

National Rural Health Alliance

Annual Report

1996 - 1997

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Annual

NATIONAL RURAL

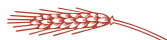
Report

HEALTH ALLIANCE INC.

1996-1997



National Rural
Health Alliance



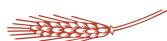
Annual

NATIONAL RURAL

Report

HEALTH ALLIANCE INC.

1996-1997



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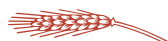
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CONTENTS

<i>Member Bodies of the Alliance</i>	<u>4</u>
<i>Members of Executive</i>	<u>4</u>
<i>Members of Council</i>	<u>5</u>
<i>Executive Summary</i>	<u>6</u>
<i>Strengthening the Bonds Between Alliance Members</i>	<u>8</u>
<i>Review of the NRHA</i>	<u>8</u>
<i>Policy Priorities</i>	<u>9</u>
<i>Representational Activities of the Alliance</i>	<u>11</u>
<i>The Continuing Search for Financial Security</i>	<u>12</u>
<i>NRHA Staff</i>	<u>13</u>
<i>New Faces and a New Address</i>	<u>13</u>
<i>Promotion and Community Liaison</i>	<u>13</u>
<i>The 4th National Rural Health Conference</i>	<u>14</u>
<i>The National Rural Public Health Forum</i>	<u>14</u>
<i>The 5th National Rural Health Conference</i>	<u>14</u>
<i>Financial Affairs</i>	<u>15</u>
<i>NRHA Publications</i>	<u>16</u>



MEMBER BODIES OF THE ALLIANCE

- Association for Australian Rural Nurses Inc. (AARN)
- The Rural Interest Group of the Australian Community Health Association (ACHA)
- Australian College of Health Service Executives (rural members) (ACHSE)
- The Rural Policy Group of the Australian Healthcare Association (AHA, RPG)
- Australian Nursing Federation (rural members) (ANF)
- The Australian Rural and Remote Allied Health Taskforce of the Australian Council of Allied Health Professions (ARRAHT)
- Aboriginal and Torres Strait Islander Commission (ATSIC)
- Council of Remote Area Nurses of Australia Inc. (CRANA)
- Country Women's Association of Australia (CWAA)
- The Rural Faculty of the Royal Australian College of General Practitioners (RF, RACGP)
- Health Consumers of Rural and Remote Australia - formerly the Rural and Remote Consumer Health Network (HCRRRA)
- Isolated Children's Parents' Association (ICPA)
- National Aboriginal Community Controlled Health Organisation (NACCHO)
- National Association of Rural Health Training Units (NARHTU)
- Rural Doctors' Association of Australia (RDAA)
- The Australian Council of the Royal Flying Doctor Service of Australia (RFDS)
- Rural Pharmacists Australia - the Rural Interest Group of the Pharmacy Guild of Australia and the Pharmaceutical Society of Australia (RPA)
- Services for Australian Rural and Remote Allied Health (SARRAH)

MEMBERS OF THE EXECUTIVE, 1996/97

<i>Name</i>	<i>Representing</i>	<i>Position</i>
WADE, Sue	ACHA	Chairperson
HODGSON, Dr Lyn	ARRAHT	Deputy Chairperson (1 July 96 - 15 Dec 96)
HARRIS, Dr Bruce	RF, RACGP	Deputy Chairperson (15 Dec 96 - 30 June 97)
HANSFORD, Margaret	RFDS	Hon Treasurer
MAHONY, Patrick	RPA	Hon Secretary
KNIGHT, Sabina	CRANA	Immediate Past Chairperson

OTHER MEMBERS OF COUNCIL, 1996/97 :

ADAMS, Judith	AHA, RPG	LAXTON, Sylvia	CWAA
BLUE, Ian	AARN	LAWRENCE, John	ACHSE
BROWN, Margaret	HCRRA	McLELLAN, Jenny	ICPA
BUTCHER, Mike (from 1 August 1996)	RDAA	MOORE, Renae (from 12 March 1997)	ARRAHT
CHATER, Bruce (1 July 1996 - April 1997)	Co-opted Member	PRIDEAUX, Colleen	NACCHO
CLARK, Steve	NARHTU	STEWART, Margaret	ANF
HUMES, Bill	ATSIC	WARD, John (1 July 1996-30 May 1997)	SARRAH

OTHERS WHO ATTENDED ALLIANCE OR COUNCIL MEETINGS AS PROXIES :

ROBINSON, Mark	RDAA
PUSMUCANS, Mandy	CRANA
MATERNE, Julia	ICPA
RICHARDS, Barry	RPA
BISHOP, Michael	SARRAH



L-R (back): Bill Humes, John Ward, Julia Materne, Colleen Prideaux, Gordon Gregory, Marg Brown, John Lawrence, Margaret Hansford, Ian Blue, Judith Adams, Sabina Knight, Patrick Mahony, Sylvia Laxton, Steve Clark, Margi Stewart and Mike Buthcher.

L-R (front): Bruce Chater, Bruce Harris, Sue Wade and John Anderson (Dept. of Health and Family Services). Absent: Lyn Hodgson.

OVERVIEW

The financial year 1996/97 was one of further expansion and maturing for the National Rural Health Alliance (NRHA).

The Alliance has further developed its position as the peak body working to improve health outcomes in rural and remote areas. During the year it was reviewed by the Commonwealth Department of Health and Family Services and, as a result, its core financial support was confirmed for 1997/98 and 1998/99.

The Alliance is a collaboration of eighteen national organisations. The health care professionals dominate the numbers in the Alliance's membership. At the same time the organisation has a strong consumer focus, with the Country Women's Association of Australia, the Isolated Children's Parents' Association and Health Consumers of Rural and Remote Australia being the main bodies which represent consumers.

The Alliance has a broad definition of health, encompassing the mental, physical, spiritual and community well-being of individuals and their communities. It has adopted a primary health care focus for its work, in which all sectors related to health are involved, and in which it is recognised that health is affected by economic, social and political conditions as well as by health services in the narrow sense.

The Rural Health Alliance is a fine example of the intersectoral co-operation upon which primary health care rests. In its internal operations it shows the effective collaboration which is possible between different health professions and between them and consumers. In its external work it shows the value of communication and joint activity between the health sector and others whose activity influences health outcomes.

Overall the Alliance has had success in maintaining issues relating to rural and remote health high on the political agenda. Given the status of health in non-metropolitan areas, and continued downward pressure on health expenditures, it will be important for this profile to be retained. If it is not, there will be continuing problems of equity and access in the health area for people who live and work in country areas.

One of the most important tasks for the Alliance is organisation of the Biennial National Rural Health Conference. The 4th was held in Perth in February 1997. With some 750 delegates this was one of the largest public meetings ever held in Australia on general rural and remote health policies.

The communique and recommendations from the Conference were widely circulated. They call for strong collaborative action between governments, including to improve the appalling state of indigenous health.

The recommendations from the Conference also formed the central part of the Alliance's Submission to the review and revision of the National Rural Health Strategy. The revision will lead to a new Strategy being signed by Health Ministers in 1998, hopefully with a companion National Rural Health Plan. The Alliance's submission to this review and revision has been published as 'Action on Rural Health'.

The Council of the Alliance held two face to face meetings during the financial year. The first was in Canberra in November 1996 and the second in Perth in February 1997. In addition Council has continued to meet each month by teleconference. Sue Wade has worked tirelessly and effectively as Chairperson of Council since December 1995. In 1996/97 Lyn Hodgson and Bruce Harris held the position of Deputy Chairperson, Patrick Mahony was Honorary Secretary and Margaret Hansford was Honorary Treasurer.

The 5th Annual General Meeting of the Alliance was held in Canberra in November 1996. The 6th is to be held in Adelaide on 15 October 1997.

The Alliance has its Office in Canberra. The permanent staff consists of a full time Executive Director and the equivalent of one and a half administrative staff. For much of 1996/97 Des Murray was employed as Policy Officer working first on the 4th Conference and then on the National Rural Public Health Forum to be held in Adelaide in October 1997.

In June 1997 the Office moved to new premises at 4 Campion Street, Deakin. We always welcome interested visitors to the Office; please bring your own chocolate biscuits.

Gordon Gregory
Executive Director



STRENGTHENING THE BONDS BETWEEN ALLIANCE MEMBERS

The provision of comprehensive and high quality health services to rural and remote Australians is an expensive and complex challenge which governments of all persuasions have had difficulty in meeting. In this, the fifth year of the Alliance's formal existence, it is now in a unique position to represent the health interests of non-metropolitan people to governments, professional associations and other bodies.

As the Councillors of the Alliance have developed closer links through monthly teleconferences and twice-yearly face-to-face meetings, there has been a wider recognition of the organisation's role as the peak non-government advocate for improved health outcomes for people in rural and remote Australia. The quality of the role played by our Councillors and the work of the National Office have been the key factors in determining the increasing credibility and success of the Alliance during the past 12 months.

Each of the Councillors represents one of our Member Bodies, all of which are national agencies in their own right, or the rural special interest groups of national bodies. It is encouraging to note that the growing communication and collaboration between Councillors and - through them - the organisations they represent, has resulted in a significant rise in requests received by the Alliance for information, formal and informal input, views and representational activity on a wide range of key issues affecting the health and well-being of rural Australians.

The Alliance also owes much to the on-going enthusiasm and support of the rural health professionals, consumers, politicians and public servants whose foresight conceived and supported the initial National Rural Health Conferences, from which it grew.

REVIEW OF THE NRHA

In April 1997 officers of the Federal Department of Health and Family Services undertook a review of the work of the Alliance, resulting in the Minister's approval of continuing funding of the NRHA under the Rural Health Support, Education and Training Program.

Tony Kingdon, WA Director of Health and Family Services, presents Dr Wooldridge's speech to the 4th Conference



Throughout the year 1996-7 the Alliance promoted action on a number of issues considered by Council to be of the highest priority.

Part of the work of the 4th National Rural Health Conference in Perth in February 1997 was an audit of what developments have been undertaken in each of these areas, what changes need to be made to their relative priority and what new priorities have emerged. The priorities identified include:

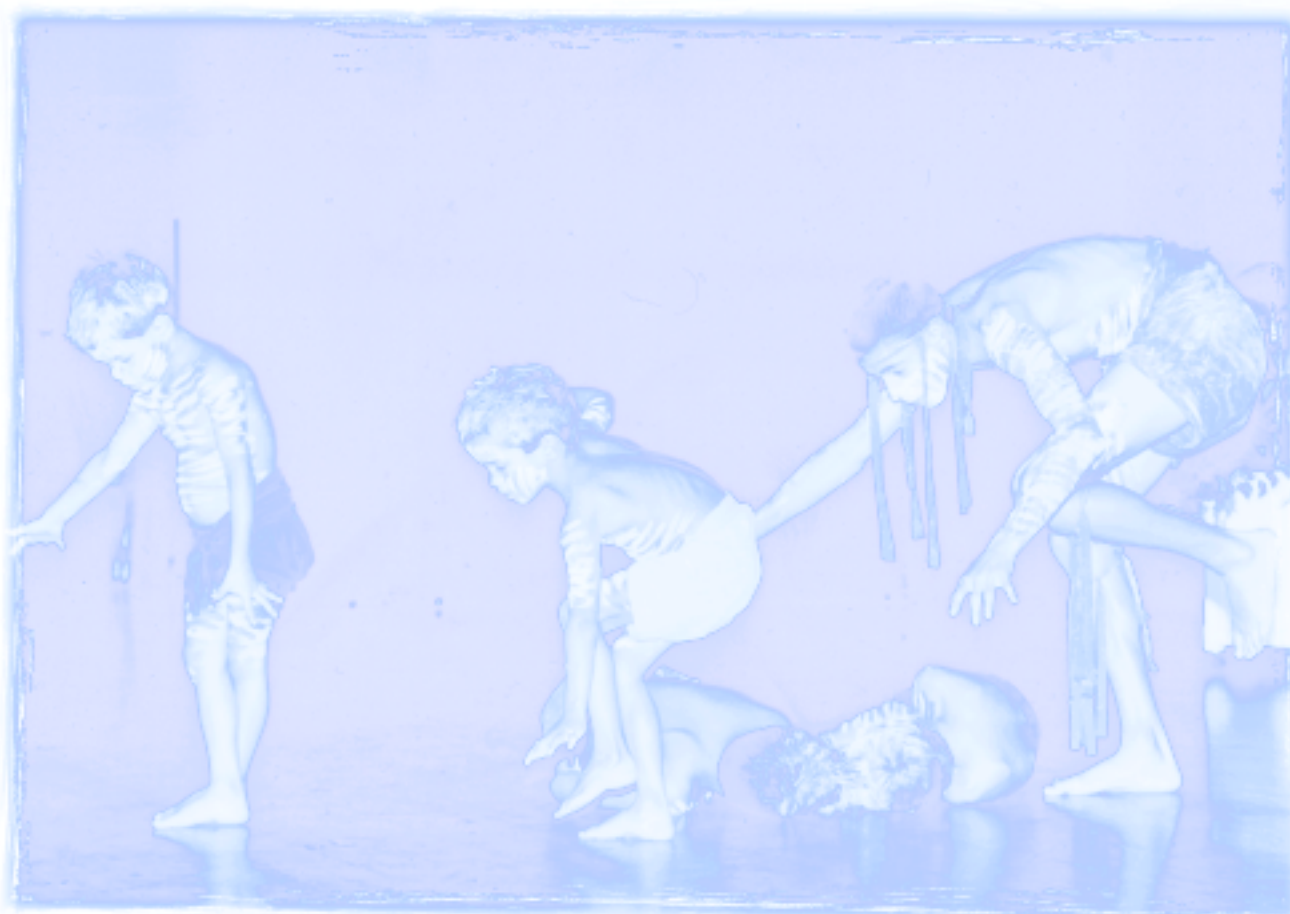
- Education, training and support programs for all rural health professionals.
- The collation and publication in easily accessible and comprehensible form of a greater amount of comprehensive data on rural health status, services and professionals.
- Improved access to mental health services in rural and remote areas, including continued attention to suicide prevention strategies, particularly for rural youth. There is an urgent need to address the shortage of psychiatrists in rural areas and the specialist services they provide.



Dr Bruce Harris, Mrs Joan Scott, WA Premier Richard Court, Sue Wade (NRHA Chairperson) and Bruce Scott (Federal Minister for Veterans' Affairs), Perth, February 1997.

- Greater attention to the contribution that must be made by agencies that are not in the 'health service mainstream' to the improvement of Aboriginal and Torres Strait Islander health outcomes.
- Promoting a greater awareness of the prevalence of risk-taking behaviour in rural and remote areas, particularly among men, and using this as a part of a campaign to encourage self responsibility and health promotion.
- Improving health care for the aged in rural and remote areas, including through training in geriatrics and aged care for existing health workers, and the placement of specialist geriatricians and aged care workers in rural health services.
- Child and family health in rural and remote areas, including immunisation and issues relating to obstetrics and professional indemnity.
- Greater attention to the needs of rural youth with respect to sexual health, including contraception, HIV-AIDS and alternative sexual identity.

- Provision of adequate and long-term funds and political support for a comprehensive network of Rural Health Training Units.
- Rural and remote nursing workforce planning.
- Communication and information systems to support health consumers, services and workers, including continued development of interactive technologies. These systems would be used to help in rural and remote health education, service delivery, planning and evaluation. The work should result in smarter systems and greater inter-sectoral collaboration, including the use of the systems of non-health agencies, including those of Federal, State and Territory Departments, and local government.
- Issues affecting rural general practice, including the structure and effects of the Medicare Agreement, and support for potential and existing rural doctors and their families.
- Developments in Advanced Nursing Practice.
- The promotion of a primary health care approach to rural and remote health services, including through increased emphasis on health promotion and illness prevention in country areas.
- Support for the operation and circulation of the Australian Journal of Rural Health.

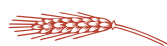


Part of the Welcoming Ceremony at 4th National Rural Health Conference

The Alliance has provided formal representatives to the following bodies:

- the Rural Incentives Program Implementation Committee (prior to this the Alliance was represented on both the Rural Incentives Reference Group and the Rural Areas Assessment Panel);
- several of the State Rural Incentives Program committees;
- the RHSET Advisory Committee;
- the Steering Committee to the review of RHSET;
- the Steering Committee for the review of ARHRI;
- a National Forum on Sexual Health Issues for Rural and Regional Young People;
- the Standing Committee on Consumer Product Information for Over-the-counter Medicines of the Federal Bureau of Consumer Affairs;
- a national project on health services undertaken by the National Farmers' Federation;
- the Remote Area Issues Sub-Committee of the Aboriginal and Torres Strait Islander Health Council;
- the Department of Veterans' Affairs, particularly in its work on a policy for the care of veterans in rural and remote areas; and
- the Alliance has also been asked to provide inputs to a number of State initiatives, such as training programs for health managers in Victoria and Western Australia and a task force on the rural health workforce in NSW.

*Magaret-Ann Cook, Principal Nurse Consultant,
Northern Territory Health Services*



In May 1996 Dr Michael Wooldridge, the Federal Minister for Health and Family Services, approved further funding for the Alliance. This support has been the means of extending the operational activities of the Alliance during the past year and covering the costs of its National Office in Canberra.

The Alliance operated as an informal network until it succeeded in obtaining a grant in 1993 from the Federal Department of Health. It was only through the provision of this grant that the Alliance has been able to grow and mature in its operations. The Member Bodies of the Alliance provide over \$120,000 a year to the work of the Alliance, most of it through contributions in kind made by their delegates to the Council of the Alliance.

In June 1996 the Chair of the Australian Health Ministers' Advisory Council (AHMAC) wrote to the Alliance stating that:

"The Executive encourages the Alliance to seek ways of maintaining funding through co-operating and collaborating with its Member Organisations rather than by seeking government grant(s)."

This again raised the issue of the Alliance's current dependence on governments for its financial support. Following Council discussion it was decided to broaden our financial base by seeking fee-for-service work and core support from the private sector and the States, although it was recognised that core Federal Government funding would remain essential for some time.

Since that time the Alliance has been asked to undertake several projects on a fee-for-service basis.

- The Australian Local Government Association requested the Alliance to report on local models of service delivery which involve local government, with an emphasis on Multi-Purpose Services.
- Services for Australian Rural and Remote Allied Health (SARRAH) retained the Alliance's National Office to arrange the administration and networking for SARRAH's first National Agenda Forming Workshop.
- In June 1997 a Grant was provided for the Alliance to undertake further work on Advanced Nursing Practice (ANP). The Project is 'An Appraisal of Existing and Proposed Curriculum for Advanced Nursing Practice for Rural and Remote Australia'. A Project Officer will be appointed for 8-10 weeks.
- The Alliance is organising the first National Rural Public Health Forum, to be held in Adelaide in October 1997. Funds for this have been provided by the Public Health Division of the Dept. of Health and Family Services.

The Alliance has also maintained a special relationship with some of its Members, notably AARN, CRANA, HCRRA and SARRAH. These have grown in importance and confidence with direct support from the Alliance.

NRHA STAFF

Gordon Gregory	<i>Executive Director</i>
Leanne Coleman	<i>Executive Assistant (Part -time)</i>
Pat Allen	<i>Clerical Assistant (Part -time)</i>
Lexia Smallwood	<i>Clerical Assistant (Part -time)</i>

CONTRACT STAFF FOR SPECIFIC TASKS (MOSTLY SHORT-TERM)

Des Murray	<i>Policy Officer (4th NRH Conference, NRPHF)</i>
Libby Amiel	<i>Policy Officer</i>
Kathy Cook	<i>Policy Officer</i>
Bruce Cullen	<i>Media Advisor</i>
Doug Mendoza	<i>Policy Officer</i>
Fiona Tito	<i>Policy Officer</i>
Maria Vincent	<i>Clerical Assistant</i>
Ross White	<i>Policy Officer</i>

NEW FACES AND A NEW ADDRESS

Having operated from a room at the back of the garage at the Executive Director's home for some months, the National Office in Canberra has recently obtained sufficient funds from the Department of Health and Family Services to be able to supplement its staff and to move to permanent premises at 4 Campion Street in Deakin, ACT. Between the original and the current premises the Alliance's Office was located in the Australian Hospital Association's building and a very co-operative relationship developed between the staff of the two organisations.

The Alliance's Executive Director is now supported by a part-time Executive Assistant and a part-time Clerical Officer, together with Policy Officers working on fee-for-service contracts arranged through the Alliance.

Administration procedures have been up-graded and now provide a comprehensive data base, an up-graded accounting system and an extensive Faxstream to rural media outlets.

PROMOTION AND COMMUNITY LIAISON

Media releases and interviews have become a standard part of the work for the Alliance's Chairperson and Executive Director. During 1996/97 there was a focus in media activities on the Commonwealth Budget, the recommendations from the 4th National Rural Health Conference and the revision of the National Rural Health Strategy.

THE 4TH NATIONAL RURAL HEALTH CONFERENCE

The 4th National Rural Health Conference was held in Perth from 9-12 February 1997 following six months of hard work by staff of the Alliance, who were responsible for the management of the project.

The 750 delegates heard keynote addresses by the Hon. Bruce Scott, M.P., Professor Max Kamien, Mr Shane Houston, Commissioner Sue Walpole, Ms Margaret-Ann Cook, The Hon Kevin Prince, MLA, Ms Robyn Tredwell and (on behalf of Dr Wooldridge) Mr Tony Kingdon. Workshops, paper sessions, displays and videos provided a comprehensive portrayal of the health services and programs now caring for the women and men, the young, the old, the indigenous and those of non English-speaking backgrounds across rural and remote Australia.



At the conclusion of the Conference a Communique was distributed to delegates, to official agencies, to Members of Parliaments and to the media. The Proceedings of the Conference have been collated and are being prepared for distribution to stakeholders. The Conference papers are on the Alliance's homepage on the internet. The recommendations from the Conference have been incorporated into the Submission from the Alliance to the Review and Revision of the National Rural Health Strategy. This Submission has subsequently been published by the Alliance as 'Action on Rural Health'.

THE NATIONAL RURAL PUBLIC HEALTH FORUM

Managed by the National Office of the Alliance and funded jointly by the Departments of Primary Industries and Energy and Health and Family Services, the Forum will take place from 12-15 October 1997 in Adelaide. There will be keynote speakers and workshop sessions as well as displays presented by peak bodies such as the Asthma Foundation, Diabetes Australia, the Heart Foundation, and the Anti Cancer Council.



The desired outcome of the Forum will be a group of people better equipped to work in their local communities on aspects of health promotion and illness prevention, policy directions on rural public health for incorporation into the National Rural Health Strategy, and recommendations for public health policy matters into their programs.

In April 1997 a full-time Policy Officer was appointed to handle the necessary arrangements for management of the Forum.

THE 5TH NATIONAL RURAL HEALTH CONFERENCE

Planning for the 5th Conference, which will take place in South Australia in March 1999, is already underway.

NATIONAL RURAL HEALTH ALLIANCE INC.
 FUNDS FLOW STATEMENT FOR THE YEAR ENDED
 30 JUNE 1997

CASH FLOWS FROM OPERATING ACTIVITIES	1997 \$
Income Received	658 899
Payments for Expenses	631 499
Net Cash Provided by Operating Activities	(176 180)
Payments for Equipment	27 904
Net Increase - Decrease in Cash Held	(204 084)
Cash at Beginning of the Year	271 222
CASH AT END OF YEAR	67 138

RECONCILIATION OF NET CASH PROVIDED BY OPERATING
 ACTIVITIES TO OPERATING PROFIT

Operating Surplus (Deficit)		27 400
Add:	Depreciation	6 155
	Decrease in	
	Creditors	(4 270)
	Unexpended Grants	(209 085)
	Debtors	942
		(212 413)
	Increase in	
	Provisions	2 678
		2 678
Net Cash provided at Item 1		(176 180)



Promoting the recommendations from the 4th National Rural Health Conference

A Fair Go For Rural Health

Proceedings of the 1st National Rural Health Conference, Toowoomba, 14-16 February 1991; *Department of Health, Housing and Community Services, Canberra 1992.*

A Fair Go For Rural Health - Forward Together

Proceedings of the 2nd National Rural Health Conference, Armidale, 12-14 February 1993; *University of New England Armidale, 1993.*

The Politics of Rural Health: How Far Have We Come?

Proceedings of the 3rd National Rural Health Conference, Mt Beauty, 3-5 February 1995; *NRHA, Canberra, May 1995.*

Action Now To Improve Rural Health Outcomes Soon

A Winter Manifesto summarising the priority recommendations from the 3rd National Rural Health Conference; *NRHA, Canberra, June 1995.*

Submission on the National Rural Health Strategy Mid-Term Review

NRHA, Canberra, December 1995.

Strategies For Change

A Summer Statement to Shareholders, *NRHA, Canberra, December 1995.*

The Journey to Rural Health

A July Journal, *NRHA, Canberra, July 1996.*

Local Government and Multi Purpose Services in Non-Metropolitan Areas

Report by the NRHA for the ALGA Project on 'The Role of Local Government in Health and Community Services', *Canberra, November 1996.*

Communique and Recommendations from the 4th National Rural Health Conference

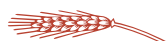
Perth 9-12 February 1997; *NRHA, Canberra, February 1997.*

Action on Rural Health

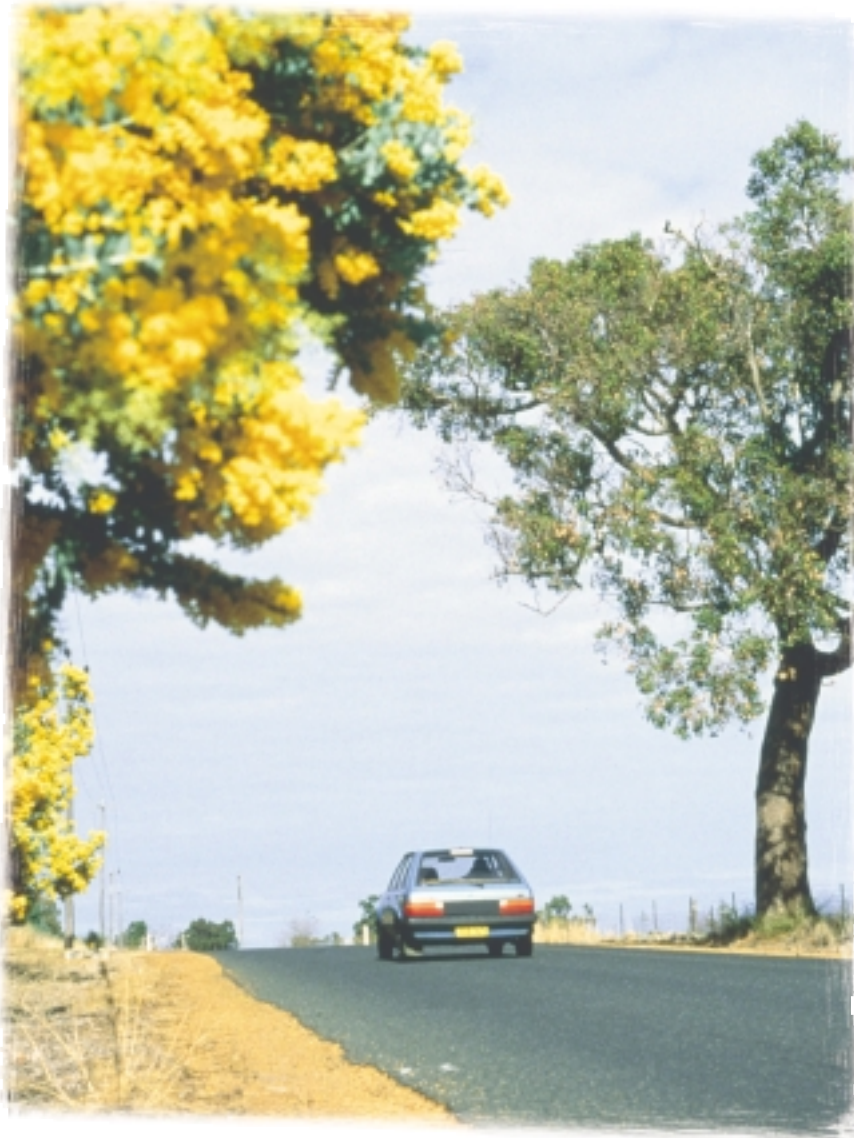
The NRHA's Submission to the Review and Revision of the National Rural Health Strategy; *Canberra, June 1997.*

The Annual Report of the NRHA 1996-1997

NRHA, Canberra, 1997.



Front and back photos courtesy Western Australian Tourism Commission



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