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From the RAMUS team

We warmly welcome 115 new scholars who have already commenced their RAMUS scholarship in 2011. A further 31 scholarship offers are still in process.

We also welcome those rural doctors who have joined the Scheme as mentors and we thank the many doctors continuing their role as RAMUS mentors. The advice, support and experience that our mentors bring to the Scheme is priceless. As one scholar said in her scholar report for 2010: ‘The RAMUS mentor program has been brilliant. Since beginning medicine I have been exposed to a range of doctors, all with different personalities and specialties, but the one that I have learnt the most from is my [RAMUS] mentor. He is one doctor that I look up to and who has qualities that I hope to possess one day.’

The 11th National Rural Health Conference held in Perth in March has been a highlight of the year so far. All the members of the RAMUS team attended the Conference where we were delighted to meet many scholars, alumni and mentors face-to-face. The RAMUS networking lunch held during the Conference was a great success. A special feature of the networking lunch was the announcement Dr Mark Zafir of Albany, WA, as the 2010 RAMUS Mentor Award recipient.

Contributors to this issue of the Newsletter include: Hannah Jones, who writes about her experiences as a first year medical student and RAMUS scholar in 2010; Joel Van der Meulen whose adaptation of Banjo Patterson’s ‘Clancy of the Overflow’ was inspired by his placement in Tennant Creek; Lachlan McIver on his research fellowship; and scholars from UWA writing about the Teddy Bear Hospital initiative. Thank you also to other scholars and alumni whose 2010 scholar reports, conference reports and photos have been used for this issue of the Newsletter. We hope these might inspire others to contribute to future issues.

Now is the time for scholars and alumni to consider applying for a grant from the Conference Placement Program to attend a conference in second semester 2011. The article on p.4 summarises the eligible conferences and how to apply.

Susan, Lesley and Janine
(the RAMUS team)
RAMUS in the news

It is fascinating to read in scholars’ annual reports where they have been and what they have experienced and achieved during the year. Below is a small selection of stories and achievements from 2010 scholar reports.

Oscar Brumby-Rendell (4th year Deakin) spent time in Papua New Guinea during his summer break only to find his trip did not end as he had planned. To read his story http://www.weeklytimesnow.com.au/article/2011/02/04/289601_national-news.html


Kaylee Barnett (graduated 2010 UTAS) was awarded the Rural Doctors Association of Australia award for the student demonstrating outstanding contribution and commitment to rural practice in Tasmania for her participation in ambulance training scenarios, and assistance in organising a King Island Emergency Skills Weekend.

Amy Noakes (4th year Newcastle) spent two weeks on a GP placement in Woolgoolga, her home town. A highlight during was spending time at the Yarrawarra Indigenous Health centre with Dr John Kramer. Dr Kramer has mentored many RAMUS scholars and received a RAMUS Mentor Award in 2007.

Savannah Hoopman (graduated 2010 Sydney) completed her honours research project titled “Barriers to Insight: the impact of patient emotion on medical students’ self-assessment of communication” which contributed to her winning the PJV Beaumont Prize (and medal) for Psychiatry. Savannah’s paper has been selected for use as an example in a seminar series for teaching research skills to medical students at Sydney University.

Dr Mark Zafir receives 2010 RAMUS Mentor Award

Dr Mark Zafir, of Albany WA, is the recipient of the RAMUS Mentor Award for 2010. Dr Zafir was nominated for the award by Prue Howson and Natasha Moseley, who both graduated from University of Western Australia in 2010. Dr Zafir has participated in the RAMUS Scheme as a mentor since 2005. Over this time he has mentored three RAMUS scholars. He is also a mentor in the John Flynn Placement Program and is involved with teaching the students at the Rural Clinical School in Albany.

Dr Mark Zafir and Natasha Moseley

Prue and Natasha have both known Dr Zafir since they were children and he was their family GP. He encouraged both of them to pursue a career in medicine and he continued to support them by becoming their RAMUS mentor when they received RAMUS scholarships.

In her nomination Prue Howson said:

‘Natasha Moseley and I could not have asked for a more interested and involved mentor. We have both gained so much from the opportunities he has afforded us. Dr Zafir’s teaching method is the ‘learn by doing’ approach,
which although a little scary for the young medical student at times, was definitely the best way to learn practical skills. ….

...He is a doctor who I look up to and aspire to become one day. He is a man who truly loves and is passionate about his work. This rubbed off on me during placements, reigniting my interest in medicine, and rural medicine in particular, when at times during my degree I may have questioned my decision.

Because of Dr Zafir’s trust, guidance, support and teaching I have been given the opportunity to become a great doctor. Due to the skills he has helped me develop, I am confident that I will have a successful career in medicine. I cannot thank him enough for the help he has given me. He truly deserves the recognition of a 2010 RAMUS Mentor Award.’

Natasha Mosely described Dr Zafir as ‘hero, mentor, friend’. She said:

‘...With each passing year that I spent with Dr Zafir I became increasingly involved in his practice and increasingly able to perform examination skills and procedures. He is a rural GP with anaesthetic and obstetric training as well as training in many other procedural skills. A placement with Dr Zafir was never mundane: I would never know from one day to the next what might be in store for me the following day.

The teaching I have received from Dr Zafir has not focused solely on the skills and knowledge of this trade; it also encompassed ‘the art of the trade’. As I progressed through my training, we discussed many issues including how to deal with life and medicine, how to maintain the passion for the profession, and the key aspects of being a good doctor, not just a knowledgeable one.

Dr Zafir has a great passion for his profession and for the training of future doctors .... Not only is Mark a very willing and enthusiastic teacher but he is also a very good one; pushing students beyond their comfort zones, always believing in them and always keen to get them involved in as many aspects of medicine as possible.’

Dr Zafir’s award was announced by Dr Kathy Kirkpatrick, Deputy Chair of the National Rural Health Alliance, at the RAMUS networking lunch held during the 11th National Rural Health Conference in March. The annual RAMUS Mentor Awards recognise mentors who have made an outstanding contribution to RAMUS through the support and inspiration they give their RAMUS scholars. Mentors are nominated for the award by RAMUS scholars.

### 11th National Rural Health Conference

Many RAMUS scholars, mentors and alumni attended the 11th National Rural Health Conference in Perth. Partyline has a fantastic wrap of conference events and can be viewed here: http://nrha.ruralhealth.org.au/publications/?IntCatId=57&IntCatId=6

The wonderful Conference MC, James Fitzpatrick (pictured right) is a RAMUS alumnus. Several scholars contributed as scribes for concurrent sessions. RAMUS scholars and alumni who presented papers in concurrent sessions included: Rebekah Adams (alumnus, graduated Flinders 2007 – pictured right), Career induced infertility—a growing problem for tomorrow’s doctors;

Shannon Nott (6th year UNSW – pictured right), The future health workforce: what is it going to take to get them out bush? and Lachlan McIver (alumnus, graduated Monash 2005), Epidemiology at the extremes: an examination of the factors that affect health outcomes in very remote areas of Australia.

The RAMUS networking lunch (see pictures next page) was also well-attended by scholars, mentors, alumni and representatives of stakeholder organisations.

Susanna Hoffmann (5th year UWA) ‘found this conference has been the most positive and inspiring of all the
conferences I’ve attended. A lot of the topics were directly related to my situation……. There [were] internationally focussed speakers, including an amazing speaker from Australian Doctors International on a project run in Papua New Guinea. There were altruistic millionaires speaking of how they and medical students would cure one disease at a time (I liked how they included us in that). The social aspect was great with the best conference dinner and band I’ve ever had. The other students were so much fun and the people I met so like minded….. It has made me want to go into rural work more than ever before.’

Sally Banfield (alumnus, graduated UWA 2009) said: ‘I was fortunate to attend the RAMUS luncheon while at the 2011 conference; an opportunity to liaise with senior and junior colleagues, staff and mentors. It was inspirational to see so many people dedicate time to the luncheon, a strong indication of the support and collegial spirit people have of the program.’

Pasqualina Coffey (alumnus, graduated Melbourne 2008) noted that ‘one of the main things I think I learnt was that there is just so much scope to be involved with and in community health. Whether you are a doctor, nurse, academic, musician, there is just great opportunity to promote community health and advocate for social justice, cultural safety and equity within health.’

Conference Placement Program
Applications now open for 2nd semester

The Conference Placement Program (CPP) provides grants to current and former RAMUS scholars to attend selected conferences. There will be about 30 CPP grants available in second semester 2011.

The list of eligible conferences for the second half of 2011 is now available. Go to http://ramus.ruralhealth.org.au/conference-placement-program for the list of eligible conferences, the CPP application form and the detailed CPP guidelines.

The eligible conferences cover primary care research, general practice, rural medicine, chronic diseases, emergency medicine and other topics relevant to rural, remote and Indigenous health. Conferences included in the list are those that have a rural and remote health context or will enhance clinical skills in rural practice and are being held in Australia.

Current RAMUS scholars in any year of study and former scholars who are members of the RAMUS Alumnus program are eligible to apply to the CPP.

Please note the due date for applications for any conference you are interested in. The due dates are strictly observed and late applications are unlikely to be considered. This is to make sure that applications can be assessed and successful applicants notified well before the conference to give them plenty of time to organise their conference registration and travel and accommodation.

Applications for eligible conferences being held in July 2011 are due by 30 May.

The CPP has become very popular and we often receive two or three times as many applications for a particular conference as the number of grants available. CPP applications are assessed against the selection criteria set out on the application form and preference is also given to applicants who have not previously received a CPP grant.
2010: a year of new ideas and new opportunities
by Hannah Jones

Hannah is a second year medical student at the University of Wollongong and was awarded a RAMUS in 2010. Here is an edited version of her 2010 report for RAMUS in which she writes about her experiences as a RAMUS scholar in 2010 and what these mean for her future career plans.

2010 saw me complete the first year of my medical degree. It was a year of adjustments; adjusting to new people, new ideas and concepts, new workloads, and new opportunities for growth and development. My plans to become an Obstetrician/Gynaecologist and to practice medicine rurally were strengthened during the year; in many ways this was due to the RAMUS program.

My RAMUS mentor is a GP with obstetric training from my home town of Cootamundra in NSW. Spending time with him I was able to witness what it was like to practice in that field in a rural town and to observe the inner workings of a rural practice. I saw the hectic workload rural medicine demands of its practitioners. This was something that had daunted me about rural medicine, but as my mentor pointed out, it is something that you simply get used to. You have little control over it but it is lifestyle you sign up for and therefore you adjust. It was invaluable to hear the experiences of a practising rural doctor this early in my medical pathway.

It was also rewarding to witness the close relationship that my mentor had with his patients. He knew them, knew their families, could chat and laugh with them. They trusted him and knew to come to him with their problems. When I asked my mentor what was different between rural and urban medicine, he said quite quickly it was the ongoing patient care. He said that you have an opportunity to build a strong patient relationship that is ongoing. In the city there are so many people and so many specialists that a lot of your work is passing people over to someone else. I loved seeing the relationships that can develop in a rural medical centre; they are the types of relationships that I want with my patients one day. When you have the opportunity to get to know your patients, you are able to provide better, more personalised care to that patient.

I came out of this time spent with my mentor and his obstetric patients with a deepened desire to practise obstetrics rurally. I witnessed how my mentor was a real asset to his community. I have long desired to make a difference in an area where the need is dire. As an obstetrician in a rural town, I know that I can impact that community considerably.

The staff and academics at the university have a great commitment to rural medicine and they are doing much to prepare me for that life. I had the pleasure of a three week placement to Grafton in the northern rivers district of NSW. It was an opportunity to observe how multiple teams work together to provide the best possible care. I am looking forward to more rural placements to gain more experience.

The people in my rural health club continue to inspire me with their passion for rural medicine. They challenge me not just to sit back and wait until I am a doctor to become involved. I love the opportunity to raise awareness of the problems in health but in rural health in particular, and the rural health club is the perfect means to do that.

I have found this year of being a part of the RAMUS scheme extremely rewarding. My commitment to rural medicine has deepened through the opportunities afforded me by the mentorship program and through the financial support that has eased so many of the burdens of being a fulltime medical student.

UWA’s Teddy Bear Hospital initiative

In 2010, several scholars took part in University of Western Australia’s Teddy Bear Hospital initiative.

Mariana Dorkham (4th year UWA) says ‘2010 has been largely dominated by my responsibility and involvement as Teddy Bear Hospital Coordinator at UWA. TBH is comprised of a group of volunteer medical students visiting primary schools to set up a ‘Teddy Bear
Hospital’, whereby children (from Kindergarten to Year 1) bring ‘sick teddies’ in for the ‘Teddy Doctor’ to see. As Teddy Doctors, the medical students examine the sick teddy with a range of medical equipment, such as stethoscopes, tongue depressors and tendon hammers, and finally give a prescription of fruit for the child/teddy to eat, all recorded in the children’s ‘Teddicare Cards’. The main aims of the TBH program are to help alleviate the fear of doctors for children, to promote healthy messages to children, and to improve medical students’ communication & interaction with children.

This year, I made it one of my goals to extend the program further than Perth and further than solely primary schools. 2010 saw the Inaugural Rural Trip, held in November…. The trip was done as a day trip to the Greater Bunbury region and was met with resounding interest. Nineteen Teddy Doctors took part in the day trip and, all in all, it was a huge success.’

Teddy Doctor Erin O’Donnell Taylor with a skeleton teddy bear

Erin O’Donnell Taylor (4th year UWA) reports ‘...I thoroughly enjoyed... the Teddy Bear Hospital Inaugural Rural Visit. The session starts off with introducing the “teddy doctors”, singing songs, playing teddy related games outdoors and colouring in teddy skeletons. From there children enter the “waiting room” where they fill out their “teddycare card” with activities that re-enforce the importance of fruits and vegetables and hand-washing.

Kids then take teddy to see the doctor who listens to what happened to teddy, a story which usually involves many broken bones. The doctor performs a full check-up on the teddy; X-ray, reflexes, listening to heart and lungs, looking in eyes, mouth and ears. The doctor prescribes bandages, hugs and fruit which the nurses give them.

The entire process is fun and informative for children and also teaches medical students how to interact with children, which will prepare them for treating children later down the track. I have been on many visits to metropolitan schools this year with Teddy Bear Hospital, however the visit I was most keen for was the rural visit. Coming from the country, I know firsthand that those living in the country often don’t have access to certain initiatives their metropolitan counterparts do.’

Erin giving the patient a prescription for bandages and fruit

Emma Jones (3rd year UWA) said of her involvement with The Teddy Bear Hospital ‘... I think it’s great that these children have the opportunity to experience what I think is a wonderful program.’

Teddy Doctor Emma Jones with her RFDS nurse teddy
James Dunbar’s upbeat editorial on the current status of rural health research “Innovation in rural health: Sound the trumpet!” sets a very positive tone for the June 2011 issue of the *Australian Journal of Rural Health*. Professor Dunbar’s assessment reflects the recent success of rural and remote researchers in the first round of funding for Centres for Research Excellence in Primary Health Care as well as key articles in the current issue of AJRH. A major review article looks at reorienting primary health care for addressing chronic conditions in remote Australia and the South Pacific. The international flavour is extended through an article that compares diabetes prevention programs in rural Montana and south eastern Australia.

Leading rural health Professors John Wakeman (Alice Springs) and John Humphreys (Bendigo) examine sustainable primary health care services in rural and remote areas and conclude “...we do have a significant amount of information about what works, where and why.”

Other articles focus on: the psychosocial impacts of fly-in fly-out and drive-in drive-out mining on mining employees; and problem gambling in rural communities. There’s also an evaluation of the John Flynn Placement Program.
Hi team,

After reading the latest issue of the RAMUS newsletter, I thought I'd drop you guys a line to let you know about an amazing program that I've had the good fortune to be involved in this year. I'm a RAMUS alumnus (graduated Monash 2005) and am in the final stages of ACRRM training, having worked as an SMO on Thursday Island in the Torres Strait since January 2009. I'm currently in the USA as the Australian Primary Health Care Research Institute/Robert Graham Center Visiting Research Fellow for 2010, for which I've just spent the last five weeks in Washington DC working on a research project entitled "Epidemiology at the extremes: an examination of the factors affecting health outcomes in remote areas of Australia". The Fellowship program is a fantastic opportunity for early career researchers in the field of primary health care, and I would encourage students and trainees to learn more about this program and consider applying once they reach the end of their training.

A link to more information about the program can be found here: http://www.anu.edu.au/aphcri/Spokes_Research_Program/2010_APHCRI_RGC_fellowship.php

Dr. Lachlan McIver MBBS MPH&TM JCC(Anaes)
Senior Medical Officer
Thursday Island Hospital

(Lachlan reported on preliminary results of his research project at the 11th National Rural Health Conference)
Clancy's Medical Reprise

by Joel Van der Meulen
(4th year UQ)

I had written, not a letter but an email to a faceless
Woman hiding out in Alice where the Todd so seldom flows.
I had dreams of outback doct'ring, of stethoscopes and flies,
Red dust, and gentian violet painted on from head to toe.
In the words of epic poets, I would seek a simple living.
One of purpose and of nature, where the ghostly gums grow tall.
And to move within the spinning of seasons, and to spend myself
On bettering the lot of those who need it most of all.

But the answer came directed in a digital transmission,
Run from Alice Springs to Hervey Bay on fibre-optics sleek.
And hopes of bush tranquillity were dealt a savage blow,
For instead of 'back of nowhere, I was off to Tennant Creek!

Ne're a hint of lowing cattle, I have yet to see a horse
Nor cow, but those aboard the road-trains as they ply the Stuart run.
And the everlasting stars are dulled by sulph'rus glowing bulbs,
As the streetlights strive to imitate the burning desert sun.

I could feed myself on charcoal-crusted damper, or a gritty
Bit of jerkie just as Clancy did, in ages sadly gone.
But the supermarket down the road sells bread and frozen meals.
There's an oven in the kitchen, and a barbie on the lawn.

And the beer flows like the Lachlan at the Tennant Creek Hotel
And it drains the street of people when the opening bell is tolled.
And when its closing cousin chimes they melt into the night,
With wobbly boot upon the foot, with singing coarse and bold.

And though I rather fancy that I'd like to change with Clancy,
All those city slicking surgeons, they can keep their snobbish clique.
With sad and sterile offices, and dustless four wheel drives.
A pox upon the lot of em. I'm keeping Tennant Creek!

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