Extended scope of practice, emerging health professions and rural career pathway attraction opportunities

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Background

The National Rural Health Students’ Network (NRHSN) is an interprofessional student network, with over 9000 members nationwide. The NRHSN believes that all health professionals contribute significantly to health outcomes in rural and remote Australia and all have the potential to contribute to better health outcomes.

In rural and remote Australia, access to health professionals is limited. Even in the 21st century, some rural and remote communities do not have access to adequate health care.

There is now great hope that the large numbers of medical, nursing and allied health graduates emerging from universities across the country will help turn this situation around. With adequate investment in positions for these graduates to take up postings in rural and remote Australia, there is significant potential for the health opportunities of individuals living in these communities to markedly improve.

Australia has experienced health workforce shortages for a long time now with a persistent maldistribution of workforce in rural and remote locations. It is possible that attracting more medical, nursing and allied health graduates to the bush may alone be insufficient to adequately address this country’s rural and remote health workforce needs.

Two strategies that could help deliver a more productive, resilient and skilled rural and remote health workforce, are currently being considered as potential adjunct solutions:

- the development of extended scopes of practice for the current health professions
- the introduction of new health assistant roles under the banner of “emerging health professions”.

The development of extended scopes of practice proposes to provide opportunities for interested practitioners to expand their knowledge, skills and training in order to acquire a unique professional qualification for their discipline. With an extended scope of practice accrediting them to perform certain clinical tasks outside the usual scope of their profession, such practitioners become valued assets to an otherwise understaffed health care team due to the broader range of services they can provide. Nurse practitioners and rural medical generalists provide current examples of extended scopes of practice.

The introduction of new health assistant roles, on the other hand, refers to developing an assistant health workforce capable of performing certain tasks under the supervision of existing health professionals. Introducing new health assistant roles is proposed to help drive greater health workforce productivity by enabling health professionals to spend a greater proportion of their time on tasks demanding of their specialist knowledge and expertise. A number of potential new health assistant roles are already undergoing planning in Australia, with physician assistants and allied health assistant roles among those currently being considered.

This paper outlines the NRHSN position on both these proposed strategies. It also draws attention to the increasing pool of health graduates and this new opportunity to facilitate higher levels of graduates moving into rural and remote Australia.
NRHSN position

Extended scope of practice for the current health professions—the rural generalists
In rural and remote Australia, access to some health professionals is limited and many health professionals on the ground are faced with the challenge of dealing with a wider range of medical conditions than their standard level of training would have prepared them for.

In order to develop a health workforce that is better equipped to deal with such challenges, the NRHSN is supportive of introducing extended scopes of practice for the current professions whereby interested health practitioners have opportunity to pursue a dedicated training pathway designed to equip them with broad “generalist” knowledge and skills enabling them to provide a greater spectrum of care to patients than would normally be expected for their profession.

The NRHSN has identified growing interest among current health students in this concept of “rural generalism”, and this is not surprising given the diversity of rural and remote practice is a common motivating factor when considering a rural and remote career. The NRHSN, however, has also identified that there is a common perception within and outside of the profession that generalist work is professionally and financially undervalued compared to other “specialties”. Unless this perception is addressed and countered with a strategy that positively promotes the importance and rewards of generalist practice, it is possible that many potential recruits to a rural generalist career could be lost due to graduates alternatively choosing other specialties motivated by the prospect of greater professional recognition and financial reward.

The NRHSN believes that for a pathway to rural generalist practice to be successful and attractive to future health professionals, it needs to be clearly articulated, well supported and backed by competitive remuneration. The NRHSN believes that the Rural Generalist Pathway in Queensland provides a good model of how this can be achieved, and that the Rural Doctors Association of Australia proposal for a National Rural Advanced Training Pathway¹ has merit in many similar regards. NRHSN looks forward to the mid-2013 release of a National Rural Medical Generalist Framework Project from HWA, which will scope what is needed to establish a coordinated cross-jurisdictional pathway to a flexible Rural Medical Generalist workforce.

As other jurisdictions and health disciplines now look to develop their own approaches to training a new generation of rural generalists, the NRHSN wishes to make the following recommendations regarding any further rollout of rural generalist training programs:

- **Recommendation 1:** That the perception that generalist work is professionally undervalued be directly addressed through a national campaign promoting the importance and rewards of generalist practice as a specialty in its own right.

- **Recommendation 2:** That clear training pathways towards rural generalist careers be articulated in medicine, nursing and allied health where a distinction between standard and rural generalist practice is considered appropriate. Health students will be more likely to consider a rural generalist career if the pathway to get there is clear, straightforward, well supported, and easy to navigate.

- **Recommendation 3:** That a strategy be developed to monitor the effectiveness of any new extended scopes of practice training programs.

The emerging health professions
Many health professionals currently spend a considerable proportion of their time on administrative or clinical tasks that could be otherwise performed to a high standard by a health assistant workforce. This

has a negative effect on productivity and potentially exacerbates the impact of a lack of health professionals in many rural and remote communities.

The NRHSN supports greater enquiry into how health assistant roles may be developed to promote greater levels of job support, satisfaction and productivity for current health professionals working in rural and remote Australia. The current work by HWA on the Expanded Scopes of Practice Program\(^2\) is a promising initiative that the NRHSN hopes will be extended across the spectrum of health professions as the program becomes established.

The NRHSN makes the following recommendations with regard to the introduction of new health assistant roles:

- **Recommendation 4:** That the development of any new health assistant roles be undertaken in consultation with key stakeholders including representatives from the most closely associated current health professional body and appropriate consumer groups.

- **Recommendation 5:** That any training for new health assistant roles be accessible to individuals living in rural and remote communities, as this will provide an important way in which rural and remote communities could be supported to help “grow” a local health workforce.

- **Recommendation 6:** That a strategy be developed to monitor the effectiveness of any new health assistant roles that are introduced.

**But what about the current record numbers of graduating health students?**

While new generalist training pathways and new health professions provide potential solutions for filling rural and remote health workforce gaps, the NRHSN believes that it is essential that the introduction of either or both takes into account the capacity of the current health system to accommodate and provide quality supervision for trainees of these professions.

As Australia currently has an undersupply of many health professional graduate training places due to lack of supervision capacity, the NRHSN urges careful workforce planning to ensure that any new health profession training programs are able to be supervised and that investment in new and current training programs is not wasted due to inability to accommodate graduates.

The NRHSN believes that Government and stakeholders should give immediate priority to establishing more positions in regional, rural and remote Australia for the unprecedented numbers of medical, nursing and allied health graduates now emerging from universities across the country. By establishing additional internship, new graduate and other postgraduate training places in rural settings, these graduates will be encouraged to move where their skills and services are needed the most. The creation of such places is essential to ensure that recent increases to health student numbers at universities across the country translate into a corresponding increase in the number of health professionals working in rural and remote Australia into the future. In addition to the NRHSN recommendations has made to encourage graduates to ‘go rural’ within our National Priorities Paper we also recommend a further initiative:

- **Recommendation 7:** For more medical, nursing and allied health internship, new graduate and other postgraduate positions to be urgently created in rural and remote areas in order to capitalise on the opportunity to recruit a reasonable proportion of the increased number of health graduates to the communities where they are most in need.

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