

the future of rural health



National Rural Health Student Network

 Provides a voice for students interested in improving health outcomes for rural and remote Australians

 Promotes rural health careers to students, with the aim of addressing the workforce shortage in rural Australia

rural health workforce

nrhsmural health clubs

ARMS

Australian National University, ACT

2. AURHA

Adelaide University, SA

3. BREAATHHE

University of Newcastle, NSW

4. BUSHFIRE

Bond University, QLD

5. CARAH

Charles Darwin University, NT in assoc with Flinders University, SA

6. CRANC

University of Canberra, ACT

7. FURHS

Flinders University, SA

8. HOPE4HEALTH

Griffith University, QLD

9. KRASH

Notre Dame University, Broome, WA

10. LARHC

La Trobe University, Bendigo, VIC

11. MARHS

Charles Sturt University, Albury, NSW including La Trobe University Wodonga, VIC

12. MIRAGE

University of Sydney, NSW

13. NERCHA

University of New England, NSW

14. NOMAD

Deakin University, VIC

15. OUTLOOK

University of Melbourne, VIC

16. RAHMS

University of New South Wales, NSW

17. RHINO

James Cook University, QLD

18. RHUUWS

University of Western Sydney, NSW

19. ROUNDS

Notre Dame University, Sydney, NSW

20.ROUSTAH

University of South Australia, SA

21. RUSTICA

University of Tasmania, TAS

22.SHARP

University of Wollongong, NSW

23. SPINRPHEX

Combined Universities of Western Australia, WA

24.StARRH

Charles Darwin University, NT including Flinders University, NT 25.TROHPIQ University of Queensland, QLD

26. WAALHIIBE

Combined Universities of Western Australia, WA

27. WARRIAHS

Charles Sturt University, Wagga Wagga, NSW

28. WILDFIRE

Monash University, VIC



NRHSN 2017 Executive



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www.nrhsn.org.au



NRHSN 2017 Executive



William Moorhead Chair (University of QLD)



Ben Dodds Vice-Chair (University of Tasmania)



Carolyn Reimann
Secretary
(James Cook University)

executivecommittee@nrhsn.org.au



NRHSN 2017 Officers



Molly
Allied Health Officer
(Curtin University)



Digby Medical Officer (University of NSW)



Danni-Lee Nursing Officer (Notre Dame)



Dylan
Community and
Advocacy Officer
(Charles Sturt
University)



Kelly Indigenous Officer (University of WA)

executivecommittee@nrhsn.org.au



NRHSN Activities – Developing Rural Professionals

- Rural health publications and resources
- Club support
- Advocacy
- Alumni







Rural Health

 28 Rural Health Clubs in every state/territory

 'Boots on the ground' for the NRHSN's Priority Areas

 Work closely with University Departments of Rural Health and Rural Workforce Agencies





Priority Areas





- Positive, clear and supported rural training pathways
- Aboriginal and Torres Strait
 Islander Health
- Mental health training and awareness for all university students
- Health outcomes for rural and remote Australians



Current NRHSN Position

- The NRHSN and Deales nationally through Position Papers
 - Bonded Schemes Position Paper
 - Indigenous Health Position Paper
 - Nurse Practitioners Position Paper
 - Inter Professional Education (IPE) Position Paper
 - Extended scope of practice Position Paper
 - Quality Indigenous Health Curriculum Position
 Paper



Positive rural training pathways

- Multidisciplinary rural training guide
- National Rural Health Stakeholder Meeting
 - Dr Hon David Gillespie MP
- Royal Australian College of Surgeons (RACS) Provincial Surgeons conference address
- Rural placements guides



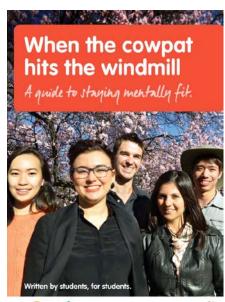
Aboriginal and Torres Strait Islander Health

- Position paper updated
- Aboriginal & Torres Strait Islander community engagement activity



Mental health

- Mental health position paper
- When the cowpat hits the windmill publication









Rural health outcomes

- Placement research
- Rural High School Visits (RHSV)
- Climate change position paper
- Marriage equality stance





Effective rural placements

A national study of experiences amongst multidisciplinary health students



Method

Online survey





897 responses



- 542 medicine students
- 355 non-medicine students
- 565 had undertaken a rural placement

Survey questions

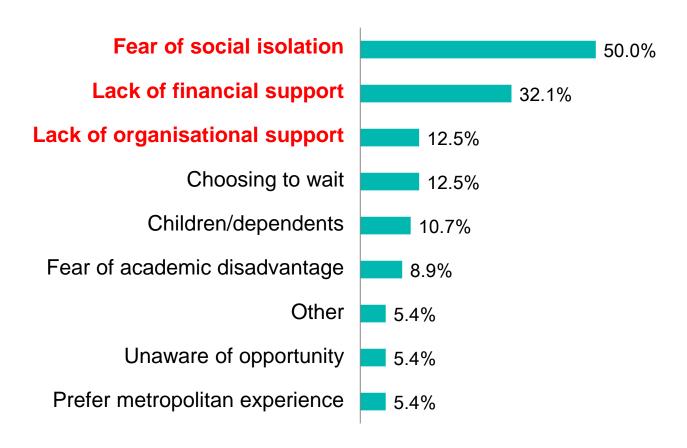




- Degree details
- Attitudes and barriers to rural placements
- Details of most recent rural placement



Barriers to rural placements

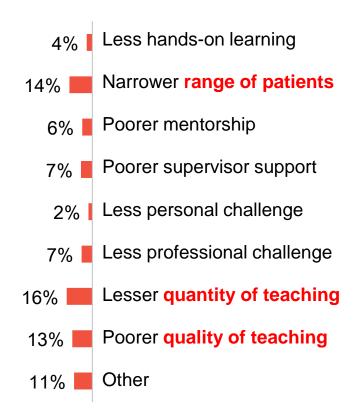




Pros



Cons





Costs

On average:

- Non-medicine students paid an additional \$55/week for accommodation (p<0.001)
- Non-medicine students incurred an additional \$563 in total costs (p<0.001)



Conclusions

- 1. >90% of students desired rural placements
- 2. >50% saw rural placements as academically advantageous
- Lack of social, financial and organisational support prevented rural placement uptake
- 4. Non-medicine students received less support in all domains, including those identified in point 3
- 5. 62% of placements increased rural practice intent
- 6. The impact on future intent depends on the experiences had whilst on placement, not the level of support provided



Conference presentations

- WONCA World Rural Health Conference
 - Aboriginal and Torres Strait Island university health curriculum
 - Role of leadership in rural health
- National Rural Health Conference
 - Effective rural placements
- RACS Provincial College Conference
 - Student perspective on rural specialty training
- RMA
- CRANAPlus



Advocacy meetings

- Department of Health
- Rural Health Roundtable
 - June
 - November
- Health workforce agency network
 - JFPP
- Federal Budget lock in
- National Rural Health Alliance



New Funding

- 3 years
- Funding support through RHMT Program
- \$12,000/year for each Rural Health Club
 - 2 x Rural High School Visit
 - Indigenous Community Engagement activity



New Administrators

- NRHSN National Executive
- Tender process in place
- From 1 January 2018
- Rural Health Clubs
- Universities
- From June 2017



Negatives

- Unfamiliar university contact
- Funding confusion
- Loss of external administrator support
- Reduced autonomy of clubs



Positives

- Increased collaboration with university
- Increased awareness of clubs
- Funding tied to RHMT, goals aligned



Rural Health Multidisciplinary Training Program

- Effective rural training experiences
- Evidence base for rural training strategies
- Supporting Aboriginal and Torres Strait Islander health
- Increasing number of rural original health students
- Well supported academic networks to enhance delivery of training to students





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NRHSN Contact Details

c/- Rural Health Workforce Australia

Suite 2, Level 5

10 Queens Rd

Melbourne Vic 3004

Ph: 03 9860 4700

executivecommittee@nrhsn.org.au

www.nrhsn.org.au