



# ARHEN



**Australian Rural  
Health Education  
Network**

**16 members  
in all States  
and the NT**

***Better health  
through a skilled and effective workforce  
for rural and remote Australia.***



# ANNUAL REPORT

# 2020

[www.arhen.org.au](http://www.arhen.org.au)



## VISION

Better health through a skilled and effective health workforce for rural and remote Australia.

## PURPOSE

To lead the rural and remote health agenda in education and research by advocating for University Departments of Rural Health who work in partnership with communities, health organisations and tertiary institutions to increase and enhance the rural and remote health workforce.

## FOCUS

- Advocates to and works with government at the national level to strengthen Australia's rural and remote health workforce.
- Builds the capacity and effectiveness of the network of University Departments of Rural Health.

### ARHEN NATIONAL OFFICE, CANBERRA

**Janine Ramsay** – National Director

**Jane Smith** – Policy and Communications (Tuesday-Thursday)

Funding and governance: ARHEN is funded by UDRH members. ARHEN is a public company limited by guarantee and is taken to be registered in the ACT under the *Corporations Act 2001*.

ARHEN thanks UDRH students and staff for the photos used in this report. Back cover also shows inaugural Rural Health Commissioner Paul Worley and staff with members of ARHEN Executive and National Office staff during a consultation in Canberra.

## CHAIR'S REPORT

In 2020, ARHEN had a dynamic year of advocacy. ARHEN promoted the hard work of the 16 University Departments of Rural Health (UDRH) which have continued to support student training, rural health research, Aboriginal workforce development and rural community engagement throughout times of COVID-19. The ARHEN Board liaised regularly with the Department of Health and Rural Health Commissioners, met with Regional Health Minister the Hon. Mark Coulton MP and welcomed new Chief Allied Health Officer, Dr Anne-marie Boxall. ARHEN has responded to the Rural Health Multidisciplinary Training Program evaluation, supported an extension of the Rural Pharmacy Liaison Officer program and also joined other organisations to advocate successfully against a proposed fee increase for mental health courses. Throughout the year, ARHEN also contributed to Rural Health Stakeholder COVID-19 teleconferences, chaired by Minister Coulton, and the Primary Health Care COVID-19 Response, chaired by Professor Michael Kidd, Principal Medical Advisor. Further, we continued to work with the National Rural Health Alliance (NRHA) and the Federation of Rural Australian Medical Educators (FRAME) to strengthen the rural health workforce.

ARHEN also undertook a number of projects, including the development of a database of UDRH research from the past decade on issues including student placements, workforce and Aboriginal health. A new project gathered student perspectives about their COVID-19 placement experiences, with travel, safety and cost emerging as difficulties. At the same time, students also highlighted their commitment to clinical learning and determination to finish their course. Another project underway is assessing the elements that make up a quality UDRH supported student placement.

The National Office continued their advocacy work throughout the year and I thank Janine and Jane for keeping UDRHs connected and informed. I also thank Christine Howard for her support and David Lyle for his wise counsel. The staff networks continued to advocate and provided valuable input to policy issues, for which I am grateful. Despite the many changes and challenges in 2020, ARHEN has strongly advocated for nursing, allied health and Aboriginal and Torres Strait Islander health across rural and remote Australia.

**Lisa Bourke, Chair, ARHEN Board**

## NATIONAL DIRECTOR'S REPORT

What a busy and productive year ARHEN has had, despite the restrictions of the pandemic. In addition, the Federal Budget in October put rural and remote health squarely on the national agenda, including the announcement of a new UDRH.

The National Office team of Janine and Jane have been busy advocating for the UDRH membership on a range of issues.

As well as working in partnership with the Board to operationalise its agenda, we have looked ahead to what else is on the rural health education horizon. In addition, National Office organised a separate successful campaign about aspects of the government's new Job-Ready Graduates package.

There have been a number of meetings, predominantly by Zoom, with guests including Minister Coulton, officers from the Department of Health, the Rural Health Commissioner and the new Chief Allied Health Officer. Featured have been strategic issues such as the national evaluation of the Rural Health Multidisciplinary Training Program, through which our members are funded, and the Rural Health Commissioner's report on distribution of allied health services in rural and remote Australia. ARHEN has welcomed the broader multidisciplinary perspective of the office of the new Rural Health Commissioner which is expected to have a key role in strengthening the rural training pathway.

ARHEN continues to influence at the national level, with three Directors on the Department of Health's RHMTF post evaluation implementation working group. In addition, there has been a focus in the past 12 months on collating UDRH led research, resulting in two rapid reviews and preparation for a special edition of the *Australian Journal of Rural Health* in 2021.

**Janine Ramsay, National Director, ARHEN**

## ARHEN BOARD 2020

The 16 University Departments of Rural Health (UDRH) that make up ARHEN are centres of academic excellence focused on addressing health professional workforce shortages which affect some 7 million people who live in rural and remote locations around Australia.

Each UDRH supports nursing and allied health students undertake clinical placements in these communities so they experience what it's like to work outside capital cities. Clinical placements like these are shown to encourage students to return to work rurally when they graduate.

UDRHs are also leaders in multidisciplinary rural health education and research, working to identify and address unmet local healthcare needs. They use approaches such as student-led clinics, school-based services and interprofessional workshops. In 2020, UDRH students and staff quickly adapted to the COVID environment by developing a range of elearning approaches to continue to assist their clients (see next page).

The ARHEN Board comprises representatives from all 16 UDRHs.

### EXECUTIVE

#### Chair

Prof Lisa Bourke, Director, Department of Rural Health, The University of Melbourne, Shepparton, Victoria

#### Deputy Chair

Mrs Christine Howard, Director, Three Rivers UDRH, Charles Sturt University, Wagga Wagga, NSW

#### Treasurer

Prof David Lyle, Head, Broken Hill UDRH, The University of Sydney, Broken Hill, NSW

### MEMBERS

#### NSW

Prof Ross Bailie, Director, University Centre for Rural Health, The University of Sydney, Lismore

Assoc Prof Leanne Brown, Academic Lead, University of Newcastle Department of Rural Health, Tamworth

#### Victoria

Dr Pamela Harvey, Rural Nursing and Allied Health Lead, Monash University School of Rural Health, Bendigo

Prof Timothy Skinner, Director, La Trobe University Rural Health School, Bendigo

Assoc Prof Vincent Versace, Director, Deakin University Rural Health, Warrnambool

#### Queensland

Assoc Prof Geoff Argus, Director, Southern Queensland Rural Health, University of Queensland and University of Southern Queensland, Toowoomba and Charleville

Prof Sabina Knight, Director, Centre for Rural and Remote Health, James Cook University, Mount Isa

#### South Australia

Prof Robyn Aitken, Deputy Dean, Rural and Remote Health, Flinders University, Bedford

Assoc Prof Martin Jones, Project Director, Department of Rural Health, University of South Australia, Whyalla

#### Western Australia

Dr Rosemarie Newitt, Acting Director, Majorlin Kimberley Centre for Remote Health, Broome

Prof Sandra Thompson, Director, Western Australian Centre for Rural Health, Geraldton, University of Western Australia

#### Tasmania

Assoc Prof Tony Barnett, Director, Centre for Rural Health, University of Tasmania, Launceston

#### Northern Territory

Assoc Prof Narelle Campbell, Academic Lead, Top End Rural and Remote Health, Flinders University, Darwin

## UNIVERSITY DEPARTMENTS OF RURAL HEALTH – ADAPTING TO THE COVID-19 CHALLENGE

### UNIVERSITY OF NEWCASTLE, DEPARTMENT OF RURAL HEALTH, TAMWORTH, NSW

What started out as a COVID-19 barrier has become a new approach to encouraging primary school students in rural NSW to consider a career in healthcare.

The University of Newcastle Department of Rural Health (DRH), in northern NSW, provides clinical placements for allied health students in several rural centres.

The opportunities they get during placement are a vital part of encouraging them to return to work rurally after they graduate.

DRH students usually travel to small, often isolated, schools to deliver workshops about topics like hand hygiene, sugary drinks, motor skills for physical activity and body balance.

When schools closed because of COVID-19, workshops were put on hold, meaning many faced a wait of up to three years before another visit.

However, a rapid change to online delivery, coordinated by placement students and DRH staff, resulted in more workshops than ever being delivered.

One school received nine online sessions in the same time previously required for a single visit - all in a COVID-safe way, of course!

The innovative online approach has now become a permanent part of the DRH program and will also be used by students for broader community health education.

*Nutrition and Dietetics student Lily Leighton during a Zoom community engagement session with children from a small rural school.*



*A client in Derby, WA, taking part in a telehealth occupational therapy session with student James in his home in Newcastle, NSW.*

### MAJARLIN KIMBERLEY CENTRE FOR REMOTE HEALTH, BROOME, WA

When 3rd year Occupational Therapy student James found out COVID-19 meant his placement wouldn't be so remote after all – but his clients would be – he had doubts about going ahead.

How can I learn about culture and build a rapport with people in WA Aboriginal communities from my bedroom 2000km away, he wondered?

It helped that OT focuses on adapting to changing circumstances - so James persisted, attending Zoom meetings with the Majorlin cultural security officer and student coordinator and asking lots of questions.

The clever COVID approach then linked James from his home in Newcastle, NSW, with clients in an aged care facility in Derby, WA. All quickly learned how to use iPads for reminiscing and collage therapy and to watch presentations originally designed for face-to-face practice.

Over 8 weeks, James was surprised by the success of the telehealth approach:

*“Adaptation and discussion between ourselves and the clinical educator meant we were still able to deliver a clinically relevant and diverse service to our clients – much more than I had anticipated was possible.”*

*“This placement has made me feel not only competent but comfortable using telehealth in the future and I'm confident these skills will be useful for the rest of my career.”*

## A HEALTHY DOSE OF RURAL RESEARCH AROUND AUSTRALIA

The 16 University Departments of Rural Health (UDRHs) across Australia have a shared purpose of leading the rural and remote health agenda in education and research. They develop and deliver academically enriched clinical education and training and also undertake research, including targeted research relevant to the region. UDRHs are the only rurally based academic units that work across all health disciplines at undergraduate and postgraduate levels and with the existing workforce.

Over the past 12 months, an ARHEN group of Directors, led by Martin Jones and including David Lyle, Vincent Versace, Sandra Thompson, Sabina Knight plus researcher Sandra Walsh, developed an EndNote database comprising a list of all research publications by all UDRHs over the past 10 years. As the original purpose was to inform the Rural Health Multidisciplinary Training Program evaluation on research outputs of UDRHs, a rapid review was developed by the group and sent to the evaluator. A further rapid review was completed for Spinifex, with the group also preparing for a special edition of the *Australian Journal of Rural Health* in 2021.

The ARHEN website now has a list of UDRH publications for 2019-20, which will continue to be updated each Department of Health reporting cycle. A quick look at the list shows the diversity of output over the past 12 months. Articles address a range of issues in rural and remote health, including student placements, Aboriginal and Torres Strait Islander health, service delivery, workforce issues and specific health issues – here are just a few highlights.

- Staff at the Mount Isa Centre for Rural and Remote Health explored the influence of a university rural curriculum and clinical placements on pharmacists' choice to practise in a rural or remote area. While positive placements influenced career choices, other factors (rural lifestyle, family commitments, remuneration, career opportunities and other contractual agreements) also play a role, highlighting a need for a strong rural curriculum.
- In Victoria, a social work student at the University of Melbourne UDRH completed a rural research placement where she interviewed students about the barriers and enablers to satisfaction with their placement.
- Researchers from several UDRHs drew from Australian Aboriginal and Torres Strait Islander perspectives to conceptualise the association between community participation and continuous quality improvement processes. Analysis of six case studies identified community participation and trusting, safe relationships as important in five of the services.
- In a study of research training, the Broken Hill UDRH identified how research tends to be individually driven and fragmented, calling for more strategic and systematic approaches to research development.
- Other research papers investigated specific health conditions, such as palliative care and chronic disease, as well as broader rural topics such as recruitment, retention and access to health services across rural and remote Australia.

**For more about current UDRH research visit the ARHEN website [www.arhen.org.au](http://www.arhen.org.au)**

## STAFF NETWORKS

The six ARHEN staff networks (Rural Pharmacy Support, Service Learning, Mental Health Academics, Aboriginal Staff Alliance, Executive Officers and Student Placement Coordination) continued to meet during the year, despite the difficulties experienced by all UDRHs because of COVID-19.

Staff networks report to the ARHEN Board. Staff at all UDRHs are encouraged to join networks to contribute their ideas and expertise. Each network works to Terms of Reference and meets regularly to provide members with opportunities to inform policy development, share information, promote programs and projects and offer support and mentorship.

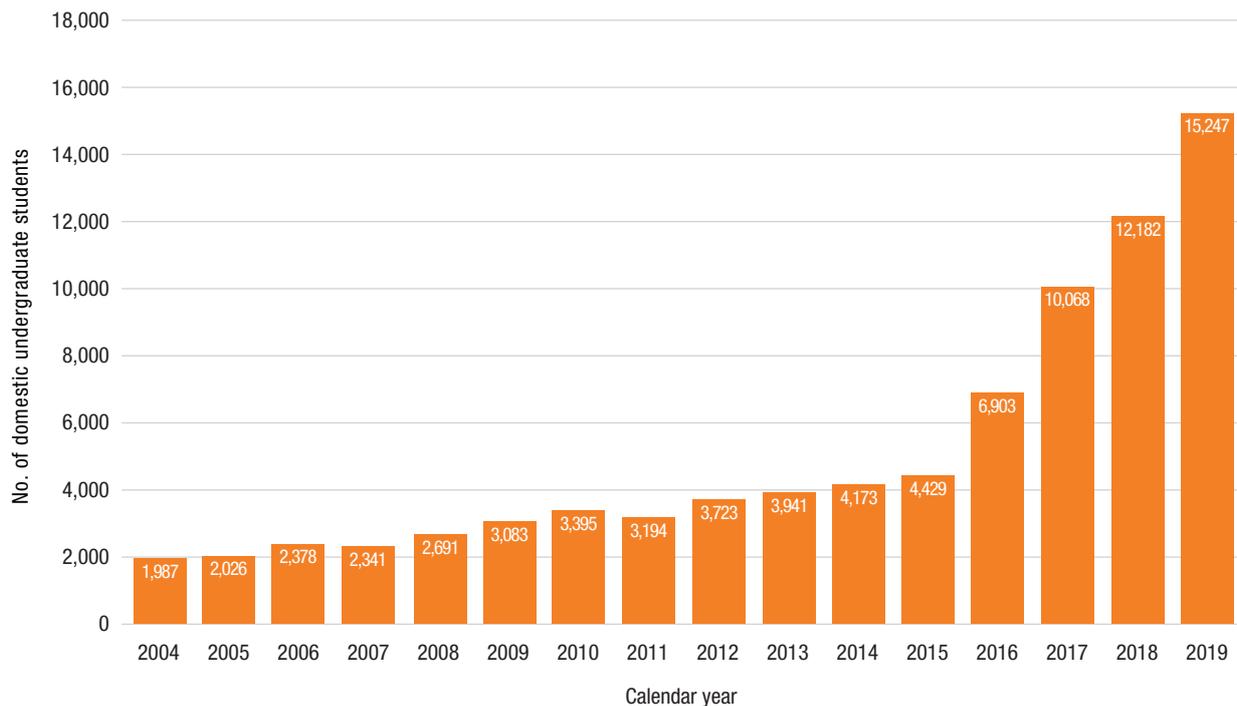
Most networks reported some impact on members' activities because of the pandemic - the Board thanked Chairs for continuing to take on these roles and the added workload that comes with these responsibilities. Many members provided feedback during the year to show they valued the opportunity provided by these meetings, usually by Zoom, to continue to share, collaborate, exchange information and support each other.

Following a Board decision, a Director/senior academic was appointed to each network to provide a point of liaison for Board business.

## 2019 UDRH STUDENT ACTIVITY SUMMARY

In 2019, a total of 16,510 nursing, midwifery, and allied health students were hosted by UDRHs for two weeks or more. Of these, 61% were nursing and midwifery students and 39% were from 25 allied health disciplines. Compared with 2018, the number of students completing rural placements with UDRHs increased by 3,411 or 26% (Figure 1). These students undertook a total of 79,979 placement weeks, of which allied health students undertook just over half of these placement weeks. Placements in more remote areas as well as those in Dentistry, Occupational Therapy and Social Work tended to have longer placements.

**Figure 1. Changes<sup>1</sup> in undergraduate student numbers from 2004-2019**



The information above was compiled from figures submitted by UDRHs to the Department of Health.

While the footnote below cautions against directly comparing years in Figure 1, it is nevertheless pleasing to see the steady increase in student numbers attesting to ongoing government commitment and growing student interest in working rurally to improve the health of people in these locations.

Figure 1 accurately reflects the vital work of UDRHs – soon to be 17 in total – over so many years to support nursing and allied health students as they undertake diverse placements in rural and remote locations, exposing them to career opportunities outside capital cities and encouraging them to return to work rurally after they graduate.

The record 2019 numbers again show that UDRHs are continuing to excel at their core work – producing a skilled health workforce for rural and remote Australia and in so doing also supporting the long term viability of these communities which depend so much on their ability to attract high quality health professionals.

ARHEN looks forward to continuing this vital work in partnership with rural and remote communities, health service providers and government.

<sup>1</sup> Caution should be exercised when comparing years as the UDRH program has seen significant changes in the number of UDRH, aggregate funding and student disciplines reported over time.



# ARHEN

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Education Network

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