

Submission  
No 526

**INQUIRY INTO HEALTH OUTCOMES AND ACCESS TO  
HEALTH AND HOSPITAL SERVICES IN RURAL,  
REGIONAL AND REMOTE NEW SOUTH WALES**

**Name:** Name suppressed  
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Partially  
Confidential

My concern is the ongoing underinvestment in rural health. While this is a complex issue I would like to focus on the lack of investment in training and development of the rural health workforce in my submission.

We know that rural origin students are more likely to work in rural areas. We also know that rural NSW is home to many clever kids who care for their communities and enjoy rural life, yet have to move away from home to find work or alternatively settle for underemployment if they are to remain in their community. For rural people to receive a tertiary education in a health discipline most will need to relocate- usually to metropolitan areas. Those same towns struggle to recruit qualified staff in their health services.

Encouraging rural people to embark on careers in nursing, allied health and medicine is crucial. This needs long-term (over a generation) investment in multifactorial efforts to train rural people in health-related careers. There is an assumption that to pursue a career in health you need to perform well at high school and go straight to university. Multiple pathways to tertiary study exist which do not require finishing high school, such as TAFE based studies in nursing and allied health which then articulate directly with tertiary education.

There are strong foundations to build on:

- School based programs which encourage young people to consider a career in health such as Health Careers Academy which operate in Broken Hill, Dubbo, Orange and Lismore
- School Based Traineeships and VET qualifications for nursing and allied health assistants are available in some rural locations
- Nursing, some allied health and medicine (undergraduate and graduate) can be studied in some rurally located universities
- Some intern placements are available in large rural health facilities
- Some places for specialty training (in medicine) are available in some rural hospitals
- Existence of Rural Training Hubs
- Some support for rurally based research activities to understand rural health issues

But there are significant gaps:

- Extremely high costs associated with leaving home to study elsewhere. These costs are often prohibitive, especially when coupled with existing socioeconomic disadvantage and family responsibilities (such as kinship care) which mean moving away from home is not possible.
- Staff establishment levels in rural health facilities are currently too low to provide adequate student supervision on rural clinical placements, forcing many facilities to say 'no' rather than 'yes' to supervising students.

- The disruptive nature of medical training requiring doctors continually re-locate in order to finish all required stages of their training (ie relocating to take up an intern place and again to take up a place in a training program)
- Limited specialty training positions in rural hospitals (both specialty type and number of positions)
- There is a limited understanding of 'what works' in enhancing rural health workforce beyond recruiting rural origin students to tertiary education and offering extended rural placements with tertiary study

#### What can be done?

- School based programs which introduce students to health careers should be more widespread across rural and remote areas
- School based traineeships and other VET health related qualifications should ALWAYS be available close to home
- Additional financial support for rural and remote origin students to study at university where relocation is required
- Recognition of the importance of teaching and supervising needs to be properly accounted for in workloads for rural health workers so that rural facilities can supervise students
- Improve understanding of the many pathways training might proceed which result in a rewarding career in health (nursing, allied health or medicine)
- All universities in NSW should encourage (incentivise) enrolments from rural origin students
- Increase intern placements in rural health facilities
- Explore rural public/private partnerships for internship in 'generalist' type roles (where interns work in general practice and hospital roles)
- Work with Colleges to understand what would need to change to increase medical specialties and medical specialty training places in rural areas
- Increase investment for researchers living and working in rural communities to understand what works to enhance rural workforce and improve health outcomes for rural people