



August 2004 Edition - a newsletter for RAMUS Scholars and their mentors.

From the Manager

Finally, we can say welcome to the 145 RAMUS scholars who commenced their scholarship in 2004. I say 'finally' because although the formal allocations were completed by mid-February and the appeal processes finalised at the end of April, we have been allocating some additional scholarships to fill vacancies left by those who for a range of reasons left the Scheme. Janine, Helen and I look forward to working with you during your scholarship and after (see below!!).

The breaking news for this edition of the newsletter is that work is underway to establish the RAMUS Alumnus. I am very pleased to let you know of this new initiative under the RAMUS banner. The Department of Health and Ageing has funded the National Rural Health Alliance to establish the RAMUS Alumnus.

The Alumnus will provide an opportunity for ex-scholars, mentors and current scholars to interact and communicate through the website about the rewards and challenges that face scholars once they complete their university studies.

We are looking to make the Alumnus a forum for scholars to interact to compare and contrast views and share experiences – a facility that formalises a large number of informal networks. It offers the opportunity to pull together information that is valuable to those who come along in the future but which loses relevance to scholars as they move through their careers. Issues such as the pros and cons of locations of placements, positives and negatives of particular work experiences, the influencing factors on career development and placement as well as some tricks and traps encountered by scholars would be debated in this online electronic forum. The Alumnus will provide useful information, networking with peers, and a simple means to maintain contact with new and old friends.

Ex-scholars' part in this process will be to give us information, via the website or by phone, about their postgraduate career choices. In fact we will soon be in touch with ex-scholars to 'encourage' them to provide information about their career choices and the relationship between those choices and life experiences that informed them. Whilst we have information from overseas about the relationship between rural origin and location of professional practice, the information about post-graduate training location choices and, over time, the career paths of RAMUS scholars will test the thinking that links rural origin to location of professional practice as it occurs in Australia.

I would be very pleased to hear your views about the Alumnus and its aims and look forward to working with you to firstly collect the information we need, then to read with interest your contributions to the website forum and also report regularly on what all the information gathered reveals.

Carmel

Rural Doctor Mentor Scheme

Scholar responsibilities

- Develop a realistic and meaningful Learning Plan with your mentor.
- Agree each year to participate in the Rural Doctor Mentor Scheme for the life of your scholarship.
- Establish and have ongoing contact at least quarterly with your mentor.
- Maintain a journal of quarterly contact with your mentor, which discusses elements identified in the learning contract.
- Undertake rural activities throughout the year.

Mentor responsibilities

- Develop a Learning Plan with your scholar at the beginning of each year of the scholarship.
- Facilitate quarterly contact with your scholarship holder.
- Prepare a brief assessment regarding your scholar's participation in the Scheme. The assessment is required annually, during December, and should be sent to the RAMUS Scholarship Team.



The 8th National Rural Health Conference will showcase success stories and discuss emerging challenges in the remote and rural health sector, with a view to building and sustaining a healthy future. It will be a meeting place for people concerned with the health of Australia's remote and rural communities, and an advertisement for the vitality and challenge of remote and rural health practice. It will have a special focus on remote and Aboriginal and Torres Strait Islander issues, with an emphasis on inter-sectoral and multi-professional solutions. Participants from all backgrounds will be welcome, from first-time consumer advocates to experienced health researchers. There will be a range of formats including contributed papers, workshops, posters and sharing yarns in less formal settings.

Keynote and contributed papers will be clustered around the five themes listed below.

1. What are the demonstrated means of successfully strengthening the multidisciplinary remote and rural health workforce?
2. What lessons can we share about improving the health of Indigenous people and other populations in remote areas?
3. What do we know about the connections between land and health for Aboriginal and non-Aboriginal people in rural and remote Australia?
4. In what ways do sectors such as education, transport, the environment, economic development and communications intersect with each other and the health of people in remote and rural Australia?
5. What are the key emerging issues in clinical practice for remote and rural Australia?

To obtain additional information and to register for the conference please visit www.ruralhealth.org.au.

When should a Mentor Report be provided

Each **Rural Doctor Mentor** is required to provide a brief assessment of the contact with their RAMUS scholar. A copy of the proforma that can be used by mentors to complete their reporting responsibilities is located at www.ruralhealth.org.au and by then following the Scholarship and RAMUS prompts.

An honorary payment of \$330.00 (inc. GST) is made to each Mentor at the end of each calendar year on receipt of a completed mentor report and a tax invoice.

Scholar Report Excerpt

I graduated as a doctor in December and will be eternally grateful for the opportunities presented to me by the RAMUS scheme. Without this scholarship, I would have faced tremendous hardship as I attempted the immensely challenging path of the study of medicine. Over the coming years, I plan to complete GP training and ultimately begin a practice in a regional centre such as Cairns or Mackay, after I have spent some time working in more remote places such as Mount Isa and Longreach.

*Susan Grehan
(completed MBBS in 2003)*

RAMUS Payments

Please note the payment dates for Undergraduate and Graduate RAMUS Scholars.

Undergraduate Scholar Payment Dates are:

- 6th and 21st of the month, March to December. \$500 every payment.

Graduate Scholar Payment Dates are:

- 6th and 21st of the month, January to December. \$800 on January 6 and \$400 every other payment.

This information is set out on the wallet card provided to all scholars earlier this year. Refer to that card for payment dates and RAMUS Team contact details.

Please note:

- **RAMUS payments are not assessable for Australian Taxation purposes.**
- **RAMUS payments are assessable for some Centrelink purposes.**

RAMUS Acquittal Requirements

By this time of the year all RAMUS scholars should have provided the following information to the RAMUS Team:

New and Continuing Scholars

- 2004 Scholarship Agreement
- 2004 Recipient Database form
- Details of 2004 Rural Mentor
- Proof of Rural Health Club Membership for 2004
- 2004 Confirmation of Enrolment
- 2004 Learning Plan

Continuing Scholars

- Academic Results for 2003
- Assessable Income for the 2002/2003 financial year
- A report from your mentor on your contact during 2003
- Scholar Report for 2003

The non-receipt of any of the above documentation will delay the commencement of payments being made to you.

Please note that you will be required to meet the following requirements prior to the commencement of your 2005 RAMUS payments.

- A Scholar report. This report will address the goals you established earlier in the year in your 2004 Learning Plan, your involvement in your university's Rural Health Club, along with other information you believe has been relevant throughout the course of the year in expanding your knowledge/background in the practice of medicine within rural and remote areas of Australia. This report should be at minimum 500 words.
- Your Academic Results for the entire 2004 academic year.
- Your Assessable Income for the 2003/2004 financial year.
- A report from your Mentor outlining your contact during 2004.
- A signed 2005 Scholar Agreement
- A 2005 Recipient Database form.
- Details of your 2005 Rural Mentor.
- Proof of Rural Health Club Membership for 2005.
- Confirmation of Enrolment for 2005.
- A 2005 Learning Plan.

Appropriate paperwork will be forwarded to all RAMUS scholars late October/early November to assist with the prompt provision of all required information.

Please contact a RAMUS staff member on 1800 460 440 if you require any additional information.

Scholar Report excerpt -

“Having completed my medical studies on a RAMUS scholarship, I remain indebted for both the financial assistance (essential for so many country kids) and the insights I've gained from spending time with my mentor and being involved in such rural activities as my university schedule permitted. I look forward to contributing to the advancement of rural health in Australia”.

Dominique Martin
(completed MBBS in 2003)



NATIONAL RURAL HEALTH ALLIANCE INC.

As community leaders of the future RAMUS scholars will find themselves from time-to-time being asked for advice and views on matters affecting the health of the communities in which they work. The central role of the NRHA is to bring to bear the views of its Member Bodies on short and long term factors affecting the health of people in rural and remote areas. The Alliance therefore has a range of policy work, some of which relates to immediate issues and some to long-term matters.

Currently, for instance, the Alliance is promoting greater attention on maternal and child health. Readers of *Gone Fishin'* will be well aware that about the best investment one can make in the future health of an individual is to provide their mother with a healthy pregnancy and to provide them with healthy life in their first five years. The Alliance has produced a Position Paper on Child and Adolescent Health and has just started work on a 'Birthing in the Bush' project to see how such services can be retained in smaller country towns. Also related to this issue is the general case the Alliance makes for shifting aggregate health expenditures from high tech and high cost interventions in the last few months of life to early childhood. Coupled with this, the Alliance makes the general case that, as a society, we must put even more emphasis on self-care. It is simply not sensible or sustainable for the health system to try to respond to ever-increasing demands for fixes and cures from people who do insufficient to lay the basis for their own good health and who have higher and higher expectations for cures based on expanding general knowledge about healthcare.

The Alliance also currently has before it a range of health workforce issues. Its nursing Member Bodies (AARN, ANF and CRANA) are leading a group of eight national nursing organisations in work on the rural and remote nursing workforce. There are changes afoot, including those from the Review of Nursing Education, and the project will help ensure that rural issues are appropriately considered. The Alliance would like the worsening shortage of nurses to be as well known in Australia as the shortage and maldistribution of doctors – and have an appropriate number of special programs to meet this nursing shortage in rural, regional and remote areas, where it is particularly acute.

The Alliance also continues its work in support of rural GPs and specialists. It is involved in the role out of measures and in Strengthening Medicare, including those relating to overseas trained doctors and specialists, and the new arrangements for including referrals under Medicare, in certain limited circumstances, to allied health professionals and dentists. We have published a paper in support of the Melbourne Manifesto which is an ethical protocol for how an affluent country like Australia should deal with the flow of health professionals between it and other countries, some of which are much more needy than us.

The Alliance has published position papers on a rural placement system for all undergraduate health students. We have projects underway on health service managers, the allied health workforce and Aboriginal and Torres Strait Islander Health Workers. RAMUS scholars will be interested in all of these because, in your rural practice, you will be much more secure and effective as a member of a multi-disciplinary health team than trying to beaver away doing the impossible on your own.

Finally, the Alliance has recently published a paper jointly with Aged and Community Services Australia on Older People and Aged Care in Rural, Regional and Remote Australia. This will, of course, become a more important issue in the near future as the proportion of elderly increases. The challenge is to see what can be done to enable as many as possible to live through all stages of ageing in their local rural region. Much of the discussion in this paper relates to old people in need of care but we should not forget what can be done to support and extend the period for which people are quite well and independent.

We hope to see lots of you at the 8th Conference in Alice Springs next March.

Information about all of these activities is available at www.ruralhealth.org.au.

Gordon Gregory, Executive Director

THE AUSTRALIAN JOURNAL OF RURAL HEALTH

Free Online Access

Access to the Journal is available by visiting www.ruralhealth.org.au. Enter your personal details in the left hand column then follow the Scholarship and RAMUS links – the Journal link is located at the top of the RAMUS page.

Please call the RAMUS Team on 1800 460 440 if you have any questions or are unsure of your login details.

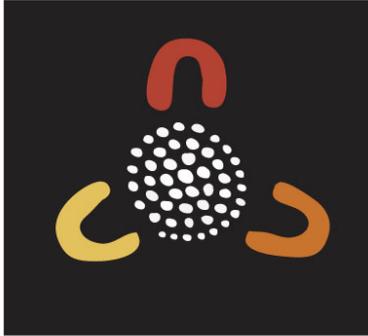
The AJRH is an excellent resource for all health students, and in particular for those with an interest in rural and remote practice. Philosophically, the AJRH promotes the formation of interdisciplinary health networks in rural areas and, through its publication of research, policy and reflective articles, supports those networks in their actual practice on-the-ground. As a result, it has a multi-professional readership with a rural interest.

Reflecting its stance in support of multi-disciplinary health teams, the AJRH is the official journal of four national professional organisations representing nursing, medicine and allied health: the Australian Association for Rural Nurses (AARN), the Australian College of Rural and Remote Medicine (ACRRM), the Council of Remote Area Nurses of Australia (CRANA) and Services for Rural and Remote Allied Health (SARRAH). The National Rural Health Alliance, a peak body for 23 national organisations with an interest in rural health, owns the AJRH, which is published by Blackwell Publishing Asia.

The AJRH is edited by Professor John Marley, Pro Vice-Chancellor (Health) in the Faculty of Health at the University of Newcastle. The AJRH is published six times a year in hard copy and on-line, is peer-reviewed and listed in Medline.



The irony was, they were both chicken.



8th National Undergraduate Rural Health Conference

What the People Want - Delivery of Health Services in Rural & Remote Australia

Barossa Arts and Convention Centre 28 September - 2 October 2004

Why Have a NURHC?

Rural areas have long suffered a shortage of health professionals from all disciplines. Issues such as geographical remoteness, lack of resources, lack of opportunities, make it difficult to attract and retain health professionals. Positive recruitment of rural students into university health courses is only one step in hoping to encourage the return of these students to rural areas. Bonded placements are another step and target a small percentage of medical students. Other government initiatives, such as the PIP Nursing Initiative is another small step designed to promote retention of allied health professionals in rural general practices. However none of these activities help to directly encourage students to:

- a) maintain their rural links;
- b) develop and foster an interest in rural health careers for students regardless of geographical background; and
- c) illustrate to students how their future professional lives can become a valuable part of a rural community working in synergy with other health professions.

NURHC is an annual conference that is designed to promote enthusiastic future health professionals at a prime time in their lives – when they are students. Investing in NURHC represents excellent value for money, with long term benefits that are priceless. The most significant benefit is providing an enthusiastic future rural health workforce, content to live and work in rural communities.

Conference Theme

“What the people want – delivery of health care in rural & remote Australia.”

University prepares future health professionals with tools of the trade that will enable diagnosis, care, treatment and a smattering of an idea of how to be the patient’s advocate. What is not clear is how to take the knowledge we are learning and marry it to the needs of the community. How to balance individual, community and the health professional’s wants and needs. Ultimately, how to create a local health service that is viable and sustainable for everyone.

Recently introduced incentives encourage health professionals and patients to move towards proactive preventative and/or maintenance care (immunisation, health checks, diabetes care incentives, asthma 3 point plan) and away from traditional fee for service, as supported by Medicare and acute care facilities, underpinning reactive consults. There is continuing debate about the role and future of bulk billing within the community (affordability issues for people), funding and role of nurses and allied health professionals within the context of primary health care (accessibility for people), and continuing feasibility of the provision of home visits (access, affordability, and safety issues for both health professionals and patients).

In May 2002, the South Australian government commissioned the *Generational Health Review* to develop a blueprint for reform over the next 20 years. The final report was released in 2003. The *Generational Health Review for SA* provides a basis that contributes to the development of a deeper understanding of the future role of health professionals within the community. During the announcement of this review, Premier Mike Rann and SA Health Minister Lea Stevens, promised “to use this Review as the means to put the consumer at the centre of health care, and we will do it. Health and health care starts with the consumer and must be driven by their needs.”

By placing patients at the centre of the debate and actively seeking opinions on how and what health services they deem to be appropriate, the review opens the way for future health professionals to re-examine their role and investigate how best to utilise their skills when working in rural communities.

‘What the people want – delivery of health care in rural & remote Australia.’

Please see www.plevin.com.au/nurhc2004/ for more details.

Rural Health Clubs



Established in 1990, **SPINRPHX** (Students and Practitioners Interested in Rural Practice, Health, Education Xcetera) is the oldest undergraduate rural health club in Australia. The club draws its members from Medicine, Nursing and Dentistry across three university campuses (The University of WA, Edith Cowan University and Curtin University).

Activities run by the club include Annual Camp, Indigenous health night, general meetings with invited rural guest speakers, Mental health night – looking after yourself ... who is looking after you? The Dr Bill Jackson Rural Undergraduate Scholarship - Essay competition and multi-disciplinary meetings with our sister allied health club WAALHIIBE. Members are also actively involved in the community through initiatives such as rural high school visits, running youth festivals in regional WA and clothing drives for remote communities. The regular monthly meetings are held on a Monday night. It's a great opportunity to make friends and at the same time gaining insight into the exciting world of rural health.

For more information: please contact our Club Administrator, Sue Pournault at WACRRM on (08) 6488 8700 or spougn@cyllene.uwa.edu.au, you can also obtain information via our website at: <http://www.spinrpheX.uwa.edu.au>



Outlook is a multidisciplinary student organisation, based at the University of Melbourne, committed to raising awareness of the health needs of under-resourced communities. Such communities include rural and indigenous Australia and developing countries, and also other disadvantaged communities, such as AIDS sufferers, etc.

Outlook members come from far and wide and include many rural-origin students, as well as students from many different health science courses. Club activities therefore provide a great opportunity to meet a wide variety of peoples. Activities organised by the club, that all members are welcome to attend, including social events, guest speaker appearances, and dinners. There are also numerous weekend trips to rural areas to help increase awareness of the health shortages, and opportunities, in these regions.

As a club we focus on a wide variety of issues and provide a wide variety of activities so there is something for everyone. We focus on issues specifically affecting rural areas as well as the rest of Australia, and also greater issues that move beyond our own shores. If you can't find something that suits your fancy, the committee always looks forward to new suggestions or even your help in getting your suggestions up and running. Numerous committee positions and sub-committees exist, so if you want to get involved there is always room for one more!

If you are after more information check out the Outlook website at <http://www.outlook.asn.au/>, come to any Outlook function, or talk to anyone wearing an Outlook T-shirt.

We look forward to you becoming an active member of the club.

More Rural Health Club News over page

Rural Health Club Information Continued



So, you're a new med student and have just been awarded a RAMUS – what do you do with your new found wealth? Easy.....

JOIN FURHS – that's the Flinders Uni Rural Health Society.

RAMUS conditions stipulate that you'll need to be a part of your rural club – which seems reasonable considering you've had country experience and hopefully have a desire to find out what practicing medicine in rural areas is like.

Which is perfect, because FURHS offers you every opportunity to explore this through our many and varied activities.

For the princely sum of \$20 you'll be a member of FURHS for 4 years. During this time, you'll be able to get involved in a variety of events, from the social to the academic, you'll even get a discount at Ramsay Medical Books Store.

Social Events

Orientation BBQs, Pub crawl (combined with Adelaide Uni and UniSA), Annual Dinner, Family Fun Days, RFDS BBQ, and our famed Bush Dance. And even more if you want to organise it!

Academic Events

Seminar series – women in rural practice, rural surgery and other procedural opportunities, training programs and integration into rural medicine, dealing with issues of sexuality in rural areas. Just about any topic is up for discussion so bring your ideas along. Rural Doctors Workforce Agency (RDWA) events for students from rural health clubs.

The first year camp – two days of Aboriginal culture and rural medicine. The 2nd year's gift to the 1st years (with a lot of support and funding from the faculty!) – a brilliant weekend.

Clinical Skills

Royal Flying Doctors Service Student Roster
Clinical skills days
Clinical skills trips – Mannum, Quorn, Pt Broughton and next year, maybe more.....

Conferences

The National Undergraduate Rural Health Conference – each year organised by the student-run National Rural Health Network. This offers a number of FURHS members the chance to meet students from around Australia and share ideas and experiences related to rural health. This is not the only opportunity for travel and the conferences are held all around Australia, so watch those frequent flyer points soar.

Plus

You'll have the opportunity to be involved with writing articles for our 4th Leg quarterly newsletter, the FURHS website, and being a part of any activity through organising or simply coming along. In addition, FURHS aims to develop our already strong allied health and nursing membership – being multi D starts here - so that we can begin to work together with our nursing, speech pathology and other allied health counterparts even before emerging into the workforce!

It's the best \$20 you'll spend – I promise!

Cheers
FURHS President
(who knows maybe this will be you in the future)

RAMUS Contact Details

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