

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 2 September 2024 – 30 June 2026

Thank you for your correspondence dated 12 September 2024 that outlines the Australian Government's priority to provide all Australians with high quality, accessible and affordable health care. My role is to assist you in achieving this vision for regional, rural and remote Australia.

As the National Rural Health Commissioner, I am committed to ensuring health policies support positive health outcomes across rural and remote populations. My and the Offices' values in providing impartial advice that is evidence-based and considerate will support sustainable innovation and an understanding of how integrated multidisciplinary team care can improve regional, rural and remote Australians' access to health care.

It is salient for me to recognise the expertise of both Deputy Commissioners and stakeholders who provide invaluable advice and guidance on local and national issues across health workforce and services, and who collectively work with the aim of achieving health equity for those in regional, rural, remote and very remote communities through respectful and collaborative stakeholder engagement and codesign.

My Statement of Intent outlines how my approach will meet the legislative requirements and priorities detailed in the Statement of Expectations. The associated activity work plan elaborates on and explicates the relationship between our Statements. It is in the activity work plan and in my reporting to you where I will articulate progress and activity against both Statements.

I look forward to working with you to improving training and workforce opportunities and health outcomes in regional, rural and remote communities as well as remaining agile to respond to any urgent or emerging priorities as directed by you.

Yours faithfully

Professor Jenny May AM National Rural Health Commissioner 21 October 2024



National Rural Health Commissioner Statement of Intent 2 September 2024 – 30 June 2026

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 sets out how the National Rural Health Commissioner will meet these.

Legislative framework and reporting

The National Rural Health Commissioner (Commissioner) holds a statutory appointment under the *Health Insurance Act 1973* (Part VA).

As part of the legislative requirements under the Act, subsection 79AP, the Commissioner will by the 15th day of October each year provide an annual report on activities undertaken during the previous reporting period, to the Assistant Minister, for tabling to the Parliament.

Contribute to Strengthening Medicare through developing and promoting innovative, integrated and multidisciplinary approaches

By providing expert advice to the government, the Commissioner and Deputy Commissioners will continue contributing to key primary health care reviews and assist with implementation of measures that strengthen Medicare to improve access to regional, rural, remote and very remote settings (For simplicity, this document will use the collective term 'rural and remote' to describe these distinct settings).

Improving access to primary health care in rural and remote communities can only be achieved sustainably with cooperative whole of sector engagement. By engaging with Commonwealth, state and territory governments and the sector, the Commissioner and Deputy Commissioners will identify effective, scalable and evidence-based models of care that reflect current and future rural and remote health services and workforce, and advocate for these models to ensure equitable access to health care in rural and remote settings. By building on the sector supported *Ngayubah Gadan* Consensus Statement, this work will look at how these services can be broadly evidenced and measured within multidisciplinary teams and models of care.

The Commissioner will advise on opportunities to address current and future inequalities in access, for example, by monitoring the planning of telecommunications infrastructure given its significant impact on the delivery of health services critical to community health and wellbeing.

Contribute to primary care, rural workforce, and training reforms

The Commissioner and Deputy Commissioners will continue to contribute to the government's reviews of and reforms in multidisciplinary primary care, workforce and training that seek to attract, retain and grow a sustainable place-based, generalist rural and remote health workforce that is equitably distributed. This will include ensuring primary care services, health education and workforce training strategies are responsive to future-focused needs.

This pivotal work will be further supported by the Commissioner and Deputy Commissioners identifying place-based workforce training options and regionalised training models to support training closer to home and on Country. This would necessarily involve codesign and consultation with consumers, communities, and First Nations training and education sectors.



To enhance this work, the Commissioner and Deputy Commissioners will map current and potential future rural health training pathways to build the evidence-based and a deeper understanding of the rural and remote training ecosystem, including its challenges and opportunities. This will be considerate of any potential changes to professions' scope of practice. Mapping of medicine, nursing and allied health training will have the additional focus of rural, remote and generalist pathways, and will build upon the key delivery of the national rural generalist programme.

Support First Nations peoples' health and wellbeing

The Commissioner and Deputy Commissioners will work closely with and seek advice from First Nations peaks, leaders and other stakeholders to implement Closing the Gap reforms. The Commissioner will when invited to do so, work with First Nations stakeholders on specific policy and program areas.

The Commissioner and Deputy Commissioners will work with key areas of the department delivering key First Nations programs to identify opportunities to improve outcomes for underserved rural and remote First Nations communities and people and achieve First Nations workforce parity.

The Commissioner and Deputy Commissioners are committed to ensuring that rural and remote funding, program and models of care design includes ongoing First Nations engagement throughout continuous policy improvement and development cycles.

To increase the First Nations health workforce, guided by the recommendations of the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031, the Commissioner and Deputy Commissioners will share and amplify First Nations led initiatives in building health workforce capacity and support cultural safety and responsiveness.

Support urgent and emerging priorities

The Commissioner and Deputy Commissioners will provide advice on potential and actual rural health risks and practical options to support urgent and emerging priorities as directed by the Assistant Minister or government. This advice can be supported, where appropriate, by the Office's established advisory networks, and broad stakeholder relationships with regional, state, territory and national perspectives. This collective expertise can effectively support government in deliberations.

The Commissioner, Deputy Commissioners and the Office will welcome the opportunity to prioritise and support the legislated independent review of the functions of the Office.

The Commissioner and Deputy Commissioners will continue engaging with the National Emergency Management Agency and relevant entities to understand the challenges in the provision of appropriate and timely primary care in communities that have been impacted by natural disasters in rural and remote areas. This will assist the Commissioner to inform the government of potential solutions and considerations to better support primary health care providers impacted by natural disasters.

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 Commissioner will submit an activity work plan comprising required and intended activities with associated timeframes, and risks for the Assistant Minister to oversee. Thereafter, the Assistant Minister will receive half-yearly reports on the activity work plan. The Assistant Minister can prioritise urgent and emerging work for the Commissioner and the Office which would be reflected in and reported on an amended activity work plan.