



National Rural Health Alliance
NRHA Priorities Survey 2023-2024
July 2023

Advocacy to imrpove access and equity

Introduction

The National Rural Health Alliance invited the College to take a short survey (hyperlink) on what the NRHA should advocate for, in developing its remit as Australia's peak body for rural health. The survey covers:

- 1. Whole of system policy and advocacy on rural healthcare access and delivery.
- 2. From start to end career education, training and support of the rural multidisciplinary team- rural medical, nursing, midwifery, Aboriginal health care, allied health, dentistry, paramedic, and allied workforce.
- 3. Access and funding to rural, regional and remote research and researcher development.
- 4. AJRH Promotion and awareness raising through rural research which allow clinicians, policy makers and researchers to understand grassroots trends and needs, learn new methods of health care and build future strategies in healthcare delivery and treatment.
- 5. Views on the Indigenous Voice to Parliament referendum and how the NRHA, as a membership organisation with disparate views, might work with members and others to ensure Indigenous people's health status and access continues to improve.

In liaison with the Section or Rural Psychiatry Committee, the RANZCP's survey responses have focused on the prioritising the issues listed.

The Survey responses will be provided via the online portal.

Survey

Section 1

1. How do you think the NRHA has performed in delivering policy to the government and ministers?

Primary Health Care Models	\bigcirc	\bigcirc	\bigcirc	\bigcirc		\circ	\circ	\bigcirc	\bigcirc	\bigcirc
Reproductive Health	\bigcirc	\bigcirc	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
NRHA Nous Report in the case for funding rural health	0	0	0	0	\circ	\circ	0		0	\circ
Poverty and Social Determinants	\bigcirc	\bigcirc	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Aged Care	\bigcirc	\bigcirc	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Climate change and health impacts	\bigcirc	\bigcirc	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

2. Which NRHA policy initiatives you believe made the most impact this year and why?

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- 3. How do you believe NRHA can increase the impact of policy and advocacy to government?
 - 4. Chief Executives only question.

What do you believe would add value to Council meetings to assist the NRHA achieve its goals on behalf of its Members and the government? i.e., does the current format of Council meetings, CouncilFest (two day face to face meeting), and Council special meetings still meet the needs of Member organisations?

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5. Chief Executives only question.

As CE of your organisation, what would add value to your interaction with the NRHA in achieving its strategic goals?

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- * 6. The NRHA receives most of its funding from the Commonwealth Government. Under this contract it has a remit to deliver activities on the government's behalf. They include:
 - · consultation with Members
 - · activities to support the sharing of information
 - · inquiries, investigations, and provision of advice
 - education and training to medical and health practitioners as appropriate
 - improving the quality of health services provided to persons in the event of sickness

What other activities do you believe could be carried out by the NRHA, if funds were available? E.g., student or trainee scholarships, attendance at NRHA conferences and scientific symposium.

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Section 2

What is your organisation?

Royal Australian and New Zealand College of Psychiatrists?

What is your profession?

Psychiatry

* 9. What do you believe are the biggest issues the NRHA and its members face in regard to the career journey of multidisciplinary clinicians in rural Australia. Please answer from the perspective of your organisation's profession (the headings below are those that have been raised by NRHA members)

Answers on scale of 1 - 10, with 1 being "low priority" and 10 being "high priority"

	1	2	3	4	5	6	7	8	9	10
Funding for training to occur in rural	0	0	0	0	0	0	0	0	0	0
Support for learners, trainees, students	0	0	0	0	0	0	0	0	0	0
Long term funding to raise awareness of health and medicine as career option, working with schools	0	0	0	0	0	0	•	0	0	0
Recruitment of rural students if this is not carried out by universities	0	0	0	0	0	0	0	0	0	0
Understanding of government policy makers when developing funding guidelines to ensure that there is flexibility to enable place-based solutions?	0	0	0	0	0	0	0	0	0	0
Housing for students, trainees and clinicians and health professionals	0	0	0	0	0	0	0	0	0	0
Support for continued professional development and support to leave for training	0	0	0	0	0	0	0	0	0	0
Backup when educating e.g. back fill of your other work, time to plan	0	0	0	0	0	Ø	0	0	0	0
Community involvement and understanding	0	0	0	0	0	•	0	0	0	0
University, training entity understanding what is needed to deliver at grassroots	0	0	0	0	Ø	0	0	0	0	0
University, training entity funding grass roots well enough to deliver in rural with costs being higher than urban centres	0	0	0	0	Ø	0	0	0	0	0
Red tape government	0	0	0	0	0	0	0	0	0	0
Red tape University or training entity	0	0	0	0	0	0	0	0	0	0
Long term policy for education funding by government	0	0	0	0	0	0	0	Ø	0	0
Capacity to involve and build community	0	0	0	0	0	Ø	0	0	0	0
Support for schooling of children	0	0	0	0	0	0	0	0	\circ	0

Other (please specify)

- 1. Older Adult mental health services/systems in rural and remote locations
- 2. Gender equity in rural and remote mental health
- 3. Development of a strategy to increase/expand private psychiatry in rural and remote areas (resident, not telehealth)

Section 3

Access to rural, remote and regional research funding, researcher development and support.

10. Please rate the importance of the below facing rural research

Answers on scale of 1 - 10, with 1 being "low priority" and 10 being "high priority"

	1	2	3	4	5	6	7	8	9	10
Support for the development of future researchers	0	0	0	0	0	0	0	•	0	0
Support for trainees, students to consider research while in rural Australia	0	\circ	\circ	0	0	\circ	0	0	Ø	0
Level playing field for researcher dollar in rural areas as in urban areas	0	0	0	0	0	0	0	•	0	0
Separate rural stream of research funding	\circ	\circ	\circ	\circ	0	\circ	\circ	•	0	0
Mentoring of rural researchers	0	0	0	0	0	0		0	0	0
Understanding of government policy makers when developing funding guidelines to enable flexibility in the scale of projects across different regions	0	0	0	0	0	0	②	0	0	0
Funding flexibility which reflects local scale, HR availability and tyranny of distance	0	0	0	0	0	0	0	•	0	0
Support for continued professional development and support to leave for research	0	0	0	0	0	0	②	0	0	0
Backup when researching e.g. back fill of your other work, time to plan	0	0	0	0	0	0	•	0	0	0
Community involvement and awareness raising of the value research and evaluation	\circ	0	0	0	0	0	0	•	0	0
Red tape University or research entity	0	0	0	0	0	0	•	0	0	0
Long-term policy for rural research funding by government	\circ	\circ	\circ	\circ	\circ	\circ	0		0	0
Capacity to involve and build community	0	0	0	0	0	0	0		0	0
Involvement of rural consumers	\bigcirc	\bigcirc	\circ	\bigcirc	\circ	0	\bigcirc		\circ	\circ
Other (please specify)				7						
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Section 4: The Australian Journal of Rural Health and the NRHA

11. What do you think should be the top three priorities for the AJRH?

Advancing evidence base to improve rural healthcare, promote equitable access to healthcare and decision-making process in rural healthcare practice.

12. Thinking across current and future rural health issues, what do you think should be the primary areas of focus for the Journal?

n/a

13. What current activities should the Journal stop doing?

n/a

14. What new activities should the Journal start doing?

n/a

Section 5

- 15. Has your institution/organisation made a public pledge to the Indigenous Voice to Parliament?
- 16. What has your organisation offered to raise awareness of the Indigenous Voice to Parliament?

We have offered our <u>public support</u> to the 'YES' campaign for the Indigenous Voice to Parliament. We also have our, <u>Position Statement: Recognition of Aboriginal and Torres Strait Islander peoples in the Australian Constitution as evidence of our commitment.</u>

17. What is your organisation's philosophy about the Indigenous Voice to Parliament and how will it impact Aboriginal and Torres Strait Islanders' access to health care and wellbeing?

The RANZCP is dedicated to the recognition of Indigenous Australian peoples in the Australian Constitution. This is important as it an important step towards fostering a more constructive and genuine national identity. We believe this will have positive effects on the health and wellbeing of Indigenous Australians to promote mental health and self-esteem. It will also serve as an important basis for the establishment of future health care initiatives through the advisory body established.

Position Statement: Recognition of Aboriginal and Torres Strait Islander peoples in the Australian Constitution was updated in 2023. The RANZCP has highlighted that recognition represents an important step towards forging a more constructive and genuine shared national identity which will have positive effects on the self-esteem and mental health of many Aboriginal and Torres Strait Islander people.

18. What do you believe is the NRHA's role in the Indigenous Voice to Parliament when it represents a broad group of views?

To represent member views from a rural perspective at a national level.