# **Rural Health**

Latest news and updates

#### Chair's Message

I hope my newsletter finds you well and safe. Since my last newsletter we have had announcements on the resumption of elective surgeries, and new dates for the RACS Fellowship Examinations. The hard work and effort of our frontline health staff has allowed the relaxation of some government restrictions to permit these events to go ahead. As the COVID-19 pandemic unfolded we as rural surgeons demonstrated that we have the resilience, adaptability, flexibility, resourcefulness and capability that we are known for and are trained for. It has enabled us to evaluate how we network and work together better.

The pandemic has emphasised opportunities in the uptake of digital health, professional development and flexible training at RACS.

The provision of virtual access to RACS events has been great, particularly for rural surgeons, allowing us to access events and participate in ways we have not been able to in the past. The move to more digital communication, webinars, meetings has been very welcome. I was able to be involved in the RACS webinar on PPE as a panellist, from home. I look forward to further increase in remote access to meetings, events, educational content. This will enable rural surgeons to be more involved in college activities and reduce barriers to participation.

Remote education has been highlighted as a sustainable option to deliver training that is close to home. The possibility of online delivery of examinations and interviews may make it more fair and balanced by giving an opportunity to those candidates who would normally be at a disadvantage due to geographical location. It would allow all candidates to sit the examination and interviews close to home, close to their family and social supports, with less time off work required and less cost of travel for the candidate.

The viability and importance of telehealth has been acknowledged by government with the community widely embracing digital health. The rapid adoption of telehealth in the urban areas has seen swift changes in government policies and regulations related to Medicare reimbursements, NBN connectivity and infrastructure improvements. I hope to see this momentum translate into improvements in the telehealth experience for all especially for those in the rural, regional and remote areas.

Lastly I encourage you to <u>contact me</u> to let me know about your local challenges or successes in your area. This will allow me to advocate and help where possible or share successes for the benefit of all.



Dr Bridget Clancy MBBS FRACS GAICD

Upcoming RACS Webinars on Telehealth & Digital Prescribing



RACS will be hosting two free webinars on telehealth and digital prescribing for all RACS members in June and July. It will cover telehealth in practice with a presentation by Dr Bridget Clancy, Chair of the Rural Surgery Section, as well as advocacy work being undertaken by RACS in telehealth which is being led by Prof Mark Frydenberg, Chair of the new Sustainability in Healthcare Working Group. Other speakers include the Australian Digital Health Agency and AVANT.

Date: Wednesday 17 June 2020 Time: 7.00pm AEST Register

Date: Wednesday 1 July 2020 Time: 7.30pm AEST Register

#### 2020 Section Annual Business Meeting Update

While COVID-19 has meant the cancellation of the RACS ASC 2020, the Rural Section Annual Business Meeting will still be proceeding virtually. Section members are invited to attend the ABM via Zoom.

Date: Monday 29 June 2020

Time: 6:00pm AEST

Register in advance here

After registering, you will receive a confirmation email containing information about joining the meeting.

#### Links to Telehealth Resources

For those of us who are new adopters to telehealth, information by the Department of Health on recent additions to the listing of the Medicare services are available on the Telehealth Bulk-Billed Items for COVID-19. To assist you in delivering telehealth that is compliant with privacy obligations, a Privacy Checklist for Telehealth Services has been developed for your convenience.

#### **Telehealth Info Hubs**

Research institutions have produced resources and tools for telehealth acknowledging its wider implementation by health professionals. A few of them are listed below:

- University of Queensland Centre of Online Health https://coh.centre.uq.edu.au/quick-guides-telehealth
- The Telehealth Hub by the Digital Health Cooperative Research Centre https://digitalhealthcrc.com/telehealth/

Aeromedical Retrieval Services Update





## **Royal Flying Doctor Service**



Australian Government Department of Health

There were initial concerns that metropolitan centres were turning away retrievals and escalation for higher level care. Thankfully there has been government action addressing these concerns.

The Federal Minister for Regional Health announced a \$52 million support package to aeromedical retrieval services including the Royal Flying Doctors Service and CareFlight to enhance support for rural and remote communities. The media release can be read here.

Angel Flight have extended free volunteer flights to include vital medical or health supplies, and extended compassionate flights where needed. This has become a substantial need and will increase with the closure of many regional flight services. Angel Flight are also working to assist people to get to remote clinics where no commercial regular public transport activities or charter flights are available. If there are any queries please call the Angel Flight Office on +61 7 3620 8300 or email: mail@angelflight.org.au

#### **IMG Updates**

We recognise the important role IMGs play in providing care to the communities in rural, regional and remote areas. The Short Term Training Pathway is one of the ways which enable IMGs to undertake training in Australia without being required to complete the AMC examinations or to have a full comparability assessment. Individuals on this pathway are required to confirm that they do not intend to apply for further registration in Australia at the conclusion of their approved training period, which is usually 24 months. It is worth reminding that hospitals trying to recruit IMGs already in Australia and who are on a temporary training visa be mindful of this restriction.

Government temporary changes to IMGs in rural and regional Australia



The Australian Department of Health has introduced temporary changes to section 19AA and 19AB of the *Health Insurance Act 1973*. IMG surgeons are likely to be impacted as these are focused on ensuring that workforce distribution is maintained in rural and regional Australia. These measures include flexibilities within government workforce programs, increasing the capacity to work in new locations for up to 12 weeks instead of two, without having to apply for a new provider number and introducing automatic extensions for some the 3GA placements and extensions to end dates.

More information about these changes can read here.



Committed to indigenous health



# New Aboriginal and Torres Strait Islander Health and Cultural Safety course released

The RACS Indigenous Health Committee announces the new Aboriginal and Torres Strait Islander Health and Cultural Safety course from Nyuka Wara Consulting. The course provides an insight into colonisation, the ongoing health disparities and the challenges faced by many Indigenous Australians. This course is for Fellows, SET trainees, IMG's, JDocs and RACS Staff. It is broken into shorter self-contained modules, and accredited for Category 4 CPD – Reflective Practice.

Go to the Aboriginal and Torres Strait Islander eLearning webpage, to access the course.

## **Spinifex Australia**



The Spinifex Network was established by and for organisations working actively in, or supporting, the improvement of rural health through research. Successful research proposals for rapid review topics have now been announced. Research themes cover rural workforce, health impacts arising from drought and natural disasters and heat health. More updates can be read here.

#### **RACS COVID-19 Information Hub**

As you might be aware, we have set up a central repository of COVID-19 information, resources and updates about the COVID-19 pandemic. We encourage our surgical colleagues to refer to our COVID-19 information hub for updates and recommended guidelines.

#### **Resources from Specialty Societies and Associations**

We have been working closely as One College with our Specialty Surgical Societies and Associations on communicating speciality specific updates. This information is available at RACS COVID-19 Information Hub Specialty society communications.

Free COVID-19 Mental Health Wellbeing Support



We acknowledge that this crisis may have significant impacts on your physical and mental health and wellbeing, with increased risk of illness and burnout. Please look after your own health. RACS have partnered with <u>Converge</u> <u>International</u> to provide confidential support to surgeons and their immediate family members.

In Australia the government has introduced a number of digital mental health support services:

- The headtohealth.gov.au website contains a repository of digital mental health services
- The Coronavirus Mental Wellbeing Support Service and their counsellors are available to talk 24/7: 1800 512 348
- The National Mental Health Commission's #InThisTogether website contains mental wellbeing tips.

In New Zealand, free resources are available from the Mental Health Foundation. Individuals can access a free and confidential call and text service any time on 1737 to speak with a trained counsellor. More information is available at the Mental Health Foundation Coronavirus (COVID-19) space.

## RESOURCES



RACS is committed to working with our partner organisations and stakeholder groups to effect positive change in rural health care.

Please email the Rural Surgery Section if you would like to inform us about any issues that you think we should be aware of, or contribute to our rural advocacy efforts in any way.

Email the Rural Surgery Section: Rural@surgeons.org



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