



**ROYAL AUSTRALIAN AND NEW ZEALAND
COLLEGE OF PSYCHIATRISTS**

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Submission to Commonwealth Audit of the health workforce shortage in rural and regional Australia

The Royal Australian and New Zealand College of Psychiatrists (“the College”) has delivered a number of projects designed to redress the health workforce shortages in Australia, and in particular rural and regional areas. These projects include the:

- Rural Advanced Specialists Training Scheme (RASTS) projects,
- Support Scheme for Rural Specialists (SSRS) projects and a
- NSW Rural Psychiatry project.

Whilst each of these projects have contributed some important and positive outcomes to the psychiatry specific workforce shortage, they remain insufficient to achieve long term sustainable improvements in the health workforce shortage. The RANZCP is committed to the continued promotion and development of rural psychiatry, with a view that psychiatry practice in rural areas offers diverse and valuable psychiatry practice and training experiences and ultimately generates key relationships between psychiatry Fellows and rural communities in the short and long term.

This submission contains a collection of the key issues surrounding the specific practice of psychiatrists and trainee psychiatrists, and the mental health sector in general, for your consideration. The College supports the Prime Minister’s and Health Minister’s announcement of an audit of the health workforce shortage specifically in rural and regional Australia and looks forward to active involvement in any ensuing initiatives and opportunities that may arise in the future.

Challenges for Rural Psychiatry Positions

Regionally, the challenges faced by psychiatrists are often varied and affected by a multitude of activities. Key challenges include:

- Access to peer support. Psychiatrists are often the only mental health specialist in the area
- Access to continuing medical education activities such as conferences, training programs, workshops etc.
- Relocating expenses and finding suitable work for partners and other family related issues;
- A lack of recruitment to the discipline overall;
- Shortage of subspecialist training positions (e.g. Child and Adolescent Psychiatry) in rural areas;
- Quality of basic infrastructure: accommodation, security etc;
- Continuity of service provision, offering a sustainable and reliable service;

The provision of an adequately supported consultant psychiatry service within local rural communities would be expected to:

- Improve access to mental health services for patients and other health professionals practicing within the area.
- Promote multidisciplinary and interdisciplinary mental health care.
- Improve communication with local health service providers.
- Provide specialist mental health to local general practitioners, hospitals and community services through practice based activities and continuing professional development.

The role of the specialist

The College supports multidisciplinary models of care and advocates that in the provision of appropriate and relevant mental health care, each mental health professional has an important role to contribute to overall service delivery. Accordingly, initiatives aimed at redressing workforce shortages would benefit from ensuring appropriate representation across all mental health profession groups.

Specialist Training in Rural Areas

Recruiting practitioners to rural areas is a challenge facing all specialist Colleges and one that has been of increasing concern to the RANZCP (the College). Currently, only 7% of College Fellows are based in rural areas. While another 11% carry out some work in rural areas through visiting services and there are a number of overseas-trained doctors working in rural Australia, this represents a significant workforce shortage. The rural workforce is also ageing faster than its urban counterpart and stands to lose 20% of its number to retirement within the next 5 years, a number unlikely to be balanced by the currently low recruitment rate.

Consultation with RANZCP Fellows and trainees has identified that traditional factors such as cost of living and cheap housing have been positive incentives for rural practice, however these are no longer the case in some areas, especially those areas experiencing the resource boom where housing and cost of living has far exceeded metropolitan centers. In practice, the College has found that if the supporting service does not provide accommodation for the psychiatrist, the region will not be able to attract an appropriate specialist or trainee and the community is denied access to specialist mental health services. For example in Mt Isa in Queensland, this resulted in a specialist vacancy for a five year period.

The factors affecting the choice of rural practice vary between individuals but a correlation is regularly seen between exposure to rural environments prior to commencing practice and later career choices, hence the importance of rural experience in training. Offering greater responsibility and more independence – issues identified as positive aspects of rural careers – advanced psychiatry training provides opportunities for the development of appealing rural training places. Consideration regarding increase financial supports in financial areas may be a real incentive to encourage Fellows to rural practice, and a possible solution being the application of a rural loading to all Medicare item numbers, especially telepsychiatry item numbers.

Aboriginal and Torres Strait Islander Mental Health

The diverse locations together with the limited opportunity for mental health professionals to participate in regular and region specific cultural awareness training specifically relating to Aboriginal and Torres Strait Islander social and emotional well-being further complicates the provision of appropriate services and the workforce shortage. The RANZCP Fellows are committed to working with Indigenous mental health workers and recommends that further exploration into the Indigenous health workforce shortage also be included as part of the audit and be considered as a matter of priority.