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From the Director's Desk

Welcome to the October edition of the UDRH Rural Health Bulletin. This edition reports on the varied activities that we have been engaged in since the last issue.

One of the most exciting happenings was a rural student learning experience at Scottsdale (report on page 2). RIPPER (Rural Inter-Professional Program Emergency Retreat) brought together students from the Launceston Clinical School and the Schools of Nursing & Midwifery and Pharmacy with rural health practitioners from Scottsdale and university lecturers. I was thrilled by the "buzz" in the Scottsdale RSL, where the event was held, when I arrived on the Sunday morning. All involved were quick to tell me what a wonderful learning experience it had been. The health professionals from the local hospital, GPs, pharmacy and aged care facility who had volunteered their weekend were full of praise for the event. Thanks to **Jess Whelan** and the team for planning and putting the weekend together.

Dr Peg LeVine and **Stuart Auckland** have been successful in winning one of the inaugural University Community Engagement Grants. There is a report on page 2 on their plan to establish a mental health Trauma Response Consortium for Rural Health between the University of Tasmania, rural community services and government bodies that have been engaged in Tasmanian critical-incident interventions.

The UDRH is fortunate to have several Honorary Associates and Fellows who provide practical input into our activities in their areas of expertise, and enrich our academic life. Honorary Research Associate Dr **Rosa McManamey** has been awarded the prestigious 2006 Australia and New Zealand Regional Science Association International (ANZRSAI) postgraduate academic prize for her thesis. Rosa, who graduated in 2005, was presented with



Associate Professor Sue Kilpatrick

her award at the ANZRSAI conference last month and presented a session on her winning submission to the conference. (See page 3)

I attended the Australian Rural Health Education Network (ARHEN) Board meeting and annual general meeting in Canberra in September. ARHEN encourages a co-ordinated approach to the activities and the strategic direction of the UDRH Program and acts as a communication and co-ordination conduit for the UDRHs and also between them and Commonwealth and other organisations. The ARHEN Board meet with several senior bureaucrats from DoHA, the new CEO of the NHMRC, the Director of the Australian Primary Health Care Research Institute and a senior staffer from Health Minister Abbott's office. The senior bureaucrats and Minister's staffer noted that the UDRHs had an excellent reputation and saw the variety of UDRHs as a strength. Nursing and allied health, rather than medicine, and a continued continuing education and primary health service research profile were regarded as the future direction for the UDRH program. More placements for nursing and allied health students and an inter-professional / multi-professional emphasis were seen as appropriate. There was also discussion about mental health academic appointments to the UDRHs to fit with the agenda set by the COAG.

Sue Kilpatrick
Associate Professor and Director

A RIPPER in Scottsdale!



Students working in multidisciplinary teams on a cardio-emergency

On 9 – 10 September 2006, 30 students from the Schools of Medicine, Nursing and Midwifery and Pharmacy successfully took part in the pilot of RIPPER (Rural Inter-Professional Program Emergency Retreat) in Scottsdale.

The RIPPER program was designed and run by an inter-disciplinary team from within the Faculty of Health Science, including Dr **Kim Rooney** of the School of Medicine, **Judy Spencer** and **Jessica Whelan** of the Department of Rural Health, **Helen Howarth** of the School of Pharmacy/UDRH and **Amanda Reilly** of the School of Nursing and Midwifery.

The primary aims of RIPPER were to foster and facilitate positive and productive inter-professional learning experiences for undergraduate health science students. It also aimed to allow students to gain an understanding of the importance of an inter-professional and team approach to delivering health care to people living in both urban and rural areas, and to encourage students to consider rural practice as a future career.

Over the course of the weekend, students took part in a number of rural based emergency care scenarios. Each scenario operated as a discrete skill development and management station, using different educational modelling tools such as the use of simulators and role play. Students were required to work collaboratively with other students from within their own and other disciplines in the immediate management of the emergency, prevention and aftercare strategies as well as participate in a discussion of case based and inter-professional learning from a multi-disciplinary perspective.

RIPPER was strongly supported by a number of inter-disciplinary academics from within the Faculty of Health Science, as well as health professionals from the Scottsdale and Launceston communities who assisted in facilitating and mentoring students throughout the weekend.

While formal evaluations of the RIPPER pilot are still taking place, preliminary

feedback has indicated an overwhelming support for the program by students and staff alike. This gives positive scope for the further development of a sustainable inter-disciplinary health care stream within the Health Sciences curriculum, and the development of further shared teaching and learning initiatives between the health related disciplines.

The program also strengthened the partnership between the Scottsdale community and the University of Tasmania, particularly in encouraging community ownership in the culture of health education. Accommodation, catering and facilities for the event were also shared and supported by health professionals, businesses and individuals in the Scottsdale community.

In effect, the program was true to its name ... a real RIPPER!



A student sharing what she has learnt

UDRH Project to Increase Rural Resilience Wins UTAS Community Engagement Grant

A UDRH project to skill trauma response networks within rural Tasmania has been awarded one of the inaugural UTAS start-up grants for support of community engagement projects. The project is initiated by UDRH Senior Lecturer Dr **Peg LeVine**, UDRH Lecturer in Community Engagement **Stuart Auckland** and **Colin Clarke**, Psychologist at the UTAS Counselling Service.

The rationale for this project is to enhance the trauma response infrastructure in rural Tasmania. The long-term goals of this project are to:

- Increase resilience in rural communities in Tasmania if and when a crisis occurs;

- Decrease the potential for chronic repercussions that emerge from acute responses to trauma that ripple through a whole community; and
- Facilitate the potential to generate better evidence based outcomes by training community response personnel in research practitioner methods of observation and record keeping, as all too often effective interventions are left unrecorded.

These goals will be met through the formal development of a Trauma Response Consortium for Rural Health. The Consortium would have the expertise to generate a user friendly trauma response manual that provides a decision tree format. This format

can assist teams to map better paths for replying to context specific trauma in a community. A research informed publication, with attention to special populations, could increase resilience and recovery for a community's children, youth, young adults and adults, should a traumatic event occur.

The manual will be put on the university website and will be designed with an interactive decision tree. As part of community engagement, the UDRH will pilot the material intended for publication onsite with St Marys, since it is a community that has ongoing activities with the UDRH and has case study material from which to pilot the decision tree.

Rosa McManamey Wins the Top Accolade

The prestigious 2006 Australia and New Zealand Regional Science Association International (ANZRSAI) postgraduate academic prize has been won by UDRH Honorary Research Associate, Dr **Rosa McManamey**, for her PhD thesis *Exploring the Relationship between Community Newspapers and Social Capital: The Power to Empower*. This is a real honour for Rosa who submitted her thesis through the UTAS School of Education and graduated in 2005.

Her award was presented at the ANZRSAI 30th Annual Conference awards dinner at La Trobe University, Beechworth on 28 September.

The Australia & New Zealand Regional Science Association International Inc. (ANZRSAI Inc.) awarded the prize at their 30th Annual Conference for a Postgraduate thesis undertaken at a higher education institution within Australia or New Zealand and submitted between 30 June 2002 and 30 June 2006. The prize included a cheque for \$1,000 and full conference attendance



Dr Rosa McManamey presenting at the ANZRSAI conference

sponsored by the Department of Transport and Regional Services.

The winning thesis was considered to contain research which makes a significant and innovative contribution to regional and urban theory and/or policy issues and contributes to understanding regional structure and change.

Rosa presented a session on her winning submission to the conference on 29 September. The thesis study explored the relationship between community newspapers and social capital by analysing the newspaper content and investigating the timing of the establishment and production of independent community newspapers published in Tasmania between 1910 and 2000. The study found that growth rates of community papers both noted in literature and in the study findings supported increasing resources of social capital over the twentieth century particularly from 1970 to 2000 at the grass roots community level. Using an innovative approach based on social capital theory, structure and models, the research also suggested that content analysis may contribute to expanding modes of understanding the concept of social capital and its practice.

The theme of the conference was "Heritage and Regional Development" and Rosa also presented a second paper, "Positive Press, Hard Times and Regional Development" based on an evaluation report of The Examiner



Dr Rosa McManamey with her thesis supervisor A/Prof Sue Kilpatrick

Newspaper's community development and education initiative, the "Believe it! Campaign". The campaign was implemented in Northern Tasmania in mid 1998 and ran until mid 1999. The newspaper campaign based on change management and transformation aimed at fostering positive attitudes, self confidence, community spirit and ongoing community capacity building across all sectors.

Her paper discussed heritage as a historical and theoretical component built on trust within the role of community newspapers impacting on social and economic regional development. It concluded by drawing on the outcomes and impact of the initiative related to trust and the significance of the initiative as an ongoing heritage for regional community well-being.

Furneaux Group Community Health Needs Mapping Exercise

The University Department of Rural Health is about to embark on a project to map the community health needs of residents of the Furneaux Group of islands.

The project evolved from a strategic directions workshop held in May this year conducted by the UDRH for the Furneaux Health and Community Advisory Group (FHCAG). One of the key outcomes of the workshop was an identified need to conduct a community health mapping exercise of residents of the Furneaux Group. The FHCAG was successful in its application to the Flinders Council to undertake the project.

The Furneaux Group project follows similar work recently conducted by the UDRH in the Meander Valley municipal

area. The project will be undertaken by an expert team of practitioners who combine both the academic and practical skills required to complete such an activity.

A key feature of the project is the capacity building approach that will underpin all aspects of the work. The project methodology is based on utilising the existing strengths of the FHCAG and broader community to work in partnership with the project team. Where possible the UDRH project team will work directly with the FHCAG in a guiding or mentoring role.

The proposed methodology also provides the flexibility for certain tasks to be undertaken by the project team, depending on the specific nature of the task, whilst other tasks could be

completed by community members. Given the geographic isolation of the Furneaux Group, the project will utilise existing Telehealth and IT facilities on the islands.

Subject to the outcomes of the mapping exercise the project will also look at opportunities for greater input by the community in the design, monitoring and evaluation of health services within the Furneaux Group.

The project will commence in November 2006 with a preliminary workshop involving the islands' key stakeholder groups and will conclude in the latter half of 2007. For further information please contact UDRH Lecturer in Community Engagement **Stuart Auckland** at Stuart.Auckland@utas.edu.au or (03) 6324 4035.

UDRH Researcher Looks into Effectiveness of Calcium Supplementation

A study conducted by UDRH Senior Research Fellow Dr **Tania Winzenberg** defies the common belief that calcium supplements given in addition to calcium from the diet will help build stronger bones in children. The paper titled "Effects of Calcium Supplementation on Bone Density in Healthy Children: Meta-analysis of Randomised Controlled Trials" for which Tania is the lead author was recently published in the prestigious *British Medical Journal*.

The study team comprising Dr Tania Winzenberg, Dr **Kelly Shaw**, **Jayne Fryer** and Professor **Graeme Jones** of the Menzies Research Institute, University of Tasmania, analysed data collected from 19 studies involving 2,859 healthy children below 18 years old without coexisting medical conditions or treatments affecting bone metabolism. Children having calcium supplementation compared with placebo with a treatment of at least three months were included and bone outcomes were measured after at least six months of follow-up.

Osteoporosis is a major public health problem, particularly in women.



Dr Tania Winzenberg

Research indicates that at least 90% of peak bone mass is obtained by the age of 18 and postmenopausal bone mineral density is a function of peak bone mass and the rate of subsequent bone loss. Thus, intervention in childhood to maximise peak bone mass might minimise the impact of bone loss related to age.

According to Tania's study, giving children calcium supplements in hopes of building stronger bones may not provide any real benefits. Calcium supplementation has little effect on bone mineral density. The only site where there was an effect was the upper limb and the effect was too small to result in clinically important decrease in the risk of fracture. Children taking the supplements only had 1.7 percent better bone density in their upper limbs compared to kids not taking the supplements. More importantly, the study found no effects at other sites where fracture is common, namely the hip and the lumbar spine.

In conclusion, the study provides only limited support for the use of calcium supplementation in healthy children as a public health intervention. More studies are required in children with low calcium intakes and in peripubertal children. Given the small treatment effects seen with calcium supplementation, however, it may be appropriate to explore possible alternative nutritional interventions, such as increasing vitamin D concentrations and intake of fruit and vegetables.

A Study into Social Connection among Older Tasmanians

What helps people to stay involved in their community as they get older?

Researchers at UDRH are keen to find out. Existing studies show a close relationship between people's social involvement and their health and wellbeing in older age. Given the profile of Tasmania as the state with the highest proportion of older people, knowing what helps or hinders older people staying in touch is very important.

Chief Investigator for the University of Tasmania study, Dr **Peter Orpin**, Senior Research Fellow in Rural Health, said, "Policies and services that help people stay connected to their families, friends and communities are going to be vital in promoting healthy and productive ageing in our rapidly ageing population."

"Our study will survey over 300 Tasmanians, 65 and over, about how their social connections have changed as they have got older. The study results will provide the first step towards a

major study that will eventually assist in refocussing services for older people in the state.

"We are looking for older people (65+) from both rural and urban areas to tell us about the way that getting older has affected their social involvement."

This study is funded under the Primary Health Care Research, Evaluation and Development Research Capacity Building Initiative and is building the research capacity in aged care research.

If you are interested . .

If you are interested in participating in the study, please contact Dr Orpin on 6226 6344 or email him at Peter.Orpin@utas.edu.au.

Multi-professional RHD Program Featured in AMEE

The Multi-professional Research Higher Degree (RHD) program and its recruitment and integrated candidate support program established at the UDRH was the focus of the paper "Multi-professional Education as a Way of Developing the Research Capacity of Practising Health Professionals" delivered at the Association of Medical Education in Europe (AMEE) 2006 Conference in September in Genoa, Italy by UDRH Deputy Director Dr **Rosalind Bull**.

The conference provided an opportunity for international information exchange about issues related to medical and multidisciplinary education. Over 1,500 delegates from all over the world were attracted to the conference. Workshops, papers and poster sessions ensured a comprehensive insight into innovations in such areas as virtual patients, simulation, clinical education and research training.

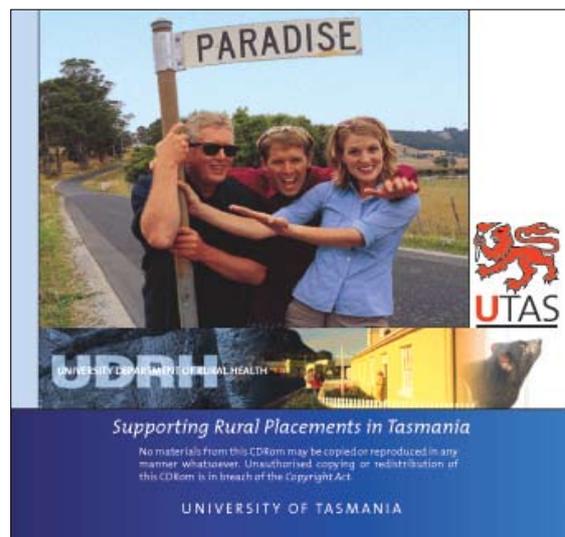
UDRH Develops a CD Resource to Support Rural Placement

The Supporting Rural Placements in Tasmania CD is a resource developed by UDRH Lecturer in Rural Education **Lisa Dalton** to support students, health professionals and academics during rural placement periods. A rural placement involves undergraduate health science students undertaking clinical and professional practice experience in actual health care agencies in rural and remote communities.

The schools at the Faculty of Health Science (FHS) are currently strengthening their rural programs and this is resulting in increasing numbers of undergraduate students undertaking rural placements in Tasmania. Stronger links are developing between the FHS, rural health care professionals and the community and while these are positive

developments, they place new demands on all people involved, including students, academics and health professionals. Through the provision of readily accessible information and resources and the identification of links to supporting programs, the Supporting Rural Placements in Tasmania CD is a streamlined way to support those involved in rural health education.

The UDRH is currently preparing to begin a process of evaluation for the prototype CD. Students, academics and health professionals will be invited to review it and provide us with feedback, which will be used to make necessary amendments. The Supporting Rural Placements in Tasmania CD will be available to Faculty of Health Science schools and departments in 2007.



The CD is a valuable resource for students undertaking rural placement

Factors Affecting GP Workforce Participation in Tasmania

UDRH Senior Research Fellow Dr **Tania Winzenberg** gave a poster presentation on "Factors Affecting GP Workforce Participation in Tasmania" at the Royal Australian College of General Practitioners (RACGP) Annual Scientific Convention, held from 5 to 8 October in Brisbane.

The ability to predict general practitioner (GP) workforce requirements depends on information about how demographic factors affect workforce participation. Regional differences in these effects may not be detected by national surveys. This study aimed to determine the demographic factors associated with GP workforce participation in Tasmania and to assess the impact of GP leave patterns on workforce.

A self-administered census of Tasmanian GPs was conducted from 9 – 16 May 2005 measuring GP demographics and the number of 3.5 hour sessions worked that week.

The census had a response rate of 76% (403 respondents), of whom 6% were on leave during census week. Factors associated with working full-time included older age, male sex and graduating outside of Australia, the United Kingdom or Ireland, but not rurality. Age had no effect on workforce participation in males but was associated with an increased likelihood of working full-time in females older than 55 years.

Age effects were also modified by place of qualification, with medical graduates from outside of Australia, the UK and Ireland being less likely to work full-time in the age group 49-55 years.

The paper concludes that GPs' leave requirements need to be considered in workforce planning. Some associations and interactions differ from those reported in national datasets and add to the evidence available to predict GP workforce requirements. The results highlight that not all associations used for predicting national GP workforce requirements may apply to regional areas and these predictions need to be interpreted in the local setting.

Members of the study are Dr **Jan Gartlan** of UTAS Discipline of General Practice, **Sarah Male**, **Lawrie Dondaldson**, both of the Tasmanian General Practice Divisions, and Dr Tania Winzenberg.

Another study by Tania, UDRH Research Fellow Dr **Clarissa Hughes** and **Brett Sounness** of the Royal Hobart Hospital titled "General Practitioners' Satisfaction with Radiology Services in Rural Tasmania: A Qualitative Study" was presented by Brett Sounness at the same convention. The study aimed to determine the factors that influence rural Tasmanian GP's satisfaction with the radiological services and equipment available to them.

In semi-structured telephone interviews, rural GPs were asked a series of open-ended questions regarding their use of radiology services and equipment and the factors that influenced their level of satisfaction with these services.

The study found that major factors influencing GP satisfaction were:

- The difficulties of accessing after hours services for both patients and GPs;
- Cost and accessibility for patients; and
- Promptness and accuracy of reporting.

GPs also had concerns regarding the appropriateness and availability of ongoing training and made a number of specific suggestions for improving radiological services in their communities. GPs described how they currently use their radiological services and the potential impact of the quality of these services on their clinical practice and patient outcomes.

This study adds significantly to the current understanding of radiology services in rural general practice. Because this information comes directly from GPs, it provides an important clinical perspective to inform policy development by both government and general practice organisations which could potentially lead to improved rural radiology services for GPs and their communities.

Congratulations to the 2006 E-Health Graduates

Four E-Health (Health Informatics) students recently graduated and attended the Graduation Ceremony in Launceston on 12 August. The UDRH editor got in touch with three of them who were happy to share their learning experiences.

Graeme Murrell, a specialist anaesthetist in Geelong, Victoria, is a Visiting Medical Officer for Barwon Health and runs his own private practice.



Graeme Murrell

"I enrolled in the health informatics course as a follow on from a post graduate certificate in computing at Monash. Whilst realising I was a medical practitioner not a computer scientist and also realising the huge gap in health care that could be helped with an understanding of information flows, this discipline seemed the way to go," Graeme shared why he took up the E-Health course run by the UDRH.

"Anaesthesia is not always the best specialty for practitioners nearing retirement; so the E-Health course may represent an alternative career path. Choosing University of Tasmania was by elimination. The course was advertised in a newsletter; it attracts continuing medical education points; it is available totally on line as I live in a rural setting and the units seemed interesting and doable."

Graeme thinks E-Health is relevant to every healthcare worker. He would like to see a future where he could find out important information about patients the day before he visits.

"After graduation, I hope to be involved in the E-Health process locally in Barwon Health as it moves towards more electronic storage and transmission,

and nationally through my specialist association working on data and safety committee."

Graeme is a member on the E-Health Course Review Panel and provides comments as a consumer of e-learning.

Noella Sheerin took part in the E-Health course because she saw a need within her career area of vascular health. Noella was the Clinical Issues Program Manager of the National Heart Foundation of Australia (NSW Division) and is currently taking a break from work.

"I believe that E-Health is an important cornerstone for an Australian health system that is accountable, efficient and effective for all the key players. My area of work with the Heart Foundation mainly concerned the development of evidence based management (EBM) guidelines and the defining of cardiovascular data elements for national acceptance. My personal view is that E-Health solutions will be the primary means of delivering and supporting EBM. Therefore it is essential for a person working in health to have a good understanding of the issues and some of the possible solutions and future directions in health. That's where the E-Health course at the University of Tasmania with its distance learning option was an obvious choice," said Noella.

Reflecting on her study, Noella remarked: "I know that the knowledge gained from completing the E-Health course will inform my thinking no matter what my future career opportunities might be. It is important to have an understanding of what is currently happening in Australia regarding E-Health and what the future might hold. The Health Informatics course provides that grounding and challenges you to look to the future. Finally, the Health Informatics team are a great team and give great support to encourage your success."

Noella is planning to work in vascular health again and hopes to have an opportunity to work on projects or programs that will help improve the vascular health of Indigenous Australians.

Debra Miles, a registered nurse at Royal Hobart Hospital, is contemplating a career change. She has always had an interest in computers and has a teaching diploma in computing. She would like to eventually take up a career in nursing

education utilising her knowledge in nursing and teaching.

"In the US, nurses commonly use personal digital assistants (PDAs), but not here in Tasmania where our nurses are not as technically savvy. I had the opportunity to work in Perth, Western Australia. They have a program to text a message to a doctor from the computer. Here in Hobart, we have to go to the phone, page and wait for the doctor to call back," said Debra.

"More age care facilities in Tasmania are using computers. However, most of the programs are individual programs and they are not necessarily connected."

Debra thinks Tasmania has a lot of room for health informatics development. E-Health will bring about improved patient care, better communication, increased efficiency and eventually cost saving.

To Debra, the E-Health course has been a very worthwhile pursuit. "I found it very interesting. By doing the research, I realise that implementing technology is not easy. It takes a lot of effort to convince nurses to use technology or computers. Through the process, I have learnt how to talk to them and how to bring forth the implementation of technology."

"I could not have said enough how good the E-Health team are. I have done a few other online courses and UTAS' E-Health course is by far the best. The online components are excellent. The contents are very relevant and staff are always available and quick to respond," commended Debra.

E-Health Course Review

An E-Health course review panel comprising academics from interstate and overseas, an industry representative and a student representative visited the UDRH in September to discuss the program with key stakeholders. The cyclic course review occurs every four or five years and its purpose is to ensure that courses are meeting the needs of students, employers and the professionals. The review also provides information to assist the University in planning future directions, demonstrating the quality of its offerings and in the budgetary process.

News from the Rural Clinical School

The Hoc Mai Student Bursary to Vietnam 2006

2005 was the inaugural year for awarding the Rural Clinical School Hoc Mai bursary and so it was with much excitement that the 2006 bursary was recently awarded to Ms **Esra Sanli** who is currently studying medicine at the Rural Clinical School of the University of Tasmania.

Last year's recipient, Ms **Anita Harris**, who is now in her final year of studies in medicine, joined the selection panel to make the award at a dinner in the new Rural Clinical School building on 31 August.

Hoc Mai Foundation head, Associate

Professor **Marcus Skinner**, attended the dinner along with the inaugural RCS Hoc Mai Fellow, Dr **Nguyen Huu Tu**, from Vietnam, who is currently undertaking a study exchange at the North West Regional Hospital.

The Rural Clinical School, in collaboration with Hoc Mai, the Australian Vietnam Medical Foundation, offers this unique opportunity for a fifth year medical student to travel to Vietnam during the summer vacation for a five week elective at the Viet Duc Hospital in Hanoi. The main focus of the study period is management of trauma.

Professor **Judi Walker**, Professor of Rural Health and Chief Executive of the Rural Clinical School commented: "We are very pleased to be able to offer this opportunity to Esra Sanli and were thrilled at the quality of her essay "The Importance of Internationalisation of the Vietnamese Medical Community for Medical Care in Vietnam"."

"Once again, we are pleased that there is such great interest from Rural Clinical School students in rural health care in both the Australian and international context especially since our primary aim is to prepare clinical practitioners who are able to meet the health needs of rural and regional communities."



2006 Hoc Mai recipient Esra Sanli with RCS Hoc Mai Fellow Dr Nguyen Huu Tu

Patient Safety the Driver for Skills Centre Development

The Rural Clinical Schools Skills Development and Simulation Centre is almost twelve months old and has already seen quite a few changes in the range of equipment, students, teachers and visitors passing through the doors.

The Centre currently provides opportunities for nursing and medical students, post graduate nurses and junior medical officers to undertake basic skills training. In addition the more technical aspects of Medical Emergency Team (MET) Call training has been delivered to Year 5 and Year 6 medical students and junior doctors to increase their capacity to deal with recognising and caring for the critically ill patient on the ward. The Advanced Life Support Course and the Advanced Paediatric Life Support Course for medical practitioners was also delivered out of the Centre

in 2006 by the corresponding national accrediting bodies.

Underpinning all of the activities in the Centre is the need to improve patient safety outcomes. In response to the National Patient Safety Education Framework developed by the Australian Council for Safety and Quality in Health Care, the Centre is looking to align all educational activities with the Framework principles and is working closely with the North West Regional Hospital Quality and Safety Unit and other key staff members to ensure that both educational and clinical practice are well transitioned and reflect hospital patient safety policies and procedures.

Rural health practitioners will benefit from the integration of a multidisciplinary approach including nursing, medicine,

allied health and ambulance in the North West region by being able to learn teamwork skills in a simulated environment, a principle advocated throughout the Education Framework.

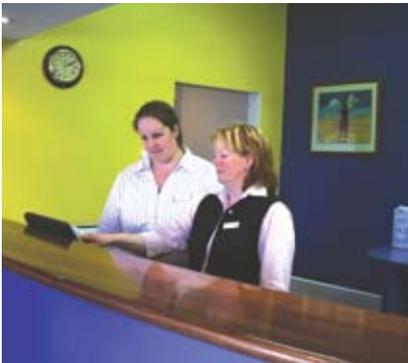


Maree Gleeson (left), Skills Centre Manager, and Lyndon Walsh discuss strategies to improve patient safety through simulation education

Rural Health Partner – Longford Surgery

The Longford Medical Service, like other rural practices, is an integral part of its community which embraces and supports the facility.

The Longford Surgery is a good sized private rural health care facility with about 18 full-time and part-time staff, serving Longford and its surrounding area. It has five consulting rooms, two procedure rooms and a satellite surgery at Perth. The practice is AGPAL (Australian General Practice Accreditation Limited) accredited and fully computerised with updated equipment including an ECG and defibrillator.



Reception staff Sara Holmyard (left) and Karen McGuire

The surgery has a broad patient demographic as Longford is a growing rural community. Its clients range from small children to the elderly. To cater to this demographic, the surgery provides a wide range of services, including full general practice services, antenatal care, palliative care, mental health, family planning, etc. The practice employs three registered nurses, one of whom is trained in performing pap smears.



Registered nurse Margaret Moore (left) at work



The Longford Medical Service

To enhance its service to the community, the surgery also has a visiting psychologist, diabetes educator and audiologist.

The practice also provides GP services to the local residential mental health facility and a nursing home.

Dr Fiona Joske, a practice principal at the Longford Surgery and a rural General Practitioner for over 23 years, is drawn to rural practice by the diversity of work and the close relationship between people in rural areas and their health professionals.

“Rural people are more loyal to the practice. They are keen to keep the service and are very supportive,” said Fiona.

“They treat us as part of the community and respect our time off and private life. We rarely get unnecessary calls after hours. This is one good thing about working in a rural area.”

Lifestyle choice is another reason why Fiona and her husband **Dr Tim Flanagan**, who is also a practice principal in the Longford Surgery, have decided not to move to an urban area. Living in Longford provides a high quality rural lifestyle, while being close enough to Launceston to enjoy urban services and family education. Outside their profession, both are active members in the local community and Fiona’s husband is the president of the local Rotary Club.

Currently the GPs at the Longford Surgery are mostly recruited from

overseas. However, Fiona is hopeful that there will be more local professionals in future as the federal government has increased the number of medical students in Australian universities.

The Longford Surgery is committed to training rural health care professionals by regularly hosting medical students and supporting the GP Registrar Training Program. The GPs help train Year 5 medical students from the University of Tasmania who spend a morning every week at the surgery for a whole semester. Year 6 medical students also visit the practice on a three-week rotation working with different doctors to gain hands-on experience in a rural area. The practice has also hosted students from interstate on John Flynn Scholarships.

In addition, Fiona is a tutor in the patient partner program of the Launceston Clinical School, and she is currently writing examination questions for the Year 5 examinations.



Dr Tim Flanagan (left) of the Longford Surgery with Year 5 medical student Ingrid Chung

UDRH Paper to be Published in Top French Medical Anthropology Textbook

The chapter “Japanese Indigenous Treatment of Morita Therapy” written by UDRH Senior Lecturer Dr **Peg LeVine** has been accepted for publication in the *French Medical Anthropology Textbook on Indigenous Therapies*, edited by Dr **Remi Bordes**.

The chapter challenges the assumption that Morita therapy is too Japanese is an interesting etic worldview to ponder. In particular, LeVine contends that underlying EuroAmerican-based treatments, such as cognitive behavioural, Gestalt, narrative and psychodynamic therapies, contain

Christian philosophic foundations, and are often person centred and object centred. These treatments tend to focus on symptoms, while assessing the mind, body, and spirit as separate from nature. Unfortunately in an age where countries are hosting more and more refugees, Western-based therapies presume universality. In places where Hindu, Buddhist and Indigenous practices prevail, these therapies rarely account for multiple gods and animating forces. Priority is given to indoor environments as places for talking therapies and they treat symptoms as objects to be eradicated.

Shoma Morita (1874 – 1938) was a contemporary of Freud and developed a treatment for anxiety disorders. Morita Therapy is a valid and reliable treatment in Asia and has implications for treatment use in other countries.

LeVine’s chapter is being translated into French for later publication in 2007. She has edited a book, *Morita Therapy and the True Nature of Anxiety-based Disorders: Shinkeishitsu*, published by the State University of New York Press, 1998.

Morita Therapy outside Asia

Dr **Peg LeVine**, UDRH Senior Lecturer, was invited to present at the International Congress of Psychotherapy in Japan from 28 August to 1 September. The title of her presentation was “The Politics of Therapeutic Modalities in the Age of Cognitive-based Therapies: Morita Therapy outside Asia”.

Morita Shoma, MD (1874 – 1938) designed his therapy as a four-stage homecare treatment of anxiety. Historically Morita was a contemporary of Sigmund Freud, Maria Montessori, Jean Charcot, and William James; and he was philosophically aligned with Zen Buddhism. In response to his own clinical observations, he created a highly structured form of residential care consisting of four stages. The first stage involves isolation, silence, and rest where the patient lies in a prone position and is deprived of stimulation. Morita was intrigued by Freud’s use of the prone position in analysis and wrote of his contemporary’s therapy.

Historically, this therapy was applied in Morita’s home environment in a rural setting. Today, the classical treatment is applied in public and private hospitals in Japan, as well as in a home environment by Peg in rural Australia.

For Morita, it was the progressive design of his treatment that made it unique from other therapies. In essence, the evolution of moving through the stages is the therapeutic process that fosters healing in the patient’s mind, body and spirit.

His therapy was designed originally to



Dr Peg LeVine (right) and Dr Naoki Watanabe

treat a disorder or anxiety that includes an oversensitivity to one’s somatic symptoms. This therapy has since been found effective in treating a range of anxiety disorders, including Post-Traumatic Stress Disorder, contextual-depression, and various adjustment disorders.

Morita Therapy has taken a long time to propagate outside Japan. Meanwhile some neo-therapies (such as Mindfulness therapy and Acceptance and Commitment therapy, and Constructive Living) in the United States, have borrowed Buddhist notions of consciousness, but without the clinical integrity embedded in Morita’s treatment. One prominent psychiatrist interested in Morita Therapy was Karen Horney

(1885 – 1952), but following her death, Morita Therapy became nearly invisible in the EuroAmerican culture as a viable psychiatric treatment.

Morita Therapy sits in a larger international arena of mental health politics and development. For example, in-patient psychiatric units in EuroAmerican settings have institutionalised a culture of treatment that rarely considers the impact of the ecological environment on staff and patients’ wellbeing.

LeVine also co-presented a paper with Dr **Naoki Watanabe**, MD, titled “Community-based Approaches to Suicide Prevention in Remote Japan via Morita Therapy” at the same conference.

Rural Community Youth Project Gains Momentum

The Social Norms Analysis Project (SNAP), led by UDRH Research Fellow Dr **Clarissa Hughes**, is entering an exciting phase. Key positions have now been filled and the first round of data collection at the five participating rural high schools started in October.



Dr Clarissa Hughes

SNAP is the first major Australian trial of the “Social Norms” approach to health promotion. Social Norms is an evidence-based prevention approach that represents an alternative to “health terrorist” approaches which essentially try to scare people into avoiding risky behaviours. Instead, Social Norms interventions emphasise the healthy choices that most young people are making most of the time. SNAP is funded by the Alcohol Education and Rehabilitation Foundation and has received endorsement from the highest levels of Tasmanian state education, health and police departments.

The Project Management Committee, comprising Dr Hughes and Associate Professor **Roberta Julian** from the Tasmanian Institute of Law Enforcement Studies (TILES), Inspector **Matthew**

Richman from Tasmania Police, and Mr **Tua Agaiava** from the Department of Health and Human Services, is overseeing the two-year multi-site trial, with local government, youth/health service providers, high school personnel and other individuals being involved on the ground. Many principals, teachers and health professionals have expressed great enthusiasm for the SNAP model of health promotion. Since it is not based on scare tactics, it has the potential to produce many flow-on benefits for the wider community.

SNAP is fortunate to have a multi-disciplinary Expert Advisory Panel (EAP), which comprises local and international experts from key areas including rural health, education, law enforcement, alcohol and drug services, toxicology, community engagement and Social Norms. The main responsibility of the EAP is to review outputs, including surveys and other research instruments, and provide feedback on draft reports and other documentation. To date, the EAP has been a virtual group that communicates electronically, but a get-together is planned for later in the year so that the Tasmanian-based members can actually meet one another!

The EAP has recently been busy commenting on drafts of the student survey, which underwent many, many revisions following feedback from the panel and an extensive piloting process with high school students, some of whom commented that “doing the survey was fun”. The Management Committee is grateful for all the assistance it received with this process, and is confident of the quality and user-friendliness of the final version of the survey which has been approved by the



A/Prof Roberta Julian and Inspector Matthew Richman reviewing project documentation

Human Research Ethics Committee and the Department of Education.

The student data collection process will be repeated in early first term and late third term next year. Following data analysis, each of the schools will work on incorporating key messages from their results into a media campaign that will focus on the school as well as the local community.

We are really looking forward to seeing the results of the creativity, enthusiasm and talent of so many young people as they start working on their media campaigns, which will communicate positive messages about safe alcohol consumption in their rural community.

If you would like to receive further information about SNAP, or be added to the distribution list for quarterly electronic updates, please contact the SNAP Executive Officer Ms **Claire Haberle** at Claire.Haberle@police.tas.gov.au or (03) 6230 2134.

Strengthening Professional Support Networks for Parents

The UDRH, in collaboration with the St Giles Society, the Paediatric Interagency Group (Tasmania) and the Launceston Clinical School, is incorporating ways to explore and address an apparent mismatch between the professional support networks used by parents to seek help for children with speech difficulties.

Strategies include assessment of the knowledge, skills and attitudes of key health professionals within the parents’ support network and the development

and implementation of activities to address areas of need.

The project is funded through the Commonwealth Department of Families, Community Services and Indigenous Affairs “Invest to Grow” strategy and is part of the St Giles “The Vital Early Years” Speech Pathology project. The project is led by UDRH Deputy Director Dr **Rosalind Bull** and Senior Project Officer **Alison Miles** and is their second collaborative project with the St Giles Society.

Pay a Visit to the Rural Health Training Events Home Page

The UDRH Rural Health Training Events (www.ruralhealth.utas.edu.au/events/) home page is a central repository of information about rural health training events for rural Tasmanian health professionals, health students, community organisations and consumers.

We welcome your visit to check out training information or to include your events.

Graduate Research Student Profile: Michael McCall

UDRH Masters student **Michael McCall** is now employed as the Quality Improvement and Safety Consultant for the Tasmanian Ambulance Service.

Mike has had a lifelong career in prehospital care commencing at the age of 17 as a Student Ambulance Officer in Devonport on the North West Coast of Tasmania. Within six months, he was responding solo to cases and completed the first Tasmanian Advanced Life Support course in 1979. He continued to work in Devonport for the next nine years before having a break working in the East Gippsland Ambulance Service in Victoria. While in East Gippsland, he undertook shifts on the oil rigs in Bass Strait and was the first paramedic to work at Mt Hotham Ski Resort.

Mike's love of Tasmania was such he returned to work as a Clinical Support Officer in Hobart in 1985. Over the past

20 years working in Hobart, Mike has obtained qualifications in Road Rescue, Helicopter Rescue Crewman, Wilderness Rescue, Advanced Paediatric Life Support, Emergency Management of Severe Burns, Urban Search and Rescue, and Disaster Medicine.

In 2003, Mike was employed fulltime as project officer on the Prehospital Intubating Laryngeal Mask Airway Trial (PILMAT) using the intubating laryngeal mask airway for prehospital tracheal intubation. Mike will be incorporating some of the information from this trial into journal articles and to further research this area and he has commenced a Masters Program with the University Department of Rural Health, Tasmania. His research area is prehospital advanced airway management.

The study through the University of

Tasmania will not only provide the Tasmanian Ambulance Service with information and expertise, but Mike has long had a desire to undertake further study in this area of research. The knowledge and skills Mike will gain from his studies will fulfil this desire and hopefully propel him to further prehospital/ clinical areas of research.



Michael McCall

Learning through Research: A Regional University & its Community

UDRH Director Associate Professor **Sue Kilpatrick** and Associate Professor **Margaret Barrett** and **Tamara Jones**, both of the School of Education, University of Tasmania, have had a paper published in the *International Journal of Pedagogies and Learning*.

The paper titled "Learning through Research: A Regional University and its Community" affirmed the role of regional universities in bringing a research capacity to their home locations that is rarely available through other mechanisms in the region. University initiated research projects conducted locally can provide an opportunity for

regional communities to examine their practices through a different lens. Through these projects, researchers in regional universities whose research includes sites internal and external to the region are able to connect their region to national and global contexts. Research presents many opportunities for regional universities and their communities to learn together.

The paper points out that there is some evidence that policy-makers are aware of the importance of behavioural relationships in the engagement of regional universities with communities. Policy documents tend to focus on the macro, institutional level benefits,

structural incentives and impediments to university and community engagement.

The paper further examines research from a regional university campus: the University of Tasmania in Launceston, Australia. It takes a micro view, considering benefits and factors influencing success for small research teams and individual researchers and their community research associates. A learning community approach, where synergies from collaboration can generate new knowledge for the benefit of all university and community players, emerges as an effective model for regional engagement through research.

Knowing the Pharmacist Preceptors

UDRH Deputy Director Dr **Rosalind Bull**, Lecturer in Rural Education **Lisa Dalton** and Lecturer in Rural Pharmacy **Helen Howarth** recently had their paper "Pharmacists' Views of Preceptorship" accepted for publication in *Pharmacy Education*.

This collaborative paper was written by members of the Australian Preceptor Education Consortium and other authors include Dr **Jennifer Marriott** (Monash University), **Kirstie Galbraith** (Monash University), Dr **Susan Taylor** (University of Sydney), Dr **Miranda Rose** (La Trobe University), **Anne Leversha** (Monash University), **Dawn**

Best (University of Melbourne) and Dr **Maree Simpson** (Charles Sturt University).

The paper aims to determine rural pharmacists' attitudes towards being a preceptor. It reports selected survey findings from the evaluation of their project funded through the Rural and Remote Pharmacy Infrastructure Grant scheme in which an online Pharmacy Preceptor preparation program was developed.

Key themes identified in the data and addressed in the paper are:

- Reasons for being a preceptor;

- Benefits and rewards of the preceptor role;
- Challenges;
- Personal strengths and weaknesses.

Pharmacist preceptors have a similar view of their role to preceptors in other professions. They identify a number of rewards of precepting and are aware of their limitations in the role. Awareness that these limitations can impact on the success of the learning experience led pharmacists to undertake the on-line Australian Pharmacy Preceptor Education Program.

Health Careers Education for North West Coast Year 9 Students: An Innovative Pilot Program

Pooling ideas, planning a program and combining resources to deliver a two-day health careers education to 30 Year 9 students from the North West Coast region may sound daunting - if not exhausting! But the results of this innovative pilot program are being hailed as highly successful by the students involved, their career pathway planning officers and teachers, and the health professionals and clinical educators involved in the program.

The program was developed and delivered this year through an active partnership between the University Department of Rural Health, Rural Clinical School, the Burnie and Mersey campuses of the North West Regional Hospital and the Department of Education. The partnership grew from shared concerns about the quality of health careers education in the region.

During a ten-month development phase, the objectives of the program were clarified and a two-day program designed to inform and motivate students to think further about a broad range of health careers. The program combined a mix of interactive

experiences with group problem solving scenarios, a taste of the health workplace, and information about study pathways into the college years and on to university.

In their feedback students said what they really liked about the program was the information they were given about different health careers, the confirmation of future career goals and the pathways to achieving these, the opportunity to consider occupations not previously considered, and an overview of the health sector.

Reflecting this feedback, some comments were:

"The program allowed me to ask questions, and now I have a really clear idea of the steps to studying at university, and the variety of health positions available."

"I learned a lot about all areas of the medical field. I learned how important and rewarding a career in this profession may be."

Footage from the program has been

included in a DVD made by the Tasmanian Office of Post Compulsory Education and Training (OPCET) to illustrate best practice in career education for high school students. A poster presentation has also been accepted for the Australian College of Rural and Remote Medicine's (ACRRM) Scientific Forum in November which has the theme of new developments in medical education. There has also been considerable interest in the program from other parts of Tasmania and from interstate.

Post-program Evaluation

- 87% of the group affirmed that a health career was a first priority;
- 89% said that the program had influenced their career plans;
- 95% said they were now more motivated to become health professionals.



Pathology, blood pressure and brainstorming activities

Primary Health Care Research, Evaluation & Development Update

The Statewide Primary Health Care Research, Evaluation and Development (PHC RED) Advisory Committee had its third meeting for the year on 17 October. The Tasmanian PHC RED Coordinator reported on the workshops to date which all received enthusiastic responses with the number of participants ranging from eight to 20.

The committee also discussed the progress of the Researcher Development Program (RDP) fellows, mentoring, and the business plan for 2007 for both the UDRH and the Discipline of General Practice (DGP).

The Annual Tasmanian PHC RED Research Symposium will take place on 23 November in Hobart.

In its third year, the theme of the symposium is "Learning through Research and Evaluation" and represents an opportunity for health practitioners, academics, policy makers, students, RDP Fellows and Mentees with an interest in primary health care to meet, network and learn from others across the research and evaluation community while at the same time reflecting on their own practice and presenting research evaluations and findings. The

symposium is free of charge.

The UDRH is providing sponsorship of \$2,500 and the DGP \$3,000 for two annual PHC RED Scholarships to encourage study in primary health care. Honours students from all faculties are eligible to apply, as long as their topics address primary health care issues.

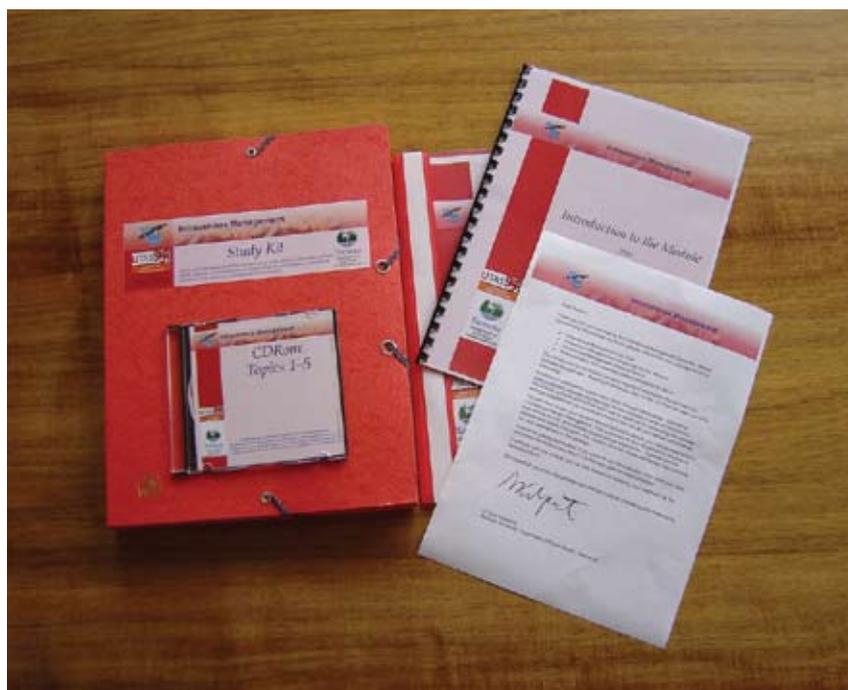
For more information on the symposium and the scholarships, please visit: www.ruralhealth.utas.edu.au/phcred/.

Tasmania First with the Development of a New Intravenous Management Module

Enrolled Nurses in Tasmania will soon be able to access a new Intravenous (IV) Management Module learning resource. Development of the module has been coordinated through the UDRH as part of the current Medication Management program for Nurses with input from specialists from the Department of Health and Human Services, the Tasmanian School of Nursing and Midwifery, Northern Group Training, TAFE Tasmania and the Park Group Aged Care Facility.

The project to develop an IV Management Module was undertaken in response to a number of recommendations arising from the Enrolled Nurse Scope of Practice Project undertaken by the Nursing Board of Tasmania. Under current legislation, the competency standards which enrolled nurses are required to meet are the Australian Nursing and Midwifery Council (ANMC) National Competency Standards for Enrolled Nurse. The ANMC competencies outline that on entry to practice, where State and Territory law and organisation policy allow, enrolled nurses may administer prescribed medicines or maintain IV fluids, in accordance with their educational preparation.

The IV Management Module will be submitted for accreditation with the Nursing Board of Tasmania and it is anticipated that it will be available for purchase in 2007. The module will only be delivered through accredited training providers and will be available in electronic format. The module learning kit comprises a CD Rom containing self assessment exercises, supporting information and readings relating to the



The new Medication Management package for Intravenous Management

management of an IV peripheral line without additives. The kit also contains an Introduction Module and Student Record comprising both theory and clinical formal assessment exercises and activities. Students completing the module will be required to complete both the theory and clinical workplace assessment in an appropriate workplace setting.

The IV Management Module will be delivered by accredited training providers and can be purchased as a stand alone learning resource for enrolled nurses who have medication endorsement status. Alternatively, the module may be completed as part of the new Medication Management

for Enrolled Nurse package. The IV Management Module has been incorporated into the revised Medication Management for the Enrolled Nurse package. Enrolled Nurses who have not previously completed the Medication Management for Enrolled Nurse package will now be able to also complete the requirements of the IV Management Module as part of their course.

For more information on the IV Management Module or the Medication Management for Nurses Program please contact **Stuart Auckland**, Medication Management Program Manager, UDRH, on 6324 4035 or email Stuart.Auckland@utas.edu.au.

UDRH Executive Management Group Meeting

The UDRH Executive Management Group met on 12 July 2006 in Launceston. Associate Professor Sue Kilpatrick, Director of the UDRH, provided members with an overview of the UDRH activities in 2006 and drew particular attention to the draft Department of Health and Ageing January-June progress report.

The UDRH Executive Management Group meets several times a year and it provides a great opportunity to

reinforce existing networks and identify collaborative opportunities. It is also a forum for external stakeholder groups to voice suggestions and contribute to UDRH's planning, priorities and activities for the future.

Particular collaborative areas include the opportunity to empower smaller rural communities to source grants and to form partnerships, particularly in relation to inter-professional learning, and academic co-authorship potential.

The Executive Management Group is comprised of senior executive staff, theme leaders, coordinators and Graduate Research student representatives of the UDRH and several external stakeholders including representatives from Aged Rural and Community Health of the Department of Health and Human Services, Allied Health and the Tasmanian Divisions of General Practice.

Back to the Future

UDRH Indigenous Higher Education and Health Science Officer **Sharon Dennis** attended the 8th National Conference and Annual General Meeting of the Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN) held in Hobart on 27 – 29 September.

The theme of the conference this year was “Back to the Future: The Future is Ours!” and indigenous health was one of the focuses of the conference.

Aboriginal leader and advocate in Tasmania and Aborigine of the Year 2005 **Rodney Dillon** started with a “Welcome to Country” and spoke about Tasmania and the Tasmanian Aboriginal Culture.



Sharon Dennis (left) and other participants at the CATSIN Congress

Michelle O’Byrne, Federal Member for Bass, opened the conference and spoke about the government’s commitments towards the Tasmanian Aboriginal people.

A broad range of indigenous health issues were discussed such as how mainstream health services were addressing Aboriginal health within the practice scope of nursing and what other key organisations play a role with government recommendations.

The rural health graduate research program and its potential for Aboriginal and Torres Strait Islanders was the focus of UDRH Deputy Director **Dr Rosalind Bull**’s paper at the congress.

Other topics included the financial availability and implications towards study in Higher Education especially for nursing students; how other government departments play key roles in addressing Aboriginal health; the health work force, and nursing and midwifery strategies that are inclusive of Aboriginal health. A new computer system called MARVIN was demonstrated at the conference. The award winning system can integrate real voice such as voice of the elders, computer generated voice, written text, images, video and PowerPoint presentations to communicate important health and education information

to remote indigenous communities. Users can quickly and easily create or customise presentations that accurately reflect the cultural, lingual and social attributes of target audiences.

Two other topics at the conference that are worth noting are the development of a Cultural Respect Program which will be in the form of an online interactive program. More information will be available on the CATSIN website when the program is finalised. Another is the revision of the Code of Ethics and Code of Professional Conduct for Nurses and Midwives. Conference attendees contributed to the revision of the codes by calling for the inclusion of Aboriginal culture and practices.

As CATSIN’s state executive member from 2004 to 2007, Sharon was delighted to see such a wonderful group of people committed to improving Aboriginal health across Australia and sharing their stories at the CATSIN conference. It certainly provides a better picture of what is happening across Australia and the effects Aboriginal health delivery and policies have on improving outcomes for Aboriginal people.

For more information about CATSIN or how to become a member or a friend of CATSIN, please visit the CATSIN website at www.indiginet.com.au/catsin/.

Graduate Research Retreat in October 2006

Doctoral work conducted by **Christine Stirling, Lisa Dalton** and **Tony Smith** was the centre of attention at the Graduate Research school on 19 October. Each candidate presented their study to a mixed audience of peers, supervisors and external academics. The topics of the theses were ambulance volunteers, undergraduate rural health education and organisational change. The candidates’ supervisors Associate Professor **Sue Kilpatrick**, **Dr Peter Orpin**, **Dr Erica Bell** and **Dr Rosalind Bull** were delighted with the presentations and the high level of enthusiasm and debate each presentation attracted.

The Dean of Graduate Research Professor **Carey Denholm** attended the day, provided feedback to the candidates and shared his perspective on doctoral candidature for mature-age people. The school was held in the Sandy Bay campus staff club in Hobart.



Christine Stirling (right) presenting at the Graduate Research school

UDRH Seminar 9 – Theories of Addiction for Strategic Policy

The ninth UDRH seminar titled “The Applicability of Economic and other Modern Theories of Addiction for Strategic Policy and Related Population Health Interventions” was held on 18 August. The seminar presented by **Cecile McKeown**, Senior Consultant, Population Health of the Department of Health and Human Services attracted close to 30 health care professionals from six locations.

Cecile pointed out that harms related to substance use across the population are of a magnitude requiring significant intervention. Models and theories from various disciplines can be useful in structuring policies and strategies to reduce harms and promote the wellbeing of the population.

In the seminar, Cecile looked at different theories and explored how health professionals could learn from these theories.

When determining policy and strategy development, most often an epidemiological approach is preferred when population based measures are required.

Other policy approaches might draw

on more traditional theories of the development of dependence related behaviours and seek to apply these broadly across populations and jurisdictions.

A number of economic models and theories are relevant to population based policy regarding the availability and use of addictive substances. These can be utilised in the development of comprehensive harm reducing strategies and interventions.

Market based models, economic and other modern theories can be applied to policy options for dependence producing substances. These may also have broader applicability to strategy development targeting other public health harms in the promotion of wellbeing across the population.

Cecile McKeown

Cecile holds a Bachelor degree in Social Science with Honours in Health Science, and is currently undertaking her PhD in population health models of substance abuse. Cecile also takes on a Research Fellow role to the Harm Minimisation Illicit Drugs Project that is closely aligned to her PhD investigation.

She has worked for twenty years in alcohol and drug related fields with experience at all levels including state wide and regional services management, policy and strategy development, formulation of standards and quality systems for alcohol and drug services, patient care, and training of other professionals.

As a former member of the National Intergovernmental Committee on Drugs in a previous role as State Manager of Alcohol and Drugs Services in Tasmania, Cecile now pursues her great passion of population health approaches to alcohol and drug related harms. Cecile has presented frequently at national and state conferences on a range of approaches to alcohol and other drug related issues and is active on a number of national and state wide expert committees.

Cecile is the recipient of a number of achievement related awards, including “Fellow” related to quality and standards development for the National Alcohol and Drug Sector, and is a member of the Australian Professional Society on Alcohol and other Drugs.

UDRH Seminar 10 – Responding to Health Skills Shortages

Shortages of general and specialist registered nurses and most allied health professionals exist in all states and territories. There are also shortages or recruitment difficulties relating to enrolled nurses in most states/territories. A team of UDRH staff embarked on a project in September 2005 to explore solutions to skills shortages within the health and community services sector, from a vocational education and training perspective.

Two members of the team, Associate Professor **Sue Kilpatrick** and Dr **Quynh Lê**, presented the project findings to more than 55 seminar participants in nine locations at the tenth UDRH seminar on 19 September. The title of the seminar was “Responding to Health Skills Shortages: Innovative Directions from Vocational Education and Training”.

The presenters commented that rural and remote areas have become home to a set of innovative service delivery models. Models identified in the study encompass local, regional and state/

national responses. Local responses are usually single health service/training provider partnerships. Regional responses, the most numerous, tend to have a specific focus, such as training young people. A small number of holistic state or national responses, eg the skills ecosystem approach, address multiple barriers to health service provision.

The seminar covered the following areas:

- Innovative service delivery models and training solutions from Australia and overseas;
- Key characteristics and features of effective models;
- Information on barriers and enhancers; and
- Criteria for good practice.

The project was funded by the National Council for Vocational Education Research (NCVER) and the project team comprises UDRH staff Associate Professor Sue Kilpatrick, **Susan Johns**, Dr Quynh Lê, Dr **Patricia Millar** and **Georgina Routley**.

Sue Kilpatrick

Associate Professor Sue Kilpatrick is the UDRH Director. She has a special research interest in rural issues, including health, social capital, agriculture, small business and vocational education and training in regional Australia. She has published extensively in these areas besides working as a consultant and researcher with rural communities at the local level. This interest complements the Tasmanian UDRH's ongoing work in rural health workforce issues.

Quynh Lê

Dr Quynh Lê is Lecturer in Rural Health at the UDRH. Her teaching and research interests include social epidemiology, population health, quantitative research, spatial statistics, multilevel modelling, e-Learning, e-Health, database design and development, networking, and computer assisted learning. She has participated in various academic and cultural activities nationally and internationally and conducted research in rural health and educational multimedia.

Briefs . . .

Lorraine Smith has joined the UDRH as Lecturer in Rural Pharmacy. She will be based in the Rural Clinical School facility in Mersey. Lorraine's research interest is in the future of rural pharmacy and how this will change with broadening requirements.

Before joining the UDRH, Lorraine was a pharmacist at the North West Regional Hospital Mersey Campus and has conducted many workshops with GPs on certain practice methods. She is an accredited medication review pharmacist and a qualified counsellor and has taught counselling skills.



Lorraine Smith

The UDRH also recently appointed **Adam Dewis** on a casual basis to support the department's website development during staff leave.

Subscribing to UDRH Tasmania Rural Health E-Bulletin

Please visit www.ruralhealth.utas.edu.au/news/newsletter. Click [[Subscribe](#)] to input your email address for subscription.

Upcoming Training Opportunities

Cultural Sensitivity Training

Presenter: Phoenix Centre
Date: 8 November (Wednesday)
Time: 9:30 am - 5:00 pm
Venue: Anne O'Byrne Centre, cnr Charles and Howick Streets, Launceston

For details, please contact **Georgie Routley** (tel: 6324 4047, email: Georgie.Routley@utas.edu.au)

UDRH Seminar Series - Seminar 11

Presenter: Dr Clarissa Hughes, UDRH
Subject: Youth, Peer-Groups and Positivity: How the Collaborative Social Norms Analysis Project (SNAP) is Working Towards Reducing Alcohol-related Harm in Rural Tasmania

Date: 14 November (Tuesday)
Time: 12:15 - 1:30pm
Venue: Telehealth Studios in Burnie, Hobart, Latrobe and Launceston (Other locations by arrangement)

For details, please contact **Cecilia Chiu** (tel: 6324 4028, email: Cecilia.Chiu@utas.edu.au)

Annual Tasmanian PHC RED Research Symposium

Date: 23 November (Thursday)
Time: 9:00 am for 9:30 am - 4:30 pm
Venue: Lazenby's Bistro and Social Science Building, University of Tasmania, Sandy Bay Campus, Churchill Avenue, Hobart

For details, please contact **Julie Forsyth** (tel: 6226 4803, email: Julie.Forsyth@utas.edu.au)

Developing Your Project

Presenters: Prof Mark Nelson, Dr Emily Hansen, Dr Peter Orpin, Dr Clarissa Hughes, Dr Tania Winzenberg, UTAS
Date: 5 December (Tuesday)
Time: Full day
Venue: Room 308, Clinical School, University of Tasmania, 43 Collins Street, Hobart

For details, please contact **Julie Forsyth** (tel: 6226 4803, email: Julie.Forsyth@utas.edu.au)

Undertaking Research for Government Policy Decision-Makers

Presenter: Dr Erica Bell, UDRH
Date: 6 December (Wednesday)
Time: 4:00 - 5:00 pm
Venue: Board Room, 3rd Floor, UTas Clinical School, Hobart and videolinked to Anne O'Byrne Centre and Rural Clinical School, Burnie

For details, please contact **Julie Forsyth** (tel: 6226 4803, email: Julie.Forsyth@utas.edu.au)

UDRH Seminar Series - Seminar 12

Presenter: Dr Peg LeVine, UDRH
Subject: Post Trauma Considerations in Rural and Remote Contexts
Date: 12 December (Tuesday)
Time: 12:15 - 1:30pm
Venue: Telehealth Studios in Burnie, Hobart, Latrobe and Launceston (Other locations by arrangement)

For details, please contact **Cecilia Chiu** (tel: 6324 4028, email: Cecilia.Chiu@utas.edu.au)

Mental Health First Aid

Presenter: Red Cross, UDRH
Date: November/ December (to be confirmed)
Venues: (to be confirmed) Deloraine, Oatlands, Sorell

For details, please contact **Georgie Routley** (tel: 6324 4047, email: Georgie.Routley@utas.edu.au)

Conducting Rigorous Evaluations

Unfortunately no vacancies – we have people on a waiting list in case of cancellations

Date: 20 November (Monday)
Time: 10:00 am - 3:30 pm
Venue: Anne O'Byrne Centre, cnr Charles and Howick Streets, Launceston

For details, please contact **Julie Forsyth** (tel: 6226 4803, email: Julie.Forsyth@utas.edu.au)

Maintaining Oral Health in the Elderly

Presenter: UDRH
Date: Early 2007
Venue: Launceston

For details, please contact **Georgie Routley** (tel: 6324 4047, email: Georgie.Routley@utas.edu.au)