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From the Acting Director's Desk...



Dr Rosalind Bull addresses a community group at Oatlands

The need to engage effectively with the rural and remote communities that the national UDRH program was set up to serve is one of the major priorities of the University Department of Rural Health (UDRH), Tasmania, and is the focus of the Spring/Summer 2004 edition of the Bulletin. It is no coincidence that the issue of community engagement is also one that the University of Tasmania has identified in its EDGE agenda. The 'keynote' article on page 2 by the Vice-Chancellor, Professor Daryl Le Grew expands on this theme.

The second half of 2004 has been a time of reflection and transition for the UDRH. The Department of Health and Ageing (DoHA), which funds the national UDRH program, is currently identifying linkages, overlaps and gaps across rural health education programs. It was therefore timely for the UDRH, with the Faculty of Health Science (FHS), to assess the future directions and scope of activities of the UDRH, Tasmania. The commitment of the Australian Government to a further four years funding cycle for the UDRH program contributed to the climate of optimism that characterised the Future Directions process.

In early June, the FHS Executive appointed a Steering Committee and approved Terms of Reference to facilitate the Future Directions review. A range of key stakeholders and partners from within and outside the University were invited to take part in the process. Their enthusiastic

participation in the Future Directions review activities enabled us to evaluate our direction and achievements, our strengths and weaknesses, and the challenges that face us in the future. With the help of our external and university-based partners, we have achieved a solid and constructive platform upon which to base our activities in our 2004-2008 funding cycle. The report and recommendations from the Future Directions review are now under consideration by the Faculty of Health Science Executive Committee.

I would like to commend and thank all those who contributed to this process and were willing to provide a fresh and honest view of the role and effectiveness of academic rural health in Tasmania.

The search for a new Director of the UDRH proceeds apace and it is anticipated that an appointment will be made in the first quarter of 2005. While I am enjoying my time as Acting Director, I am looking forward to returning to my substantive position at the UDRH in which I will continue to concentrate on rural education development and the Graduate Research program.

I commend the contents of the Spring/Summer Bulletin to you and wish its readers, and their families, a happy, healthy and prosperous Christmas and New Year.

Rosalind Bull
Director (Acting), UDRH, Tasmania

The Vice-Chancellor, Professor Daryl Le Grew, comments on UDRH and The EDGE Agenda

Dear Colleagues

The University of Tasmania Plan 2005-2007 sets out our EDGE agenda of achieving our goals through Excellence, Distinctiveness, Growth and Engagement to achieve much more for our communities than would be possible if each organisation worked solely within its own resource base and networks.

This model of partnering with others to leverage significant outcomes is one that is utilised to great effect by the UDRH, and I would like to congratulate all concerned for their strategic thinking and leadership in the field of community engagement. The UDRH's Business and Strategic Plan provides a comprehensive template for community consultation and program development that will ensure that resources are used to maximum effect to identify and address community health needs. The University as a whole can learn much from the UDRH's approach to community engagement.

Just as community partnering can help lever up our efforts and produce greater outcomes, so can internal partnering across the University. I am

keen to encourage cross-disciplinary and cross-Faculty collaborations that will enable multi-dimensional solutions to be found for complex societal issues. By breaking down artificially constructed disciplinary barriers, we can move to a higher level of innovation and creativity, and offer our communities a greater dividend on their investment in us.

One example of this focus on multi-disciplinary endeavours is the newly-badged UTAS Theme Areas. The Themes of Population and Health; Community, Place & Change; Environment; Sustainable Primary Production; Frontier Technologies and Antarctic and Marine are not the property of particular Schools or Faculties – quite the opposite. The invitation is out for all sections of the U Growth and Engagement.

The fourth cornerstone of this agenda – Engagement – demands that “UTAS must serve its communities and become a sought after local, national and international partner across all its fields of endeavour.” More specifically, the Plan challenges the University “to be recognised for its contribution to the growth and development of Tasmania by meeting the professional skills needs



University Vice-Chancellor Daryl Le Grew

of its communities and through the pursuit of research and community engagement that enhance the economic, social, cultural and environmental wellbeing of its citizens.”

The University is about to sign a new 3-year Partnership Agreement with the State Government, and has formal and informal agreements with many organisations throughout Tasmania, and beyond. These partnerships enable us as a university to explore how they might contribute to building each of the Themes as distinctively Tasmanian and uniquely UTAS.

Over to you ...

Regards

Daryl

Senior research fellow honoured by University Alumni



Kim Boyer, Senior Research Fellow in Rural Health, was honoured in October by the Alumni Committee of the University of Tasmania. She was awarded one of two Distinguished Alumni awards - in Ms Boyer's case, for 'Service to the University'.

Presenting the award, University Vice-Chancellor Professor Daryl Le Grew paid tribute to Ms Boyer's role on the Council of the University at the time of the amalgamation, in the late 1980s, between the University of Tasmania and the Tasmanian

State Institute of Technology. At the time wise counsel and strong leadership were required to achieve the outcome of a truly State-wide institution – a new university for all Tasmanians.

More recently, from 1995-2002, she was Deputy Chancellor of the University, often chairing Council meetings in the interregnum between the appointment of the current Chancellor, Dr Michael Vertigan, and his predecessor, the late Mr Justice William Zeeman.

Kim Boyer's service to the health and research communities is also conspicuous. A former Director of Community and Rural Health (1997-9) and Chief Executive Officer of the Tasmanian General Practice Divisions Inc (2000-2), she is a member of the NHMRC's Research Committee and chairs the Strategic Research Issues Working

Committee, the Health Services Research Working Group and the Palliative Care Research Committee of the NHR MC. She is currently the chair of the Tasmanian HealthConnect Trial.

The presentation ceremony was attended by members of the University of Tasmania Council, Alumni Committee, University Foundation, University staff and representatives of the broader community.

Rural Health was prominent, with Rural Clinical School Chief Executive, Professor Judith Walker, UDRH Acting Director, Dr Rosalind Bull, Executive Officer, Jason Flello and other UDRH staff in attendance to congratulate Kim Boyer on her achievement. The Rural Health connections did not end there. The recipient of the 'Service to the Community' Award, Associate Professor Christopher Newell, in acknowledging the positive effects of higher education on his career and personal development, paid tribute to Professor Walker as his PhD supervisor.



Above: Dr Chris Newell receives congratulations from Professor of Rural Health Dr Judi Walker, his PhD Supervisor



Left: Attending the 2004 Distinguished Alumni Awards Presentation Ceremony, UDRH Acting Director Dr Rosalind Bull (left), UDRH Executive Officer Jason Flello (centre) and Neil Trivett of the UTas Flexible Education Unit (right)

UDRH Tasmania enhances its role through innovative collaborations with local government



Stuart Auckland, Program Head, Community Engagement, University Department of Rural Health (UDRH) Tasmania, is enthusiastic about the value of innovative collaborative ventures between the University of Tasmania and local government.

Stuart Auckland, Program Head, Community Engagement

'The UDRH is committed to improving access to health care resources and contributing to improved health outcomes for people in rural and remote areas of Tasmania,' said Mr Auckland.

'To help achieve this objective the UDRH has developed a network of Rural Health Teaching Sites, with facilities located at Campbell Town, Dover, Flinders Island, King Island, Oatlands, Queenstown, Scottsdale, Smithton, George Town and St Marys. Local government involvement in these initiatives is vital,' he said.

Karla Peek, UDRH Rural Students Support Officer, explains that council support is generous and may take a number of forms.

'For example, general rates are waived by the Flinders Island, George Town and Northern Midlands councils. As the Dover facility is owned by the Huon Valley Council, no rates are payable at all, and they also pay the electricity bills.'

'There are other forms of "in kind" support - such as at Oatlands where the Council mows the grass and maintains the gardens. And very importantly, UDRH relies on Councils for the identification of suitable properties and the development of purchasing models,' said Ms Peek.

In March 2004 the UDRH opened the George Town RHTS. The ceremony was performed by His Excellency, Mr Richard Butler AC, Governor of Tasmania, in the presence of invited guests, including senior representatives of the University of Tasmania and all tiers of government.

George Town provides a good model of collaboration between the University and community stakeholders, led by local government. After George Town was identified by UDRH Tasmania as a suitable community in which to establish a RHTS, a working party was formed. It comprised representatives of the Council, the Department of Health and Human Services, the Anne Street Medical Centre and the University. A model for purchase, lease and maintenance of the site was developed. The arrangement was conditional on the property being leased back to the University for 25 years. Funding was provided by UDRH through its Australian Government Department of Health and Ageing grant.

George Town Mayor, Lawrence Archer, expressed his support for the development in these terms.

'Council has worked to achieve this with the George Town Health and Welfare Committee, the hospital and the local doctors over a number of years.

'The partnership with the University Department of Rural Health, in providing the RHTS, will further enhance the capacity of health services in this community,' said Mayor Archer.

These sentiments echo those of other mayors of municipalities in which Rural Health Teaching sites have been established. Kim Polley of the Northern Midlands Council praised the establishment of a RHTS at Campbell Town.

'Not only will Campbell Town and surrounding districts benefit from the increased presence of medical, nursing and allied health students and staff working and researching in the area, but there will be significant economic benefits associated with the number of health science students living in Campbell Town during the year,' said Mayor Polley.

Colin Howlett of the Southern Midlands Council saw the opening of a RHTS at Oatlands as a valuable addition to established infrastructure in his region.

'The facility will enhance our existing excellent health services and encourage professional staff to provide an even higher standard of health care,' explained Mayor Howlett.

Qualitative information is obtained from students who are surveyed at the conclusion of their clinical placements.

When asked how she felt about her time at Flinders Island, one nursing student replied,

'My rural placement took me back to the basics of nursing. It was about caring for the patient, not caring for equipment. The whole experience was much more personal than in a larger hospital.'

The long term effectiveness of the RHTS program is being evaluated in a longitudinal study being carried out by the UDRH in which the career choices of health science students from rural areas, and those who have undertaken rural placements facilitated by the RHTS network, are tracked to see whether they take up careers in rural and remote settings.

Tony Smart, Executive Officer at the Circular Head Council, worked with UDRH and other stakeholders to bring to fruition another project aimed at alleviating health workforce problems in a rural area. This involved the Council providing a building lot and the construction and fitting out of the Smithton Rural Doctors' Residence.

The bodies that collaborated on the project were the Circular Head Council, the Commonwealth Department of Health and Ageing, Rural Workforce Support (Tasmanian General Practice Divisions), the University Department of Rural Health and local medical practices. It is anticipated that the home will help attract health professionals, especially locums and visiting GP registrars, to the Circular Head community. Smithton doctor of 17 years, Dr Vern Powell, put it like this.

'Professional people and students moving into an area need somewhere warm and comfortable they can call home. We want them to get a good impression and if they feel good about where they are living then we are well on the way to helping them enjoy their rural experience.'

Continued Page 4



Star-studded lineup (from left): Professor Allan Carmichael, Dean, Faculty of Health Science; former Governor Mr Richard Butler AC; Ms Philippa Leedham, representing DHHS; George Town Mayor, Lawrence Archer; former UDRH Director, Associate Professor Ian Blue; Karla Peek, Student Support Coordinator and Ngaire McGrindle, General Manager, George Town Council

UDRH Tasmania enhances its role through innovative collaborations with Local Government *continued from page 3*

Circular Head Mayor, Ross Hine paid tribute to the persistence of Dr Powell in helping Council arrive at its decision to enter into the partnership.

Not all UDRH/local government collaborations are accommodation related. UDRH worked with the Northern Midlands Council on the development of a successful submission for funding to the Tasmanian Community Fund. The submission, entitled the *Campbell Town Be OK Project*, was put together collaboratively by the Northern Midlands Council, Campbell Town District High School, Campbell Town Health and Community Services and the UDRH. The Project is administered by the Council, with the University assisting in the design and evaluation of the project, which seeks to strengthen the ability of the Campbell Town district communities to provide supportive living and learning environments for young children.

In late 2003 UDRH was involved in Rural Health Week, an initiative of the Huon Valley Council which again brought together all three tiers of government - the Australian Government Department of Health and Ageing, the Tasmanian Department of Health and Human Services and local government. The week provided health and wellbeing related activities presented by community groups and organisations throughout the Valley, culminating in a two days Health Expo/Fair at Huonville. It was a unique opportunity to show what services and community activities are available in the area, as well as identifying exciting health and lifestyle possibilities. The UDRH saw Rural Health Week as an ideal venue at which to highlight issues and opportunities impacting on rural health services in Tasmania as a whole.

Another UDRH Tasmania activity that relies for its very existence on community links is the two week Inter-professional Rural Program (IRP). In the case of the Scottsdale IRP the University made good use of local government infrastructure, using video-link facilities at the Dorset Council Chambers to conference academic rural health issues with the Smithton IRP group. At the conclusion of the program the students presented their experiences of rural inter-professional education to the host communities, including local government representatives. The students stayed at the Scottsdale and Smithton Rural Health Teaching Sites.

Dr Rosalind Bull, Acting Director of the UDRH recognises the importance of providing infrastructure in collaboration with local government and other community bodies.

'This is a key role of the UDRH but it is one that we cannot do alone. We need to continue to work collaboratively with all of our stakeholders,' she said.

Cash injection has healthy outcomes in Oatlands

The University of Tasmania has had a presence in Oatlands, administrative centre of the Southern Midlands Municipality, since the opening of the Rural Health Teaching Site (RHTS) in April 2003.

One of the attractive aspects of all University RHTS is their modern computer equipment, which enables residents and local health professionals to gain access to the University system. Unfortunately, at the Oatlands facility there has been no dedicated ICT room, so the computers were set up in the dining room.

Then, across the road, the Department of Health and Human Services (DHHS) extended the Midlands Multi-Purpose Health Centre. A larger, separate facility was constructed adjacent to the Centre, so freeing up space within the main building.

The UDRH was able to buy, with a cash payment of \$24,000, the newly vacant space in that facility, so providing a dedicated computer room for residents of the nearby RHTS and offsetting the cost to DHHS of the extension.

UDRH Community Engagement Program Head, Stuart Auckland, was delighted that the University had been able to capitalise on this situation.

'Our students will now have 24 hour access to a quiet, close, secure and well equipped computer facility, so making it easier for them to use email, the internet and everything else that they need to complete assignments and maintain professional and personal contacts when they are on rural placements in Oatlands,' he said.

The enhanced facility, now named the Southern Midlands Community Health Centre, was officially opened by the Deputy Premier and Minister for Health and Human Services, the Hon David Llewellyn, MHA, in November. The ceremony was attended by representatives of the Australian and state governments, local government, DHHS staff and members of the Faculty of Health Science. Acting UDRH Director, Dr Rosalind Bull, gave a short presentation on the work of the Department and the significance of the opening to academic rural health in the Southern Midlands area.



The Oatlands choir group salutes Rural Health at the Health Centre opening

Practical 'in service' help for professionals in rural practice

Judy Stone is the Clinical Supervisor, Physiotherapy Services, North West Regional Hospital, Burnie. She commented in these terms on the importance of professional development opportunities provided by UDRH.

'As clinical supervisor it is part of my responsibilities to ensure that members of the physiotherapy department have the same training opportunities as they would have working in a big hospital on the mainland. I extend my thanks to UTAS and the UDRH for the help I have received in funding these endeavours.

'Working in the rural and remote area of North West Tasmania presents many problems in respect of professional development. In order to get the lecturers and tutors who suit the department's present needs, we have to organise our own courses and bring the tutors from the mainland to visit.

'At the NWRH in October I convened a NAGS, SAGS and MWMS (natural apophyseal glides, sustained apophyseal glides, and mobilisation with

movement) course at which Kim Robinson from Perth was the key presenter. He taught us a very useful manual therapy technique for the treatment of a variety of conditions. He has agreed to return next year to further our skills in this technique.

'In late October I travelled to Hobart to attend a workshop on 'Recognising and Managing Depression in CVD and Diabetes' delivered by Dr Prasuna Reddy. She gave a wonderful insight into the needs of patients trying to cope with chronic disease/pain. Both these courses will be of direct benefit to the patients seen in the physiotherapy department at the Burnie hospital.

'The University has given educational bursaries to staff to pay course fees. Using one's weekend to drive to Hobart for a course is a bit of a challenge, but having the course paid for is a much needed motivational factor.

'I will certainly be asking UTAS and UDRH for help in future with courses. They have made me feel very optimistic about my professional development schedule for next year,' said Judy.

Partners in oral health fill the gap in public dental care

Two Launceston dentists, partners in life as well as in practice, have been honoured in a unique way for their services to public dentistry.

Rosemary Cane is a researcher at the Launceston based University Department of Rural Health (UDRH). Her husband, David Butler, is Clinical Director of Oral Health Services, Tasmania, with the Department of Health and Human Services. Both have recently been elected as Fellows of the International College of Dentists, a leading honorary dental organisation.

The College is dedicated to the recognition of outstanding professional achievement and meritorious service. It also acknowledges dentists who contribute to continued progress in the profession of dentistry for the benefit of humankind.

As Junior Research Fellow (Oral Health) Rosemary Cane's role is to undertake research on accessibility and equity in oral health and public dental care. Rosemary's major research project is titled: *Filling the gap: improving accessibility and equity in oral health and dental care in rural public dental services in Tasmania*. The project is one of 18 oral health projects in Australia to receive a grant from the NHMRC Strategic Research Development Committee in 2002. This work is seen as an important milestone for Tasmanian oral health research, given the historical absence of a dental school.

As dentists with a strong commitment to public dentistry, Rosemary and David are keen to place oral health within the broader general and rural health context and build the capacity for research

to inform public oral health programs in Tasmania. Working within the framework of the University Department of Rural Health, their aims also include the publication of several papers in scholarly academic dental journals. A paper entitled *Developing primary health clinical teams for public oral health services in Tasmania* has recently been accepted for publication by the refereed professional journal of the Australian Dental Association (ADA).

'The paper seeks to highlight the oral health issues in Tasmania, to stimulate dialogue amongst the profession and other health professionals and to provide evidence for change,' said Dr Cane.

'Oral health, disease and general health share determinants and occur together. The longstanding omission of oral health from the national agenda has substantially affected the progression of public oral health programs, particularly for people living in rural and remote communities.

'Realistically, it is a significant challenge to improve access to oral health care for people who seek public dental services in Tasmania. Most of the barriers are similar to those faced in the delivery of health services in rural Australia.

'They include the dispersed population, levels of socio-economic disadvantage, health status and co-morbidity, the longstanding difficulties in recruitment and retention of dentists, lack of access to specialist services for complex treatment needs and financial constraints,' she explained.

Dr Cane is very conscious of the political, social



Rosemary Cane, whose research paper has been accepted for publication by the professional journal of the Australian Dental Association

and cultural influences on health service delivery, and is aware that a natural resistance to changes in clinical approaches will present further barriers.

'My challenge has been to, firstly, understand the current situation and why it has occurred. It has been important to ensure that this understanding is shared across educational and professional sectors. By carrying out preliminary research and evaluation, evidence will be provided for reform,' she concluded.

The 'Filling the gap' project represents the first step in addressing methods to improve access to equitable health care and provide evidence for introducing the restructuring of public oral health services and practices on a larger scale in Australia.

Rosemary Cane and David Butler will be inducted into the International College of Dentists at the Australian Dental Conference, to be held in Adelaide in March 2005.

Integration of hospital and GP services showcased

A successful and innovative collaboration between agencies delivering health services, primary health care and health education was showcased at a Symposium on the GP-Hospital Integration Demonstration Site Project, held in Launceston in November.

The collaboration involved the University of Tasmania (through the UDRH), the Division of General Practice (Northern Tas) Inc and the Department of Health and Human Services (DHHS).

The Symposium was attended by health professionals, senior health administrators, representatives of client groups and researchers and was followed by a luncheon. It comprised a series of presentations about health care integration, covering such topics as

- GPs and mental health services working together;
- continuity of care from community to hospital;
- GPs working in the emergency department;
- issues for rural/remote consumers;
- community screening for MRSA*;
- gathering information pre-operatively;
- the transfer of information about discharge medication; and
- general practice liaison.

Project Manager, Dr Beth Mulligan, was enthusiastic about the potential benefits and importance of the project.

'The future of health care will depend on all health services working collaboratively. To do this effectively, we must work out appropriate structures and processes to ultimately improve health outcomes,' she said.

'The participation of senior people from the Department of Health and Ageing in Canberra and from Queensland State Health provided a national focus for the symposium and related the Tasmanian experience to what has been seen in other health settings,' added Dr Mulligan.

Michael Rice of the Clinician Development Programme (Innovation Branch) of Queensland State Health outlined his experience in implementing similar collaborative models of hospital-GP integration. He described how he took the project to the health and wider community as a 'road show' that toured regional areas of his state.

Shandell Elmer, Research Fellow, Primary Health Care, Evaluation, Research and Development at the UDRH, presented results from an assessment of integration activities in Tasmania.



Nadine Van Asch of GP North (left), Shandell Elmer of UDRH and Dr Beth Mulligan, Project Manager (right) at the GP-Hospital Integration Symposium

'This local study is based on two sets of interviews, a year apart, using an instrument developed by the Mater Centre for Primary Health Care and GP Integration in Brisbane. These interviews revealed improvement because of the processes and practices that we had put into effect. For example, we brought interstate speakers to Launceston for two workshops on hospital-GP integration and set up several working parties to implement integration,' explained Ms Elmer.

Certificates of Recognition were presented to participants by Dr Stephen Ayre, Chief Executive of the Launceston General Hospital.

*methicillin resistant staphylococcus aureus

Grass roots clinical program attracts international interest



A tri-nation (Sweden, Malaysia, Australia) study in concentration during the IRP in Tasmania's Fingal Valley: the School of Nursing and Midwifery's Judy Spencer and Susan Rasmussen (UDRH, in stripes), centre, brief visitors (from left) Yingqi Teh, Evelina Linström and Eva Andersson, and (from far right) Daisy Leong, Dimitri Trosimou and Karl Magnus Lovnord

Twice a year, the Launceston based University Department of Rural Health (UDRH) runs an innovative program called the Inter-Professional Rural Program (IRP), developed by academic staff from areas within the Faculty of Health Science. Project Officer Susan Rasmussen of UDRH is responsible for the 'hands on' management of the program.

The IRP seeks to expose health science students from the three UTAS disciplines of medicine, pharmacy and nursing to rural clinical practice, and to impress on them that, in rural and remote locations, all health professionals rely very heavily on one another.

'A pharmacy student could work with a community nurse or general practitioner, a nursing student with a dietician or a social worker, and a medical student with a psychologist, as well as having the opportunity to learn about rural practice issues with professionals from their own field,' explained Susan.

'In this way they get a fresh insight into the inter-professional nature of rural practice – a nice adjunct to what they are taught within the Faculty,' she added.

One of the most noteworthy things about the IRP is that it has been very popular with international students – both 'exchange' and full fee-paying. Susan Rasmussen is often asked why this is so.

'Besides its intrinsic clinical benefits, one of the unique selling points of the IRP is its "community immersion" component. This aspect of the program works alongside the clinical part. It involves the students learning about the social and economic characteristics of the community in which they are working.

'As you can imagine, this component offers some unique opportunities to international students, and means that they can be students and adventure tourists at the same time,' said Susan.

We wondered what a group of Swedish nursing exchange students would make of health, lifestyle and economic issues in small rural communities along the North West Coast and in the Dorset Municipality in Tasmania's North East.

'Our Swedish exchange students had been trained in big city hospitals, and were used to a very centralised health care system. Although they may have had some rural experience in Sweden, it usually has been of a very different nature,' explained Susan.

'From the clinical point of view the interaction with a range of health professionals, as you absolutely must do in a small rural community like Ulverstone, Wynyard or Scottsdale, was a unique experience.

'In addition, the primary health care issues, like the effects of diet on the health of the community, are different in Sweden, where they eat more fish and fewer fats and carbohydrates than they do on the North West Coast.

'Being from the northern hemisphere they had never visited an alpaca farm, a penguin reserve or a reptile park, although they were no strangers to plantation forestry,' she added.

Swedish exchange students have been involved in the Scottsdale IRP in the Dorset Municipality for a couple of years.

'Scottsdale High School students and teachers appreciated the chance to hear about the Swedish social, health and education systems from our international students,' said Susan. 'This activity was good for the exchange students, too, as they honed their English public speaking skills and found out more about life for a young person growing up in a country town.'

We wondered how two Malaysian pharmacy students, Daisy Leong and Yingqi Teh adjusted to the lifestyle of St Marys in the Fingal Valley area of the Break O'Day Municipality.

It transpired that both had already spent some time on a rural placement, with Daisy having worked with the pharmacist at Richmond, outside Hobart, and Yingqi at Dover in the Channel area. Not surprisingly it was the inter-professional aspect of the program that held the greatest interest for these students.

'I liked working with the other health professionals in the area, such as the psychologists, a dietician and the psychology interns. I was very grateful that they were so patient with us pharmacy students,' said Yingqi.

Daisy was placed with the local doctor and gained some new and valuable insights into alternative therapies and primary health care.

'I also learned that team work is more than just a nice catch phrase – it's a necessity in a rural or remote location where the backup that we are used to in the larger centres is just not available. In particular I was just amazed at the stories that Julie Severin, the St Marys paramedic, had to tell about her experiences in the Northern Territory and rural Tasmania,' she said.

Both Daisy and Yingqi hope to work in Australia for a while before returning to Malaysia, so broadening their base of clinical and cultural knowledge.

Susan Rasmussen was assisted in the delivery of the IRP by Judy Spencer of the Tasmanian School of Nursing. Judy was accompanied by Eva Andersson, an exchange lecturer from the Malmö Academy of Nursing in Sweden.

Malmö nursing students Karl Magnus Lovnord and Russian born Dimitri Trosimou were guests at a community presentation held at the conclusion of the program in the picturesque eScApe Tasmanian Wilderness Café and Gallery. Though unable to join the September inter-professional program because of the high demand for places from Australian students, Karl and Dimitri had not missed out on the rural experience altogether, having had earlier stints during their exchange program at Scottsdale and on Flinders Island.

The UDRH inter-professional program has been running for four years and has become an accepted element in the health science curriculum.

'Each year the program is modified so that it meets the needs of the students and the health system that little bit better,' said Susan. 'We set a lot of store on being flexible, thinking laterally and surveying all participants – students and local health professionals – to see how we can make the placement an even more positive educational and social experience.

'Each international student who has participated has enhanced the program with their stories of the health system and the health professionals with whom they worked back in their home country. This has helped to broaden our Australian students' ideas about health in general,' she concluded.

UDRH program wins national recognition

The Launceston-based University Department of Rural Health (UDRH) has won Australia-wide recognition through its 'gold medal' winning poster presentation at the National Services for Australian Rural and Remote Allied Health (SARRAH) conference in Alice Springs in August. The UDRH was represented by Inter-Professional Rural Program (IRP) Project Officer, Susan Rasmussen. Her presentation on the IRP was made before 150 delegates from all areas of allied health, as well as delegates from university health science faculties and government departments.

Allied health is a broad area covering health-related disciplines such as physiotherapy, speech pathology, occupational therapy, podiatry and social work. Because the University of Tasmania generally does not teach allied health disciplines, it is keen to attract 'mainland' allied health students to Tasmania on placements such as those provided under the UDRH inter-professional program (IRP).

Rural Health Careers Program expanded to meet demand & interest

An innovative activity of the Health Careers Program provided by the University Department of Rural Health (UDRH) was significantly expanded in 2004. Forty-one Year 10 students from 17 high schools all around Tasmania attended residential workshops at Camp Clayton, Ulverstone, in June and July.

In previous years one workshop was provided, but in 2004 two were held, doubling the number of students involved in this informative and enjoyable learning opportunity.

Workshop participants were selected from high schools as far afield as Huonville and Nubeena in the state's South, St Helens on the East Coast, Riverside in the central North, Smithton in the far North West of Tasmania and points in between.

The four day workshops were organised by the UDRH's Rosalie Maynard, Health Careers Program Coordinator. Each provided hands-on experience and focused discussion on health careers with local health professionals and current university health science students.

The professions represented were medical practice, nursing, physiotherapy, social work, dietetics, radiography, speech pathology, occupational therapy, podiatry, dentistry, pharmacy, optometry and the ambulance service.

'The contributions from 21 health professionals and eight undergraduates, who so generously gave up their time to be involved in the camps, were greatly appreciated,' said Rosalie.

'The fact that local health professionals are so willing to be involved reflects everyone's awareness of the need to foster positive attitudes to rural health practice and to encourage young people into future health careers,' she said.

'The students always say that the highlights of the camp are the opportunities to talk with practising professionals. They also say that they come away with a much greater appreciation of the pathways to follow in order to pursue various careers in the health area.

'A highlight of this year's camps was the involvement of Joanne Ambrose, a medical student at the University of Tasmania who attended the first Health Careers Workshop held in 2000 when she was a Year 10 student from Burnie,' said Rosalie.

Now in second year, Joanne enjoyed passing on her own insights into university life, including the rewards and challenges posed by a course like medicine.

'I feel strongly about encouraging young Tasmanians to believe in themselves! When I attended this same camp four years ago I looked at the university students who were there and hoped that one day I would be the student coming back to talk about my experiences,' said Joanne.

A participant in last year's workshop, Corinna de Bomford from Leith in Tasmania's North West, also recommended the experience to those in Year 10.

'The workshop gave me an improved awareness of what I need to do in my next two years at Don College to try and get into medicine. It also showed me that health science is not only about medicine and nursing, but can lead to a whole range of interesting health careers working with people,' she said.

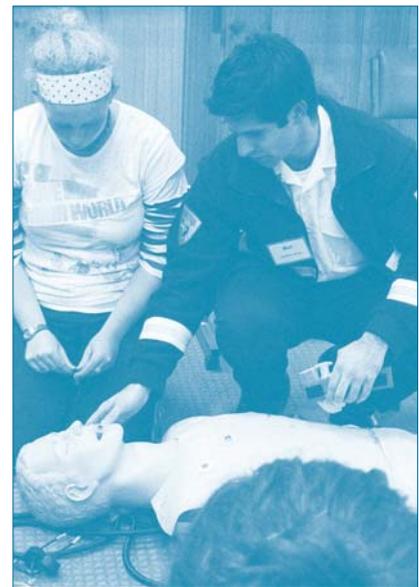
An additional strength of the workshops lies in the involvement of recent graduates, health science lecturers and student recruitment staff. They provided advice on course requirements, the transition from school to tertiary study and the experience of the young practitioner in the rural setting.

'These students' comments are typical of general feedback provided about this year's camps,' said Rosalie.

I gained a huge understanding of what different occupations are about, and what is required to do them (e.g. subjects, what skills are involved etc). I learnt HEAPS and made lots of new friends.

I am glad I have the next 2 years to make a decision because so many options sound good!

For more information regarding the broad scope of Health Careers Program activities, contact Rosalie Maynard, Health Careers Program Coordinator, UDRH, on 0427 61 22 66 or email on Rosalie.Maynard@utas.edu.au



Bec Jory of Riverside High School and Matt Singh of the Tasmanian Ambulance Service, at the Health Careers Camp

It's the personal touch that matters

Year Four Pharmacy student Amy Tria has proved that success is all about chemistry – that successful combination of essential elements: knowledge, personality and professional care.

In Adelaide recently Ms Tria was named Pharmacy Student of the Year at the national Congress of the Pharmacy Society of Australia (PSA) after competing against finalists from other states.

Amy is no stranger to rural practice. In her third year she undertook a clinical placement on remote King Island, in Bass Strait. This year she has spent time in Mt Isa and at Port Douglas.

UDRH Pharmacy Academic Helen Howarth was delighted with Amy's success.

'It is very encouraging to think that we can produce such a well rounded, confident final year student who will soon go out into the clinical world equipped with a variety of rural experiences in widely diverse social, professional and physical settings,' said Ms Howarth.

Amy told the Hobart *Mercury's* John Briggs (22 October 2004) that the selection process involved dealing with the public in typical real life situations.

'Fortunately for me I've had five years of experience in a pharmacy dealing with the public, communicating and providing advice. That part of the process was both daunting and fun.

'At the final in Adelaide we had professional actors presenting situations we might come across in a pharmacy. We were judged on the way we gave advice and counselled clients,' added Ms Tria.

When she completes her Pharmacy degree, Amy will work at the Royal Hobart Hospital, where she is looking forward to working and communicating with patients. The diversity of experience that she has gathered in her rural placements, in her 'over the counter' role whilst a student, and at the PSA Congress will be of assistance when she begins clinical practice.



Amy Tria, winner of the Pharmacy Student of the Year Award

Amy hopes to take holidays in August to attend an international conference in Germany, as part of her prize.

'If there's time I might be able to visit other parts of Europe, including Italy, where my father was born,' she told John Briggs.

UDRH staff carry their message far and wide

Professional development was to the fore in the second half of 2004 as UDRH staff travelled widely to showcase their work at conferences all over Australia and internationally.

These events provide stimulating and diverse forums for the sharing of ideas and for professional networking. They often produce innovative strategies for improving rural health service delivery, for teaching health science students in a more effective way and for expanding educational opportunities that are relevant to rural and remote practice. They also enable staff to benchmark and evaluate their own programs and examine others that seek to achieve these objectives.



Kim Boyer and Lisa Dalton reflect on their research

Acting UDRH Director, Rosalind Bull, and Lisa Dalton, Lecturer, Rural Education, travelled to Edinburgh (UK) in early September for the international conference of the Association for Medical Education in Europe (AMEE). This gathering attracted 1550 delegates from developed and developing countries. AMEE members are teachers and organisations with an interest in achieving and maintaining high standards of education in medicine and health care, in research and in the exchange of information about medical education.

Dr Bull presented a paper, written with Jennifer Marriotti, Maree Simpson and Susan Taylor, entitled *A national education strategy for pharmacist preceptors: an Australian collaborative model*. Lisa Dalton delivered a paper, co-written with Ros Bull, on *Student nurses' use of space as an indicator of professional development*. The

implementation of the Inter-Professional Rural Program (developed jointly by the UDRH and the Schools of Nursing, Medicine and Pharmacy), at the Rural Clinical School was described by the Professor of Rural Health, Judi Walker, in a paper entitled *The delights and difficulties of inter-professional education: learning from experience*.

Lisa Dalton found the Edinburgh experience intensely stimulating.

'The actual venue for the conference was a grand, yet relatively modern building known as the Edinburgh Conference Centre. Full and half day workshops ran before the conference commenced and covered a wide range of topics relevant to the improvement of medical education.

'Diverse topics and content spanned the many short communication sessions. A series of internationally renowned keynote speakers hosted the plenary sessions that presented the consequences for health consumers of fragmented medical education, the need to develop medical education in line with achievable learning outcomes, and the value of inter-professional education,' she explained.

'I presented some findings from a research study involving undergraduate student nurses undertaking rural placements. I showed how there is an expectation that nursing students will engage intimately with patients while on clinical practice, despite their inexperience in the field. They are judged on their ability to do so.

'New ways of understanding the way students behave in the rural clinical environment were presented so that clinical supervisors could support students during the learning journey,' she said.

Lisa had a very different, but no less valuable, experience when she attended the second of her two conferences. The British Association for Applied Linguistics (BAAL) 2004 Conference was held in central London at the prestigious Kings College, London.

'The BAAL conference was simple, honest and intense. The sessions were purely theoretical presentations about the traditional and emerging ways linguistics is contributing to research across many disciplines.

'As my PhD will combine ethnography and critical discourse analysis (which are both styles of linguistics) the sessions were extremely valuable for the development of my study,' said Lisa.

Inter-professional learning was again the focus at the National Services for Rural and Remote Allied Health (SARRAH) conference in Alice Springs at

the end of August. The UDRH was represented by Inter-Professional Rural Program (IRP) Project Officer, Susan Rasmussen. Her presentation around the department's IRP poster was made before 150 delegates from all areas of allied health, as well as delegates from university health science faculties and government departments. In common with the Olympic spirit Susan was presented with the 'gold medal' for her efforts.



Susan Rasmussen, whose poster presentation was a national winner

Susan's presentation was seen as an excellent marketing opportunity for the IRP and for the department's Rural Health Teaching Sites.

Maree Fish, Principal Project Officer for the Falls Prevention Project is no stranger to Olympic gold either. The Seoul hockey medallist has spearheaded a range of collaborative activities



Maree Fish, Principal Project Officer, Falls Prevention Project

around Tasmania since 2002, working with the Emergency Department of the Royal Hobart Hospital (RHH), government departments, the Divisions of General Practice, allied health professionals and injury prevention specialists to raise awareness related to the causes and community costs of falls in an ageing population. In mid-September Maree attended a conference in Mackay where she presented a paper, with a colleague from the RHH, entitled *The role of injury prevention in hospital emergency departments*.

The needs of older Australians were also considered when Professor Judi Walker and Kim Boyer, UDRH Senior Research Fellow, attended the National Gerontology Conference in Melbourne in November. Their paper dealt with the identification of health service usage needs and migration patterns of older rural Australians, using a proposed three year study in rural Tasmania.



Christine Fahey looks to the future for volunteers in her research

Education was under examination when Acting Deputy UDRH Director, Dr Peter Orpin; Acting Program Head, Research and Evaluation, Christine Fahey; Program Head, Rural Community Engagement, Stuart Auckland; Research Fellow, Oral Health, Rosemary Cane; Acting Program Manager, Education and Support, Sue Whetton; Dr Clarissa Cook, Research Fellow; Senior Project Officer, Alison Miles and Coordinator, Health Careers, Rosalie Maynard, attended a two day workshop of the Australian Rural Health Education Network (ARHEN) in Adelaide. ARHEN is a consortium of all Australian UDRH, with a board made up of the UDRH Directors and a full-time Executive Officer and executive assistant. Its main function is to increase the effectiveness of the UDRH by concerted action on appropriate issues.

The Adelaide workshop was attended by more than 80 participants and is the first time UDRH staff, as distinct from Directors, have come together to

identify, discuss and prepare a coordinated response to the issues/themes that concern them most.

Rosemary Cane was impressed with the amount of 'positive energy' that was at the gathering, and felt that the unstructured 'open space' format encouraged a free flow of ideas.

Peter Orpin summed up his impressions in these terms.

'As a result of the workshop I think the AHREN Board will start work on policies and actions to support more collaboration. Individual Directors will provide stronger support to collaborative activities between UDRH as part of core business. I hope that part of this will be opportunities for staff exchange and support for travel to collaborate.

'In the end, however, better collaboration and sharing will only happen when individual staff working on particular issues or projects make the effort to see who else in the UDRH is working in the same area and push to combine efforts,' he said.

Chris Fahey and Peter Orpin were particularly interested in the theme of workforce multipliers – that is, activities that try to maximize the effectiveness of the workforce by multi-skilling, teamwork, training generic health workers, collaborative and team models and community involvement.

'I will also be pushing for a cross-UDRH group to look at the range of strategies that are being pursued in this area,' said Dr Orpin.

Lack of leadership development, largely driven by the short term nature of UDRH funding and marginality within the universities, militating against career development and leading to high staff turnover, was another common concern at the workshop.

Peter Orpin had research evaluation under the microscope when he presented a paper entitled *What do you want to Know and Why do you want to know it? – asking the hard questions in evaluation* at the national conference of the Australasian Evaluation Society in Adelaide in October.

'The theme was around ways of including "diverse voices" in evaluation. Primarily that means how do we make sure that evaluation (and research) is properly sensitive to cultural diversity?

'There were no easy answers but we all came away realising that we need to listen very carefully to, and think about, the interests of those we evaluate/research – whether they be particular

cultural groups or people whose work and life are under examination, such as project staff,' he explained.

The recruitment of Indigenous nurses was one of the themes of the Congress for Aboriginal and Torres Strait Islander Nurses (CATSIN) in September. Sharon Dennis, UDRH and Tasmanian School of Nursing Indigenous Health Science Officer/Higher Education Officer, and elected Tasmanian delegate to CATSIN, presented an abstract on Indigenous Nurse Recruitment in Tasmania.

Sharon was enthusiastic about the networking opportunities offered by the gathering.

'This was not a conference where statistics were highlighted so much – it was more aimed at personal accounts of first-hand nursing stories and the achievements made in the current environment.

'It was useful to find out how Indigenous and other health policies affect not only Indigenous health but also the delivery of Indigenous health from "mainstream" health care providers. It was very apparent that here is still a need to increase numbers of Indigenous nurses and health providers and to raise the profile of Indigenous issues and health care in the delivery of nursing courses,' said Sharon.



Dr Emily Mauldon, whose paper on ethical issues for researchers on small budgets attracted keen interest

Research Fellow Emily Mauldon presented a paper entitled *Ethical principles versus practice in small budget research projects* at the GP and Primary Health Care Research Conference in Brisbane in July. This poster presentation focused on some of the challenges of managing ethical responsibilities and the university ethics process while undertaking short research projects.

'To my delight,' said Emily, 'about three quarters of the questions raised during the question time for my session, which contained five different presentations, related to my paper.

UDRH staff carry their message far and wide *continued*

'It became apparent to me that there is a great deal of frustration experienced by people who see ethical review as a fairly arbitrary process. They don't understand why it works the way it does, and aren't convinced that it's necessarily useful. There's a need to educate primary health care providers about why research ethics are important, how they differ from clinical ethics, and what's involved with ethical review processes,' she concluded.

The wider social significance of the volunteer was examined in two papers presented by Christine Fahey, Acting Program Head, Research and Evaluation, at the Tenth National Conference on Volunteering in June. The theme was 'Evolution, devolution or revolution?' and it considered how volunteering is a vehicle for societal change, and how the structures that support volunteering are changing. Christine's papers were entitled *Is volunteering a useful tool for government?* and *Supportive management of volunteers – a new mindset*.

"My two talks considered issues that impacted on the governance of volunteers in this changing environment – on the one hand looking at how power impacts on volunteers and, on the other hand, what types of management support volunteers,' she explained.

The necessity for an integrated approach to health care was the theme at the National Health Care Integration conference attended by Research Fellow Shandell Elmer in mid-August at the Mater Centre in Brisbane. In keeping with the culinary imagery (the theme was *Recipes for Integration*) Mary Blackwood from DHHS provided the Tasmanian overview with a presentation *What's cooking in the states?* Project manager, Dr Beth Mulligan, described the project and its intended aims.



Shandell Elmer (centre) shares some conference insights with Martin Harris (left) and Rosalind Bull

'The conference brought together those who are interested in improving health care integration and those involved in the national demonstration sites for GP-Hospital Integration funded by DoHA,' said Dr Mulligan.

Shandell Elmer presented a workshop discussion on the Standards for Health Care Integration that have been developed for use within the project. The standards aim to provide a framework for integration activities and recognize the need for senior/executive level support, needs identification and prioritization, ensuring patients and their families and carers are fully informed, and joint evaluation.

'The workshop also provided an opportunity for our project team to meet with the recently-appointed evaluators of the national demonstration sites,' said Shandell.

'We learned from the evaluators that our experiences are similar to those of other sites. These similarities occur in relation to the elusive nature of integration and the difficulties in defining and scoping the term.

'We also learned that achieving integration is probably easier in states where there is a statewide/state health-led agenda for integration. Perhaps most importantly we received affirmation that the approaches we have taken are "on the right track",' she concluded.

The varied uses of information and communication technology were the subject of two August conferences in Brisbane attended by Sue Whetton, Acting Program Head, Education and Support, and Chris McKay, Computer Systems Officer.

Sue presented a paper entitled *Value: the usability factor* at the 2004 Health Informatics Conference. She found the experience valuable in 'keeping up to date with the latest developments in e-health and their impact on rural health'.

Dr Quynh Le, Program Head, ICT, made two joint presentations at the International Educational Research Conference at the University of Melbourne in late November 2004. One paper was entitled *A contrastive study of on-line communicative functions between undergraduate and postgraduate students*. It examined the role of communication in teaching and learning in a university context, with a focus on the use of emails.

The second, titled *Intercultural Health Metaphors*, examined the relationship between culture and metaphor and how it influenced the perception of migrants in making sense of health concepts and issues in Australia.

'Participation in this conference provided an opportunity to share ideas and practical implementations with colleagues of different educational research backgrounds on many topics relating to educational multimedia and intercultural education,' said Quynh.



Dr Quynh Le, Program Head, ICT, is looking at the role of email in university teaching and learning

Chris McKay attended the SAGE-AU (System Administrators' Guild of Australia) Conference.

'I found that one of the best things about the conference is that you get to meet up with other IT people from all sorts of businesses and organisations around the country - and a few from NZ as well.

'It's interesting to hear about the things other "sysadmins" are doing, and it also presents the opportunity to ask those who are more experienced in certain areas questions about stuff that I will soon be doing with the UDRH setup. Definitely worth it!' said Chris.

'And so say all of us!' say Chris' colleagues.



Chris Mackay, computer systems administrator

Radical facelift for UDRH's Annual Report

Prior to his departure from Tasmania in mid-2004, Director Associate Professor Ian Blue signaled his intention to move away from the traditional book-like hard copy Annual Report format to a CD-ROM. A working group was formed to put this change into effect.

'The 2003 University Department of Rural Health Annual Report CD-ROM concept is the product of creative thinking from the staff of our multi-disciplinary department,' said his successor, Acting Director, Dr Rosalind Bull.

'The format of the CD allows the reader to access a large amount of information in an interesting and interactive way. In addition to our report of 2003 activities we have included current (2004)

information on our staff profiles and contact lists, reports of our research and project work, published papers, press releases, and capacity statements from the major program areas of our work. The CD includes a slide show of UDRH staff at work,' said Dr Bull.

In consultation with UDRH staff, Tasmanian firm AT&M developed the cover and label design from a concept provided by UDRH. Media and Marketing Coordinator, Caryl McQuestin explains.

'The CD-ROM is contained in a sturdy cardboard wallet that incorporates design features that are also utilized in other promotional media, such as the UDRH banners and the Bulletin.

'The cardboard container is fitted with a pullout tab that enables it to be turned inside out and fixed to sit up on a desk, showing a 12 month July 2004 - June 2005 calendar. Besides the CD-ROM the wallet contains a four page booklet outlining the UDRH's Mission, the National Key Result Areas for UDRH, background information about the Department, a message from the Director and contact information,' said Caryl.

Executive Officer, Jason Fello, was delighted with the compact nature of the finished product.



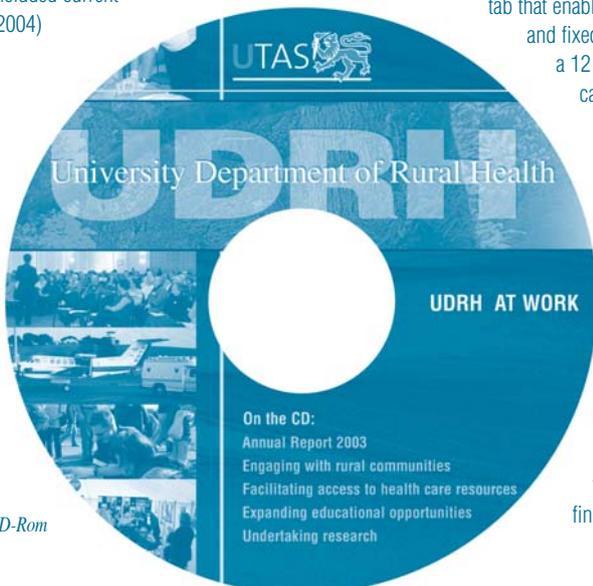
Jason Fello, UDRH Executive Officer, and Caryl McQuestin, Media and Marketing Coordinator

'The CD-ROM format allows the report to be mailed in shrink wrapping at a fraction of the cost of sending the weighty booklet, whilst at the same time allowing for the inclusion of up to date information that goes beyond the scope of the report of 2003 activities,' he explained.

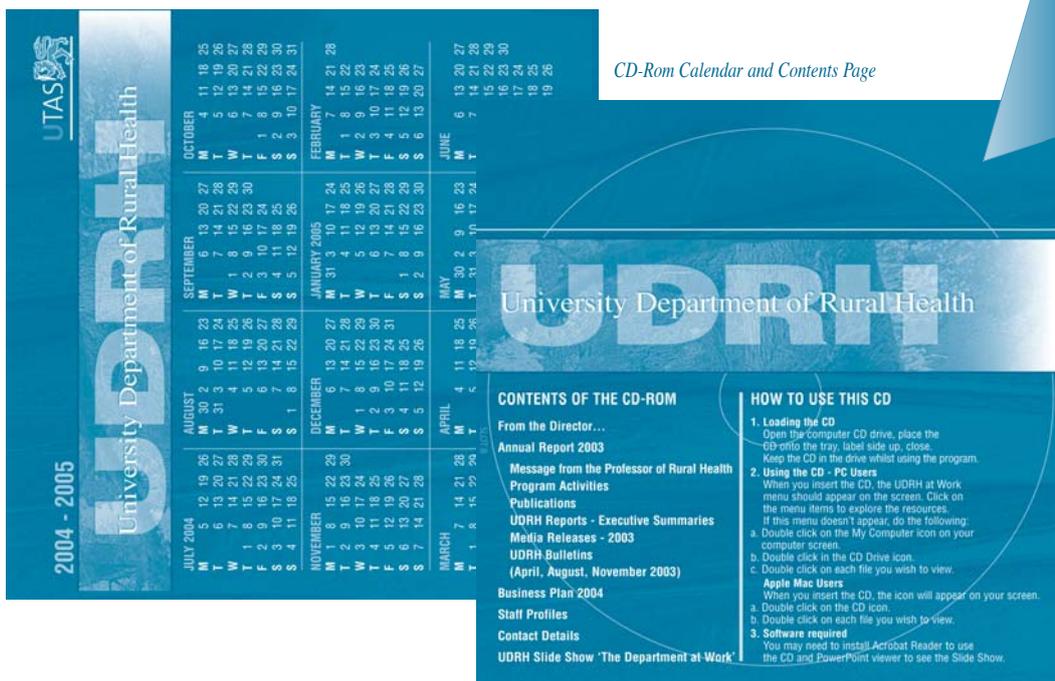
'This project was a team effort, but in particular I pay tribute to our ICT staff, who worked with the marketing staff and the designers to produce an interesting, useful outcome,' added Jason.

AT&M reports that they have had several requests for reports to be published in a similar manner since the UDRH report was sent to stakeholders in Tasmania and beyond.

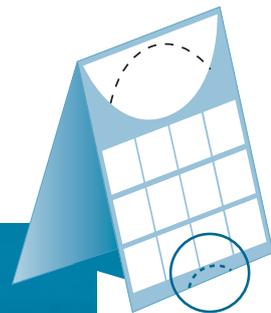
For copies of the UDRH CD-ROM, please contact Caryl McQuestin, Media and Marketing Coordinator on 03 6324 4064 or email Caryl.McQuestin@utas.edu.au.



CD-Rom



CD-Rom Calendar and Contents Page



The CD-Rom cover as a desk calendar

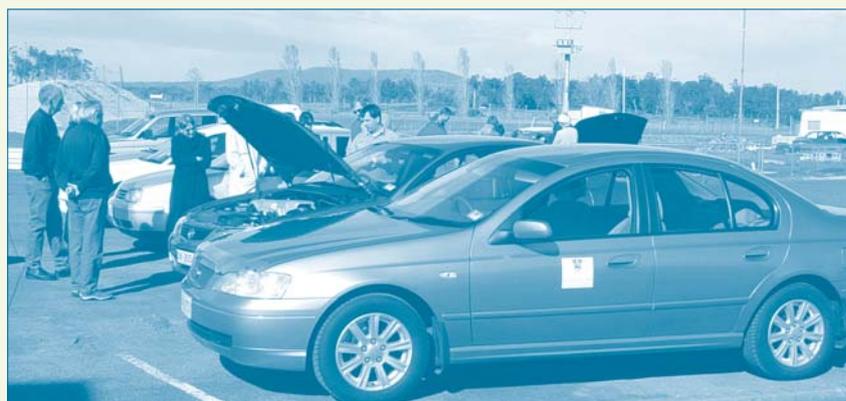
University moves to reduce road risk for staff

Long hours on the road in challenging driving conditions are an everyday part of working life at the University Department of Rural Health (UDRH). Staff pride themselves on being responsive to the needs of stakeholders in rural and remote areas all over Tasmania. Based in Launceston, the UDRH has a presence, through its ten Rural Health Teaching Sites and a number of other activities delivered in local communities, in rural and remote areas around the state. Its Research and Evaluation section is located in Hobart and the Rural Clinical School, with which it has close links, is in Burnie. Even in the age of electronic communication this means a great deal of road travel for staff.

Soon after his arrival in Tasmania, former UDRH Director Associate Professor Ian Blue pushed for the introduction of a voluntary professional development program for staff that would provide them with the necessary defensive driving skills to cope with potentially hazardous situations encountered in their work. A tragic accident involving people attached to a mainland UDRH in which one young health professional was killed and another seriously injured was the catalyst for Dr Blue's initiative. A more recent accident involving a staff member of the University only served to emphasise the importance of the course.

After Dr Blue's departure for Canada the idea was taken up by UDRH Acting Director, Dr Rosalind Bull.

'TAFE Tasmania, which offers the Arrive Alive Defensive Driving Course (TDT C1 97A) was found to be the most suitable provider for our needs. We were attracted by the fact that the program was available at the Symmons Plains Raceway, combines theory and practice and is concentrated in one full day,' said Dr Bull.



Bonnets up for UDRH and Utas staff at defensive driving course at Symmons Plains Raceway

Instructor Nick Cameron of TAFE Automotive, North, was keen to allay fears of potential participants.

'If you are somewhat apprehensive about the day, please don't be. The course is designed for all levels of drivers and is focussed on encouraging safe and positive driver attitudes, and on providing important driving information and skills in a fun way, all within a totally safe environment,' said Mr Cameron.

Amanda Feely, Personal Assistant at the UDRH could not agree more.

'I felt that I would be well out of my comfort zone, especially braking at speed, but I learnt a huge amount through the course and had a great day as well,' she said.

The first Arrive Alive course was run on Thursday 12 August with others following later in the year.

Jason Fiello, UDRH Executive Officer, was also positively impressed.

'I liked the way that the dangers of bad driving practices were demonstrated – like the common habit that Tasmanian motorists have of driving too close to the car in front,' he said.

For UDRH staff the course was conducted in University of Tasmania cars, part of a large fleet necessitated by Utas' multi-campus structure and its commitment to the delivery of educational services to communities all over Tasmania. Bruce Baudinette, Transport Officer, Fleet Services, Utas Newnham, was an interested participant in the second Arrive Alive course. Pip Rose of the Utas Occupational Health and Safety Unit within the Human Resources area undertook the first course.

'It is encouraging to see that the UDRH has assessed their risks regarding driving activity and have analysed the need for such a preventative strategy. Hopefully other schools and sections who are in similar situations will also be proactive in relation to risk minimization,' said Pip.

Trivial fun has serious benefits

UDRH has combined with two other Launceston icons, Spurr Wing Inc, (a residential facility for country patients of the Launceston General Hospital) and the Duke of Wellington Hotel to bring the spoils of a keenly fought Trivia Night quiz series to rural and remote area people.

On successive Wednesday nights a talented but disparate collection of local teams vied at the Duke of Wellington Hotel for weekly prizes and the big one – \$1000 in cash for the aggregate winner at the end of the twelve weeks. Rae and Partners, Launceston's largest law firm, won the major prize. A secondary award of a television set, for the best score in the second half of the competition, went to the UDRH.

'The questions were varied, with sport, film and popular music featuring prominently as well as traditional topics like politics and history,' said Liz Homan, hotel manager. 'Rae and Partners won because they had a good mix of youth and age, and could generally rustle up a strong team with a variety of interests, but UDRH made a bold showing on the home stretch,' she added.

Chris McKay, computer systems administrator at UDRH and team leader, explained why Spurr Wing Inc was chosen as the recipient of the television set.

'We see Spurr Wing as a valuable facility for people who live more than 75 kilometres away from medical facilities like the Launceston General Hospital. We hope that the television set will help



Spurr Wing, Charles Street, Launceston

make the stay of people who are away from home a bit more pleasant,' said Chris.

Lynne Loftus of Spurr Wing Inc said that the UDRH's television set would be used in a newly established unit for disabled rural patients staying at Spurr Wing. The major sponsor of the unit is the Riverside Lions Club.

Dentistry, destiny and black-faced sheep

Erica Bell works as a Research Fellow in the Hobart office of the University Department of Rural Health. She is involved in a broad range of collaborative projects, including rural health education, youth residential rehabilitation service delivery, and falls prevention for older clients.

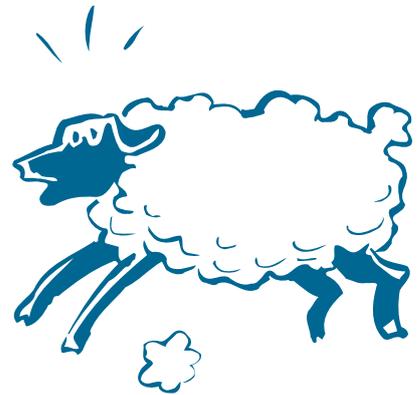
Erica's most important career-shaping moment occurred in a very unlikely place. She was sitting in the dentist's chair as a child listening to her Polish dentist, a highly educated man, and a survivor of the Nazi holocaust, tell her why education was important:

'Your house can be burnt down,' he said, as he drilled away 'and bad things can happen to people you love, but no one can take your education away, because that is something you will always carry locked inside you, it is your struggle to become something more, something better than yourself.'

That was an appointment with destiny, not to mention an amalgam.

After spending her mid-twenties doing a PhD in language theory (semiotics and post-structuralism), and teaching in four different university departments (English, Philosophy, Art, and General Studies), Erica went on to spend two years as a higher education research officer and equity advisor at the University of New South Wales, three years as a senior research officer, and almost five years as a research manager in the Queensland Government education portfolio.

She has led many projects involving diverse educators, community and stakeholder groups, producing over 40 publications that have helped develop policy and practices in the post-compulsory education sectors. She has been a secretariat member on ministerial reviews of education, and was one of two consultants who produced Australia's first national guidelines on assessment quality and equity for the Australasian Curriculum, Assessment and Certification Authorities.



'I want to be always "pushing the envelope" and opening up new frontiers of learning for myself, and to be a positive force in the lives of those around me,' said Erica.

Erica also admits to more whimsical ambitions.

'I'd like to have a farm in Tassie and some little black-faced sheep that frolic and gambol beneath my window,' she said.

Research apprentice practises her craft

In September Georgina Earles commenced a new Hobart based Supported Researcher position as part of the PHCRED Researcher Development Program. The position is essentially a year-long 'research apprenticeship', during which Georgie will work with Dr Clarissa Cook (UDRH) and colleagues from Nursing and General Practice at UTas to design and undertake a research project on models of dementia care in rural communities.

Georgie grew up in Launceston, attending Scotch Oakburn College, before moving to Hobart to undertake a BSc majoring in Psychology and Geography & Environmental Studies. After graduating in 1997, she moved to Melbourne where she took up a position as an Accounts Coordinator in a city advertising agency. Two years later she went backpacking through Japan, Europe and Thailand, before settling in London where she worked as an Account Manager in the advertising department at the Financial Times newspaper.

In early 2001, Georgie returned to Australia, moving to Sydney to undertake a Master of International Public Health at the University of Sydney, which she

completed in early 2002. After finishing her higher degree, she spent some time back in Launceston before winning a position on the Australian Government Department of Health and Ageing Graduate Program and moving to Canberra.

Georgie's first six months were spent working in the Office of Aboriginal and Torres Strait Islander Health (OATSIH) in the areas of Social Health and Research & Data, with a strong focus on the provision of services in rural and remote areas. She then undertook a six month placement with the NHMRC, working on the implementation of the *Research Involving Human Embryos Act 2002* and the *Prohibition of Human Cloning Act 2002*. Georgie then returned to OATSIH, where she worked in the Substance Use and Men's Health Section before taking up her position with UDRH.

While living in Canberra, Georgie and her fiancé spent their weekends camping along the NSW coast and skiing at Thredbo and Mt Perisher, and are currently spending their weekends building a beach house at Binalong Bay.



Georgina Earles, Research Assistant, PHCRED

Financial and academic support for rural health researchers

UDRH continues to provide financial support to graduate researchers with an interest in academic rural health.

'The UDRH and the Rural Clinical School have offered four bursaries of \$15000 each for rural health professionals who wish to take up study at postgraduate level but who need to redevelop their study skills,' said Dr Rosalind Bull, Coordinator, Graduate Research.

'Successful applicants will undertake a program of activities that support the development of advanced research skills, a literature review and research proposal.

'They will be supervised by one of the Rural Health Graduate Research supervision team, and will have access to a range of student support activities and services,' she explained.

Bursaries were offered to potential students who were interested in developing research with a clear rural focus. Areas of particular interest were:

- multidisciplinary practice and/or education;
- primary health care;
- volunteers in health care; and
- maternal and child health.

'Applications have been received and the recipients of the bursaries will enrol into a Masters Preliminary course through the Rural Health Graduate Research program,' concluded Dr Bull.

The second of the twice yearly graduate research student retreats was held at Grindelwald, on the West Tamar, in mid November. The first was in Hobart in the last week of April.

Using sound criteria-based assessment: what does this mean in the education of health professionals?

Erica Bell, Geraldine MacCarrick, Lisa Parker
University Department of Rural Health and the Medical Education Unit

Mode: workshop

In the first part of the workshop Dr Bell will describe how criteria-based assessment is about making sure that our education practices do what we think they are doing for students. A step-by-step discussion will occur about how to make sound criteria-based assessment happen in university courses. It begins with the task of developing a language in which to theorise assessment, defining the difference between criteria-based assessment, norm-referenced assessment, and other key assessment terms.

Using key principles and practical examples drawn from the challenges of preparing health sciences students for rural Australian contexts, it then goes

on to describe the course design features required to make sound criteria-based assessment work for students: from defining course objectives, to developing an assessment plan, to determining standards, to designing assessment instruments, and developing a marking scheme using verbal standards.

In the second half of the workshop Dr MacCarrick (Chair of the Assessment Task Group of the New MBBS Curriculum Working Group) and Dr Lisa Parker will describe the particular challenges being faced as the New MBBS Curriculum Committee recommend approaches to assessment that are consistent with UTas Code of Conduct for Teaching and Learning, Policy on Assessment Practice and Rule 111 on Academic Assessment.

The introduction of the new five-year course at the TSoM has initiated review of current assessment procedures and we have already seen a significant move towards more integrated, centrally coordinated approaches to assessment. The development and implementation of the new outcomes-based curriculum will see even more integrated relevant assessment which will be designed to:

- judge mastery of knowledge, skills and attitudes;
- provide feedback to students and staff;
- motivate students to study; and
- direct and drive student learning.

A contrastive study of on-line communicative functions between undergraduate and postgraduate students

Authors: Thao Le & Quynh Le University of Tasmania

Abstract:

This paper is based on a contrastive study conducted with on-campus and off-campus students in a university context with a focus on communicative functions. The main aim of the study was to examine the nature of undergraduate and postgraduate students' communication in teaching and learning in terms of three communicative functions: procedural, social, and cognitive. It attempted to identify the underlying reasons why students wanted to communicate with their lecturer via email communication. The data analysis of undergraduate students indicates the predominance of procedural functions in their

communication and strongly reinforces the assumption that students were mainly concerned about academic procedure and conformity. This is against the view held by many academics in different levels of education that communication in teaching and learning should be fundamentally a meaning making process and teaching is to facilitate the minds of learners to make sense of knowledge. However, the communication of on-line postgraduate students shows a balance of three clusters of functions. This phenomenon can be explained in terms of curriculum control and interpersonal relationship in an academic discourse.

What Do You Want to Know & Why Do You Want to Know It?

Peter Orpin

Of all the potential pitfalls lying in wait to sabotage any sort of research, especially evaluation, none is so deep and so obvious, yet so under-attended, as the process of formulating the question(s).

Evaluators can often feel pressured to move too quickly through this phase of the design process because it requires those commissioning the evaluation to do a lot more of the work.

This paper argues that time spent pushing and probing the commissioners to address two very simple questions – What do they want to know?, and Why do they want to know it?, is the key to quality evaluation. If pursued with skill, persistence, rigour and analytical insight, this can uncover and eventually unravel immense complexities that left covered and inadequately examined will devalue, if not doom, even the best designed evaluation.

A national education strategy for pharmacist preceptors: an Australian collaborative model

Rosalind Bull*, Jennifer Marriott, Maree Simpson and Susan Taylor

Background:

The presentation outlines the development of a national education strategy for pharmacist preceptors (clinical supervisors) that addresses rural workforce shortages: supports rural pharmacists and improves students' clinical experiences in rural Australia.

Summary of work:

A national core curriculum to prepare rural pharmacists acting as preceptors to pharmacy students on clinical placements was developed by

four universities across three Eastern states of Australia in consortium. A five-module interactive on-line package was developed. Three Australian States are trialling the package. A core curriculum was developed, informed by contemporary educational and pharmacy literature. The program is delivered on-line with CD support. There are 5 Modules: Introduction, Focus on the Student, Focus on the Preceptor, Challenges and Problems in Supervision and Putting the Theory to Work. Videos, exemplars, self-directed assessment and reflective activities are integrated into the package.

Subtopics in the modules present two levels of information - a summary level that includes links to relevant areas, and an in-depth level, providing learners with the flexibility to meet their learning needs and encouraging further exploration.

Conclusions:

Collaboration between four Australian universities has resulted in the development of a national on-line education strategy for pharmacist preceptors. The package can be customised for other health professions.

Introducing falls risk assessment into GP Practices

Maree Fish*, Christine Fahey

Introduction:

Stand Up Right - Stay Upright! introduced the Prince of Wales Clinical Falls Risk Assessment Tool into four GP practices. The evaluation reviewed how the tool assisted practices to improve identification of clients at risk of falling, management of clients' identified risks, and what factors affected the introduction of evidence to practice.

Method:

Four GP practices were each provided with the Prince of Wales Clinical Falls Risk Assessment Tool, and accompanying resources. Practice nurses were asked to include the use of the assessment tool with the EPC Health Assessment and 111 clients were assessed. The risk factors identified were monitored, along with the use of

handouts. Interviews were conducted with practice nurses after using the tool to assess how it impacted on their falls prevention practice.

Results:

The use of the tool was easily combined with the EPC Health Assessment. The tool provided a formal framework for assessing and managing falls prevention. At-risk clients who would otherwise not have been considered at risk were identified prior to falling. The tool assisted management of falls risk factors by allowing practitioners to give clients clear direction and instruction. The results sheet from the falls risk assessment was useful for the GP to assess clients. However, lack of resources was one barrier to falls prevention referrals that the tool could not assist, creating some frustration and queries from some GPs about the usefulness of the tool.

Discussion and Conclusions:

Introducing a simple falls prevention tool into GP practices can be done via the EPC Health Assessment when undertaken by practice nurses. The process adds to the capacity of practice staff to identify and manage falls prevention risks. However, the project was not adequately designed for engaging GPs, and several problems identified included lack of medical evidence for the tool items, and a need to place the introduction of the tool into the larger context of the extent of the problem. A second phase of the project will attempt to improve engagement of GPs by providing an intervention that is more suited to their medically-orientated small business model.

Student nurses' use of space as an indicator of professional development

Lisa Dalton* and Rosalind Bull

Aim:

There is an expectation that nursing students will engage intimately with patients while on clinical practice and they are judged on their ability to do so. New ways to understand this and support students will be presented.

Summary of work:

Experiences of students' first engagements with clinical practice were explored from a cultural perspective. Observation of students in a rural hospital in Tasmania, Australia was conducted and analysed using ethnographic framework.

Summary of Results:

The way in which students used space is indicative of their stage of professional development. The shared domain is the space which patients occupy and where the intimate nature of care takes place. There are a further three spaces within this domain that students move through. They initially occupy a hiding space. They become more confident as they engage with the culture of nursing and gradually move through the transition space to the intimate space that the patient occupies.

Take home message:

Students, who are newcomers to the culture of nursing, behave in certain ways as they are introduced to professional practice. Students who occupy the dining space in a patient's room may not be disinterested in learning, but may simply lack confidence to participate in nursing care at an intimate level.

The role of injury prevention in hospital emergency departments

Maree Fish

Paper aims:

This paper highlights the particular barriers to implementing an injury prevention initiative in a hospital emergency department, but also the need for such initiatives.

Method:

A falls prevention project for older community-dwelling people was implemented in Tasmania between 2002 and 2004. The project had a mixed method data collection using focus groups and client interviews.

Findings:

The project data identified the urgent need for discharge care coordinators in emergency departments to deal with older clients, who, while injured, are not admitted to hospital. Particular difficulties in introducing a prevention focus in the acute emergency department setting were encountered during the project. These will be examined and suggestions for an improved approach given.

Conclusions:

Injury prevention in older clients should be an important focus of emergency departments. A different approach to measuring injury is necessary, alongside comprehensive discharge processes.

Intercultural health metaphors

Authors: Quynh Le & Thao Le, University of Tasmania

Abstract:

Metaphors reveal a great deal about our perception, judgment and values. They could be considered as the significant scaffolding surrounding serious efforts at developing comprehensive descriptions, explanations and predictions of phenomena, events, and conceptualisation. Metaphors can generate insights about how things are perceived in reality. A metaphor indirectly or implicitly indicates our perception and attitudes, particularly in relation to the social values. If a hospital is perceived metaphorically as a home, this metaphor brings with it positive features held by the metaphor users such as warmth, care, security, kindness etc. On the contrary, if a hospital is perceived as a clinical factory, it reveals negative images and feelings such as cutting the flesh, indifference, fear, cold blood etc. A study based on narrative research methodology of Vietnamese migrants' perception of health concepts in an intercultural discourse was conducted. It attempted to understand the cultural meaning that Vietnamese migrants used to interpret and value health concepts and issues in terms of their Vietnamese metaphors applied to the Australian context.

Outcome:

sharing ideas and practical implementations with colleagues of different educational research backgrounds on many topics relating to educational multimedia and intercultural education.

Briefs...



Jenny Barns left the UDRH in mid-November after five years of service in a diverse range of areas. She has worked in allied health, in health services management, as events coordinator, special projects officer

and in professional development and continuing education. New staff members at the Anne O'Byrne Centre were grateful for Jenny's welcoming attentions, and those who remain will miss her contributions to morning teas and other 'team building' activities. Stakeholders in the rural health community valued her thoroughness and energy in coordinating the Rural Health Tent at Agfest. Jenny left to take up a position as 'Rural Co-Pilots' Coordinator in Scottsdale. This position is funded by Northern Tasmanian Development, formerly Business North.



Karla Peek is completing a Bachelor of Arts degree, majoring in Sociology and History, and including a 'Qualitative Research Methods' unit. Part of this study involved Karla observing a public event

and interviewing a participant as to his reactions and experiences. Karla enterprisingly chose the 2004 AFL Grand Final, telecast live into a local venue.



Helen Howarth, Pharmacy Academic, has submitted her Master of Medical Science thesis for examination. It is entitled *Pharmacist Participation in Health Promotion Activities: Facilitators and Barriers*.

Lauren Hoban is studying a Master of Education by Coursework at the University of Tasmania. Her program is mainly oriented towards adult and higher education, with additional units in online education and linguistics.



Sharon Dennis, Indigenous Health Science/Higher Education Officer has been elected as Tasmanian representative on the executive of the Congress for Aboriginal and Torres Strait Islander

Nurses (CATSIN). She is undertaking a course in Contemporary Indigenous Studies through the University of Tasmania.

Jason Fiello, UDRH Executive Officer, is currently enrolled in a Master of Education and a Graduate Certificate in University Learning and Teaching, both through the University of Tasmania.

Martin Harris is progressing well with his PhD study into 'The personal characteristics of resilience in young men during periods of transition'. His research explores the personal characteristics of resilience (particularly self-esteem and coping strategies) that are sustaining in the absence of the contextual support characteristics such as social and familial supports.

Lisa Dalton, who is undertaking PhD study that uses Critical Discourse Analysis to examine nursing, medical and pharmacy rural placements in Tasmania, was able to take advantage of her recent attendance at the British Association of Applied Linguistics (BAAL) 2004 Conference in London. She also met in Romania with Professor Norman Fairclough, a well recognised expert in the field of Critical Discourse Analysis.



Peter Orpin reports that the Research and Evaluation team is involved with a number of fascinating community-based projects. The Leading Practice Support project, a collaborative activity with the

University of Melbourne, the Upper Murray Community Health Service and the Campbell Town Health and Community Service, is looking into ways of increasing community involvement in the planning and operation of Multi-Purpose Services (MPS). It is due to end early next year.

Yvette Massey and Amanda Feely, of Management and Resources, are both undertaking a Certificate IV in Business Administration.

Tina Pinkard is reinforcing her status as 'the oracle' on matters grammatical and stylistic by doing a 'Professional Editing and Proofreading' course through the Australian College of Journalism in Sydney.

Sue Whetton, Acting Program Head, Education and Support, is the primary author of a textbook to be entitled 'Health Informatics – a Socio-Technical Perspective'. Sue reports that the manuscript has been completed and edited, and has elicited some favourable comment from reviewers, including one health informatics academic who intends to use it in his teaching. It will be published by Oxford University Press and should be available next year.



In late November UDRH's **Susan Rasmussen** (left) and **Judy Spencer** (School of Nursing and Midwifery) visited the Indigenous community of Iga Warta, five hours from Whyalla,

where they participated in a three day cultural awareness program. This included a bush walk focusing on bush tucker, a visit to a painting site, story telling around the camp fire and an explanation of the significance of ochre painting at the ochre pits. As the picture shows, both Susan and Judy had their faces painted by local indigenous people to illustrate this lesson.

Melinda Minstrell, who had been researching the prevention and management of cancer and chronic disease in the rural setting for her Cancer Council of Tasmania-supported PhD, has given birth to a daughter.

A collaboration with Diabetes Australia Tasmania, the Diabetes Kit Evaluation, is assessing information issued to clients newly diagnosed with Type II diabetes.

The 'Be OK Project' is evaluating a program run by the Northern Midlands Council designed to provide support to parents of children up to three years of age in Campbell Town district. An internally initiated MPS Board Study is looking into the composition, training and support needs of MPS community boards and committees. The team is collecting data in a pilot phase involving the three Tasmanian MPSs as a pilot phase before surveying the 88 MPSs nationally.

And Program notes...

Emily Mauldon has been looking at the experiences of people from rural and remote communities who have to travel to a major metropolitan hospital for treatment. This is part of a national study which is being coordinated through ARHEN, and is being run in seven different locations across the country. She has been interviewing hospital staff and patients in a rural community.