



The Royal New Zealand
College of General Practitioners
Te Whare Tohu Rata o Aotearoa

Media release

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New National School of Rural Health proposed to address chronic shortage of rural health professionals

The creation of a new national School of Rural Health (SRH) is being investigated by New Zealand's two medical schools at the University of Otago and the University of Auckland, in association with the Royal New Zealand College of General Practitioners (RNZCGP) and the New Zealand Rural General Practice Network (NZRGPN) in a joint initiative which has the potential to begin to address the country's chronic shortage of rural health professionals.

Professor Peter Crampton, Pro-Vice-Chancellor of Health Sciences and Dean of the Otago Medical School at the University of Otago, Professor Warwick Bagg, Head of the Medical Programme at the University of Auckland and Dr Tim Malloy, President of RNZCGP announced the initiative today.

Professors Crampton and Bagg said that there are sufficient medical students being trained in New Zealand. However, the shared challenge is to get more graduates aspiring to work in rural communities to meet rural health needs and address inequity.

The primary function of the SRH would be to enable a vibrant and sustainable rural component for all health professional students by building a dispersed inter-professional faculty with its own leadership, based at up to 20 sites located in rural communities across New Zealand.

"Vibrant rural communities provide a rich learning environment for educating our health professionals and working in those communities during training will attract new graduates and returning health professionals to the rural sector," said Professor Crampton.

The vision is for rural communities, including iwi, to be at the centre of rural health professional education and research.

"We intend to work closely with these communities as they play a leading role in creating their future health workforce. We intend to work with them to solve their health service issues through a School of Rural Health," said Professor Bagg.

In developing the concept the medical schools have been working closely with the Royal New Zealand College of General Practitioners and the New Zealand Rural General Practice Network. All parties are deeply committed to creating a sustainable rural health workforce in New Zealand.

“To have a sustainable rural workforce we need to increase the number of New Zealand medical graduates choosing general practice from 30% to 50%. It is very important to consider this proposal as we have the potential to drive necessary change,” said Dr Tim Malloy, President of RNZCGP.

“Like most developed countries, New Zealand has been facing chronic shortages of rural doctors and other rural medical health professionals for some time.

“There needs to be system changes, including training in new ways, as is being proposed, to ensure rural communities have equitable access to health services,” Dr Malloy said.

NZRGPN, CEO Dalton Kelly said his organisation was interested in any change to how medical, nursing, and allied health students are trained rurally.

“There is overwhelming evidence that giving trainees exposure to good-quality rural medicine during their training means it is much more likely they will choose to work rurally once they graduate,” he said.

The concept being considered would:

- Include up to 20 inter-professional rural sites networked into the SRH.
- Have sites co-developed and co-governed by iwi and local communities.
- Ensure inclusiveness for all institutions educating health professionals and equity amongst student health professionals.
- Enable investment in rural communities: administrative, hauora Māori, inter-professional education (IPE), Information technology (IT), student accommodation and research positions at these sites.
- Allow for improved vertical integration of undergraduate, early post-graduate medical and vocational general practice and rural hospital medicine (*vertical* integration).
- Provide inter-professional education for all health professionals (*horizontal* integration).
- Provide longitudinal integrated clerkships (LICs) - rural immersion of up to one year for a cohort of medical students, and possibly other students.
- Provide clinically based rural learning through IPE for as many health professional students as possible in rotational arrangements.
- Ensure excellence in the rural component of all health professional education.
- Enable academic and research development in the rural context.
- Be clinician led and community supported and driven.

“The strength of this proposal is that it is inter-disciplinary, multi-located, rurally-focussed and sustainable, which taken together provide a pathway for rural academic development that will benefit the health outcomes of rural communities,” said Professor Crampton.

Professor Bagg said targeted initiatives by Otago and Auckland universities, such as the Rural Immersion Programme and Pūkawakawa in Northland, respectively, show that focussed investment can achieve positive results for rural and regional communities. This initiative would extend the coverage and results significantly.

The learning would be delivered at marginal extra cost given the existing administrative, academic and curriculum infrastructure of the two universities and RNZCGP with the support of NZRGPN.

ENDS

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