



Australian Government

Office of the National Rural  
Health Commissioner

# Creating a Rural and Remote Health Workforce

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Better Health Futures Symposium  
8 April 2022



Australian Government

National Rural Health Commissioner

I would like to begin by acknowledging the Traditional Custodians of the land on which I stand today, the Arrernte people of the Mparntwe lands, and of all lands of where we meet virtually.

I pay my respects to the Arrernte Elders past, present and emerging.

I extend that respect to Aboriginal and Torres Strait Islander people with us today.

# The role of the National Rural Health Commissioner

Supporting urgent & emerging issues

Supporting innovative models of care

Rural Generalism

Stakeholder engagement



# The role of the Deputy Rural Health Commissioners

Support the Commissioner in achieving goals

Provide expert advice in their specific disciplines

Engage with rural, regional and remote stakeholder groups



**R**epresent

**E**ngage

**A**ctively pursue

**C**hallenge

**H**ighlight

We **REACH** into  
communities and enable  
rural communities to **REACH**  
and influence Australian  
health policy



# Factors and barriers affecting rural health outcomes

Geographic narcissism & health system design:

It is a common mistake to think that the  
"gold standard" of health system design  
is the urban health system. The  
gold standard of health system design  
is the rural health system.



# Geographic narcissism is:

Complex funding systems designed for urban, high density populations trying to run in rural towns

In one privately self employed rural physiotherapist's day they need to access multiple funding streams  
– drowning in red tape

# Geographic narcissism is:

Health and medical training opportunities that are city-centric offering little experience of rural/remote

The assumption : “best training” equips doctors to work anywhere..... & “best” training is city training

BUT city trained doctors are ill equipped to work in rural areas and rarely leave the city



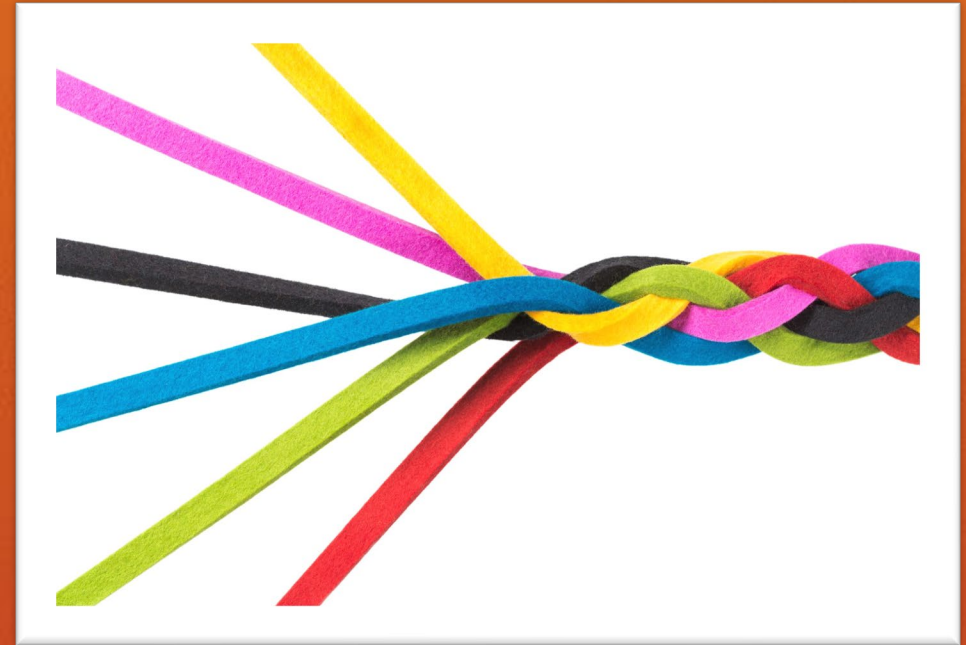
# Challenging conventional urban design principles

Integration

Co-design with community

Multidisciplinary teams

Rural Generalism



# The National Rural Generalist Pathway

A dedicated medical training pathway to attract, retain and support rural generalist doctors

AHPRA and MBA recognition of Rural Generalism as a specialised field within the speciality of General Practice

National consistency with the potential for local application



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# Goals of the National Rural Generalist Pathway

- Formal recognition of Rural Generalism
- Streamline training
- Increase training support
- Increase training & job opportunities
- Retain Rural Generalists in rural and remote communities



# Key governance points on the Rural Generalist Pathway

Supporting pathway establishment

Strengthening the training pipeline

Consulting the rural health  
sector other key elements of  
Rural Generalism

Ensuring national consistency



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# Multidisciplinary teams

Rural Generalists most effective in multidisciplinary teams

Multidisciplinary teams can meet the health needs of rural communities

Working within locally designed models of care – provide appropriate and accessible care





# Innovative Models of Care

Health models co-designed by local communities and health services

Primary Care Rural Innovative  
Multidisciplinary Models (PRIMM)

Innovative Models of Care



# COVID – what have we learned?

The strength & vulnerabilities of the rural & remote health workforce

The value of multidisciplinary teams in providing value based care

Stronger together





# Vision for rural nursing

Attracting and retaining an appropriate, skilled and well supported nursing workforce

Development of a National Rural & Remote Nurse Generalist Framework to support future careers and opportunities for rural nurses

Nursing Generalists – working to top of licence



# Vision for rural allied health

Workforce policies that provide training & support

Expansion of the Allied Health Rural Generalist Pathway and Allied Health Assistant Workforce Package



# Vision for rural health services

Implementation of the National Rural Generalist Pathway

Increased rural origin selection and rural training placements

Supported supervision for training of the entry/early career rural health workforce



# Vision for rural health services

Multidisciplinary teams supported by visiting specialists

Locally led multidisciplinary rural models of care

Midwifery Group Practice & Rural Generalist Doctors Models of Care.



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# Thank you