

CENTRE FOR RURAL HEALTH BULLETIN

JULY 2016

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DoH 2011-2015 funding

The CRH has successfully undertaken a range of activities that has enabled it to meet all Project Objectives.

15

Recovery camp

An experiential learning opportunity for students of health disciplines.

Aboriginal and Torres Strait Islander health students: Placement support program



Riawunna Newnham Campus

Background

The Centre for Rural Health (CRH) has a long-standing commitment to advancing the health and well-being of Aboriginal and Torres Strait Islander people. This commitment translates into supporting Aboriginal and Torres Strait Islander health and allied health students through their tertiary studies at UTAS. Their graduation and registration as health professionals is dependent on the quality of their professional

experience placements (PEPs). Placements are rewarding periods as students integrate curriculum learning with practical 'hands on' experiences in a supervised healthcare environment. Placements are also critical 'make or break' periods for students as they vary in duration from a few days to a month or more and are undertaken in hospitals and other health care or workplace settings, off-campus and away from home. As such, they can be dislocating and challenging to students. With few Aboriginal and Torres Strait

Islander health professionals in the workforce, placements can also be socially and culturally isolating for Aboriginal and Torres Strait Islander students.

Collaboration

In response, key stakeholders from the CRH, the Riawunna Centre for Aboriginal Education and Schools within the Faculty of Health have been working to develop a targeted support program for Aboriginal and

Torres Strait Islander health students undertaking placements in Tasmania. Our program aims to complement existing support mechanisms provided by Riawunna Aboriginal Higher Education Officers (AHEO), Student Services and PEP coordinators. We also encourage students to develop peer support groups and 'look out for each other' through their placements and studies, and to proudly graduate as emerging Aboriginal and Torres Strait Islander health care professionals with a valuable suite of clinical and cultural skills.

Rationale

The reasoning for our placement support program is multi-layered. The poor health status of Aboriginal and Torres Strait Islander people has long been recognised as a direct outcome of the cumulative effects of colonisation and ongoing cultural and socio-economic marginalisation. Our support program aims to help rectifying the critical shortage of Aboriginal and Torres Strait Islander health professionals in Australia's health workforce. We know that increasing the

STORY CONTINUED ► Page 02

NEWS & ACTIVITIES

PHCP 2015 report

Each year the University of Tasmania Centre for Rural Health (CRH) offers a small number of project-based research training opportunities linked to CRH research projects.

These involve primary health care (PHC) professionals working in short-term, remunerated, casual placements. These placements provide an opportunity for primary health care professionals with an interest in research to build their research skills, experience and track record through hands-on involvement under the guidance of an experienced researcher.

In 2015, eight scholars participated in the program and the finished project lists are outlined in the table below. The CRH is proud to have provided these interesting opportunities and looks forward to assisting new batch of scholars for 2016.



Further Information

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Scholar	Project Title	Supervisors
Deb Carnes	Educational development of virtual orientation tours	Dr Merylin Cross
Greer Maine	Evaluation of better oral health in residential aged care	Dr Ha Hoang
Bianca Perera	The life support program	A/P Tony Barnett
Christabel Alliston	The mental health rural road art show	Dr Heather Bridgman
Ella Anderson	Circle of security: parent attachment study	Dr Lyndsay Quarmby
Suzanne McNab	Feasibility of a rural based tele-psychology clinic	Dr Heather Bridgman
Kimberly Kevan	Recovery Camp	Dr Heather Bridgman
Suzie Clafflin	The international student experience	Dr Martin Harris

COVER STORY (CONTINUED)

Aboriginal and Torres Strait Islander health workforce has a direct link to improving the health of Aboriginal and Torres Strait Islander people. We also know that the retention and graduation rates of Aboriginal and Torres Strait Islander health students are vastly improved when they are supported at cultural, academic and clinical placement levels.

Flexible delivery

Our placement support program

is necessarily flexible as students from different years of study and different disciplines are on placements through a staggered rostered system throughout semesters one and two. The Riawunna Centre will initially inform and invite Aboriginal and Torres Strait Islander health students to our placement support program prior to semester two, 2016. The first workshop will take place on 18 July. Our initial focus will be with students who are undertaking placements in rural and remote health care facilities. Delivery will entail briefing

and de-briefing workshops, with follow-up student engagement through phone, email and/or site visits during their placements. Students at other campuses will have video conferencing access to these workshops. At the end of semester two we will evaluate and refine our program for ongoing delivery in 2017.

Our placement support program seeks to ensure Aboriginal and Torres Strait Islander health students have positive professional placement experiences by being more

informed, 'placement ready' and socially connected. Enhancing our students' capacity to succeed during placements will increase the Aboriginal and Torres Strait Islander health workforce and ultimately contribute to the care of our future generations.



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Welcome new Practitioners (PHCP 2016)



Rita Wong

I was born and raised in Malaysia. I came to Australia as an international student in 1991 to pursue higher education and completed my Pharmacy degree at the University of Tasmania.

I always find education very rewarding and fulfilling so I made a career change into teaching and interpreting before I decided to apply as a research assistant with the UTAS Centre for Rural Health. It is a new venture and I am very grateful to be part of the team at CRH. I am currently working on a project with Dr Ha Hoang and Mark Kirschbaum looking at rural pharmacists and oral health. I am interviewing pharmacists who provide us with invaluable insights into strategies used to improve oral health standards in rural communities. It is a real privilege to interact and share ideas with colleagues of my own profession.

I think I have found my dream job doing research and would definitely progress my skills and experience in this area as more opportunities arise. My passion and goal is to see the community's quality of life improved through our studies. It gives me a great sense of purpose and it empowers and drives me to do more; something that surpasses monetary gain. I want to look back one day and say: It is well with my soul.



Rosy Green

My name is Rosy Green and I have worked as a nurse, midwife and lactation consultant for over 20 years in a wide range of practice settings. I trained initially at the Royal Adelaide Hospital and then in Taunton England for midwifery, with a career that has included working in all manner of hospitals, primary health care facilities and rural clinics in India and Sudan. My areas of focus have been community practice, sexual health nursing, counselling, private practice with a medical team, working for the Premiers physically activity council and as a community midwife in private practice with Launceston Birth centre.

Since 2008 I have been lecturing in nursing and midwifery with the School of Health sciences supporting students in community, rural and mental health facilities across Tasmania and NSW. I looking forward to my involvement with the current CRH study instigated by Dr Merylin Cross and A/Professor Tony Barnett, investigating factors that constrain and enable the use of rural health teaching sites for professional experience placements.



Jerildene Cane

I got into nursing nearly 7 years ago after having done biomedical research for around 4 years as I wanted more patient contact. I graduated from La Trobe University and did my grad year at the Royal Eye and Ear Hospital, Melbourne. After that I was lucky enough to get into a discovery program in Emergency and off I went. I obtained postgraduate studies in ED and 3 states later, am now working in ICU and research at Launceston General Hospital in Tasmania. I enjoy combining critical care nursing and research and being able to do the two (at present) is immensely interesting. I am currently working on the Life Support Project looking at Skill Decay in health professionals with Associate Professor Tony Barnett and Dr Chona Hannah. As part of this I am exploring if there is a difference in skill decay between nurses that have Critical Care Skills/training and those that don't. I'm here on Wednesdays so please come and say Hi.



Vicki Salter

I have worked in the mental health sector for many years and have always felt that it is a privilege to be a mental health nurse. My work is important, varied and interesting. I use a range of skills such as mental health promotion, intervention, medication management, direct nursing care, education and training (both staff and consumers), psychotherapy, counselling and advocacy. It is important to me as I have met some wonderful people, laughed and cried along my journey but most of all making a difference in people's lives.

I see the positives that people can achieve with support, along with believing in what I do for a living. The role is rewarding, never dull, it challenges me to be creative, remain committed and enthusiastic about helping others.

I am currently working with Dr Heather Bridgman on analysing the data collected through the recovery camp evaluation.

Where are you now?

Annette Loudon MMedSc - Yoga Therapist

Annette Loudon completed her research degree with the Centre for Rural Health UTAS three years ago. She examined the benefits of yoga therapy as an adjunct self-management option to alleviate the effects of lymphoedema secondary to breast cancer. An outcome of this work was to produce a Yoga DVD, a resource now available from the Australasian Lymphology Association and increasingly being used by yoga teachers. Annette came back to Tasmania to make the DVD, as a tribute to her research volunteers. Her work was recently featured in the Lymph Exchange magazine (April 2016).

Annette developed the DVD after being contacted by various people with upper body lymphoedema or who had friends

or relatives with lymphoedema, as well as yoga teachers, lymphoedema therapists and allied health professionals. She explained that the DVD is also used as a vital teaching aid for trainee yoga therapy students on her accredited *Yoga and Breast Cancer, Yoga and the Lymph System and Lymphoedema* courses. The DVD has generated interest from and is being used by health professionals around the world including Canada, United Arab Emirates and South Africa.

Annette has met many people who are unaware of the possibility of developing secondary lymphoedema after cancer surgery and said: "the sad thing is, these people don't even know who to turn to". She recommended that people in rural and remote

areas could use the DVD as "a self-management resource". Annette spoke of developing a specific yoga therapy sequence for a rural lymphoedema patient who was introduced to her by a friend. The life of this person has changed since she did her yoga twice a day. As the good news about yoga therapy spreads, Annette encourages people with lymphoedema to join yoga class and continues to educate community nurses, allied health professionals and yoga teachers about the benefits of supervised and specialised yoga as a holistic adjunct to lymphoedema treatment.

Since graduating, Annette has spoken at conferences and conducted workshops at the request of yoga organisations, consumer groups and health professionals around Australia. One of her favourite outcomes from these talks "is assuring women and men with lymphoedema that they

are not forgotten". Through these conferences and workshops, Annette has tasked the opportunity to encourage yoga teachers "to investigate evidence-based research and apply it to their teaching". As a past president of the Australian Association of Yoga Therapy (AAYT), Annette has been able to "promote the need for yoga research". Annette's postgraduate experience clearly shows her passion for her work. She works extremely hard to make a difference to the lives of people with lymphoedema. Annette is more eager than ever to explore the benefits of yoga therapy across many areas.



Further Information

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Exercise and Education

The Centre for Rural Health in conjunction with the Rural Clinical School is helping in the delivery of a program through Pathways to Success Project at Number 34 Aboriginal Health Service.

The program consists of a one hour presentation relating to higher education and wellbeing and one hour of exercise with an instructor. The program runs once a week for five weeks. Included in the program are links to nutrition and wellbeing, body image, familiarisation with the Rural Clinical School, meeting medical school students and discussions including Higher Education and pathways.



Fit Futures



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Ms Sharon Dennis and Denise Jones

Water, hidden sugar and Tasmanian oral health!

Associate Professor Len Crocombe was featured in the local newspaper (Mercury) last April 11, 2016. In the featured article he spoke about how Tasmanian dentists advocate for the “expansion of fluoride into water supplies of Tasmania’s smaller townships” to combat the States poor oral health. According to TasWater data, 36 towns do not have fluoridated water supply. Tasmanian adults are considered as having the worst oral health in Australia – blamed partly on more hidden sugars in the diet, and a more decentralised population reliant on non-fluoridated drinking water. He explained that fluoridated tap water was a simple preventive measure for this problem; yet most bottled water does not contain fluoride, which is denying children to fluoride and causes the rise in tooth decay. He said Tasmania was the first State to ensure that all towns with a population of 1000 people had fluoridated water supplies but “we cannot afford to ‘rest on our laurels’ with oral health being poor in rural areas”. “Cost-effective water fluoridation options are now available for smaller communities” he said.

The Tasmanian branch of the Australian Dental Association (ADA) called for communities with as few as 500 people to have access to fluoridated water supplies. The ADA highlighted the contributing factors that impact on the state of Tasmania’s oral health: Tasmanians were more likely than mainland Australians to have fewer teeth. Dental conditions were the key reason for acute preventable hospital admissions in Tasmania. The State population is more decentralised, older, with a lower socio-economic status and a higher proportion of people eligible for public dental care. The prevalence and recurrences of these impacts constitute a silent epidemic. Dental caries are the second most costly diet-related disease in Australia, with an economic impact comparable with that of heart disease and diabetes. The ADA also called for a crackdown on smoking to improve oral health – backing a plan for a “smoke-free generation”.

(Source: Anne Mather, Mercury April 11, 2016)



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Ms Sharon Dennis giving lecture for the “Close the Gap Day”

Tasmanian Native Food Exhibition and Lecture

Sharon Dennis from the Centre for Rural Health was invited as a guest speaker at the *Number 34* Aboriginal Health Service Close the Gap Day in Ulverstone on the 17th of March. Close the Gap day aims to reduce Aboriginal and Torres Strait Islander peoples disadvantage and to pledge a commitment towards improving Aboriginal health and wellbeing outcomes.



Tasmanian Native Plants

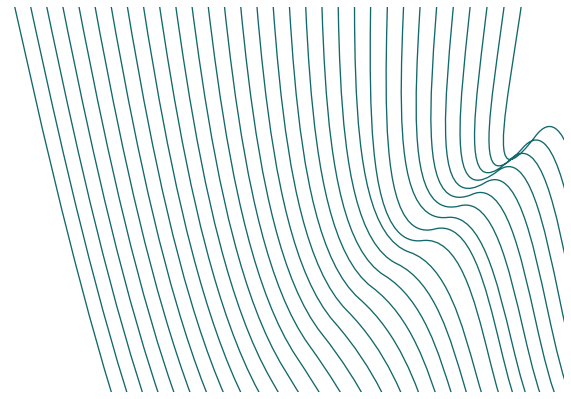
As part of the awareness and commitment, a table of Tasmanian native food was prepared for people to touch and sample. Native food links in with the Aboriginal people’s relationships to the environment, and health, and food in its natural state. Native food is also related to nutrition and the overlap of introduced foods. There were also many examples provided that relate native food and nutrition with the importance of education, health and wellbeing.



Further Information

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2015 PUBLICATIONS



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Epilepsy Connect



Free over-the-phone peer support for Tasmanians affected by epilepsy

Epilepsy Tasmania in partnership with the Centre for Rural Health, has recently launched its new program - Epilepsy Connect - with the generous support of the Tasmanian Community Fund.

Whether living with epilepsy or a carer, Epilepsy Connect provides an easy and confidential way to get in touch with others who've 'been there'.

Peers can provide practical information, empathy and support, discuss concerns and challenges, and provide a better understanding of epilepsy.

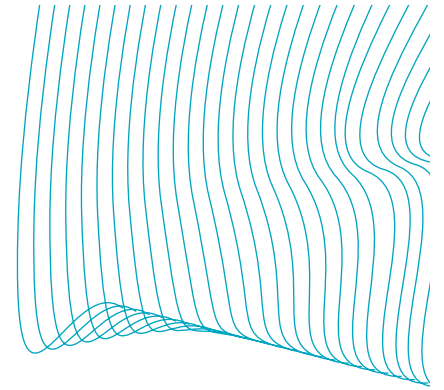
For more information or to register for the service contact Epilepsy Tasmania on 1300 852 853.



Further Information

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GRADUATE RESEARCH



We have farewelled our Graduate Research Coordinator Dr Quynh Le. **Dr Quynh Le** recently retired from the Centre for Rural Health (CRH) and moved to Melbourne. We thanked Dr Quynh Le for her dedicated and great support to our HDR candidates over the years and wish her well for the new stage of her life.

“You have been here with us and now you are no longer with us! We want to say goodbye with great gratitude.”

(Vietnamese song-lyrics)

We welcome Dr Ha Hoang as the newly appointed Graduate Research Coordinator for the CRH. Dr Ha Hoang has been with CRH for nearly ten years both as a Higher Degree by Research (HDR) candidate and a postdoctoral fellow. Since being awarded with a PhD in 2012, Ha has supervised four PhD students with 1 completion and 8 primary care practitioners under the CRH Primary Care Practitioner Scholarship Scheme. Dr Ha Hoang is highly focused in Oral Health and Maternity Care research and has contributed a track record of more than 20 publications in high quality journals. Ha is very excited with the new appointment and looks forwards to working closer with HDR candidates and their supervisors in her new role!

Warmest welcome to our new HDR candidate **Dr Shahrukh (Shah) Khan**. Shah is looking at “Prevalence and Risk Factors of Periodontal Disease and Oral Health in a Rural Population” and is supervised by A/Profs Len Crocombe, Tony Barnett (CRH, Faculty of Health) and Dr Silvana Bettiol (School of Medicine, Faculty of Health).



We are very proud to announce that our HDR candidates Deb Carnes, Anna Spinaze and Joanne Yeoh have been awarded with their PhDs, Melissa Terry with Masters Degree in Medical Science. Congratulations to all!

Jackie Stuart co-authored with her supervisors and has published a paper entitled “*Sorry, I’m not a dentist*” in the Medical Journal of Australia.

Diana Godwin has had her paper entitled “*Views of Australian dental practitioners towards rural recruitment and retention: A descriptive study*” accepted for publication in BMC Oral Health.

Thao Doan has returned from maternity leave. Welcome back, Thao. We wish you well with thesis submission.

The Centre for Rural Health

Research symposium took place at the Rural Clinical School in Burnie on the 26th and 27th April 2016. The symposium was a forum for staff and research students in the rural health space to share and showcase research and to foster collaboration with colleagues and key stakeholders. Our four HDR candidates **Diana Godwin, Lucio Babo Soares, Sherphard Chidarikire and Thao Doan** (and her little baby Paris) participated in and presented their research at the symposium. Diana Godwin presented her study entitled “Why don’t dental practitioners work in rural areas?”, Lucio Babo Soares “Changes in the oral health of the children of Dili, Timor Leste, between 2002 and 2014”, Sherphard Chidarikire “A focused ethnography of the experiences of people living with schizophrenia in Harare, Zimbabwe” and Thao “Health literacy: a critical analysis and conceptual model”.

Our students have done well not only in academic performance but also in job attainment. Dr Joanne Yeoh has secured a job in global education and is based in Melbourne, Victoria. Since she graduated, Melissa Terry has

worked as a research assistant at the University of Melbourne. Our former PhD graduate Dr Daniel Terry is now a lecturer at the University of Melbourne and has recently been successful in securing a competitive grant application in his position there.

Graduate research has made a significant contribution to the research excellence of our university and broadly to global health research. One of its strengths is the collective spirit and networking among students, colleagues within and outside CRH. Thanks to this, many dreams have been proudly achieved.



Further Information

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PROJECTS

Open-wide: A look inside the work of Centre of Research Excellence in Primary Oral Health Care

Established in 2012 and awarded \$2.5 million over four years by the Australian Primary Health Care Research Institute, the Centre of Research Excellence in Primary Oral Health Care (CRE) is a collaboration between the Universities of Adelaide, Tasmania, and Western Australia. The CRE four research themes and eight projects represent priority areas as identified in research and in Australia's National Oral Health Plan.



During 2012-2016, the CRE researchers at the Centre for Rural Health, UTAS have successfully conducted three major projects: (1) Dental practitioners: Rural work movements; (2) Relationship of dental practitioners to rural primary care

networks and (3) International oral health policy implications for Australia. In addition, the CRE team has conducted 6 leveraged projects on a number of topics including the oral health in residential care training program, readability characteristics of oral

health brochures and managing dental caries in children using silver diamine fluoride. The team has also initiated and developed four new project ideas including skill mix and oral health during pregnancy. One of these ideas has been further developed to an application and submitted to a national competitive grant funding body.

During the life of the CRE program, researchers have developed and maintained collaborations with a number of health care service providers, industry sectors and researchers around Australia and internationally. Close partnerships have been developed with Oral Health Services Tasmania and with Southern Dental Industries Limited to conduct a clinical randomised controlled trial. The CRE, Aged and Community Services Tasmania, Oral Health Services Tasmania and the Wicking Dementia Research and Education Centre has formed an Oral Health Aged Care Alliance to work towards an oral health plan for people with access to aged care services in Tasmania. The alliance meets regularly and has been progressing a detailed oral health plan for older people in residential care.

In the period 2012-2016, the CRE researchers have published 18 papers in journals with an impact factor from 0.7 to 4.089. These journals have provided a quality platform for disseminating the work of the CRE at UTAS.



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Department of Health 2011-2015 funding period report summary

The CRH has successfully undertaken a range of activities that has enabled it to meet all Project Objectives. It has developed and strengthened links with a number of health care and community organisations to support students and health care workers living and working in rural Tasmania. Major achievements over the period have been showcased in the Bulletin series (a bi-annual newsletter produced by the CRH and widely distributed to rural health stakeholders across the state).

Student placements

Over the 2011-2015 reporting period, the CRH provided support to a large number of Nursing, Medicine, Pharmacy and Allied Health students enrolled with the University of Tasmania and to smaller numbers of students from interstate universities who undertook their clinical placements in rural and remote Tasmania. The CRH supported over 1,600 students on placements for two weeks or more. This represents more than 6,400 student placement weeks with an increase in the average placement duration from 3.4 to 3.9 weeks. There has been a noticeable growth in Allied Health (AH) student placements over the period. In 2011, 28 AH students undertook a rural clinical placement and this increased to 82 AH students in 2015.

Student accommodation

The CRH manages bookings for accommodation facilities at a number of locations across rural and remote Tasmania where students can reside whilst undertaking their placement at the local hospital, pharmacy or GP practice. The number of locations in which support has been provided has grown from 13 in 2011 to 16 in 2015 and the number of accommodation facilities has increased to 18, accommodating more than 80 students at any period.

The development of new accommodation under the Rural Interprofessional Clinical Education Training Centres (RICETC) Program in 2012 increased student accommodation capacity across the state by a total of 17 beds. Accommodation houses were purchased at Deloraine, Oatlands, St Helens and Zeehan and existing accommodation at Smithton was refurbished. The Latrobe Motel, was purchased by the University of Tasmania in 2014 to support health students on placement in the Mersey Region and can accommodate up to 14 students.

Virtual Orientation Tours

The CRH developed 16 virtual orientation tours of rural and remote practice settings across Tasmania (including three Aboriginal health centres). The aim of these tours is to increase student awareness of rural health services, attract greater numbers of students to rural remote placements and assist in their orientation to these facilities. The tours can be viewed at <http://www.tcen.com.au/virtual-tours>



Equity based student placement allowances have been provided to students to assist with travel and other costs associated with a rural placement

Student placement allowances and scholarships

Equity based student placement allowances have been provided to students to assist with travel and other costs associated with a rural placement. Whilst capped, these allowances have helped many students to undertake clinical placements in locations and venues that would have otherwise been prohibited because of cost. In collaboration with the Rural Clinical School and the University Graduate Research Program, a number of *Elite* research scholarships have been provided to graduate students to undertake a research degree and investigate rural health topics under the supervision of a CRH staff member. *Write-Up* scholarships were introduced in 2011 to promote research dissemination by graduate research students after they have submitted their theses and are waiting for the results.

Workforce Development and Training

The CRH worked with government and non-government organisations to bring a range of training, mentoring and professional development activities to rural health care professionals across Tasmania. Topics presented included: life support skills, cannulation, challenging behaviours, autism assessment, simulation, oral health, communication, research literacy, programs for school children to reduce alcohol abuse and online training for rural clinical supervisors and community health needs assessments. The programs continue to be well received and patronised.

E-Health

The Graduate Program in E-Health (Health Informatics) has operated over the funding period and enrolls 20-30 students annually. It was extended in semester 2 of 2013 to include a Bachelor of EHealth (Health Informatics) (Professional Honours), which articulates directly with the Master of EHealth (Health Informatics). The E-Health team undertook a review of the program in 2014. The review confirmed that the curriculum and structure of the program was congruent with the Certified Health Information Australia (CHIA) competencies and that the program complied with the Australian Qualifications Framework (AQF) requirements.

Practitioner Scholars Scheme

The CRH Practitioner Scholars Scheme provides busy practitioners some time out from their mainstream job to learn new skills and to work with CRH staff on research, student learning and quality improvement projects. Over this reporting period, 60 practitioners have participated in the scheme, representing a broad range of health care disciplines.

Grants

Staff at the CRH have had great success in securing 91 grants with a total value of \$6,770,177. The direct value to the CRH was \$3,607,672 and helped to build the research capacity and profile of the CRH. The larger of the grants awarded over the period included the following:

Three CRH senior researchers made up over half of the chief investigator (CI) team involved in the establishment of the \$2.5 million Centre for Research Excellence in Primary Oral Health. The Tasmania based CIs focussed on projects related to primary health care services in rural and remote Australia and the barriers and enablers that impact on dental practitioners working and living in rural areas.

A national training grant of \$431,800 enabled our e-health team to deliver training aimed at up-skilling health professionals to effectively use tele-health to enhance access to services for rural, remote and metropolitan communities.

A \$440,000 grant from Health Workforce Australia (the “*Simulated Learning Environments Distributed Simulation Project*”) helped improve clinical training by providing equipment, training and generally strengthening the quality of the clinical learning environment at many rural and remote teaching sites.

Publications and research dissemination

Over the reporting period CRH staff and students have published an impressive total of 146 international refereed journal articles, contributing to rural health research on both a national and an international scene. Staff also presented at conferences, produced papers and reports and worked with a range of health care providers to translate research findings into practical outcomes.

Performance and quality – benchmarking

A Benchmarking exercise was undertaken by the CRH with the Greater Green Triangle UDRH based in Warrnambool over 2013/14. The project compared each unit's performance against the 8 reporting KPI's, especially around community engagement and research activities and outputs. Since that time a number of improvements have been implemented to strengthen activities and performance across each KPI.



Staff at the CRH have had great success in securing 91 grants with a total value of \$6,770,177

Structure and management

As part of a Faculty-wide restructure the CRH was realigned to sit within the School of Health Sciences within the Faculty of Health from 1 January 2014 and was renamed the “Centre for Rural Health” (CRH). As part of this, a number of professional (service/support) staff responsibilities and positions were centralised.

The Board of Management met at least annually over the reporting period to provide input and feedback on how the CRH was meeting its objectives and performance indicators. There was little change to membership though during this period, a Board member Pip Leedham was appointed to the University Council.

Non-Faculty members of the Board:

- Clair Andersen (Indigenous Adviser)
- Rev Chris Jones (CEO, Anglicare),
- Lee McGovern (Chief Allied Health Adviser/ Corporate Policy and Regulatory Services),
- Lester Jones (DoN/Manager Deloraine District Hospital and Community Services),
- Pip Leedham (Director Service Planning and Design, DHHS), and
- Dr Rosalie Woodruff (Local Government Member, Huon Valley Council)

E-Health update

Enrolments continue to grow, with 92 students currently enrolled in E-Health units. This includes 40 students in the Professional Honours program, 14 in the Graduate Certificate, 9 in the Graduate Diploma, and 15 in the Masters program. The remaining students are enrolled in a variety of courses and are taking e-health units as electives. Enrolment numbers are expected to increase with the second semester intake.

Sue Whetton, course co-ordinator, will fill the role of Scientific C-Chair at the upcoming national health informatics conference, HIC2016, to be held in Melbourne in July. Sue has also recently been invited to take up the position of Australian Co-Chair of the Australasian College of Health Informatics (ACHI) Conference Scientific Panel Sub-Committee. The New Zealand Co-Chair is Professor Ray Kirk, University of Canterbury.



Further Information

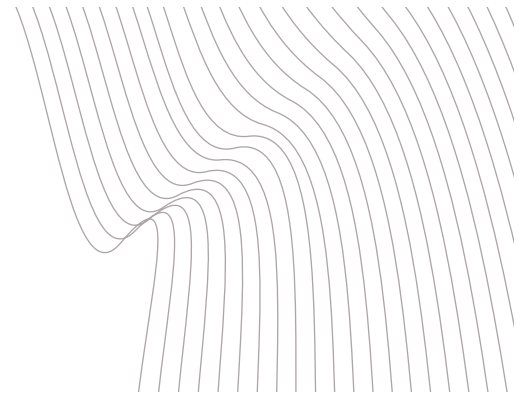
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GRANTS / RESEARCH



Evaluation of the Bridges Out of Poverty workshop program



In 2013 Tasmanian Medicare Local (TML) received funding through the Australian Government Department of Health to establish the Social Determinants of Health and Health Risk Factors project.

One of the overall aims of the project was to reduce inequalities in health and improve health outcomes for all Tasmanians through supporting programs which develop and support workforce and community capacity to address the social determinants of health. Following a community consultative process the then TML identified a priority need for training in understanding the

cultural impacts of poverty. The Bridges Out of Poverty workshop was identified as a potential training resource for understanding the socio-cultural impacts of poverty.

The Bridges Out of Poverty workshops have been delivered to different education, social services, health, criminal justice and policing, housing, and community stakeholders since the early 2000's. In 2013 TML sponsored a series of seven Bridges Out of Poverty workshops as part of a suite of professional development and information activities aimed at creating an understanding of the dynamics that cause and maintain poverty from the individual to systems level. Of particular interest to TML was the extent to which the workshops

have been able to develop and support workforce and community capacity to address the social determinants of health in Tasmania.

An evaluation team comprising researchers from the Centre for Rural Health, School of Health Science and the Rural Clinical School at the University of Tasmania were successful in securing a grant to undertake an evaluation of the workshops. The evaluative study targeted the 930 participants who attended one or more of the seven TML supported Bridges Out of Poverty workshops between May 2013 and October 2015. Of particular interest to the evaluation is the extent to which the workshops have created change in:

- Workforce and community capacity to address the social determinants of health;
- The understanding of the cultural issues impacting on poverty;
- The capability of practitioners who support people impacted by intergenerational poverty;
- Service delivery aimed at supporting people impacted by intergenerational poverty.

Outcomes from the evaluation will inform the strategic priorities for the new Primary Health Tasmania (PHT) entity. Workforce development and community capacity building remain two key objectives of the new PHT strategic plan. Data from the evaluation as it relates to workforce development and capacity building may add value to other education, training and support programs delivered by PHT currently and into the future.



Further Information

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Autism-readiness in mainstream community childcare

The Rural Clinical School (RCS) and Centre for Rural Health (CRH) are collaborating with the North-West Tasmania, Autism Specific Early Learning and Care Centre (ASELCC) to undertake an Autism Specific research project.

Project team: Kathryn Fordyce, NW Tas ASELCC manager, Colleen Cheek, Miranda Stephens and Penny Allen (RCS) and Merylin Cross, CRH University of Tasmania.

The North West Tasmania (NW Tas) Autism Specific Early Learning and Care Centre (ASELCC) has adopted a hub and spokes service delivery model with selected mainstream childcare centres. The NW Tas ASELCC model prepares and supports staff in satellite mainstream childcare centres when a child registered with the ASELCC lives in an

area beyond reasonable commuting distance from the centre and there is capacity to deliver early intervention through a local mainstream childcare centre. Child outcomes at these rural 'spokes' centres are similar to child outcomes at the regional 'hub', and there is demand for the model to be extended to other childcare centres and rural towns. However, currently, there are no guidelines to inform which childcare centres may be suitable, or how the childcare centre and ASELCC can work together to build this capacity. This collaborative project, funded by Burnie

City Council (\$15,000), will review existing accreditation standards to determine the minimum requirements for childcare centres, review existing literature to identify desirable skills of staff delivering early intervention for children with autism in mainstream settings, and survey local experts to determine their experience and suggested requirements. Data will be collated into a set of workable criteria for the NW Tas ASELCC to strategically plan and work with mainstream child care centres to increase their readiness to become spoke centres and form part of a larger project and grant application to the Australian Government Department of Social Services.



Further Information

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Children – the 'forgotten victims' of domestic violence?



A multidisciplinary team from the University of Tasmania partnered with the Salvation Army (Tas) to undertake a project investigating 'best practice' approaches to raising awareness of the impact of family violence on children. The project was funded by the Tasmanian Community Fund, with the original grant application being submitted by the late Associate Professor Erica Bell, formerly of the Centre for Rural Health.

The project team includes Drs Peter Lucas, Romy Winter and Clarissa Hughes, along with Professor Ken Walsh of the School of Health Sciences. During the initial stages of the research, the team undertook a narrative literature review of

academic and 'grey' literature (including government reports, brochures, and websites) and adopted a strategic approach to identify and engage with relevant stakeholders locally, nationally and internationally.

In conjunction with the Salvation Army, the researchers conducted collaborative community consultations (in Ulverstone, Launceston and Hobart) with a range of stakeholders from non-government organisations, the business sector, universities and government agencies. Focus groups and interviews were conducted with a further 17 individuals who were unable to attend the "World Café" style events.

Lead Researcher Dr Peter Lucas said "We had an excellent response to our invitation to attend the consultations. Eighty-nine people were involved from across the state, including workers from the family and domestic violence sector, police officers, researchers and program managers from a range of services working in this area. The discussion was lively at times and it was great to hear a diversity of views."

"One thing we really noticed was the sector's incredible

commitment to working together to help raise awareness of the harms that children experience from exposure to family violence. We're really encouraged by that", said Dr Romy Winter, who has been researching in the domestic violence space for almost two decades.

The Final Report of the project includes over thirty recommendations in the areas of awareness raising, program content and delivery, resourcing, and ongoing research. While submission of the report signals the end of this stage of the research project, it is hoped that it will inform ongoing discussion about how best to raise awareness of harms experienced by children who are exposed to family violence.



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Recovery camp participants and facilitator

Recovery Camp: An experiential learning opportunity for students of health disciplines

Recovery Camp provides an alternative opportunity for students to gain mental health placement hours in a non-stigmatising, recovery focused learning environment. The UTAS Recovery Camp was funded by a UTAS Teaching Development Grant to pilot the concept in a Tasmanian context.



Stretch and strengthen activity



Canoeing

Recovery Camp was originally developed by Mental Health Nursing Professor Lorna Moxham from the University of Wollongong (UoW). The Camp was held in April 2016 at the Fingal Valley. The Camp team consisted of Dr Heather Bridgman (Psychologist, Centre for Rural Health), Ally Smith (Social Work), David Lees (Mental Health Nursing) and Vicki Salter (Mental Health Nurse, Richmond Fellowship). The Camp included nine community volunteers who have a stable, diagnosed mental illness, and six students from various disciplines (nursing, social work, psychology and exercise physiology).

The Camp aimed to increase support and understanding of recovery from mental illness; while providing interprofessional learning opportunities. Camp activities involved a variety of challenging and supportive mental and physical activities that encourage participants to advance their understanding of mental health recovery and wellbeing through engagement with both consumers and future health care providers. Outdoor activities concentrated on teamwork and trust activities such as balancing on ropes, canoes, logs and swings. Students spoke of these activities

as safe, pivotal turning point of the camp and facilitated group cohesion and trust. All activities were designed to support recovery and offered volunteers safe and supported opportunities to increase their confidence and work towards their goals.

A two hour romp stomping dance with a live bush band set the toes tapping and challenged stamina of the campers. John Coleman (Director of the Choir of High Hopes in Hobart) led a soul stirring hour of choir singing complete with a spine tingling rendition of 'Hallelujah'. The musical extravaganza continued during the campfire, where chocolate bananas and toasted marshmallows were accompanied by heartfelt reflections of the personal meaning of Recovery Camp, laughter, tears and several hours of joyful singing.

Recovery Camp will be evaluated using a mixed methods design complementing the UoW evaluation framework. The team will investigate the model as an alternative Mental Health placement experience across various health disciplines and hope to continue collaborating with UoW.



Further Information

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Researching the social and economic benefits of treated water for small communities

The Centre for Rural Health (CRH) in collaboration with the Institute for Regional Development (IRD) have recently completed a comprehensive literature review of the social and economic benefits of treated water for small communities including the health impacts of different water qualities on ten small rural communities in Tasmania. The research conducted on behalf of TasWater acknowledges that access to a safe and clean water is fundamental to good health and illness prevention.

The study was an outcome of the implementation of the 2014 Small Towns Water Supply Strategy and Guidelines which focused on the assessment and prioritisation of treated water supply in Tasmania. Much of the available information focused on the cost benefits of treated water supplies and with public health outcomes, and the resource demands of water management.

The study highlighted the complexity of addressing water supply issues for small rural



communities within Tasmania. The study report recommended that consideration be given to the social and livelihood costs, and benefits, as well as the economic viability when considering options for treated water supply. There are a range of both direct and indirect economic/financial impacts for consumers and communities related to treated water supply as well as impacts at regional and sub-regional level which have longer term implications. The report recommended that these impacts need to be well understood and communicated to the target communities



Underpinning these complex decision filters lies the challenges of sustainability and long term safety and quality

before implementation of the preferred supply option. Underpinning these complex decision filters lies the challenges of sustainability and long term safety and quality.

Findings and recommendations from the study were presented to TasWater and inform further stages of the Small Towns Program including detailed investigations into upgrade and service replacement options, assessment of both TasWater and consumer costs, and formal engagement with key stakeholders.



Further Information

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Update on the Community Garden project in SE Tasmania

Following on from the success of the Walking Each Other Home (WEOH) project in 2015, the Okines Community Garden is continuing to explore ways to provide a supportive gardening space for people in the community.

We were recently successful in the Community Levy Fund grant round, which will enable us to employ an occupational therapist on site one morning a week over spring and summer this year. Together with the Centre for Rural Health, Okines will encourage people with restricted mobility, for whatever reason, and their carers to participate and enjoy the garden. The grant will also allow some improvements for wheelchair access. This is a fantastic opportunity to trial this new assisted gardening approach. I will be documenting and evaluating its progress.

Together with the WEOH fibre artist, Gwen Egg, I have been promoting the project at various Palliative Care Tasmania events. Most recently, we had a stand at the 'Dying to Know Expo' in Hobart where we spoke about the benefits, challenges and delights of working in this exciting area of therapeutic space.

The first article from the WEOH research, "Community Gardens as Site of Solace and End of Life Support: A Literature Review" was co-written with Anna Spinaze and will be published in next month's edition of the International Journal of Palliative

Care (Vol 22:3). Please take a look and I would love to hear your feedback. Please get in touch if you would like to know more about this ongoing research, or would like to be involved in future work.



Further Information

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EVENTS /AND/ CONFERENCES

Systematic Reviews on the Horizon

In mid-February, Dr Merylin Cross, Dr Simone Lee and Dr Clarissa Hughes from the Centre for Rural Health joined 18 other participants to undertake the Joanna Briggs Institute (JBI) Comprehensive Systematic Review Training in Hobart.

This 5-day program was facilitated by Dr Catalin Tufanaru and Dr Micah Peters from JBI in Adelaide, who together delivered an exciting, informative and practical program.

The hands-on training was designed to prepare researchers to develop, conduct and report comprehensive (mixed method) systematic reviews of evidence using the JBI Model of Evidence-based Health Care. By the end of the week participants had learned how to develop a focussed question, design a search strategy, select relevant literature, appraise and synthesise evidence, and prepare a protocol ready to commence a review.

Each participant had the opportunity to present their draft protocol paper for peer appraisal and it was evident from this exercise, the breadth of qualitative and quantitative health research that would be systematically reviewed in the coming 12 months. A Community of Practice has since been established to facilitate the continued development of these reviews and ensure their timely publication. All participants successfully completed the program and are now certified by JBI as competent reviewers, for a period of two years. It is anticipated that UTAS staff who attended the program will undertake further training with a view to training additional staff in the JBI systematic review process. Overall, this was a fantastic professional development opportunity which will benefit staff and the University alike.



<http://evidencebasedliving.human.cornell.edu/2010/04/20/evidence-based-systematic-reviews-as-close-to-certainty-as-it-gets/>



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WONCA Conference

During my Centre for Rural Health Primary Health Care (PHP) practitioner programme I worked with a team on the project "Saving lives"- Life Support Skills. As part of this programme I was encouraged by A/Prof Tony Barnett to send an abstract to the first WONCA conference of 2016 – the South Asia Region conference which took place in February in Colombo, Sri Lanka. WONCA is an acronym representing the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians.

Two weeks prior to the conference we heard from the WONCA SAR Scientific Committee about the acceptance of the oral presentation abstract. It was very exciting, but also slightly nervous as I did not have much time to prepare.

The theme of the conference was "Reaching across the shores to strengthen primary care ". Over 600 family doctors from Sri Lanka, India, Pakistan, Bangladesh, Bhutan and the Maldives, together with colleagues from many other nations around the world, participated to share experiences in clinical care, education and training, and research. It was an amazing experience.

I take this opportunity to express my gratitude to A/Prof Tony Barnett and also to thank Dr Merylin Cross, as well as Dr Chona Hannah and Mr Darren Grattidge for all the support. It was a great pleasure to work with you all.

Further Information

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L-R: Dr Raj Eri; Ms Jo Reid and Dr Stephen Myers

Rural Health Symposium

The Centre for Rural Health (CRH) conducted a two day Rural Health Research Symposium on 26th and 27th April at the Rural Clinical School, Burnie. The aim of the symposium was to share and showcase research from staff and research students in the rural health space and to foster collaboration with colleagues and key stakeholders.

The first day program was structured as a number of short 10 minute presentations, loosely grouped under one of the four research theme areas specified by the Commonwealth Government Department of Health as part of its "Rural Health Multidisciplinary Training" programme. The CRH and the Rural Clinical School are both funded through this programme. The first day of the symposium highlighted 22 oral presentations that includes: completed research, research in progress and research that is 'imagined' or proposed. The theme areas were:

- Rural Health Workforce Development (including recruitment and retention strategies)
- Rural Training Strategies
- Innovative Rural Service Delivery Models

to enable the Provision of Health Services to meet Community needs

- Improving the Health of Aboriginal and Torres Strait Islander People

A symposium dinner on Tuesday night allowed staff, students and colleagues to further collaborate and time to unwind. As Aristotle once said: The end of labour is to gain leisure.

The second day program focused on research planning; particularly aligning current research projects under the new DoH research theme areas. Key research partnerships and collaborations were highlighted as well as identifying recruitment strategies and plans for Research Higher degree students. The autumn symposium was a success and we take this opportunity to thank everyone who attended and presented at the symposium.



The first day of the symposium highlighted 22 oral presentations that includes: completed research, research in progress and research that is 'imagined' or proposed



Further Information

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MUDRIH visits

In February 2016 the Centre for Rural Health hosted two visiting scholars Dr Keith Sutton and Dr Anton Isaacs from Monash University Department of Rural Health (MUDRIH), with the aim of fostering ongoing collaboration related to rural mental health workforce development and service provision. Keith is Lecturer in Rural Mental Health and has extensive experience as a clinician, manager and bureaucrat in the mental health field. He is a registered psychiatric nurse and has worked in the UK, Queensland, Melbourne and Gippsland. Keith coordinates a range of training, service development, and evaluation/



Drs Anton Isaacs and Keith Sutton

research projects; including the Gippsland Mental Health Vacation School. Currently Keith's research is focused on attracting allied health and nursing professionals to work in the rural behavioural health sector.

Anton is Acting Senior Lecturer, Monash University School of Rural Health MUDRIH. He is a public health physician with over five years' experience in India and has worked in the fields of HIV and AIDS, reproductive health, occupational health and mental health. Anton has routinely taught medical and nursing students as well as community health workers. Anton's interests include treatment and outcomes of people in rural areas with mental disorders such as depression and anxiety. Currently Anton's research is focused on improving the mental health of Indigenous men.

During the visit Keith and Anton discussed potential, ongoing collaborations with staff from the Centre for Rural Health, the Rural Clinical School in Burnie and local mental health service providers. Keith presented on "Attracting mental health workers to rural areas – what does the evidence tell us?" whilst Anton presented "Developing mental health services for disadvantaged communities". Ample time was also dedicated to showcasing the best of North West Tasmanian scenery and food!

In their words:

"We now understand the mystery of the irrigation circles as viewed from the aircraft just before landing in Launceston. Our first impressions of Launceston related to the old colonial buildings and steep slopes. You certainly live in a beautiful part of the world. Keith thought it was a great opportunity to meet with colleagues from another UDRH, put faces to names and gain an understanding of the environment in which you are based. Keith was also thankful for the opportunity to explore potential partnerships. Anton welcomed the opportunity to be able to share his research with you and to chat with Terry Cox about the issues faced by Aboriginal people in his community. Our trip to Burnie was full of berries, cheese, chocolates and spectacular scenery. Overall, we were touched by your warm hospitality and were pleased to be able to strengthen our friendships. We hope that our visit paves the way for future collaborations."



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Nubeena writing retreat March 2016: Balancing work rest and play

Four academics from three disciplines participated in a group-initiated, largely self-catered writing retreat in March at Nubeena, one of our Centre for Rural Health, Rural Health Teaching Sites. The purpose was to undertake an integrative review of the literature on the benefits, barriers and enablers of mentoring for women in faculties of health. Notably, there was very little Australian research on the topic.

This was our fourth writing retreat in 18 months. Each of the three previous retreats produced an article that has since been published, and we are almost ready to submit our recent article. We found the writing retreat experience to be a healthy balance between intensive writing

and relaxing activities. We found the retreat requires preliminary planning, agreeing on a topic, defining our research question, undertaking a search of the most relevant data bases, reviewing the titles and abstracts, selecting the most appropriate source articles and screening reference lists to check that we haven't missed something important. By the time we head off for a retreat we have a full set of the articles to be used, have decided the sequence of authors and identified the target journal, based on its focus, indexing, quartile ranking and impact factor. Apart from expediting and refining our writing, the writing retreat helps us consolidate collegial and interdisciplinary relationships, gets us out and about and increases our ability to peer review.



I-R: Drs Heather Bridgman, Simone Lee, Merylin Cross, and Rachel Kornhaber

Using one of our rural teaching sites when students are not in residence provides a cost-effective, self-contained, comfortable environment to write in. Nubeena provides a quiet, 'retreat-like' experience with water views, walking distance to local amenities and a short drive to White Beach (see photo below). We choose a long weekend because this provides enough time, when suitably prepared, to write a first draft. Working around a weekend provides a mix of

work and private time, enables us to avoid conflicting work priorities and to find a time that is mutually convenient. We recommend that others ready to write a collaborative paper or grant, consider the value of a writing retreat.



Further Information

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DIRECTOR'S REPORT



Associate Professor Tony Barnett

Work has commenced under the new **Rural Health Multidisciplinary Training (RHMT)** Program that sees funding continue from the Department of Health for rural health activities over the next 3 years. The primary focus of the program remains on the recruitment and retention of health care professionals and on improving health outcomes for people in rural and remote areas. Recently, the Commonwealth has indicated its desire for the University to double the total number of weeks nursing/allied health students undertake placements in rural areas – a challenge which we hope can be met. This would mean an increase from a projected 1300 students total placements weeks being support this year (2016) to 2600 weeks in 2018.

CRH staff have been actively aligning their **research activities** in accord with the four research themes areas described in the new RHMT funding agreement:

- Rural Health Workforce Development (including recruitment and retention strategies)
- Rural Training Strategies
- Innovative Rural Service Delivery Models to enable the Provision of Health Services to meet Community needs
- Improving the Health of Aboriginal and Torres Strait Islander People

Some of this work was presented at a **rural health research symposium** held in Burnie at the Rural Clinical School on 26th April 2016. During the symposium staff and students presented work that had recently been completed or in progress for a total 22 projects under each of the Commonwealth's themes.

2015 was another strong year for **research publications** for the CRH, with 30 peer reviewed

papers published in international journals over, as well as a number of book chapters, conference papers and presentations.

Congratulations to **Stuart Auckland** and team for securing a grant from the Kentish Council for \$19,999 to develop a Local Government Area Community Learning Plan. The project team will undertake a place based approach to building community capacity through partnerships, collaboration and additional resources attainment to; provide greater educational opportunities across the lifespan; lift education attainment levels; and create a lifelong learning culture within the Kentish local government area.

Our Primary Health Care Practitioner Scheme saw a number of new faces join the multi-disciplinary CRH team in Launceston. We extend a very warm welcome to **Jeraldine Cane, Rosy Green, Suzi Claflin, and Vicki Salter** each of whom is on short term (6month) part-time secondment to gain skills in research that they can then

apply within their professional and local work environments on completion of the program.

Earlier this year and with great fondness, we bid a sad farewell to **Dr Quynh Le** who has re-located to Melbourne after many years' with the CRH as Graduate Research Coordinator. Quynh will be missed by many staff and the graduate research students she has touched over her time with the University. We wish her every happiness for the future. **Dr Ha Hoang** has been appointed as Graduate Research Coordinator for the CRH to replace Quynh.

Last year, the CRH supported more than 330 Australian health students including 7 Indigenous students to undertake a little over 1300 weeks of **placements** in health care and other settings across Tasmania. Many of students were provided with accommodation close to their placement facility while others received a rural placement travel allowance. Nursing students accounted for the majority of students supported

followed by medical students and those in a range of allied health disciplines. Paramedic students represent the largest single group of allied health students supported whilst social work students undertook the greatest number of placement weeks (13 students undertook a total of 208 placement weeks across the year).

Further Information

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