National Rural Health Commissioner

Adj. Prof. Ruth Stewart

PO Box 6532

CAIRNS QLD 4870

The Hon. Emma McBride, MP

Assistant Minister for Rural and Regional Health

Assistant Minister for Mental Health and Suicide Prevention

PO Box 6022

House of Representatives

Parliament House

CANBERRA ACT 2600

Dear Assistant Minister,

**National Rural Health Commissioner Statement of Intent 1 July 2022 – 30 June 2024**

I am pleased to provide you with the National Rural Health Commissioner’s Statement of Intent as requested in the Statement of Expectations issued by your office.

This Statement of Intent outlines my approach to meeting the obligations and achieving the priorities detailed in the Statement of Expectations.

I look forward to continuing our collaborative working relationship to improve health outcomes in regional, rural and remote Australia.

Yours faithfully



Adjunct Professor Ruth Stewart

National Rural Health Commissioner

15 March 2023

**National Rural Health Commissioner Statement of Intent 1 July 2022 – 30 June 2024**

This Statement of Intent responds to the Statement of Expectations received from the Assistant Minister for Rural and Regional Health, the Hon Emma McBride MP. This Statement of Intent is a formal commitment to meet the expectations of the Assistant Minister.

### **Legislative Framework and Reporting**

The National Rural Health Commissioner holds a statutory appointment under Part VA, of the Health Insurance Act 1973.

As part of the legislative requirements under 79AP of the Act, the Office of the National Rural Health Commissioner (Office) will, by the 15th day of October each year, prepare and give to the Minister, for presentation to the Parliament, a report on the Commissioner’s activities during the previous reporting period, which will also include any other matters that the Assistant Minister directs to be included in the report.

### **Support urgent and emerging priorities**

Working with the Deputy Commissioners, the Commissioner will:

* continue to support rural and remote General Practice-led Respiratory Clinic initiatives;
* support rural and remote policy development and implementation in any potential future pandemics; and
* engage with rural health service and training providers to understand local issues across Australia.

This sector engagement will inform and assist the Commissioner to formulate advice to the Assistant Minister on emerging opportunities and challenges in rural and remote health and possible management of these.

The Office will engage with the National Emergency Management Agency to highlight disaster related rural and remote health opportunities and risks raised by key rural and remote stakeholders, service providers and peak bodies. The Commissioner will seek to ensure response and resilience measures are nationally consistent and include specific rural and remote health considerations. Where appropriate the Office will review rural programs to inform the Assistant Minister.

Where lessons can be learnt from the COVID-19 pandemic response, a brief will be provided to the Assistant Minister on those observations including planning, implementation, success stories and considerations on potential improvements for future pandemic responses.

The Commissioner will continue to support government initiatives from the Strengthening Medicare Taskforce recommendations.

### **Contribute to the implementation of innovative models of care for rural and remote communities**

The Commissioner will continue to assist the Department of Health and Aged Care (Department) to build upon the learnings from past and current innovative models of care (IMOC) to inform future design and implementation of policy for innovative rural and remote models of care and community-led solutions to health care. To support the broader outcomes of the IMOC grant opportunities, the Commissioner will provide expertise in assessment panels for future IMOC grant opportunities and will engage with successful recipients to assist them to develop sustainable multidisciplinary solutions to resolve local challenges.

The Commissioner will continue to work closely with rural and remote health stakeholders in the design and monitoring of rural area community-controlled health organisation and other innovative models of care programs and evaluations.

The *Ngayubah Gadan* Consensus Statement will provide sector wide consensus on establishing and supporting rural and remote multidisciplinary health teams at policy, organisational and community levels to optimise the provision of high-quality primary health care. This includes enabling broadest scope of practice of health professionals (including rural generalists in medicine, allied health and nursing) and the contributions of non-clinical team members. The Commissioner will advocate on behalf of signatories to the *Ngayubah Gadan* Consensus Statement to be a key point of reference across the health sector and within the Department to enable consistency in policy formulation and implementation and to support sustainable multidisciplinary primary health care in rural and remote communities.

The Commissioner will coordinate a publication of a special supplement in a peer-reviewed journal on the learnings from 25 years of the Rural Health Multidisciplinary Training Program, that has supported the education, growth, and development of the rural and remote health workforce.

The Office will report six monthly on sector engagement and findings from evaluation of Department funded innovative models of care and other developments in provision of primary health care. The reports will provide recommendations on policy development for the Assistant Minister to consider.

### **Support First Nation peoples’ health and wellbeing**

The Office will continue to engage with the Aboriginal and Torres Strait Islander Health Peak Organisations (ATSIHPOs), First Nations health care workforce stakeholders and the Department. The Commissioner will continue to work with the National Regional Education Commissioner, focusing on opportunities to strengthen training and education opportunities for rural and remote communities and the entry of Aboriginal and Torres Strait Islander Peoples into the health workforce. These discussions include consideration of tertiary education institutions and the role of this sector in supporting Aboriginal and Torres Strait Islander Peoples to become health professionals, as well as the work of University Departments of Rural Health in maintaining, enhancing, and providing positive relationships across communities in regional, rural and remote Australia.

The Office, through meaningful relationships with the ATSIHPOs, First Nations-focused departmental colleagues and consumer groups contribute to the Australian Government's commitment on the Uluru Statement from the Heart, the National Agreement on Closing the Gap (July 2020) (Closing the Gap), the National Aboriginal and Torres Strait Islander Health Plan and Health Workforce Plan, and implementation of Closing the Gap priority reforms.

The Office has as a core responsibility for the health and wellbeing of all Australians, and through the relationship with the Deputy Commissioner – Indigenous Health continues to seek, support, and elevate the roles that Australia’s First Peoples have within the broader work of the Commissioner. True self determination is First Nations-led. The Office seeks to support self-determination and therefore will always seek to support and work with First Nations leaders to enable them to meet their goals. The Office notes that the Aged Care Royal Commission recommended that a specific First Nations Aged Care Commissioner be established by June 2023. The Commissioner supports this recommendation and creation of a First Nations Health Commissioner position that would have a holistic approach and intersect with aged care, mental health, and rural and remote health and education. This would ensure that First Nations peoples' health and wellbeing is at the heart of decision-making led by and for First Nations peoples.

### **Contribute to rural workforce, training and primary care reform**

The Commissioner will continue to monitor publications and engage with clinical research organisations and the tertiary sector to ensure current expert advice is provided on government programs, initiatives, policies and potential gaps. Development of the National Allied Health Rural Generalist Pathway will be supported by this Office and the Office will work with the Assistant Minister to launch the National Rural and Remote Nursing Generalist Framework in 2023.

The Office will seek to learn what factors impact and influence woman-centred care in rural and remote areas by engaging with consumers and maternity-related professional bodies, the Department and maternity service providers. This engagement will inform evidence-based solutions and advice on the Woman-Centred Care Report that will be provided to the Assistant Minister by September 2023.

The Commissioner will continue regular engagement with the Commissioner for Mental Health, to collaboratively work to improve access for rural and remote communities to mental health and suicide prevention workforce and services. Additionally, the Commissioner will work closely with mental health stakeholders and the Department to ensure policies and initiatives relating to mental health and suicide prevention are rural-proofed.

The Commissioner will regularly engage with the Department’s Health Workforce Division, the general practice colleges and other key stakeholders in general practice training to monitor and support a successful transition to college-led training. While the Transition to College-led Training Advisory Committee operates, the Commissioner commits to fulfilling her obligations as co-chair with the Deputy Chief Medical Officer. Any major identified inhibitors to this transition will be raised to the Assistant Minister.

### **Stakeholder relationships**

The Commissioners will engage with key rural and remote stakeholders to ensure the Office remains abreast of learnings and issues, to ensure policy advice and implementation is sound and risks are mitigated. These stakeholders will include, but will not be limited to:

* rural and remote consumers through the establishment of a consumer network by the Office;
* rural and remote service providers;
* Aboriginal and Torres Strait Islander Community-Controlled Health sector with regular engagements with the peak body, the National Aboriginal Community Controlled Health Organisation;
* the education sector including universities, vocational education providers, and research networks;
* specialist training colleges;
* relevant peak bodies;
* all levels of government;
* Primary Health Networks;
* Rural Workforce Agencies; and
* Departmental senior executives.

The Commissioner will Chair quarterly rural and remote health sector consultation meetings to align priorities across sectors and improve access to health services for regional, rural and remote communities.

The Commissioner will continue to Chair the National Rural Generalist Pathway Strategic Council to progress the implementation of the remaining recommendations from the *Advice to the National Rural Health Commissioner on the Development of the National Rural Generalist Pathway* in medicine. This requires ongoing consultation to broker agreed understandings of problem definitions to ensure sustainable solutions are implemented against the recommendations. The Strategic Council brings together key stakeholders in rural medical practice and training and functions to broker agreed advice to the Department and Government Further, in collaboration with the two general practice colleges, the Commissioner will continue to lead the work of recognition of Rural Generalism as a specialised field within the specialty of General Practice.

The Deputy Commissioner – Nursing and Midwifery will consult with rural and remote nursing and midwifery stakeholders on the Department’s priorities, particularly on matters that address development of workforce strategies and plans.

The Commissioner will also investigate targeted issues across rural and remote communities to understand training, workforce and service gaps to provide advice to the Assistant Minister on a six-monthly basis.

### **Organisational Governance and Financial Management**

The Commissioner will ensure that the affairs of the Office are managed efficiently, effectively, ethically and in a way that meets the requirements of the *Public Governance, Performance and Accountability Act 2013* and *Public Governance, Performance and Accountability Rules 2014*, and the financial management and operational policies of the Department, including the Australian Public Service Code of Conduct.

### **Activity Work Plan**

The Assistant Minister will be provided the Commissioner’s activity work plan on a six-monthly basis. This activity work plan will include activities, risks, milestones and timeframes for delivery. This activity work plan will provide the Assistant Minister opportunity to prioritise work for the Commissioner and the Office.