Appendix D  RUSC parameters
Rural Undergraduate Support and Coordination Program funding parameters

Parameter 1
The University must maintain measures to increase the number of rural origin students selected for entry into the medical degree to, or maintain the number at, at least 25% of Commonwealth-supported places (CSPs). (A rural origin student is defined as one who has spent at least 5 years in an area with a Rural, Remote and Metropolitan Areas (RRMA) Classification of RRMA 3 to RRMA 7 since beginning primary school. Medical school staff with a background in rural medicine must contribute to the selection process.

Parameter 2
The University must provide a rurally-focussed curriculum that promotes rural practice, with delivery commencing early in the medical course. The curriculum must highlight the rural context by focusing on rural health, the rural social environment, cultural and gender issues in rural medicine, clinical skills and decision making appropriate to rural practice.

Parameter 3
The University must maintain a central point of contact at the main campus to help integrate rural medical programs and initiatives with all other medical school activity;

Parameter 4
The University must coordinate development and support for rural medical educators in partnership with Rural Clinical Schools, University Departments of Rural Health and regional vocational medical education training providers.

Parameter 5
The University must, within the medical school curriculum, provide a safe, culturally appropriate, high quality experience of rural medicine for all Australian medical students by facilitating one or more structured residential rural placement/s of at least 4 weeks’ duration in total, preferably in the early years of a students’ course.

- Placements should only be provided in RRMA 3-7 areas.
- RUSC Program placements may also be conducted in the Northern Territory, through the designated provider of RUSC Program services in this area.
- The University must take reasonable action to ensure that students undertaking training at rural locations do not suffer financial hardship as a result and are adequately and safely accommodated.
- In exceptional circumstances, the Dean of the Medical Faculty (or equivalent) may exempt individuals from undertaking a placement on the basis of financial hardship or demonstrated health concerns.

Parameter 6
The University must, in regard to Indigenous health:

- maintain measures to increase the selection of Indigenous Australian students (of rural or urban origin) into the Medical degree (which may include the introduction of selection targets);
- support Indigenous applicants during selection process and while completing their degree;
− ensure that the medical curriculum enhances the understanding of, and commitment to improving, the health status of Indigenous Australians (with possible reference to the Medical Deans Australia New Zealand Indigenous Health Curriculum Framework);

− ensure that all medical students and relevant staff undertake appropriate cultural awareness and safety training; and

− consider the appointment of Indigenous academic staff to assist in achieving these goals.

**Parameter 7**

The University must maintain a multi-disciplinary rural health club for students as a means of encouraging interest in a rural career. The activities of the rural health club must be carried out in accordance with the most current edition of the *Framework for Funding Rural Health Clubs* and should also be consistent with the principles and practices of the National Rural Health Students’ Network (NRHSN). The University is responsible for the management of Commonwealth funds provided to the rural health club and must ensure that funds are expended in support of the broad outcomes of the RUSC Program as detailed above.