



Priority Recommendations from the 13th National Rural Health Conference

It is vital that people in rural and remote Australia have access to high quality, affordable, safe and well-coordinated health care. To ensure that they do, delegates at the 13th National Rural Health Conference call upon governments to adopt the 10 priority recommendations below.

1. Aboriginal and Torres Strait Islander health and health services

Delegates agree that they will not tolerate continued failure to improve the health and wellbeing of Aboriginal and Torres Strait Islander people. In addition to existing programs and initiatives, Conference delegates urge:

- the Commonwealth Government, as a matter of urgency, to announce and fund an Implementation Plan for the National Aboriginal Health Strategy;
- Commonwealth, State and Territory governments to establish a joint fund to compensate Aboriginal and Torres Strait Islander people, and Aboriginal health services, for the time they spend helping to design, implement and evaluate programs and projects; and
- the Commonwealth Government to fund clinical pharmacy positions in Aboriginal health services to oversee the delivery of the S100 Remote Area Aboriginal Health Service Program.

2. Broadband

Fast, reliable, affordable, digital access is an urgent priority for remote and rural communities, for business and recreational purposes as well as for health services such as telehealth and telecare.

Delegates call on:

- the Commonwealth Government to develop a remote digital inclusion framework and telecommunications strategy to ensure that remote and rural Australians can effectively participate in the global digital economy; and
- the Department of Health to undertake a comprehensive review of telehealth/telecare initiatives that identifies ways of extending and improving services delivered through such mediums, providing sustainable resourcing for them, and establishing business models that effectively underpin implementation and sustainability.

3. The success of Primary Health Networks in rural and remote areas

It is vital that the Primary Health Networks (PHNs) help facilitate tangible improvements in the health and wellbeing of rural and remote Australians. To succeed, PHNs with rural and remote populations will need to work differently from their metropolitan counterparts. Delegates call on the Commonwealth Department of Health to establish a cross portfolio Working Group, designed to assist rural PHNs find ways of working collaboratively across program areas in various portfolios, including: disability and aged care services; acute and primary care; preventive health; education and Indigenous affairs. The Working Group should look in particular at:

- ways of capitalising on the local knowledge and capacities of existing service providers (for example Multi-Purpose Services, community health services and Aboriginal Community Controlled Health Services);
- alternative approaches to funding service delivery (such as block and pooled funding options);
- proven methods of engaging local communities; and
- novel approaches to organisational management and governance.

4. Food security

Delegates call on the Senate to establish an inquiry into food security in remote and rural areas. The terms of reference should include:

- a review of the supply chain and cold storage issues;
- the potential introduction of a community service obligation on food wholesalers and retailers;
- ways in which local and regional food production and supply systems can be established or encouraged;
- food literacy and behavioural change policies; and
- the hypothecation of taxation on unhealthy foods.

5. Implementation of the National Disability Insurance Scheme

For the NDIS to succeed in rural and remote areas, there needs to be a substantial increase in the supply of service providers available in those areas. Delegates call on the National Disability Insurance Agency to trial innovative, local responses that include engagement and liaison with existing workers. Such approaches could include:

- a key worker model that would enable a nominated health professional to oversee the delivery of the entire package of care for an NDIS participant in a remote area; and,
- employing local, community workers to work in partnership with key workers, particularly in remote Indigenous communities. These individuals could provide regular, on the ground support for people with disabilities in their local community, help key workers to operate effectively, and act as community/cultural advisors.

6. Health workforce

Delegates call on the Commonwealth Government to convene a Summit on rural and remote health workforce issues that leads to the development of a National Rural Health Workforce Strategy. The Strategy should identify ways of addressing longstanding challenges, including:

- recruitment and retention of the rural and remote health workforce;
- expanding access to continuing professional development, mentoring and 'upskilling' for existing rural and remote health workers;
- effective methods of identifying students and graduates most suited to working in rural and remote areas;
- the need for a national, longitudinal health workforce data set that can inform workforce planning and incentive programs;
- the adequacy of rural and remote training places and incentive programs for health professionals in rural and remote areas;
- methods for funding the training of health service managers in rural and remote areas;
- ways of expanding and developing the Aboriginal and Torres Strait Islander Health Worker profession;
- options for developing rural generalist pathways for all health professionals; and
- the possibility of revising existing scopes of practice for health professionals working in sparsely populated areas.

7. Funding rural and remote health service delivery

Although the burden of disease is generally higher in rural and remote areas, expenditure on health care tends to be lower, often because people have limited access to Medicare-funded services. To remedy this disparity, delegates call on the Commonwealth Government to examine ways of expanding access to Medicare in rural and remote Australia as part of the work of its Medicare Benefits Schedule (MBS) Review Taskforce. Specific issues that should be considered include:

- developing new funding models to support multi-disciplinary team practice in primary care; and
- expanding access to Nurse Practitioner and allied health services under the MBS in rural and remote settings with demonstrated workforce shortages.



8. Child health

In view of the rising prevalence of children with chronic illness and learning difficulties whose conditions require early identification and management, delegates calls on Commonwealth, State and Territory governments to:

- agree and implement a co-ordinated national approach to screening and early intervention programs for children that includes a nationwide, standardised school-readiness screening program;
- fund culturally appropriate ante- and post- natal care clinics supported by Aboriginal and Torres Strait Islander health workers to encourage the uptake of early screening by Indigenous women and children, and to support family focussed care; and
- increase funding for successful programs that work to prevent family violence in rural and remote areas.

9. Eye health

With 94 per cent of vision loss in Aboriginal communities being preventable or treatable, delegates recommend Commonwealth, State and Territory governments jointly fund an integrated strategy to Close the Gap for Vision. This strategy should include:

- increased funding for visiting optometry and ophthalmology services in areas of need;
- programs to support local and state-wide co-ordination and community control;
- a subsidised spectacle scheme for rural and remote areas and Aboriginal and Torres Strait Islander communities;
- support for trachoma elimination; and
- funding to support monitoring, reporting and national oversight of the strategy.

10. International health

As part of its commitment to the region, Australia should continue to take an active and proactive role in improving the health and wellbeing of people in all Oceanic nations. To progress this goal, Delegates recommend that the Commonwealth Government:

- invest in work to identify the threats to health, wellbeing and security posed by climate change in the region, along with options to ameliorate its consequences;
- develop a multinational plan to prevent and eliminate the infectious diseases of greatest burden regionally (including malaria, TB, leprosy); and
- develop partnerships between Australian health professions and their equivalents in neighbouring countries to support joint training opportunities in rural and remote health.