

BRINGING ACCESSIBLE QUALITY HEALTHCARE TO RURAL VICTORIAN COMMUNITIES





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**“RURAL AND REGIONAL
VICTORIANS DESERVE
EQUITABLE ACCESS
TO QUALITY AND
AFFORDABLE
HEALTHCARE.”**



MESSAGE FROM THE RWAV CHAIR

While all Victorians have the right to access high-quality healthcare close to home, not all can. Rural Victorians do not have the same access to healthcare services as residents in metropolitan areas, and as a result there's a significant disparity in health outcomes.

As a GP who works in regional Victoria I am constantly reminded of how important the work of RWAV is for rural and regional Victorians. The work undertaken every day is built on the belief that rural Victorians deserve equitable access to quality and affordable healthcare.

Healthcare professionals in primary healthcare continue as the lynchpin to deliver the stability and security of healthcare for any rural community. We want the best and brightest health professionals to have an enjoyable, unique and rich professional development opportunity through working in rural Victoria. For more than two decades, Rural Workforce Agency Victoria (RWAV) has worked closely with rural communities to enhance the access, quality and sustainability of the rural health workforce. RWAV has staff on the ground, regularly visiting different rural communities; co-ordinating key stakeholders and influencers and constantly working with health services and general practices to ensure the best healthcare outcomes possible.

But there is more to be done.

In the past year we are proud of the work we have undertaken raising the profile of the rural and regional health workforce with government.

We have been advocating for general practice and primary care with four high priority areas. We have been asking Members of Parliament to:

- Invest in new block funding for general practices to enhance team-based care and overcome the skills gap in rural communities
- Expand locum support programs to enable health professionals to deliver quality healthcare in rural communities
- Support RWAV's efforts to develop localised community based solutions that work for rural communities
- Enable access to existing Commonwealth Government communication channels to provide information to health professionals on the role of RWAV in supporting rural health careers.

The Rural Generalists Pathway was established by the Federal government and supported by \$62 million in funding through the Stronger Rural Health Strategy.

This training will enhance access for rural communities who need greater access to a range of health services if health outcomes are to improve.

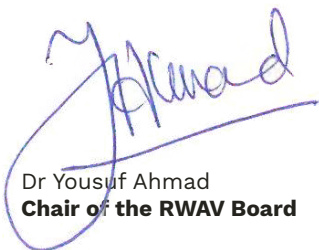


“HEALTHCARE PROFESSIONALS ARE THE LYNCHPIN TO DELIVER THE STABILITY AND SECURITY OF HEALTHCARE FOR ANY RURAL COMMUNITY.”

In Victoria RWAV is best placed to support doctors in the Rural Generalists program who will need case management and support to maximise their opportunities for success.

This year has also seen a change in leadership with the appointment of Mr Trevor Carr as our new Chief Executive Officer. Mr Carr stood out with his academic background, broad governance experience working in the rural health sector, and sound knowledge of the political and financial environment. Mr Carr brings a new dynamic to RWAV as we continue to pursue our vision to improve health for all in rural, regional and Aboriginal communities across Victoria. I'd also like to thank Megan Cahill as the outgoing CEO and Chris Scott for his work as interim CEO.

We are moving forward and enhancing our focus on customer service, and on the level of collaboration and partnerships with other important organisations such as professional colleges, PHNs, and RTOs to improve health outcomes in rural and regional Victoria. We will continue to provide services to communities in need, and support the health workforce in rural and regional Victoria.



Dr Yousuf Ahmad
Chair of the RWAV Board

2018/19 BY THE NUMBERS

99

HEALTH PROFESSIONALS RECRUITED IN 2018/19

2018/19 BY THE NUMBERS

2,267

GPS AND REGISTRARS SUPPORTED IN 2018/19

2018/19 BY THE NUMBERS

225

DOCTORS BEING CASE MANAGED IN 2018/19

2018/19 HIGHLIGHTS



RECRUITMENT

75

GP PLACEMENTS

24

ALLIED HEALTH AND
NURSING PLACEMENTS

| Modified Monash Model | Number of health professionals recruited |
|-----------------------|--|
| MMM2 | 23 |
| MMM3 | 29 |
| MMM4 | 31 |
| MMM5 | 16 |

WORKFORCE SUPPORT

516

PRIMARY HEALTHCARE
PRACTICES

225

DOCTORS BEING
CASE MANAGED

26

ABORIGINAL COMMUNITY
CONTROLLED ORGANISATIONS

2,267

GPS AND REGISTRARS
SUPPORTED

LOCUM

226

PLACEMENTS
PROVIDED

5,940

SESSIONS OF
LOCUM RELIEF



**“WE WANT THE BEST
AND BRIGHTEST HEALTH
PROFESSIONALS TO HAVE
AN ENJOYABLE, UNIQUE
AND RICH PROFESSIONAL
DEVELOPMENT OPPORTUNITY
THROUGH WORKING
IN RURAL VICTORIA.”**

EDUCATION AND TRAINING

728

**GRANTS
PROCESSED**

123

**EDUCATION
SUPPORT GRANT**

60

**HEALTH WORKFORCE
SCHOLARSHIP PROGRAM**

39

**RELOCATION
SUPPORT GRANT**

318

**RURAL ALLIED HEALTH
SUPPORT PROGRAM**

OUTREACH SERVICES

399

SERVICES SUPPORTED

4,115

NUMBER OF VISITS

49,284

**NUMBER OF
PATIENT ENCOUNTERS**

VISION:

IMPROVE HEALTH FOR ALL IN RURAL, REGIONAL AND ABORIGINAL COMMUNITIES

ACCESS

Improve access to health workforce

- Build partnerships and alliances to develop and deliver health workforce solutions
- Facilitate a community-focused approach
- Advocate on behalf of rural, regional and Aboriginal communities on government policy

SUSTAINABILITY

Provide health workforce solutions for the future

- A relevant, robust and sustainable organisation that will deliver on its mission
- Support health workforce solutions that adapt to community needs over time

QUALITY

Provide quality health workforce solutions

- Increase opportunities for health professionals to maintain and improve skills
- Provide quality services and programs for rural health professionals and other stakeholders
- Staff are supported by excellent organisational systems, processes, resources and training

INNOVATION

Application of new ideas and technology to grow and sustain the organisation

- Business model innovations to deliver value to customers and communities in entirely new ways
- An innovative approach to problem-solving
- A strategic foresight capability to recognise emerging risks and opportunities and take timely action

IMPROVING ACCESS TO THE HEALTH WORKFORCE

Rural Victorians do not have the same access to healthcare services as residents in metropolitan areas, and as a result, there's a significant disparity in health outcomes.

To address that disparity RWAV seeks to meet current and future community health workforce needs through comprehensive and evidence-based workforce planning. Workforce planning guides the development and delivery of our programs and services to improve access and continuity of access to essential primary healthcare for communities in rural and regional Victoria.

We have improved access to essential primary healthcare through partnerships to develop and deliver health workforce solutions, recruitment support to health professionals and to

practices seeking to employ health professionals, ensuring access to GP locums, and facilitating outreach services to communities.

Recruitment is more than placing a health professional in a position. It includes activities that aim to retain health professionals in rural and regional locations for longer periods of time.

RWAV appropriately matches candidates to clinics and communities and supports them throughout their journey through orientation and regular contact. Retention support extends to the health professional's family to ensure a smooth transition into their new community, various professional development opportunities and locum relief.

4,115

**NUMBER OF
OUTREACH VISITS
IN 2018/19**

FINDING A GOOD FIT FOR BOORT



After an extensive three year search for a permanent doctor, the community of Boort has welcomed Dr Christopher Olise as the principal of Boort Medical Practice.

The central Victorian town, previously identified as a District of Workforce Shortage, had been in danger of losing its only medical health service after the previous practice ceased operating the clinic in November 2018, leaving a gap in healthcare for Boort.

Following this time, RWAV helped to facilitate an agreement between the Australian Health Industry Group (AHIG) and Boort District Health (BDH) that would see it operating until mid 2019, while plans to source an independent provider continued. RWAV placed locum GPs to the practice during this period, however there was an urgent need to find a permanent solution.

Dr Christopher Olise had been in contact with the RWAV Recruitment Team, expressing an interest in returning to Victoria to take the next step in his career. Working closely with AHIG and BDH, RWAV put forth Dr Olise as a candidate to take over the practice given his previous experiences and desire to work rurally. RWAV Recruitment Program Officer Ben Trewarn who recruited Dr Olise to the role said, “we looked at a number of different opportunities that presented themselves in terms of buying opportunities or taking over.”

“Through those discussions Boort did come up very early on, but at that stage it was under different management...When the opportunity arose back in November last year we touched base again and from there it was just around the negotiation of getting Dr Chris over here to meet and have those discussions.”

Dr Olise’s understanding of the complexities of working in rural health in Western Australia and Swan Hill made him the ideal candidate for BDH. Welcoming the arrival of the new resident doctor, BDH Board Chair, Mrs Wendy Gladman, said “this is an absolutely outstanding result, given the critical shortage of general practitioners across many parts of rural

Australia, and we look forward to our local and surrounding community fully supporting Dr Olise in his new venture.”

Dr Darren Clarke, BDH Chief Executive Officer, said, “the community wants to have a permanent doctor that they develop that familiarity with and rapport. It’s extremely important for us to have Chris here because of what he brings to the town, and the fact that he’s a fellowed GP and doesn’t require any oversight or supervision. He can practice independently and also wants to take over the practice which to us is really important because it’s always been Boort’s preference that we had an independent operator for the clinic.”

Members of the Boort community welcomed the doctor and his family at Boort Medical Practice prior to his official commencement as Practice Principal. In the past, residents of the town would often need to travel to neighbouring towns such as Kerang to access healthcare when a local doctor was not available or waitlist times were too long. This was particularly a concern for the ageing population of the community, and would have negative flow-on effects for local businesses. “We’re very thrilled to be able to have the doctor here today to give us assurance that we don’t have to drive out of town to see doctors,” said a resident of Boort.

Dr Olise is excited by the transition and what the future will hold. “I look forward to working with the staff of the hospital and the practice to the best of my ability, to provide the best care to the community...and I look forward to being here for the long haul.”

“I LOOK FORWARD TO WORKING WITH THE STAFF OF THE HOSPITAL AND THE PRACTICE TO THE BEST OF MY ABILITY, TO PROVIDE THE BEST CARE TO THE COMMUNITY... AND I LOOK FORWARD TO BEING HERE FOR THE LONG HAUL.”

2018/19 BY THE NUMBERS

75

**GP PLACEMENTS
IN 2018/19**



ON THE ROAD WITH THE LOOK OUT PROJECT

The Look Out Project is an RWAV initiative and aims to deliver ophthalmology outreach services at selected Aboriginal Community Controlled Organisations (ACCOs), specifically to facilitate greater access to diabetic retinopathy treatment for Aboriginal and Torres Strait Islander communities.

In May 2019, RWAV launched the Look Out Project, an initiative that aims to deliver ophthalmology outreach services at selected Aboriginal Community Controlled Organisations (ACCOs) to facilitate greater access to diabetic retinopathy treatment for Aboriginal and Torres Strait Islander communities.

This initiative was developed following consultations with the ACCOs and referral pathway mapping undertaken with the Primary Health Networks (PHN) through the Eye HealthPathways Project. The work identified that many Aboriginal and Torres Strait Islander patients had little to no local access for ophthalmology services, often having to travel to Melbourne or larger regional centres every four to six weeks for eye procedures associated with diabetes, macular degeneration and glaucoma. These eye conditions, if untreated, can lead to vision loss or blindness in patients. The patients also consequently incur significant out of pocket expenses for procedures and travel.

To overcome the barrier of access to eye health services, the Indigenous Diabetes Eye Assessment Screening (IDEAS) Van was brought to Victoria from Queensland as part of the Look Out Project. The IDEAS Van is a fully equipped mobile ophthalmology and optometry clinic, and has been utilised to provide bulk billing screening and treatment at five ACCOs across Victoria. The services are being delivered by local ophthalmologists, orthoptists and optometrists.

A working group was established to provide support and oversight to the project. The working group consisted of the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), representatives from the five ACCOs, lead ophthalmologists, IDEAS Van Partnerships Ltd, Australian College of Optometry and The Fred Hollows Foundation.

The Look Out Project aims to raise much needed awareness about the lack of available diabetic retinopathy treatment across the state. The project has involved significant planning



and collaboration between the key stakeholders and communities in order to strengthen access at a local level whilst building sustainable pathways for the future. Since its launch, the van has serviced five Aboriginal and Torres Strait Islander communities on a rotating bi-monthly schedule at Albury Wodonga Aboriginal Health Service, Albury; Moogji Aboriginal Cooperative, Orbst; IPC Health Wyndham Vale; Winda-Mara Aboriginal Cooperative, Heywood; and Murray Valley Aboriginal Cooperative, Robinvale. The project is set to run for 12 months, ending in June 2020.

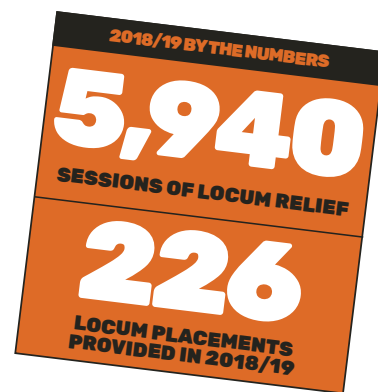
The response from the hosting ACCOs and community members have been overwhelmingly positive about the IDEAS Van as it provides local access to a dedicated eye healthcare service, in a culturally safe setting.

“THE LOOK OUT PROJECT AIMS TO RAISE MUCH NEEDED AWARENESS ABOUT THE LACK OF AVAILABLE DIABETIC RETINOPATHY TREATMENT ACROSS THE STATE.”

“As part of the visits to Windamara I’ve been lucky enough to work with the travelling Indigenous Diabetes Eye Assessment Screening (IDEAS) Van. The outreach visiting days enables patients to have access to both an optometrist and an ophthalmologist within their community, and the technology available on the IDEAS Van is first class. It is a rare opportunity that patients are able to attend an optometrist before moving directly on to an ophthalmologist where anti-VEGF injections and YAG laser can be carried out on-site, without the need for referrals or waiting times.”

James Mitchell from Penry Routson Optometry and RWAV Outreach service provider on the Visiting Optometrists Scheme (VOS)

THE LOCUM EXPERIENCE



After working in a big city setting for most of his career Dr Michael Ibragimov wanted to make the move to working in country Victoria.

Dr Ibragimov discovered RWAV's Employed Locum Program, which allowed him to undertake various short term placements across regional and rural Victoria - a suitable balance between his career aspirations and family life.

The Employed Locum Program is offered to GPs who are seeking varied work settings and experiences, while still having a sense of longer term stability. This suited Dr Ibragimov's needs when he first relocated from Tasmania to Melbourne. He works during the week and returns to Melbourne on the weekend to be with his family, while his children are in school and his wife is studying. Some of the locations he has provided locum services for include Apollo Bay, Lorne, Boort, St Arnaud, Camperdown and Leongatha.

When asked what he finds to be the most rewarding part of doing locum work in country Victoria, he says, "It's hard to tell just one thing, first it's rural and I like rural - people are different here. They're easier going, they're easier to talk to, easier to get a connection with."

Dr Ibragimov finds the nature of locum work exciting as he enjoys the variety of cases that he sees, with the bonus of experiencing country life in a new location.

"The other thing I like a lot, though probably a lot of people find it strange, is that it keeps changing. Previously I worked in the same place for a very long time requirement. And at some point you just get sort of bored."

He has enjoyed the ease of being on the Employed Locum Program, "I'm a member of a very big Facebook group of doctors in Australia and there's been a lot of people asking for advice; having trouble with a locum agency, not getting paid, or they get stuck. It's never happened that way with RWAV, I can't really imagine that happening because it's so smooth. It's more structured."

"I thought it would be a lot harder and I wouldn't know how to manage...but it turned out that it's not that bad. I can do it," said Michael when recounting what has surprised him about locum work. "I don't think you will know in advance whether it's right for you or not...It's worth trying, it's interesting."

Having just wrapped up a placement in Leongatha, Dr Ibragimov plans to continue doing locum work with RWAV for some time to come. This in turn helps RWAV to fill the gap in healthcare in communities where it is needed most.



"THE OTHER THING I LIKE A LOT, THOUGH PROBABLY A LOT OF PEOPLE FIND IT STRANGE, IS THAT IT KEEPS CHANGING."

IMPROVING WORKFORCE QUALITY

Providing quality health workforce solutions is core to RWAV's mission. This is in both parts ensuring that Victoria's rural communities have access to quality healthcare in their locality, as well as ensuring that health professionals servicing those communities have the skills they need to maintain and enhance their delivery of care.

Over the past financial year, RWAV has continued to administer a range of grants and scholarships for rural health professionals to access continuing professional development opportunities. These resources have been utilised by a diverse range of health professionals seeking to positively impact the health outcomes of their communities. In a step towards streamlining

the grant application process, this year the MyRWAV Portal was introduced. MyRWAV is an online system that has helped to strengthen the overall experience of applying for a grant through RWAV.

RWAV also continues to support non-vocationally registered GPs working in rural Victoria to gain their fellowship by providing examination support, individual learning plans, facilitating workshops, in addition to the provision of grants. This commitment to doctors in training and the rural health services they practice in has proven to be a valuable function of RWAV; allowing us to develop long lasting and trusted relationships.

728 GRANTS
PROCESSED

DIETITIAN HELPS YOUNG RURAL FAMILIES TO LIVE HEALTHIER LIVES

Georgie Barber is a Dietitian working at West Gippsland Healthcare Group. Georgie's journey in rural health began here, and it has given her the opportunity to see more complex clients and a wider range of clinical conditions.

Interested in expanding her paediatric skills, Georgie applied for an RWAV Continuing Professional Development (CPD) for Allied Health Grant to help her attend the Dietitians Association of Australia National Paediatric Training Course held in Sydney.

"I wouldn't have attended the course if the grant hadn't been available! Expanding my skills in paediatrics has been something I've wanted to do for a while. As we are a small team of dietitians at Warragul, I am now able to help with seeing our paediatric clients when other staff are unavailable," says Georgie.

It was important for Georgie to branch out into paediatrics as the Baw Baw Shire is a growing region for young families. Each year, Georgie and her team are seeing more paediatric patients, including Type 1 and Type 2 diabetes, fussy eating, eating disorders and disability. If these conditions aren't managed at an early age and early stage, the risk of chronic disease later in life is much higher.

"The sooner we can start the conversations about healthy eating, the better the outcomes for young families. We are already running programs directed at educating families with young children, and our Positive Pregnancy

Program encourages healthy eating during pregnancy. Growing the presence of dietitians and healthy eating in schools is something we have started to tackle, and we think it would be really beneficial."



"MY FAVOURITE PART IS THE FACT THAT YOU CAN HAVE CONTACT WITH PATIENTS IN THIS INTEGRATED HEALTH SERVICE AT EVERY STEP IN THEIR HOSPITAL JOURNEY, FROM ACUTE, THROUGH TO OUTPATIENTS, HOME VISITS AND AGED CARE."

2018/19 BY THE NUMBERS

318

RURAL ALLIED HEALTH
SUPPORT PROGRAM GRANTS



ORAL HEALTH THERAPIST DECREASES COMMUNITY'S WAITLIST TIME

Zeyu Li is an Oral Health Therapist working at South West Care in Warrnambool. As a recipient of RWAV's Allied Health Postgraduate Scholarship, Zeyu is undertaking a Graduate Certificate in Dental Therapy, which will allow her to treat patients of all ages.

"The distance between communities and dental services in rural and regional Victoria may be well over 100 kilometres with community members needing to take time off work that they can't afford to take, as well as travelling great distances each way," says Zeyu.

"Dental practitioners who come through to the region are often from major cities (where the dental educational institutions are located) and tend to return to metropolitan areas after a short term of employment. It is important to provide greater incentive for practitioners to stay in rural and regional Victoria as well as to strategically place practitioners in the region to improve access to dental services."

This year is Zeyu's fourth year in rural Western Victoria. She has seen many clinicians come and go, seeing first hand the devastation that is caused by growing waiting lists for dental care in the region. By studying the Graduate Certificate in Dental Therapy, this removes the age restriction imposed upon Zeyu's scope and allows her to provide treatment for all ages. As a result, she can free up appointments for the dentists by treating adult patients who need simple fillings and treatment, allowing the dentists to treat more complex cases like dentures, root canals and extractions. As a result, waiting times will decrease meaning that the community can access treatment faster.

"A SHORTAGE OF DENTAL PRACTITIONERS IMPACTS THE COMMUNITY BY INCREASING WAITLISTS FOR TREATMENT, AND AFFECTING THE NUMBER OF EMERGENCY APPOINTMENTS THAT CAN BE SET ASIDE. THIS LEADS TO PROGRESSION OF DISEASE AND MORE COMPLEX DISEASES DOWN THE TRACK."

2018/19 BY THE NUMBERS

123

EDUCATION
SUPPORT GRANTS

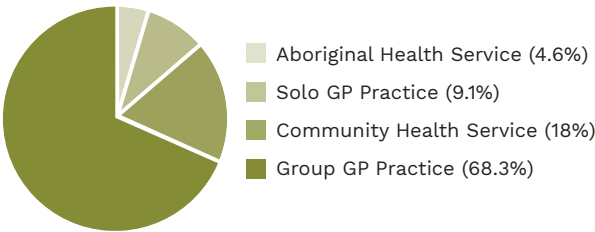
2018 RWAV GP AND PRACTICE SURVEYS

Every year RWAV takes a snapshot of the health workforce in rural and regional Victoria and asks every practice to check that their details are up to date.

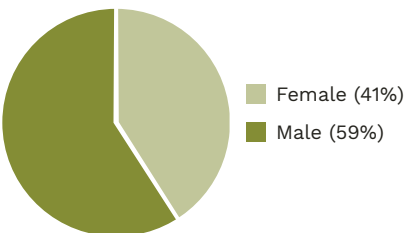
The survey helps to identify workforce issues and health and service needs across rural Victoria. The information collected assists us to identify the critical recruitment, retention, professional development and support needs of health professionals, as well as contributing to a national Minimum Data Set on the rural and regional general practice workforce in Australia.

2018 BY THE NUMBERS

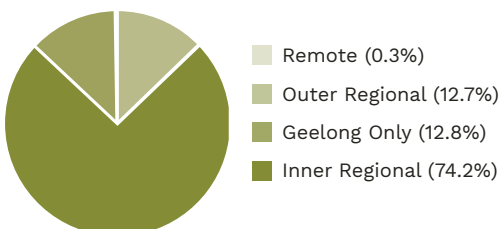
TYPE OF PRIMARY CARE PRACTICES IN REGIONAL AND REMOTE VICTORIA



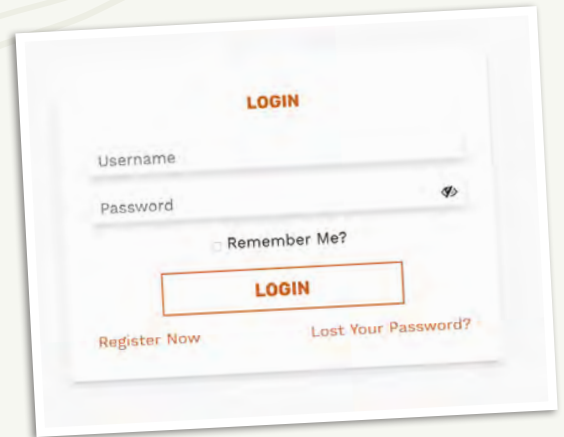
PROPORTION OF MALE AND FEMALE GPs IN REGIONAL AND REMOTE VICTORIA



GPS BY REMOTENESS AREA



RWAV LAUNCHES ONLINE GRANTS PORTAL



RWAV made an improvement in the grant application process with the launch of the MyRWAV online portal in mid 2019.

Gone are the long paper forms to fill out, there is a new way that is easier on your printer, the environment and your sanity.

Developed in response to feedback from grant applicants MyRWAV makes the process of applying for a grant much more streamlined for everyone. MyRWAV means the grant application process is entirely online. Applicants can save applications and come back later. And once submitted the portal makes sure applications are complete and have everything needed for the best chance at getting approved. The portal replaces the numerous ways we previously collected and processed this information.

MyRWAV also makes the approval and payment processes much more straightforward.

Development of MyRWAV will continue with improvements and new features planned for 2020. rwav.com.au/myrwav

BUILDING A SUSTAINABLE WORKFORCE

Building sustainable health workforce solutions is integral to the future health landscape of rural Victoria. RWAV seeks to grow and strengthen the supply of health professionals in the short and long term, meeting Victoria's rural community needs over time. This involves monitoring the stability of the health workforce environment and developing strategies for continuity of care.

RWAV's Future Workforce Program is an effort to help shape a sustainable healthcare industry by attracting secondary and tertiary students to a career in rural health. In partnership

with a number of Victorian universities and education networks, we deliver programs and services that encourage and support the pursuit of a rural health career. This also includes the provision of programs that give students rural exposure throughout their time in training.

Additionally, we support the business management skills of rural general practices to improve the viability of their future practice. This support comes in the form of education and training support, as well as facilitating workshops that improve their capabilities.

51

THREE MBS WORKSHOPS WITH 51 PARTICIPANTS

68

FOUR FELLOWSHIP EXAMINATION PREPARATION WORKSHOPS WITH 68 PARTICIPANTS



ENCOURAGING THE NEXT GENERATION OF RURAL HEALTH PROFESSIONALS

RWAV's Future Workforce Program promotes rural health careers in medicine, nursing, midwifery and allied health.

The program recognises that early interest and retention of a rural health workforce is crucial in supporting the significant health needs of rural communities in Victoria.

The activities that form the basis of the Future Workforce Program revolve around early exposure to careers in rural health, identifying clear pathways into tertiary studies, health education grants and the provision of quality rural experiences during undergraduate and postgraduate years.

Key projects for this financial year have included:

Rural Experience Day Out - a day in which RWAV funds a group of preclinical students to visit healthcare sites in regional Victoria.

Rural General Practice Experience Programs - an opportunity for medical students to shadow a GP and learn about the prospects of working rurally over two days.

Cultural Safety Workshops - RWAV arranges and funds three workshops per financial year facilitated by the Victorian Aboriginal Community Controlled Organisation (VACCHO). The workshop introduces students to culturally safe practices in Aboriginal health.

Bonded Medical Student resources -

RWAV runs workshops for bonded medical students multiple times a year to discuss the obligations in their contracts, rural training pathways and careers in Victoria, and the support they can access from RWAV.

John Flynn Placement Program (JFPP) -

JFPP is a national program for medical students to visit a rural community for a total of eight weeks across four years. The focus is on the community and the benefits of practising as a rural doctor. RWAV coordinates GP mentor and community hosts for all students who come to Victoria for their JFPP placement, as well as arranging local promotional and induction events for medical students accepted into JFPP.

68

**JFPP
PLACEMENTS
IN 2018/19**

2018/19 BY THE NUMBERS

RURAL EXPERIENCE DAY OUT



“A great day hosting medical and nursing students from RWAV at our Eaglehawk, Kangaroo Flat and Nova House sites so they could see first-hand the services we offer to care for the community and hear from our staff working in those programs. Thanks for showing interest in learning more about community health. The group visited Monash University School of Rural Health, Bendigo Primary Care Centre and Bendigo & District Aboriginal Co-Operative before heading back to Melbourne. It’s brilliant to see city-based students heading out into regional areas to look at the services and agencies working hard for their community.”

Bendigo Community Health Services

NEW RURAL VICTORIAN GP ENJOYING VARIETY OF WORK AND PATIENT APPRECIATION

Dr Ferdinand Pranadi is enjoying life as a rural GP after joining the Timboon Medical practice in 2019 as part of the Rural Locum Relief Program (RLRP).

Timboon is a 45-minute drive from Warrnambool and 20 minutes from Port Campbell. It is an area that is known for dairy farming, with the beauty of the Great Ocean Road and its world-famous beaches close by.

After coming from working in an urban location, Dr Pranadi has adapted to the rhythms of life in a rural area. "In Timboon, I work in the clinic, admit patients as required to Timboon & District Healthcare Service and provide on-call and acute care. In Cobden, I work in the clinic and visit residents in the large aged care service located within the same grounds as the clinic. Each week in both practices, I provide a range of services from cardiac, dermatology and geriatric care to mental health services."

Dr Pranadi says that one of the advantages of working in the area is the variety of cases. "I'm working with cases that I never came across in an urban area. As this is a dairy farming area, there are more chronic care patients, and so, I'm able to provide a continuity of care for them. There's also a tremendous appreciation for healthcare professionals by the patients. They are very welcoming. I've had people ask me directly if I'm going to stay in the area. It's easy to engage with the people in the rural community."

Katherine Gorringe, Practice Manager at Timboon Medical clinic, says that Dr Pranadi has been a welcome addition to the team. "Timboon is fortunate to have a very modern, well designed and equipped practice. Health professionals are often surprised at the facilities we have for such a small rural town. There are many opportunities for health professionals to network with other health professionals and visiting medical specialists."



"RWAV HAS SUPPORTED ME WITH INFORMATION AND HAS BEEN QUITE OPEN IF I NEEDED ANY HELP IN SEEKING OUT ADDITIONAL CONTINUING PROFESSIONAL DEVELOPMENT COURSES."

53

**RLRP
PLACEMENTS
IN 2018/19**

2018/19 BY THE NUMBERS

INNOVATIVE COLLABORATIONS

Collaboration is at the heart of how we work as an organisation. In order for RWAV to develop and deliver health workforce solutions to Victoria's rural, regional and Aboriginal communities, we must draw on our valued partnerships to problem solve and implement innovative solutions.

In this past year we have worked with 19 regions of Victoria to develop action plans to address their current and future community health needs. The insights gained from these collaborative workshops have helped to guide our lobbying efforts in Canberra, where we discussed the issues facing the health workforce in rural and regional Victoria over twelve meetings with Members of Parliament and advisors.

RWAV's Outreach programs supported the development of three mobile clinics, bringing culturally safe and accessible health care to communities most in need. This included the Look Out Project - a first of its kind in Victoria that saw a fully equipped mobile ophthalmology and optometry clinic visit five Aboriginal health services across the State.

We continued to celebrate the outstanding and dedicated health professionals in rural health for the 14th annual Victorian Rural Health Awards, and co-hosted the Victorian Rural Health Conference in Melbourne where more than 150 Victorian health professionals gathered to network and collaborate about enhancing community health.

399

**OUTREACH SERVICES
SUPPORTED IN 2018/19**

49,284

**NUMBER OF
PATIENT
ENCOUNTERS**

LOBBYING FOR VICTORIA'S HEALTH WORKFORCE

In 2019 RWAV sent a delegation to Canberra to talk to Members of Parliament about the issues facing the health workforce in regional Victoria.

Chris Scott (former RWAV Interim CEO), Dr Yousuf Ahmad (Chair, RWAV Board), and Lauren Cordwell (RWAV Policy Advisor) had twelve meetings in two days with Members of Parliament and advisors.

Former RWAV Interim CEO, Chris Scott, said it was an excellent opportunity to meet to discuss the challenges of recruiting and retaining a sustainable health workforce in rural Australia. "We met with Victorian Federal rural MPs who embraced our concerns for immediate and long term solutions. They understand what needs to be done to attract and retain a quality workforce to rural Victoria, and it was exciting to showcase RWAV's achievements, successes and stories."

"There is a maldistribution of doctors in the city and the country. Something needs to happen. Medicare was supposed to be about creating equitable access to healthcare in Australia for Australians; it is just not working for rural Australia."

Chair of the RWAV Board, Dr Yousuf Ahmad, said the response from MPs was encouraging. "There are over 139 GP vacancies in rural Victoria, and the GP to patient ratio across rural Victoria remains too high. There was a real appetite from the members of parliament to fix the issues."

RWAV discussed options including investing in specific block funding for rural general practices to deliver team-based care, expanding locum support programs to include nursing and allied health to enable health professionals to provide quality healthcare in rural communities, and closing legislative loopholes for after-hours and medical deputising services.

RWAV is continuing discussions with Victorian Members of Parliament and welcomes the opportunity to collaborate further. Together, government and Rural Workforce Agency Victoria have a critical role to play in promoting healthcare in Victoria's rural communities, ensuring a highly-skilled and passionate workforce today and for the future.



The RWAV team with Member for Indi, Dr Helen Haines MP.

"MEDICARE WAS SUPPOSED TO BE ABOUT CREATING EQUITABLE ACCESS TO HEALTHCARE IN AUSTRALIA FOR AUSTRALIANS; IT IS JUST NOT WORKING FOR RURAL AUSTRALIA."

FEDERAL MEMBERS OF PARLIAMENT MET WITH:

- Chris Bowan
- Russell Broadbent
- Darren Chester
- Lisa Chesters
- Libby Coker
- Dr Helen Haines
- Catherine King
- Dan Tehan
- Dr Anne Webster

BRINGING HEALTHCARE TO COMMUNITIES MOST IN NEED

This year saw RWAV Outreach programs support the development of three mobile clinics in Victoria.

Mobile clinic from Halls Gap's Budja Budja Medical clinic:

The van is called Tulku wan Wininn, which is from the local Djab Wurrung language and means "health to you".

The van looks after an area that spreads over 10,000 square kilometres, encompassing Stawell, Ararat, St Arnaud, Gariwerd, Dunkeld, Mortlake, the western part of Beaufort and towns in between. The area has a growing Aboriginal and Torres Strait Islander population and the launch of the service followed an eighteen-month investigation into the health needs and priorities of the community.

The IDEAS Van: The Indigenous Diabetes Eyes Assessment Screening (IDEAS) van is a mobile eye clinic to screen, treat and help prevent blindness due to diabetes in Aboriginal and Torres Strait Islander communities. Work identified that many Aboriginal patients have to travel to Melbourne or other larger regional centres every four to six weeks for eye procedures associated with diabetes, macular degeneration and glaucoma. These eye conditions, if untreated, can lead to vision loss or blindness in patients.

Albury Wodonga Aboriginal Health Service's GP mobile clinic: The Albury Wodonga Aboriginal Health Service's GP mobile clinic outreaches to Wangaratta and Benalla with a GP and Aboriginal Nurse. Services provided out of the outreach bus include ECGs, full chronic disease management treatment and management plans and, writing prescriptions in a culturally sensitive and safe environment.

"IT IS GREAT TO SEE HOW DIFFERENT HEALTHCARE MODELS ARE WORKING ACROSS THE STATE, TAKING VITAL SERVICES TO ABORIGINAL AND TORRES STRAIT ISLANDER COMMUNITIES MOST IN NEED."



CULTURAL SAFETY TRAINING



At RWAV, we want to ensure that outreach services accessed by Aboriginal and Torres Strait Islander clients are culturally safe and sensitive to their needs. Cultural training is a condition for outreach service providers to work within the programs.

In 2018/19 RWAV collaborated with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) to facilitate nine Cultural Safety Workshops across rural Victoria.

Workshops were free to attend with experienced Aboriginal and Torres Strait Islander facilitators delivering each workshop. The sessions focused on developing awareness of Aboriginal culture, identity and protocols to aid in creating cultural safety in practice.

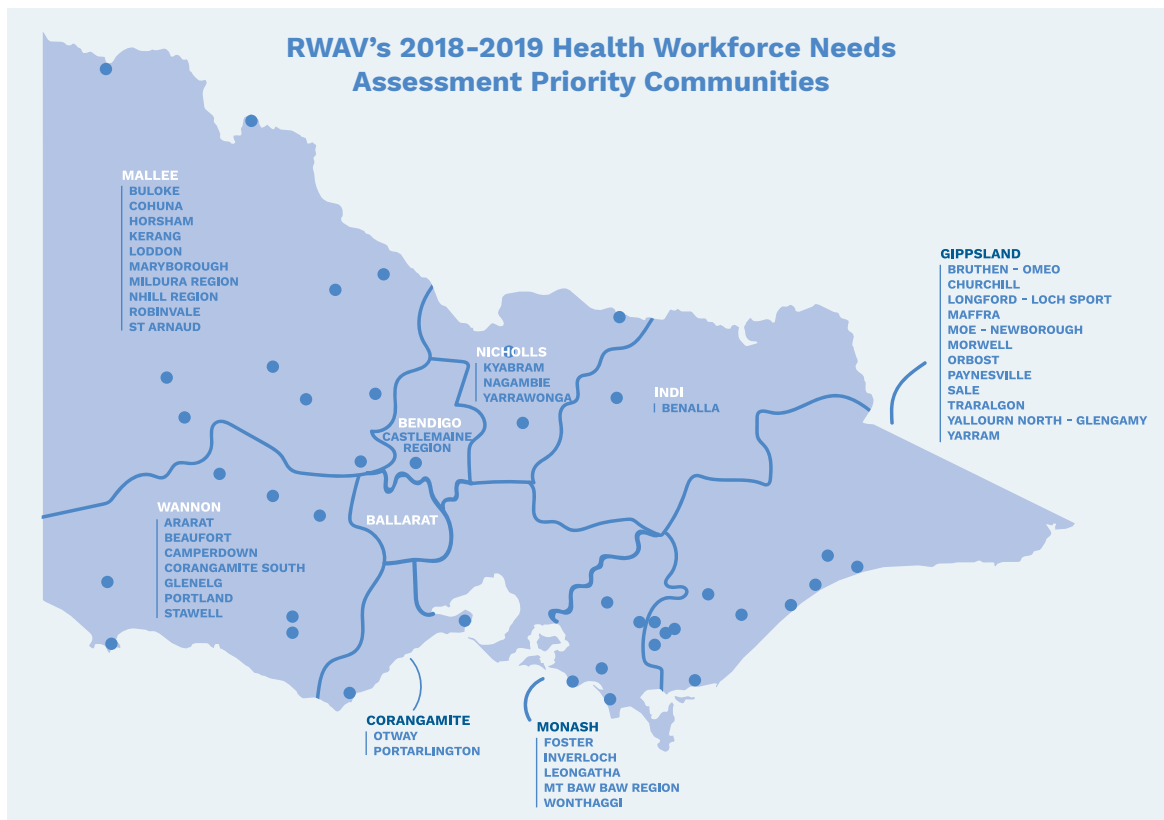
2018/19 BY THE NUMBERS

160

NINE CULTURAL SAFETY WORKSHOPS WITH 160 PARTICIPANTS

PRIORITY COMMUNITIES AND RWAV: WORKING TOGETHER

RWAV's 2018-2019 Health Workforce Needs Assessment (HWNA) identified a number of priority communities across Victoria based on general practitioner demographics and number of practices within the community, as well as health needs, vulnerable populations, and potentially preventable hospitalisations.



RWAV is committed to facilitating a community-focused approach to health workforce solutions. Our recently developed community consultation framework is focused on ensuring community needs are heard and addressed in each identified priority community.

In December 2018, RWAV facilitated the first of a series of workshops where representatives from local organisations collectively developed an action plan outlining health workforce strategies that address community needs. A total of eight health workforce solutions workshops ran between December 2018 to June 2019 and the strategies identified were focused on:

Access - improving access and continuity of access to essential primary healthcare

Quality - building health workforce capability by upskilling the current workforce

Sustainability - growing the sustainability and supply of the health workforce

In addition to local community health stakeholders, representatives from the Department of Health and Human Services, local MPs, the Primary Health Networks, Registered Training Organisations, not-for-profit organisations, and universities and secondary colleges attended the workshops.

From these discussions RWAV gained an understanding of the existing initiatives and challenges relevant to the priority communities across the State. The information collected was insightful, and will help RWAV to work collaboratively with the local stakeholders to resolve current needs, and plan for future needs.

VICTORIAN RURAL HEALTH CONFERENCE AND AWARDS

This year the Victorian Rural Health Conference took place from 26 - 28 April in St Kilda, Melbourne.

More than 150 Victorian rural health professionals gathered in Melbourne to network and collaborate about how to enhance community health.

At this year's conference co-hosted by RWAV and Rural Doctors Association Victoria, attendees had the opportunity to partake in sessions on pain management, LGBTQI health and addiction in rural communities, doctors' mental health, paediatric behavioural and development issues, Aboriginal health and palliative care. Plus there were many other engaging sessions from keynote speakers such as Dr Norman Swan, Dr Ewan McPhee, ACRRM President and Carol Matthews, Victoria's Australian Local Hero 2019.

Held in conjunction with the Victorian Rural Health Conference was the 14th annual Victorian Rural Health Awards. Every year nominations are put forward by members of the public, community organisations and local healthcare providers and are assessed by an independent panel of judges. In 2019, 34 rural health professionals were recognised for their outstanding commitment and dedication to rural health in Victoria. The awards celebrated GPs, allied health workers, nurses, practice managers, Aboriginal health workers and students.

"We celebrate GPs, rural GP locums and medical specialists, who not only go beyond their call of duty but also support each other and mentor the next generation of health professionals," said Dr Yousuf Ahmad, Chair of RWAV.

"We value allied health workers, nurses, practice managers, and Aboriginal health workers who provide invaluable support and expertise to build strong healthcare teams. Each of these health professional's collective efforts deliver a high quality and sustainable healthcare system for rural Victoria."



"WE CELEBRATE GPs, RURAL GP LOCUMS AND MEDICAL SPECIALISTS, WHO NOT ONLY GO BEYOND THEIR CALL OF DUTY BUT ALSO SUPPORT EACH OTHER AND MENTOR THE NEXT GENERATION OF HEALTH PROFESSIONALS."

2018/19 BY THE NUMBERS

34

VICTORIAN RURAL HEALTH AWARD WINNERS

FINANCIAL STATEMENTS

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2019

| | 2019 \$ | 2018 \$ |
|--|---------------------|--------------|
| Revenue from continuing operations | 17,025,874 | 15,589,878 |
| Projects and grants expense | (12,898,751) | (11,281,605) |
| Employee benefits expense | (3,406,617) | (3,016,600) |
| Depreciation and amortisation expense | (395,778) | (362,243) |
| Other expenses | (1,311,433) | (1,174,630) |
| Prior year funding to be returned | (735,641) | - |
| Finance costs | (67,678) | (77,937) |
| (Deficit) for the year | (1,790,024) | (323,137) |
| Other comprehensive income | | |
| <i>Items that will not be reclassified to profit or loss</i> | | |
| Changes in the fair value of equity investments at fair value through other comprehensive income | 28,907 | - |
| Other comprehensive income for the year | 28,907 | - |
| Total comprehensive (loss) for the year | (1,761,117) | (323,137) |

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2019

| | 2019 \$ | 2018 \$ |
|---|------------------|-------------------|
| ASSETS | | |
| Current assets | | |
| Cash and cash equivalents | 6,296,122 | 9,723,756 |
| Trade and other receivables | 126,819 | 43,384 |
| Total current assets | 6,422,941 | 9,767,140 |
| Non-current assets | | |
| Receivables | 169,421 | 165,612 |
| Property, plant and equipment | 823,714 | 1,172,051 |
| Financial assets at fair value through other comprehensive income | 272,160 | - |
| Financial assets at fair value through profit or loss | 1,909,932 | - |
| Total non-current assets | 3,175,227 | 1,337,663 |
| Total assets | 9,598,168 | 11,104,803 |
| LIABILITIES | | |
| Current liabilities | | |
| Trade and other payables | 2,598,006 | 2,215,653 |
| Provisions | 644,941 | 334,243 |
| Contract liabilities | 1,392,859 | 1,573,228 |
| Other current liabilities | 316,736 | 360,978 |
| Total current liabilities | 4,952,542 | 4,484,102 |
| Non-current liabilities | | |
| Provisions | 41,018 | 38,687 |
| Other non-current liabilities | 601,445 | 817,734 |
| Total non-current liabilities | 642,463 | 856,421 |
| Total liabilities | 5,595,005 | 5,340,523 |
| Net assets | 4,003,163 | 5,764,280 |
| EQUITY | | |
| Other reserves | 28,907 | - |
| Retained earnings | 3,974,256 | 5,764,280 |
| Total equity | 4,003,163 | 5,764,280 |

RWAV BOARD

**DR YOUSUF
H. AHMAD**
CHAIR

**ANTHONY
GRAHAM**
DIRECTOR

**DANIELLE
WALKER**
DIRECTOR

**ASSOCIATE
PROFESSOR
MORTON RAWLIN**
DIRECTOR

**JANE
POLETTI**
DIRECTOR

**RIWKA
HAGEN**
DIRECTOR

**DR SUZANNE
GEORGE**
DIRECTOR

**DR ALISON
GREEN**
DIRECTOR

**CHRISTOPHER
SCOTT**
DIRECTOR
(CEASED 23/04/19)

**JAQUELINE
WILSON**
DIRECTOR
(CEASED 01/03/19)

RWAV ACKNOWLEDGES OUR FUNDING PARTNERS





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