

10th National Rural Health Conference

Cairns, 17-20 May 2009

Communiqué

The 10th National Rural Health Conference was held in Cairns at a time of unprecedented opportunity for health reform. A range of key strategic reviews are due to report to the government within the next two months. The global financial crisis highlights the need for Australia to invest in health promoting policies which have the capacity to reduce national costs on health care in the medium term.

The 920 delegates at the event have therefore called on the Australian Government to work in collaboration with the States and Territories, and with the health sector, to seize the opportunity for system-wide improvement. Indigenous Australians in particular, and people living in rural and remote Australia, will be among the main beneficiaries of an improved health system overall.

The Conference again demonstrated the cohesion of the rural and remote health sector and the capacity for innovation and the resilience of the people in it.

Despite the enormous challenges posed by the natural and financial environments, people in the rural and remote health sector are confident of their ability to lead health innovation and the development of better ways of providing health services.

People in the rural and remote health sector have great expectations of the governance proposals to be included in the final report in June of the National Health and Hospitals Reform Commission. Delegates have a range of views on the relative benefits of options A, B and C (and of other possible models) but agree that the best way for improving health in the bush will be one that allows funds for health services to be held and managed at the regional level.

A major focus at the Conference was on the social and economic determinants of health and the social gradient which affects the health of individuals and communities. In the context of the national health change underway, the rural and remote health sector should be seen as “the best bet” for early investments in new and better ways of delivering health services. The sector has renewed its commitment to lobbying and advocacy which will bring an end to the locational disadvantage in health status from which people in rural and remote areas suffer.

The Conference again attracted a range of Aboriginal and Torres Strait Islander consumers and professionals. Members of the rural and remote health sector recommitted to direct advocacy, as appropriate, and strong support for Indigenous bodies for improvements to Australia’s national Indigenous health shame.

Given the global shortage of health professionals and the serious maldistribution within Australia, significant emphasis at the Conference was on ways to improve access to health professionals and the services they provide. Conference delegates believe that with the right incentives in place and available across all professions, it will be possible to meet the need for services even in more remote areas. The Budget announcement relating to the scaling of incentive programs was supported in this context.

However, to ensure that workforce shortages are not a constraint on service development, a more rapid adoption of new health professional roles and expansion of existing health professional roles will be necessary. This will require governmental and professional support and cultural change.

Conference called for early investment in an individual electronic health record, with due provisions relating to confidentiality and the nature of the sort of system required to cover all spatial and demographic realities.

There was strong support for the development of a national rural health plan, and for advocacy to have governments and others in a position to act implement the actions proposed in the range of existing national strategies that relate to health.

For the first time at the biennial National Rural Health Conference, there was a significant emphasis on climate change and its impacts on the health of rural and remote communities and individuals, as well as the demographic and economic changes likely to occur. It was agreed that there is much to be done to moderate climate change and to mitigate its impacts, and to take advantage of the potential economic opportunities that climate change will bring to rural and remote areas.

People at the Conference noted and welcomed the announcements in the recent Federal Budget, including those relating to incentives for rural general practice, regional cancer centres, MBS and PBS payments for nurse practitioners and selected midwives, and maternity services.

The reservations felt about these Budget announcements relate to the continued lack of equivalence in incentives for recruitment and retention across the various health professions, and some questions about the devil that may be in the detail of the programs as they are rolled out.

Inspirational addresses were heard from a range of Keynote and Concurrent Session speakers, with a small number of special guests from Canada and the US. The whole Conference was infused with the sense that if there is genuine engagement with communities at the regional level, health consumers and professionals can overcome both short and longer-term challenges and meet their shared aspiration of equal health for people in rural areas.

20 May 2009