

fresh 10



Dr Matt Masel and Dr Rob Thompson

Rural generalist trainees workshop

Nineteen Rural Generalist Trainees from across Queensland took part in the first Rural Generalist Trainees (RGT) Workshop for 2010 in Mackay recently.

An experienced team of practising Rural Generalists assisted as facilitators at the Central Queensland University for the workshop which was held 6 – 9 June.

Workshop coordinator Deanne Bond, from the Cunningham Centre's Medical and Education and Training Team, said the trainees took part in the two and a half day program which featured case discussions, procedural skills sessions and scenarios.

“The workshop received positive feedback from attendees, with everyone concurring the experience had enhanced and reinforced clinical skills and awareness of support networks associated with rural medical practice,” Ms Bond said.

She said the Rural Generalist Pathway Team sincerely thanked everyone who took part in the workshop including facilitators Drs Sue Masel, Matt Masel, Rob Thompson and Kaylene Girgenti and the education team of Dr Katie Mills, Graeme Wainwright, Sean Lannan, Wendy Katterns and Clinton Madsen.

The next Rural Generalist Trainees Workshop is being held at Roma Hospital 22 – 25 August 2010 and will celebrate the fifth anniversary of the Roma Agreement, the meeting which founded the Rural Generalist Pathway.



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Directors message



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All finalised articles and associated images need to be submitted to Marketing & Multimedia, Cunningham Centre no later than COB the second Friday of each calendar month. We welcome any comments, suggestions and feedback.

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Firstly welcome to our second issue of *Fresh*. We have received wonderful feedback from Queensland Health staff across the state about our newsletter and we look forward to much more.

The Cunningham Centre team managers and I recently travelled to Cairns for the Office of Rural and Remote Health's (ORRH) planning day. It was a two day event concentrating on the inaugural theme 'connecting to benefit the community we serve'.

ORRH's Senior Director, Pattie Hudson, wanted the nine teams that sit under the ORRH to come together and unite with the vision of working closer with each other for future outcomes. This is extremely important with the national reform on the horizon.

The program objectives included clarifying the purpose of the 'team', understanding the relationships that matter for better outcomes, deciding the way the 'team' needs to work together, identifying the unique contributions of team members to ORRH and affirming the 'team's' identity, the plan and the way forward.



Clockwise from front: Louis Ariotti, Lujana Abernathy, Ans Van Erp, Jill Keen, Danielle Walton and Sue Syberg at the Office of Rural and Remote Health planning day.



Clockwise from front: Gayle Hall, Ans Van Erp, Courtney Jurd, Sue Syberg, Robert Timmings, Susan Muirhead, Sandyl Kyriazis, Donna Palmer, Kerry Ramsay, Teresa Sullivan, and Sue Crocker at the combined Toowoomba and Cairns nursing team planning day, Cairns.

I was also fortunate to travel to Cairns last week with the Toowoomba nursing team to meet with the Cairns nursing team for an annual planning day.

At the planning day it was acknowledged that the Cunningham Centre would benefit from a Nursing Director for Rural and Remote Education and Research at the Cunningham Centre. Sue Crocker (Cairns) has been appointed to this position in an acting capacity until recruitment is completed.

This appointment recognises the importance of Rural and Remote Nurse Education and shapes the Rural and Remote workforce with knowledge that it is essential to the ongoing development of the nursing profession and to quality outcomes in patient care.

The planning day also provided a wonderful opportunity for connecting our two nursing teams together as well as mapping the future in nursing education and training at the Cunningham Centre.

If you would like to submit an article or picture or see something published in Fresh please email fresh@health.qld.gov.au

Dr Ans Van Erp
Director
Cunningham Centre



Sue Syberg and Courtney Jurd



View of Cairns marina



Ans Van Erp, Robert Timmings and Courtney Jurd

Spotlight

Indigenous Health Worker – Isolated Practice Authorisation Course [Health (Drugs and Poisons) Regulation, 1996]

The Cunningham Centre – Cairns, is currently trialling the revised Indigenous Health Worker – Isolated Practice Authorisation Course, (Health (Drugs and Poisons) Regulation, 1996).

The course was developed in 2000 following successful submissions for amendments to the legislation to allow Indigenous Health Workers (IHW) to administer and supply specific drugs in isolated practice areas. The Drug Therapy Protocol for IHW with Isolated Practice Authorisation list these drugs.

The original course curriculum was revised and updated early 2009 in consultation with key stakeholders. With respect to the Aboriginal and Torres Strait Islander Health Worker Career Structure, Health Workers who successfully complete this course will qualify at level 006.

In compliance with the legislation, Health Workers who enrol in the course must have obtained a Diploma of Aboriginal and Torres Strait Islander Primary Health Care, or equivalent, and be employed in an Indigenous community. The resultant Isolated Practice Authorisation can only be applied by successful students who are employed in isolated practice areas, as defined in the Health (Drugs and Poisons) Regulations 1996.

The first cohort commenced in November 2009, with a total of 20 students enrolled by January 2010. Currently there are 16 students enrolled, the majority of whom are employed in the Torres and Northern Peninsula Area Health Service District.

The course is structured using a variety of learning modes, including face to face workshops, teleconferencing, video conferencing, workbooks and journals. Assessments will be conducted in the individual student's community, and in collaboration with other health professionals who also provide services to the community.

The curriculum addresses four specific areas of health service delivery; primary clinical care, chronic disease management, immunisation, and sexual and reproductive health. These four areas are built into the following 5 modules of study:

- Population Health and the context of remote practice
- Communication and cultural skills
- Systems and organisational approaches
- Professional, legal and ethical role
- Clinical skills in remote Primary Health Care practice.

Health Workers who successfully complete this course will be competent to administer and supply medications under specific conditions as described in their Drug Therapy Protocol, and following Health Management Protocols as described in the current edition of the Primary Clinical Care Manual. The course is expected to take up to 12 months to complete within a self paced learning model.

It is envisaged that Aboriginal and Torres Strait Islander Health Workers who successfully complete this course will have the capacity to strengthen the role of the Indigenous Health Worker in the provision of primary clinical care and chronic disease care in remote Indigenous communities.

21st annual Rural Doctors Association of Queensland (RDAQ) conference



Dr Rosie Zacher and Dr Joe Turner

The Rural Generalist Pathway celebrated its fifth anniversary at the 21st annual Rural Doctors Association of Queensland (RDAQ) conference in Mackay last month.

To celebrate this milestone Queensland's Deputy Premier, The Honourable Paul Lucas acknowledged the importance of the Pathway at the conference and the progress it has made since 2005 to the rural medical workforce.

"It is providing a highly skilled generalist workforce to rural and remote communities in both hospital based and private practice," he said.

During the conference the Australian College of Rural and Remote Medicine (ACRRM) President Dr Jeff Ayton and the Rural and Remote Medical Services (RRMS) Executive Director Dr Denis Lennox co-presented Rural Generalist Trainees with their Rural Generalist Medicine Prevocational Certification certificates.

RRMS Deputy Executive Director Dr Christian Rowan said a rural generalist was defined as a rural medical practitioner who was credentialed to serve in hospital and community based primary medical practice.

"They are also credentialed to serve in a hospital-based secondary medical practice without supervision by a medical specialist in at least one specialist medical discipline (*commonly but not limited to obstetrics, anaesthetics and surgery*) and in a hospital and community based public health practice," Dr Rowan said.

He said there had been strong interstate interest in the pathway, as Queensland was the only state in the country to run such a program.

"The program is unique to Queensland and already the Northern Territory are looking to come on board, also the Department of Health and Aging are currently evaluating the pathway with a view to national rollout as part of the national health and hospitals reform process," he said.

The RGP was founded following a meeting of key stakeholders who convened in Roma in August 2005 to discuss and develop the concept of a supported training pathway to a career in rural medicine.



Back from left: Dr Dale Hanson, Ms Natalie Taylor, Ms Cathy Kirkbride, Dr Tarun Sen Gupta, Dr Dan Manahan, Dr James Telfer, Dr Christian Rowan, Dr Andrew McKenzie
Front from left: Ms Jessie Hargens, Dr Denis Lennox, Ms Deanne Bond

The pathway still receives vital input from these stakeholders via various governing bodies today including the Royal Australian College of General Practitioners (RACGP), the Australian College of Rural and Remote Medicine (ACRRM), Regional Training Providers and the Remote Vocational Training Scheme.

As a result of the Medical Officers' (Queensland Health) Certified Agreement (No.1) 2005, Rural Generalist Medicine was recognised by the State as a generalist discipline in May 2008.

Dr Rowan said from January 2011 there would be 39 rural generalists interns commencing with the pathway across 10 Queensland Health hospitals.



Dr Jeff Ayton, President of ACRRM, Dr Chris Gill and Dr Matthew French, Rural Generalist Trainees receiving their Rural Generalist Medicine Prevocational Certification awards

Vocational education and training (VET)



Jennifer Pound
Vocational education and training
A / Manager

With 25 years background in training and education Jennifer Pound has already delved into her new role as the Cunningham Centre's Vocational Education and Training (VET) Acting Manager.

Jennifer lives in Townsville and has been a part of the Cunningham Centre's VET team for about 12 months.

"The VET team is made up of people who live and work in different towns and cities across Queensland and although some might find leading a "virtual" team challenging it has so far been very rewarding," she said.

Jennifer also says that she believes the key to working in a "virtual" team is being able to use excellent communication skills. "VET are a team of really good communicators who are self motivated and know their goals and how to achieve them, this is why I had no hesitation in taking on the role as acting manager."

Her enthusiastic approach to working as a team and overcoming challenges has been one the VET team has embraced. "We are currently implementing improvements to our delivery of training and organising a forum for all our operational stream in September in Brisbane," Ms Pound said.

The VET forum will be held in Brisbane at the Holiday Inn on 1 – 2 September, 2010.

News

from the Office of Rural and Remote Health (ORRH)

Senior Director, Pattie Hudson

Rural sustainability project

The Rural Sustainability project had its first Steering Committee meeting on 20 July 2010. The project aims to provide principles and guidelines that will inform the Government's direction in providing sustaining rural and remote health services. The project will review and update existing development policies in relation to hub hospitals and the outreach services they provide, multipurpose health services, rural and remote hospitals, primary care centres and outpatient clinics.

The project aims to provide a report to the Integrated Policy and Planning Executive Committee in September / October 2010. The report will outline recommended policy principles and guidelines and provide some recommendations in relation to the next steps in developing sustainable rural and remote services. A communication and consultation strategy will be published in the near future.

Medical Specialist Outreach Assistance Program – Indigenous Chronic Disease (MSOAP – ICD)

The MSOAP – ICD program is funded federally by the Department of Health and Ageing. MSOAP – ICD has been introduced to address the burden of disease and to reduce the gap in the life expectancy of Aboriginal and Torres Strait Islander peoples. It is an initiative to support the “Closing the Gap” health campaigns of Commonwealth, State and Territory Governments.

The aim of the MSOAP–ICD measure is to increase access to a range of health services, including expanded Primary Health Care, provided to people in rural and remote Indigenous communities for the treatment and management of chronic disease.

The objectives of the MSOAP – ICD are to:

- support health professionals to provide outreach services to rural and remote Indigenous communities
- increase the range of services offered by visiting health professionals to detect, manage and prevent chronic disease more effectively
- foster the collaboration between health services in the local Indigenous community and visiting health professionals to target the delivery of essential treatment to patients with chronic disease
- improve ongoing management and continuity of patient care
- provide up-skilling opportunities in the outreach location
- work with communities to build knowledge and support informed self-care.

Surgical services review in rural and remote Queensland

The provision of surgical services to rural and remote Queensland is challenging. While we have been fortunate to have the dedication and commitment of a select group of surgeons in regional and rural areas, the rising cost of patient travel and the evolution of advancing technology requires us to rethink the way we deliver surgical services.

A six month project is to be commenced shortly to look at the development of a range of sustainable and safe options for service delivery of surgical services to rural and remote communities. It is to be overseen by the Sustainable Outreach Surgical Services Committee tasked with reviewing the existing range of services provided and exploring new and enhanced models of delivery.

Source www.qheps.health.qld.gov.au/gofor2and5

Lamb shank casserole

25 minutes preparation + 2-2½ hours cooking

Tipped or Frenched lamb shanks are prepared by detaching the meat from the top of the bone and pushing it down removing the skin and gristle.

Ingredients

2 teaspoons olive oil
4 lamb shanks, tipped
Freshly ground or cracked black pepper, to taste
2 tablespoons plain flour
2 cloves garlic, crushed
1 large onion, sliced
2 turnips, peeled and cut into chunks
2 parsnips, peeled and cut into chunks
2 sticks celery, sliced
150 g mushrooms, sliced
400 g can whole tomatoes
1 2/3 cup (400 ml) water
½ cup red wine (optional)
A few fresh herbs (parsley, thyme, marjoram, oregano)
or ½ teaspoon dried Italian herbs

Directions

Preheat oven to 160°C. Heat oil in a frypan. Toss lamb with flour and pepper in a plastic bag.
Remove lamb, pan-fry until brown on all sides and place in a large casserole dish.
Add all vegetables except tomatoes to the pan and cook for 5 minutes, turning constantly until they begin to colour slightly.
Tip in remaining seasoned flour from the plastic bag. Add tomatoes and water and stir into vegetables. Add red wine and herbs.
Bring to the boil and pour over lamb. Cover closely with a lid and bake in oven for 2-2 1/2 hours until meat is falling off the bones.

Variation

500 g cubed chuck or blade steak may be used instead of lamb shanks.



= 16 serves of vegetables

Staff profile

This month we chat with Jill Keen

Q What is your role at the Cunningham Centre?

A Manager Quality and Client Services

Q What do you do to relax?

A Read lots of books – love biographies

Q Favourite / best meal ever and where?

A Spiced chicken at the Green Mango restaurant.
Ha Noi, Vietnam.

Q What are you passionate about?

A Family

Q What annoys you?

A Mosquitoes

Q Favourite movie?

A Epic BBC version of Pride and Prejudice with
Colin Firth in it!!!

Q What are you reading now?

A A thousand splendid suns by Kahled Hosseini
(also wrote The kite runner)

Q Favourite holiday destination?

A Any where near or on the Tweed River

Q What superpower would you like to have?

A None – that would be too exhausting

Q If you were an animal, what would you be?

A My cat Pud (uber spoilt)



What's that acronym??

QHEPS	Queensland Health Electronic Publishing Service (Intranet)
HCB	Health Careers in the Bush
SRPC	State Recognised Practice Committee
SMO	Senior Medical Officer
RACGP	Royal Australian College of General Practitioners
RGP	Rural Generalist Pathway
VET	Cunningham Centre – Vocational Education and Training

Events

August

Dates	Topic	Site	Discipline / Facilitator
18	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care
25	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care
31	Aboriginal & Torres Strait Islander Cultural Awareness program	Brisbane	Primary Health Care

September

Dates	Topic	Site	Discipline / Facilitator
06	Living Strong Facilitator Training Program	Toowoomba	Primary Health Care
07	Aboriginal & Torres Strait Islander Cultural Awareness program	Brisbane	Primary Health Care
08	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care
09	Suturing of Simple Lacerations	Toowoomba	Nursing
22	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care

October

Dates	Topic	Site	Discipline / Facilitator
05	Aboriginal & Torres Strait Islander Cultural Awareness Program	Brisbane	Primary Health Care
13	Aboriginal & Torres Strait Islander Cultural Awareness Program	Brisbane	Primary Health Care
20	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care
27	Reconciliation Learning Circles	QH Corporate Office Brisbane	Primary Health Care

November

Dates	Topic	Site	Discipline / Facilitator
02	Aboriginal & Torres Strait Islander Cultural Awareness Program	Brisbane	Primary Health Care
03	Reconciliation Learning Circles	Brisbane	Primary Health Care
17	Aboriginal & Torres Strait Islander Cultural Awareness Program	Brisbane	Primary Health Care
17	Reconciliation Learning Circles	Brisbane	Primary Health Care

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further information