandoctor.com.au/articles/F0/0C0382F0.asp

RDAA BLASTS ABORTION PILL CLAIM (24-Nov-2005)
Rural doctors have dismissed claims they cannot safely prescribe the abortion drug, mifepristone, with the RDAA saying such advice underestimates the advanced skills of rural general practice.

NATIONAL CALL CENTRE NETWORK REVISITED (24-Nov-2005)
The first details of the rollout of a national medical call centre network are to be released next month by the Council of Australian Governments (COAG).

LANGUAGE BARRIER TO ABORIGINAL HEALTH (24-Nov-2005)
A critical lack of communication between Aboriginal patients and doctors has sparked calls for a greater number of specially trained Indigenous health interpreters in doctor’s surgeries.

TOP RURAL GP IS JACK-OF-ALL-TRADES (24-Nov-2005)
A former horse breaker and now solo GP has won the inaugural Rural Doctor of the Year title.

AMA GETS BEHIND RURAL GROUP STRATEGIES (30-Nov-2005)
The AMA has offered an olive branch to rural doctors, with a position statement highlighting the dire workforce shortages in rural Australia and recommending initiatives in line with those suggested by the rural medical groups.

GP INFORMATION NETWORK

Federal Government funding support for a new information network to support General Practitioners will lead to improved health care of their patients, the Federal Minister for Ageing, Julie Bishop, has announced. Ms Bishop said the Divisions of General Practice Information Management Strategy will receive up to $7 million in Federal Government funding over four years.

The strategy includes:
* Regional Health Information Management Consultants, embedded in the Divisions of General Practice Network across Australia, to support implementation and change
* A Virtual Private Network, to provide a secure repository for shared information and knowledge
* Data extraction tools, to enable relevant practice and clinical information to be accessed securely and easily.


CONTRIBUTION AND SUBSCRIPTION INFORMATION AND DISCLAIMER

The NRHA e-forum is edited by a third party moderator, Jim Groves. Contributions are sought on any topic relevant to rural health concerns. Please send contributions to the moderator at grovesc@winshop.com.au (do not “reply” to this email - send contributions to grovesc@winshop.com.au).

As such, the Alliance does not control postings and the contents do not necessarily reflect the opinions of the Alliance. Nor do postings necessarily reflect the view of Jim Groves or any organisation he is associated with. Jim Groves can be contacted at grovesc@winshop.com.au.

This issue is going to 2,469 email addresses. Please forward a copy to any colleague you think may be interested.

Great news for rural and remote allied health

Today’s announcement by Minister Abbott of a new undergraduate scholarship for allied health disciplines is great news for people in rural and remote areas.

John Wakerman, Chairperson of the Alliance, said today from Alice Springs that the new scheme shows the national leadership the Commonwealth is giving on rural and remote health workforce issues.

“Allied health professionals are key parts of the health team, particularly when it comes to keeping people out of hospital and getting patients back home after episodes of ill-health. The new program will provide substantial support to a small number of students, but it is most significant in what it says for rural and remote health services,” Associate Professor Wakerman said.

In 2006, its first year, 65 scholarships will be available to students from rural and remote areas studying an allied health discipline - climbing to more than 180 by the third year.

“The Alliance has been promoting the extension of such scholarships to allied health for some years and it was good to be able to acknowledge the Minister’s decision when our Council met with him last week,” John Wakerman said.

The new scheme complements the undergraduate scholarships for medicine, nursing and pharmacy, as well as the postgraduate scholarship for existing rural allied health professionals administered by Services for Rural and Remote Allied Health (SARRAH).

The Commonwealth has allocated $4 million over three years to the new program and it will boost substantially the relatively small number of scholarships provided by the States for allied health.

John Wakerman leads new Alliance Executive

John Wakerman, Director of the Centre for Remote Health in Alice Springs, is the new Chairperson of the National Rural Health Alliance.

Sue McAlpin takes her place on the Executive of the peak body as Immediate Past Chairperson.

Associate Professor John Wakerman is a Public Health Medicine specialist and general practitioner, with a background in the provision of remote primary health care services, both as a medical practitioner and senior manager. He is the inaugural Director of the Centre for Remote Health and has had substantial international experience as a public health and health service management consultant. He is active in health services research, teaches management and is a general practitioner in Alice Springs.

Secretary of the Alliance is Lynne Sheehan, CEO of the Mater Misericordiae hospitals in the Rockhampton region. Lynne represents on Council the 17 rural Catholic Hospitals in Catholic Health Australia and has been on the Executive for two years.

Alison Aylott, pharmacist from Dorrigo in the New England, is Treasurer, replacing long-serving ACRRM delegate on Council, Jane Greacen,
in that Executive position. Alison was pharmacist at Dorrigo and Coffs Harbour and locum at Coffs Base and Bellingen Hospitals. She has recently bought into a pharmacy in Nambucca Heads, and works as a locum pharmacist in the area. In September 2005 Alison was elected to the Pharmacy Board of NSW.

Deputy Chairperson is Jenny May, a part-time GP at Tamworth in northern NSW. Jenny also works for the University Department of Rural Health in Tamworth supporting research activities in primary care. Jenny practised with her husband at Tom Price in the Pilbara for five years and more recently in a remote community in Canada for a year. Jenny has been involved with Divisions of General Practice and the Rural Doctors Association and is on the RDA Women’s Group.

Other Members of the Executive elected at the AGM on Sunday 31 October are Stephen Gough from the Council of Ambulance Authorities, Liz Mattock, remote area nurse and CRANA delegate, and Myra Pincott, National President of the CWAA.