Eforum Newsletter: NRHA eforum 16 December 2005

National Rural Health Alliance E-forum – 16 December 2005

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'SAVE OUR SERVICES'

The National Rural Health Alliance has called on health authorities and experts to ensure that moves to rationalise public hospitals and emergency units in Sydney, or any other metropolitan centre, do not flow on uncritically to country areas. The Alliance statement is at http://www.ruralhealth.org.au/nrhapublic/Index.cfm?Category=LatestNews and is reprinted below.

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From: Clair North
Subject: Copies of the Rural Health Education Foundation's "Out of the Blue: Managing Depression" program

Free copies of the Rural Health Education Foundation's "Out of the Blue: Managing Depression" program are now available on DVD and video. The program was first broadcast in May of 2005 and has been edited for distribution. Information on the program can be found by visiting http://www.rhef.com.au/programs/505/505.html

To order your free DVD or VHS video copy (one copy per person or organisation only within Australia), simply email rhef@rhef.com.au or fax on (02) 6232-5484 specifying your preferred format, your name, organisation, postal address, contact telephone number and/or email address.

This free offer is provided with generous support from the Australian Government Department of Health and Ageing and beyondblue - the national depression initiative.

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SMALL UNITS ARE SAFE PLACES FOR BIRTH

Low risk pregnant women can now be reassured that giving birth in small maternity units in Australia is safe, following the publication of a landmark study by Associate Professor Sally Tracy and others in the British Journal of Obstetrics and Gynaecology: “Does size matter? A population-based study of birth in lower volume maternity hospitals for low risk women”.

The study found that low risk women having babies in maternity units with less than 100 births a year had significantly fewer inductions, epidurals, forceps/vacuum births, emergency caesareans and babies being admitted to a neonatal unit, compared with low risk women giving birth in maternity units with greater than 2000 births a year.

‘It is clear that in Australia, a lower hospital volume is not associated with adverse outcomes for low risk women and their babies’ Associate Professor Tracy said, ‘in fact, it appears these women are better off. They have more normal births and lower levels of intervention in the birth. There is plenty of research to say this is a good thing.’

‘This is important evidence for Australia, which has seen the closure of more than 120 rural and remote maternity units over the last 10 years’ said Dr Sue Kildea Vice President of CRANA. ‘Women want to be able to have their babies closer to home and now we have Australian evidence to show that it can be done safely’.

The Rural Doctors Association agreed. Its statement is at
http://www.rdaa.com.au/uploaded_documents/Governments%20Must%20Heed%20the%20Evidence%20--%20Small%20Maternity%20Units%20are%20Safer%20--%20December%202005.htm

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SEX, SOCIOECONOMIC STATUS AND LOCALITY, KEY FACTORS IN DIABETES DEATHS

Death rates from diabetes-related causes increase dramatically with increasing socioeconomic disadvantage and distance from major cities, and men are more likely than women to die from diabetes or related causes, says a new report released by the Australian Institute of Health and Welfare (AIHW).

Over the period 2001-2003 there were nearly 21,000 diabetes-related deaths registered for people aged 25 years and over in Australia,

representing 5.4% of registered deaths in that period. Diabetes was recorded as the primary or underlying cause of death in nearly 9,800 of those cases.

Death rates from diabetes-related causes increase dramatically with increasing socioeconomic disadvantage. This reflects a higher prevalence of diabetes and related diseases, particularly diseases of the circulatory system, in the more socioeconomically disadvantaged groups. The rate of diabetes-related deaths was also found to be markedly higher in remote areas than in major cities and inner regional areas.

Aboriginal and Torres Strait Islander people were more likely than other Australians to die as a result of their diabetes or from other conditions, such as heart attack, stroke or kidney disease, where diabetes is known to be a contributing factor.

The AIHW release is at http://www.aihw.gov.au/mediacentre/2005/mr20051213.cfm and the full report at http://www.aihw.gov.au/publications/index.cfm/title/10221

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The Australian Journal of Rural Health invites you to contribute to the ongoing development of rural health in Australia, and submit your manuscripts for publication. Send your papers to AJRH@newcastle.edu.au and be pleasantly surprised at how quickly you can be in print. Author guidelines and sample issues of the AJRH are available at http://www.blackwellpublishing.com/submit.asp?ref=1038-5282 or email ajrh@newcastle.edu.au for further information. The October 2005 issue of the journal is available online now at http://www.blackwell-synergy.com/links/toc/ajr

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The National SARRAH Conference

Building bridges ….. Crossing borders
A Conference for Rural and Remote Allied Health Professionals

13 – 16 September 2006
Albury Convention Centre, ALBURY, NSW

CALL FOR PAPERS NOW OPEN
Information available on the website – www.sarrah.org.au
Deadline for abstracts: 30 November 2005

The 2006 National SARRAH Conference
C/- National Rural Health Alliance
PO Box 280
DEAKIN WEST ACT 2600
Phone: 02 6285 4660
Fax: 02 6285 4670
Email: conference@ruralhealth.org.au or register@ruralhealth.org.au
Website: http://www.sarrah.org.au

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eMJA update

The 5 December 2005 issue of the Medical Journal of Australia is now online at http://www.mja.com.au/

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7th WONCA RURAL HEALTH CONFERENCE

Transforming Rural Practice Through Education
8-15 September 2006
Seattle, WA, USA
http://www.ruralwonca2006.com

Wonca is the World Organisation of Family Doctors, which has a specific Working Party on Rural Practice. This Working Party holds an annual conference on rural health and has produced a number of policy documents regarding rural health (for more information about Wonca, go to http://www.globalfamilydoctor.com).

The deadline for submitting abstracts is 17 February 2006.

WONCA Rural Conference
8-10 September 2006
University of Washington campus
Clinical Conference
11-13 September 2006
34th Annual Advances in Family Practice and Primary Care
University of Washington campus
Post Conference
13-15 September 2006
Talkeetna Alaskan Lodge - Anchorage, Alaska

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RURAL HEALTH ON THE ABC

PBS changes won't hurt bush, says Govt
The Federal Government has ignored concerns from country pharmacists, and gone ahead with a series of changes to the Pharmaceutical

Benefits Scheme. (15/12/2005) http://www.abc.net.au/rural/content/2005/s1531666.htm

Silo death prompts inquiry
The death of a man in a grain silo in South Australia yesterday has prompted ABB Grains to launch an inquiry into safety standards at the site. (13/12/2005) http://www.abc.net.au/rural/content/2005/s1529866.htm

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ARTICLES IN 'RURAL AND REMOTE HEALTH'

'Rural New Zealand health professionals' perceived barriers to greater use of the internet for learning'
Will increased access to broadband internet help rural health professionals? This research from New Zealand shows there are more issues to be addressed before this potential can be fulfilled.
http://rrh.deakin.edu.au/articles/showarticlenew.asp?ArticleID=436

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DEATHS IN AUSTRALIA, 2004
(ABS publication, catalogue 3302.0)

There were 132,500 deaths registered in Australia in 2004, approximately 200 (0.2%) more than the number registered in 2003 (132,300). However, the standardised death rate in 2004 (6.3 deaths per 1,000 population) was the lowest on record, slightly lower than that in 2003 (6.4) and down 32.6% from 1984 (9.3).

Over the past 20 years life expectancy has improved by 5.6 years for males and 4.0 years for females. A boy born in 2002-2004 can expect to live 78.1 years while a girl can expect to live 83.0 years.

In 2002-2004 life expectancy at birth varied between Statistical Divisions of Australia by up to 11 years. Male life expectancy at birth was highest in Canberra (79.7 years), followed by Perth (79.2 years) and Melbourne (79.1 years). Female life expectancy at birth was highest in both Outer Adelaide and South-West Western Australia (each 84.3 years), followed by Canberra and the Midlands in Western Australia (each 83.9 years). Male life expectancy was lowest in the Balance of the Northern Territory (68.4 years) followed by the Kimberley (70.3 years) and North-West Queensland(71.3 years). Female life expectancy was lowest in the Balance of the Northern Territory (73.4 years), the Kimberley (73.7 years) and North-West Queensland (76.9 years).

There is undercoverage of Indigenous deaths to some extent in most states and territories. Therefore, measures of Indigenous mortality presented in this publication are likely to be conservative estimates. There were 2,100 deaths registered in Australia in 2004 where the deceased person was identified as being of Aboriginal, Torres Strait Islander or both origins (Indigenous). Experimental Indigenous life expectancy at birth for 1996-2001 is estimated to be 59.4 years for males and 64.8 years for females.

All ABS publications are now available at http://www.abs.gov.au

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PARTYline is the official newsletter of the National Rural Health Alliance. Keep up to date with rural health policy information and good news stories on living and working in the rural health community. The December edition (No. 24) of PARTYline is available now. Available online at http://www.ruralhealth.org.au/nrhapublic/Index.cfm?Category=PartyLine or receive a hard copy by emailing partyline@ruralhealth.org.au

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GOVERNMENT REINFORCES COMMITMENT TO INDIGENOUS HEALTH

The Commonwealth Government has announced 27 Indigenous primary health services will receive funding under the Healthy for Life program. This is the first funding round and the successful services will receive funding of up to $400,000 per year for four years under the program. The extra funding will be used to improve child and maternal health and chronic disease services with extra staff, health promotion activities, parent child health education and care plans.

The full text of Mr Abbott's statement is at http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2005-ta-abb155.htm

In response, Opposition spokespersons Julia Gillard and Chris Evans said that Labor welcomes the Government's spending on Indigenous health, but has serious concerns that it will be spread too thin. The full text of their statement is at http://www.alp.org.au/media/1205/msfcsfcsheaialoos060.php

The Rural Doctors Association welcomed the announcement. Its statement is at http://www.rdaa.com.au/uploaded_documents/Extra%20Funding%20Will%20Help%20Indigenous%20Health%20--%20December%202005.htm

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LIFELINE'S JUST ASK - 1 300 13 11 14

Your Rural Mental Health Information Service
Lifeline's Just ask is a rural mental health information service. Information provided includes: referral to services and web sites, printed material and a range of self help resources. The self-help resources focus on practical steps to help promote mental health in a range of areas. For information and copies of resources call or visit http://www.justask.org.au and further information is available at national@lifeline.org.au and http://www.lifeline.org.au

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FARM KIDS AT RISK

Statistics show that country kids, particularly those in remote areas, are more at risk of life-threatening injury than those in urban areas. Death

rates for children under 15 in rural areas are slightly higher than in metropolitan areas, but in remote areas they are almost double those in metropolitan areas. On average a child under 15 dies as a result of an injury on an Australian farm every 10 days, accounting for about 20 per cent of all farm deaths from non-intentional injury. Around three-quarters are boys and two-thirds are children under five. Report summaries and links to the booklets are at http://www.rirdc.gov.au/fullreports/hcc.html#OHS. Also visit the FarmSafe Australia website: http://www.farmsafe.org.au/

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BUSH CRISIS LINE - 1800 805 391

Bush Crisis Line is a twenty-four hour confidential telephone support and debriefing service for multi-disciplinary remote and rural health practitioners and their families. It is staffed by qualified psychologists with remote and cross-cultural experience, is toll free and available from anywhere in Australia. For more information http://www.bushcrisisline.org.au

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MEDICAL TRAINING BOOST FOR RURAL NORTH QUEENSLAND

The Commonwealth Government has committed $3 million over two years for a new rural clinical school to be established by James Cook University Medical School. This will improve the clinical training offered to medical students at James Cook University. Medical students from the university will now be able to spend more of their training time in rural and remote areas.

The six-year-old medical school at James Cook University already sends medical students to places like Cairns, Mackay and Atherton. With Commonwealth Government support, the university will expand these opportunities for its medical students and be able to offer better services and facilities such as student accommodation.

The full text of Mr Abbott's statement is at http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2005-ta-abb167.htm

The Rural Doctors Association welcomed the announcement. Its statement is at http://www.rdaa.com.au/uploaded_documents/Rural%20Doctors%20Applaud%20Funding%20for%20New%20Rural%20Clinical%20School%20--%20December%202005.htm

Meanwhile, the Queensland Government announced that it is well advanced to establish a training program for Queensland's new brand of specialist doctors - the rural generalist. The statement by State Health Minister Mr Robertson is at http://statements.cabinet.qld.gov.au/cgi-bin/display-statement.pl?id=9958&db=media

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'RURAL AND REMOTE HEALTH PAPERS 1991 - 2005' CD

This CD is a valuable resource for students, academics, researchers and policy writers in the field of rural, regional and remote health. The 1,800 separate authored documents contain 17,000 pages of information and are searchable by key words and phrases.

The CD includes:
* Full proceedings of the 8th National Rural Health Conference, Alice Springs, March 2005
* Healthy Horizons Outlook 2003–2007
* PARTYline newsletters
* The Australian Journal of Rural Health 1992–2004
* Full proceedings of the Infront Outback Rural Health Scientific Conferences
* The Alliance's Rural Health Information Papers
* The Alliance's Annual reports

The CD is provided free of charge to all friends of the Alliance. If you would like to receive a copy of the CD go to the friends page at http://www.ruralhealth.org.au/nrhapublic/Index.cfm?Category=Friendsand fill in the membership form and return it with your payment to: National Rural Health Alliance, PO Box 280, DEAKIN WEST ACT 2600.

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Extracts from Australian Doctor E-NEWS

DEFENDING FOREIGN-TRAINED DOCS (1-Dec-2005)
Letters on international medical graduates, shadow shoppers, statins,
rural kids becoming rural docs.
http://www.australiandoctor.com.au/articles/74/0C038D74.asp

PHARMACY PRESCRIBING MODELS REVEALED (8-Dec-2005)
A radical vision allowing pharmacists to prescribe PBS-subsidised drugs,
adjust patient doses and dispense repeat prescriptions has been outlined
in a new study funded by the Federal Government.
http://www.australiandoctor.com.au/articles/FE/0C0394FE.asp

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GROWING DIVERSITY IN REGIONAL TELECOMMUNICATIONS SERVICES

New infrastructure, products and services are increasingly being offered by telecommunications carriers in regional markets, according to a report by the Australian Communications and Media Authority. The report, Telecommunications Services Availability in Australia 2004-05, covers the availability of fixed voice, mobile and data services in metropolitan, regional and remote areas of Australia. The overall number of telecommunications carriers in Australia is increasing with 40 new telecommunications carrier licences being issued in 2004-05, bringing the total number of carrier licences to 132. Fourteen of the new carriers said that they intended to provide services in regional areas. The full report is at http://www.acma.gov.au/ACMAINTER.4849984:STANDARD:685811583:pc=PC_100351

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PUBLIC HOUSING RESPORTS

Two reports released by the Australian Institute of Health and Welfare on public rental housing and state owned and managed Indigenous housing, show that social housing remains an important source of accommodation for households whose housing needs cannot be met by the private rental market. The reports, Commonwealth-State Housing Agreement national data report 2004-05: public rental housing , and Commonwealth-State Housing Agreement national data report 2004-05: state owned and managed Indigenous housing , provide an overview of public rental housing and state owned and managed Indigenous housing in Australia. The public rental housing report shows that there were 335,264 households living in public rental housing dwellings in June 2005, a decrease of 991, or 0.3%, from 2004. The AIHW statement is at http://www.aihw.gov.au/mediacentre/2005/mr20051216.cfm

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CONTRIBUTION AND SUBSCRIPTION INFORMATION AND DISCLAIMER

The NRHA e-forum is edited by a third party moderator, Jim Groves. Contributions are sought on any topic relevant to rural health concerns. Please send contributions to the moderator at grovesc@winshop.com.au (do not "reply" to this email - send contributions to grovesc@winshop.com.au).

As such, the Alliance does not control postings and the contents do not necessarily reflect the opinions of the Alliance. Nor do postings necessarily reflect the view of Jim Groves or any organisation he is associated with. Jim Groves can be contacted at grovesc@winshop.com.au.

This issue is going to 2,469 email addresses. Please forward a copy to any colleague you think may be interested.

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'Save Our Services'

The National Rural Health Alliance today called on health authorities and experts to ensure that moves to rationalise public hospitals and emergency units in Sydney, or any other metropolitan centre, do not flow on uncritically to country areas.

"Closing an emergency service in a small metropolitan hospital within striking distance of another is quite a different proposition to closing small hospitals in country areas where there is no alternative within a reasonable distance," John Wakerman said today. "In the face of undeniable pressure on staff and other health resources, we must not apply a metropolitan solution to rural areas," he said. Associate Professor Wakerman is Chairperson of the National Rural Health Alliance.

"There may well be a need for sweeping changes to the public hospital system, but not at the cost of losing acute and emergency care in country towns", Dr Wakerman said.

A recent citizens' jury exercise in Western Australia has shown that country people see the importance of primary health care as a means of keeping people out of hospital. But country communities still have the right to emergency services close at hand. And they also have a real need for a number of reasons, including a higher rate of motor vehicle accidents, some dangerous industries and transport infrastructure, services and subsidies that are no match for the distances involved.

"While we are working to keep people out of hospital, the challenge is to re-shape acute care and to protect and enhance the workforce able to provide emergency care. This will involve continuing to support GPs in country areas - especially those with procedural and emergency skills - as well as nurses, allied health professionals and ambulance and paramedic staff who have the skills to intervene in emergencies and 'refer up' to the next level of care," Dr Wakerman said.

Spending more on both primary health care (ie prevention) and emergency services may mean we have to spend more on health overall. So be it. There is evidence that the majority of Australians would prefer increased expenditure on services to further tax cuts.

"Safety and quality of practice are obviously critical and people in rural and remote areas have just as much right to demand these of their health system. But wholesale closure of small hospitals and their emergency and birthing units is not the way to go."

As a recently-published on article on Australian maternity services shows[1], what counts in safety is not the throughput of a health service but the level of competence available.

"We need greater investments in the training and support of health professionals, and a shift in emphasis from hospital-based care to better primary health care services. But we must not risk the health of people in rural areas by imposing metropolitan solutions which would lead to the widespread closure of rural hospitals or emergency units."

1. "Does size matter? A population-based study of birth in lower volume maternity hospitals for low risk women", Sally K Tracy, Elizabeth Sullivan, Hannah Dahlen, Deborah Black, Yueping Alex Wang, Mark B Tracy, BJOG: January 2006 - Vol. 113 Issue 1 p.86ff; online publication date 5 December 2005