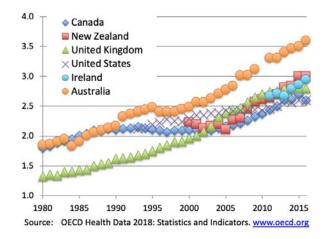
Making Rural Health Matter



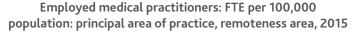


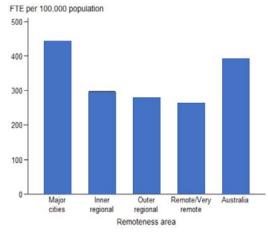
Australia is not short of doctors

Practising physicians, density per 1000 population for selected countries

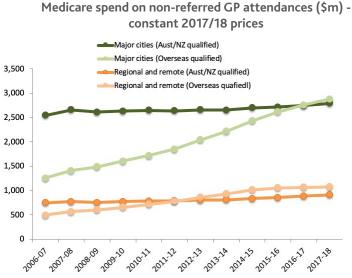


The real issue is rural distribution





The stop-gap measure of recruiting overseas trained doctors as GPs in rural areas is resulting in them flowing into the city once they complete their required time.



James Cook University | Making Rural Health Matter

Innovative education that also invests in communities

JCU provides truly unique educational experiences from the point of entry into medical school through to specialist General Practice Fellowship, under the University's innovative GP training program. JCU is the only university in Australia that provides postgraduate GP training.

The journey begins with a clear vision and training pathway for high school graduates who are interested in pursuing medical careers as generalists with a broad scope of clinical practice.

The JCU medical program attracts students who care about living in and serving communities. In addition, the program appeals to high school students living in regional and rural Australia, where many communities struggle to grow and sustain a permanent medical workforce.

Upon graduation, students are encouraged to stay and further their specialty training in the north. JCU has partnered with northern Queensland Hospital and Health Services and other health care providers to map specialty training pathways for junior doctors. The initiative is known as NQ Regional Training Hubs and helps to bolster the specialist workforce for the communities its services. Tied into this initiative is General Practice as a specialty, of which JCU is the training provider.

The JCU GP training program adds on the success of the medical school. The program has forged links between undergraduate and postgraduate training, allowing students to graduate as doctors and then embark upon specialist GP training throughout regional Queensland.

The program's unique model of training enables GP registrars to live, learn and work alongside inspirational educators, supervisors and mentors in diverse rural, remote and regional locations.

Committed to closing the gap, the program has established training posts in numerous Aboriginal and Torres Strait Islander health services across the state, where cultural educators and mentors provide additional learning support.

Unique medical experience

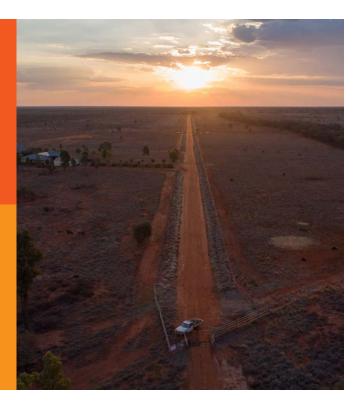
of registrars enrolled in the JCU GP training program are ICU medical graduates

of GP training applicants in 2017-18 came from regional, rural and remote communities



68%

of applicants successfully placed in the program in 2019 came from regional, rural and remote locations



The JCU Experience

THE JCU EXPERIENCE STARTS IN YEAR 1 OF THE BACHELOR OF MEDICINE, BACHELOR OF SURGERY



"I chose JCU because there is a lot of emphasis on the rural community and I want to be a doctor that doesn't just treat the patient but brings education and teaches them about the diseases and how to overcome them."

ANDREAS ASTIER JCU Medicine student

PLACEMENT OPPORTUNITIES DURING MEDICAL SCHOOL

The degree includes multiple rural placement experiences, across the six years. Placements allow students to obtain all of their training from start to finish, outside major metropolitan areas. These opportunities foster an aptitude and passion for a career in rural and remote health.



"The rural placements are one of the best things about JCU. When you're out there and you're on a team of maybe three or four other people, you get to do so much more then you ever would in one of the big hospitals."

DR KAVESHAN PATHER JCU Medicine Graduate

SUPPORTING INTERNSHIP

On completion of the degree, JCU graduates enter the hospital system to work as interns.



"We are trying to grow our own highly skilled doctors who want to be here and have all the competencies and capabilities they require to help sustain a rural medical workforce. From medical school, JCU seems to target students with an interest in working regionally and rurally... We are pretty excited by the synergy this has created between JCU and our health service."

DR ANNETTE TURLEY CQHHS Director of Clinical Training



SUPPORTING SPECIALIST TRAINING

CU works in partnership with nospital and health services via NQ Regional Training Hubs to support unior doctors choosing a pathway that allows them to train in regional Queensland. Doctors apply to their desired College and stay in the north for all or the majority of their training.



"There's a very large perception that you have to do your specialist training in a major city, and it does depend on the college, but for most you can start or complete some, if not most, of your training in a regional centre."

DR ALISHA THOMSON JCU Medicine Graduate Psychology Registrar, TTH

SPECIALIST GP TRAINING

Junior doctors who have chosen to specialise in General Practice join the JCU GP training program, which enables them to train in diverse regional, rural and remote locations across North Western Queensland fully supported by regional training teams - until they achieve Fellowship



"On any given shift, we manage a variety of primary care, chronic disease, emergency presentations and everything in between. You never know what is going to walk through the door. You have to be confident in your clinical and consultation skills and work together with your team."

DR EBONNEY VAN DER MEER JCU Medicine Graduate & GP Fellow



JOIN MEDICAL EDUCATOR TEAM

"Growing up and going through medical school and registrar training, I had a lot of respect for some wonderful medical educators that taught me over the years. I always remember thinking I would really love to do what they do and inspire people the way they inspired me."

DR CIARA ROSS JCU Medicine Graduate & Medical Educator "Australia doesn't have a shortage of doctors, but it does have a maldistribution of where they are located. I think JCU's vision to take kids from the country, train them in the country, and then get them back to the country as soon as they can after they graduate, is the is the best way to tackle that workforce maldistribution."

Dr Tom Currie JCU Medicine Graduate, Mt Isa intern

JCU plants the seed for a career in rural health

The JCU medical experience is fast-tracking Tom Currie's ability to achieve his ambition to work as a Rural Generalist in a country town.

I chose to study medicine at JCU, because it has the best reputation for producing work-ready graduates, and it has a strong focus on rural and remote health, which is the primary reason why I wanted to study medicine. I come from a small country town in New South Wales and wanted a career that would enable me to live and work in the country.

In addition, JCU has an undergraduate program. As a high school student, I had a very firm idea in my mind of what I wanted to do with my life. I applied to JCU, because I wanted to go to medical school straight out of high school.

I really didn't see the value in studying an undergraduate degree that was unrelated to what I wanted to do and then apply to medicine as a postgraduate student, which is what many of the larger universities are shifting to these days.

What also sets JCU apart from a lot of other medical schools is that it has multiple rural placement experiences spread across the six years. It enables you to obtain all of your training, from start to finish, outside major metropolitan areas.

During my six-year course (2012-2017), I had a series of fantastic placements across outback Queensland, Far North Queensland, the Northern Territory, New South Wales and Victoria. This puts you in the best position to do your internship in a regional or rural centre.

I'm currently working as an intern in Mt Isa. I first came here for a four-week placement as a second-year medical student, had a fantastic experience and opted to go back in fifth year for a 12-week placement. That pretty much sealed the deal for me to want to be an intern here.

At that time, Mount Isa was hosting its first-ever batch of five interns and they were having such a great time. They were getting a lot of hands-on experience, working in small teams, closely with their consultants. Because everyone knows one another, the hospital in Mount Isa has a fantastic culture.

I am now on the path to become a Rural Generalist through the QRGP (Queensland Rural Generalist Pathway).

The JCU undergraduate course puts you in the best position to apply for the pathway – a continuation of your rural and remote health journey. You apply as a final year medical student. They take you on board as an intern and support you all the way through to fellowship, with either ACRRM (Australian College of Rural and Remote Medicine) or RACGP (Royal Australian College of General Practitioners). At the moment, I am doing 10 weeks of Obstetrics & Gynaecology. There are between 5 and 10-week terms on core rotations in Medicine, Surgery, Paediatrics, Obstetrics & Gynaecology, and Emergency. That gives us a broad foundation on which to develop our skills for rural practice.

What sets a Rural Generalist apart from your run-of-the-mill GP is that you're required to undertake a minimum one year of Advanced Skill Training. I want to do Obstetrics and Gynaecology. I've been interested in it ever since I did my rotation in medical school, and it fits well with the rural and remote setting. Mothers shouldn't have to leave home to give birth to their babies.

If you look at it from the bigger picture, I believe there's an increased sense of connection with your home town if you can say that you were born there. The long-term benefit this has on the sustainability of smaller communities is often overlooked, as birthing facilities are centralised across Australia.

In post-graduate year five, I like the idea of moving to Longreach. I went there as a student and I think it hosts some of the best rural doctors I've come across. By that stage I will be a GP registrar and I want to learn from the best. It's isolated, but well-resourced and a focal point for Rural Generalism in Australia.

But I believe the real value in placement is getting involved in the community.

It's important to have a good clinical experience, but research shows that this aspect of your placement has little impact on whether or not you will return there to work. What does carry a lot of weight is the social experience and I would encourage anyone living in rural areas to embrace visiting health students and show them a good time. That's what will bring them back, much more so than a day spent studying.

I don't know exactly where I'll be in 10 years' time, but definitely within a small country town somewhere. It could be in Longreach. It could be in Mount Isa. I really love the idea of working some day in the Kimberleys, in northern WA, or on the west coast of Tasmania, or maybe back home in New South Wales, in the country town where I grew up.

Australia doesn't have a shortage of doctors, but it does have a maldistribution of where they are located. I think JCU's vision to take kids from the country, train them in the country, and then get them back to the country as soon as they can after they graduate, is the is the best way to tackle that workforce maldistribution.

I would recommend the JCU experience hands down. If you want to be a rural doctor, the university definitely puts you in the best position to take full advantage of all the training opportunities that you could possibly obtain to get there.

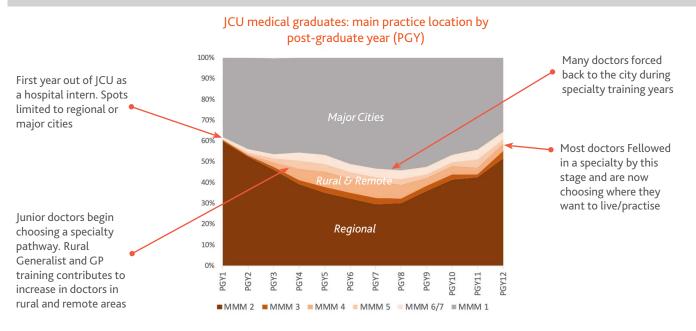
How is JCU filling workforce needs?

Attract value aligned students and give them a positive rural experience during their medical degree

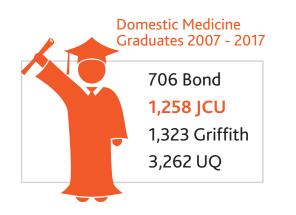
Percentage of new students enrolled who are from **rural and remote** communities



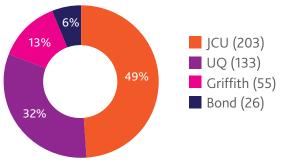
2 Graduates are more likely to stay in or return to regional, rural and remote communities



JCU graduates make up the largest proportion of doctors on the Queensland Rural Generalist Pathway

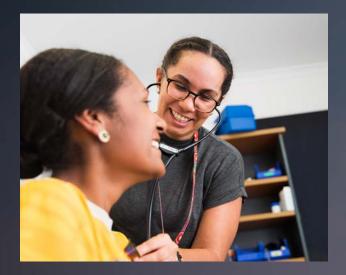


Queensland Rural Generalist Trainees and Fellows by University (in QLD) - 2019 Snapshot Data



James Cook University | Making Rural Health Matter

JCU is the only university in Australia offering unique end-to-end training from undergraduate to postgraduate, which sees doctors train in regional, rural and remote Queensland



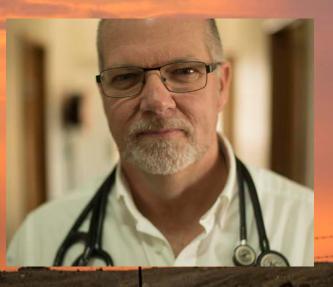
"I loved the fact that right from second year you went out into rural towns and learnt from doctors in those areas. They're very inspiring people. Their level of enthusiasm and knowledge is amazing. It takes a lot to be a doctor in a rural town, so it was really inspiring for students coming through to learn in those settings."

Dr Jacinta Power JCU Medicine Graduate and GP Registrar Townsville

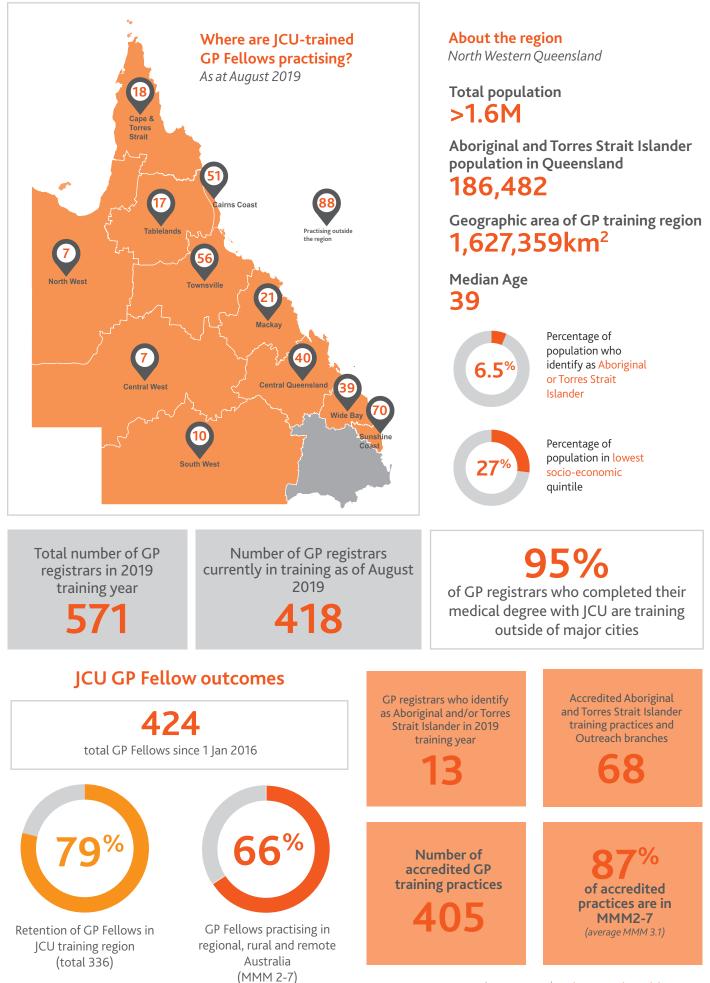
The proportion of registrars training in rural and remote regions continues to increase since the beginning of the program (2016). In 2019, there is a 100% retention rate of registrars in south-western Queensland

"There is no way I would have been given the opportunity to take on the role of Director of Medical Services, five years out from medical school, in the city. This is a clear demonstration of the opportunities available in rural areas. We love Roma so much that we have recently purchased our own small property on the edge of town and are planning to stay for the foreseeable future."

Dr Alan Richardson JCU GP Fellow Director of Medical Services for the Roma Health Precinct

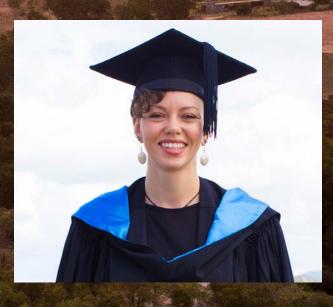


GP training program snapshot 2019



James Cook University | Making Rural Health Matter

JCU is Australia's most successful university in producing health professionals who go on to rural and regional careers



"My most cherished placement experience is the time I've spent in Cooktown, Far North Queensland, which serves the Hopevale and Wujal Wujal Aboriginal communities. I met the most incredible health professionals there, people who have sparked my interest in different aspects of health care, and mentors who continue to influence the direction of my career."

Dr Samara McNeil JCU Medicine Graduate

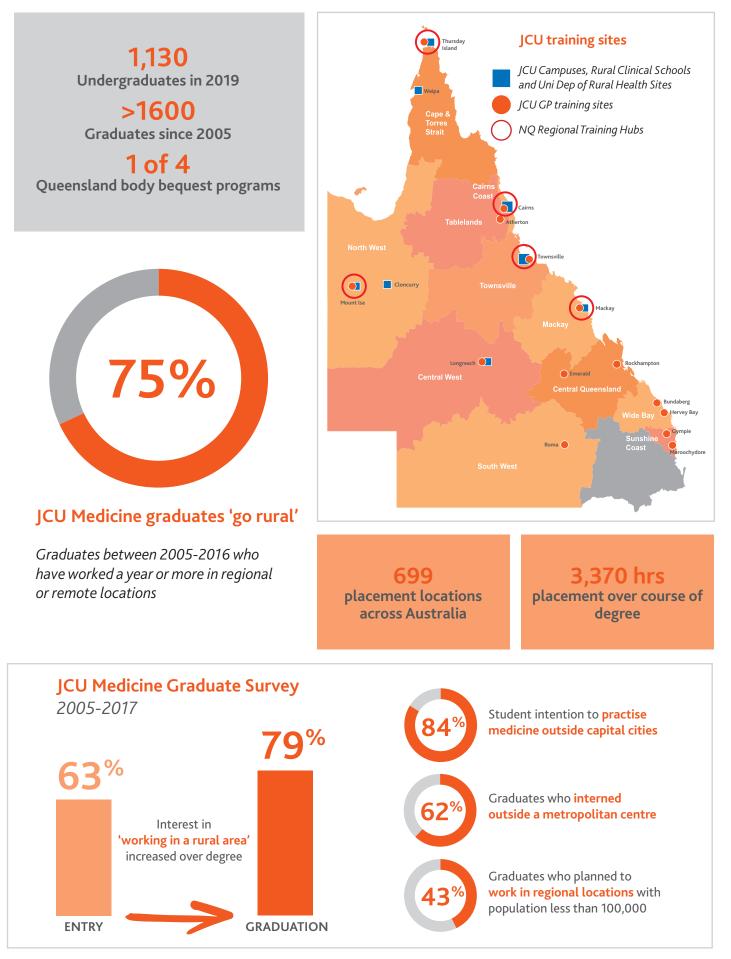
JCU: There's no substitute for experience

"Right from the start at JCU, you get a lot of clinical experience and at the end of first year you're going away on rural placements, so you're involved in seeing patients early on, which for me makes medicine more enjoyable."

> Dr Philip Gaudin JCU Medicine Graduate, Townsville



JCU Medicine snapshot



James Cook University | Making Rural Health Matter

"There are paediatricians here who were around when I was a first year basic trainee. They've really helped me through my career to the point where I am now a colleague, a peer and a Medical Director. They've been amazing supports for me, and continue to be."

Dr Jason Yates

Paediatric Endocrinologist & Medical Director, The Townsville Hospital JCU Medicine Graduate

Jason Yates - a born and bred north Queensland Paediatrician

For Townsville Hospital paediatrician Jason Yates, it was the relationships he was able to develop with his patients that confirmed his love of the specialty.

"We had a girl with us as an inpatient for about 18 months. The relationship we formed with her, with her family, and together as a team was special.

"We'd come in and see her on our days off, and at Christmas. You just don't see that in other specialties or other places. There were lots of rewarding moments, and it's those moments where you realise the hard work is worth it."

North Queensland born and bred, Dr Yates was among the first doctors to graduate from James Cook University's medical school in Townsville. He went on to complete his internship at The Townsville Hospital and took on the hospital's first basic training position as a paediatric registrar.

After a stint in Brisbane Dr Yates returned to the north, where he's now a consultant and Medical Director. He credits the mentorship at The Townsville Hospital for his career development.

"I've had great mentors all the way along. Paediatric people tend to be very generous with their time and it's a very family orientated way of doing medicine. So you come to work but you also socialize outside of work, you always feel part of something."

And it's those relationships and networks that continue to support him today.

"There are paediatricians here who were around when I was a first year basic trainee. They've really helped me through my career to the point where I am now a colleague, a peer and a Medical Director. They've been amazing supports for me, and continue to be.

"The relationships within the Department are fantastic. We all get on and are all on the same path. It means the vision to make this a (paediatric) tertiary centre for north QLD is more likely to happen."

And Dr Yates can't speak highly enough of the benefits of training in northern Queensland.

"You've got more access to consultants. I generally have one or two trainees, so they can come and see me anytime. It's much easier than if you have 15 trainees under you. I feel like I actually get to know them as people.

"When I went through there were only two of us so we did all the cannulas, we did the long lines in the NICU. We saw all these kids in clinics, we had really good exposure and were very good with procedures.

"You develop amazing skills. When you go to the children's hospitals you do very well, because you've worked on your own without a consultant sitting over your shoulder.

"Children's hospitals tend to love trainees who come from regional centres because they are much more experienced in the day-to-day workings of how to manage children."

Dr Yates believes continuity of care is another great benefit of training and working in the regions.

"You'll see a family for the first time and you will put a plan in place. Then you will see them again. There are lots of positive stories that come out of that. You become a lot closer to the families and the patients, and you are more likely to develop that connection."

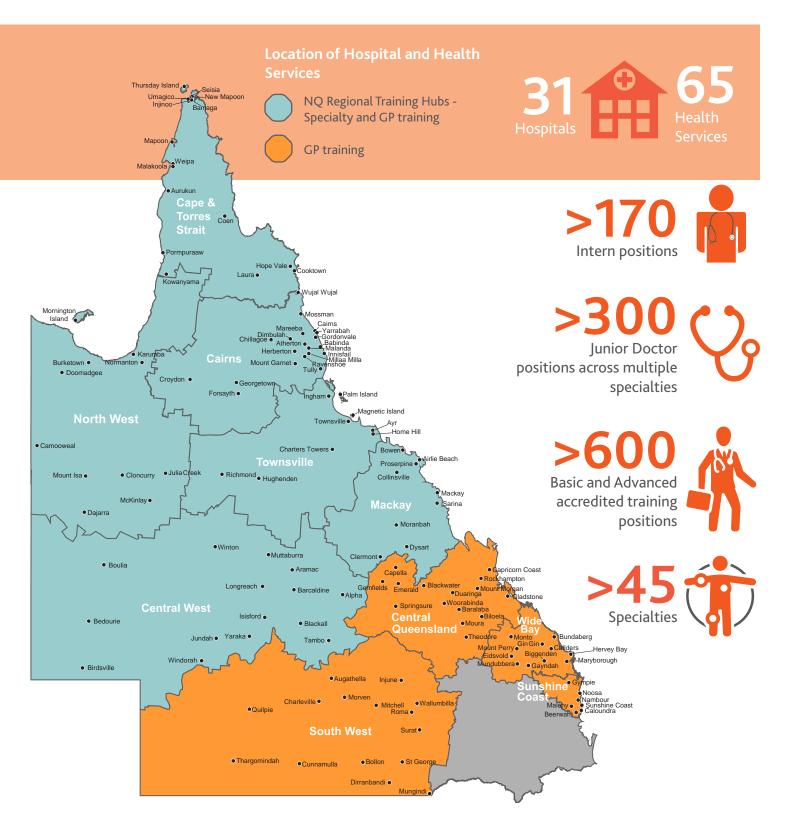
And as for living in a regional centre, Dr Yates said the northern Queensland lifestyle is a definite a selling point.

"The region has a lot of to offer in regards to relaxation and downtime. The community is very laid back, welcoming and family oriented.

"We'll often have BBQs together, and there are about five Christmas parties because everyone is very inclusive and we all want to have fun."

Northern Queensland Regional Training Hubs

What does northern Queensland have to offer?



"The last two years finishing my training in the Burdekin at Ayr Hospital and working in the community of GPs has been brilliant. I've had broad experience both procedurally as well as in general and emergency medicine, and ward based work."

Dr Michael McLaughlin JCU GP Registrar, Ayr

Rural GP Training in the Burdekin

Burdekin based doctor Michael McLaughlin was a medical student at James Cook University when he discovered a love of working in rural and remote communities.

Growing up in central Queensland he'd always been attached to the regions, but it was his rural placements in Cooktown, Innisfail and on Thursday Island that cemented his plan to specialise as a rural generalist.

"These experiences were all really positive and made me commit to the rural generalist pathway. They really made me want to pursue a career in rural medicine."

During his intern and residency years at the Cairns Hospital, Dr McLaughlin also discovered a love of general surgery, which he was able to incorporate as an advanced skill in his specialist training.

"When I was in medical school and a junior doctor I really enjoyed procedural medicine, but I also found big city hospitals weren't the most supportive, they could be a bit overwhelming.

"I found working in the smaller hospitals friendlier and they gave me broader experiences."

Having now finished his training as a rural GP, he has nothing but praise for pathway he chose and JCU's GP Training Program.

"The last two years finishing my training in the Burdekin at Ayr Hospital and working in the community of GPs has been brilliant. I've had broad experience both procedurally as well as in general and emergency medicine, and ward based work."

"JCU has embedded its culture and mission to develop rural medicine and rural health services, and produces a lot of rural generalist trainees.

"At Ayr Hospital all the doctors but one graduated from JCU, and all of them have trained up here, with a few stints in other places."

The scope of practice and continuity of care he can offer his patients as a rural GP has been a major draw card.

"There are lots of little moments when you get to follow patients. Where you may have started their antenatal care, assist in their caesarean and see them through postnatal.

"Or you might do a skin check on someone and take them through their melanoma journey. You're then doing their skin checks three to six months after you have cleared them of cancer. It's that continuation where you get to see them as the whole person."

"When I worked in tertiary hospitals you might see someone for a moment, or you might see them in that acute admission but you never see them again, you never know what happens to them."

Even if a doctor doesn't plan to settle in the regions long term, Dr McLaughlin believes rural and remote training is highly beneficial.

"It makes you a better doctor. You are very aware of those accidents and mistakes you make, you can't hide from them. You have to learn from them because they are facing you at the shops or the markets or the local club, so you can't run away.

As for the lifestyle for doctors in the regions, Dr McLaughlin says it's second to none

"I did my advanced skill in Brisbane and I probably wasted about an hour and a half on the commute each day. Here I live across the road from the hospital so I've got a lot of extra time. I've got into gardening and I now grow my own fruit and vegetables.

"The beach is only 15 minutes away so you can take the dog down and throw the Frisbee around and there are a lot of opportunities to go fishing and hiking as well. It's great." "The best thing I ever did was decide to go rural. I think I am going to have a much better lifestyle. I am well supported. I was able to gain a lot more experience in clinical skills earlier on. Rural based senior doctors are so supportive and such good mentors."

Dr Skye Nissen JCU GP Registrar, Bowen Hospital

GP training in a Cyclone

In the wake of Cyclone Debbie, Dr Skye Nissen has reflected on the vital role she played in assisting the community.

Dr Nissen is a JCU GP registrar who currently splits her time between Bowen Hospital and Whitsunday Family Practice.

During the aftermath of the 2017 cyclone, Dr Nissen jumped to action to assist at the Proserpine Hospital and local clinic.

"I'm from Cairns so I'm used to cyclones, but cyclone Debbie was just something else. It went for so long, it was so destructive," she said.

On the day following the cyclone, Dr Nissen was unable to access the Proserpine Hospital due to floodwaters, so worked in a makeshift emergency department set up at a local GP Practice.

"We had compound fractures, appendicitis – all these people couldn't get to the hospital."

When the floodwaters receded, Dr Nissen drove to the hospital to relieve the doctors who had been working non-stop for several days.

"The scene I walked into at the hospital after the cyclone was like a war zone. The hospital was half in the dark, there were people on the floor. I walked past one man in a chair unconscious having an anaphylactic episode, so we got him on the ground and gave him adrenaline. It was just crazy.

"That was the first real mass casualty event that I've had. It was one of the highest volume of patients I've had to manage, and my training meant that I was ready to deal with it all."

JCU Medical Educator Dr Ciara Ross said JCU's GP training program along with practical experience gives registrars the skills they need to respond in a disaster. "A lot of the training JCU registrars are given is centered around rural, remote medicine and a large component of that is dealing with emergency situations.

"One of the good things about their training posts is that they are assigned to very experienced supervisors who have been working in these rural, remote areas for a very long time.

"This means they are very familiar with dealing with emergency situations, maybe in a resource poor environment, away from a tertiary centre."

Dr Nissen's career goal is to become a hospital-based generalist in a rural hospital, and says it was her rural placements during medical school that inspired her to go rural.

"The best thing I ever did was decide to go rural. I think I am going to have a much better lifestyle. I am well supported. I was able to gain a lot more experience in clinical skills earlier on. Rural based senior doctors are so supportive and such good mentors."

Dr Nissen says she also enjoys being part of a community.

"It's great having that engagement with the community, and seeing your patients out and about."

"We get lots of support from JCU to do workshops up in Cairns and other areas. We get a supervisor provided through JCU, the medical practice and the hospital as well. So they go through different case studies with us, any questions we have about any real life patients we are having dramas with and training towards our exams. I would love to stay in Biloela and keep the training pathway going that way."

Dr Angela Barrie JCU GP Registrar, Biloela

Building family and birthing babies in Biloela

As a patient, do you ever reflect on your medical treatment and appreciate all the times you've see the same doctor? Whether it be for a prescription, serious illness or injury or even the birth of your child. Your doctor becomes an important part of your health journey and your family life.

But have you ever stopped to consider how the doctor feels about the time you spend together?

For Dr Angela Barrie, the special relationships built with patients through her practice are what drive her love for her job, in the small rural community of Biloela.

Dr Barrie splits her time between her Senior Medical Officer duties at the local hospital and General Practice registrar training at the medical centre.

"I really like working at the hospital and being able to see patients in a more acute setting. Whether it's coming in on call over night to see someone with chest pain, then having them transferred out and being able to see them again in a couple of weeks' time in the GP practice to follow up how they've gone, what's happened and what their ongoing treatment is," she said. "That's been really nice and a really different change to what I used to do back in the bigger centres. To be doing all three aspects."

A north Queensland girl through and through, Dr Barrie studied Medicine at James Cook University, trained in Mackay hospitals and then sought out a rural opportunity to test herself.

"I'm from Mackay so I've always been in that regional area. I did my obstetrics advanced skill and once I completed that, I looked for jobs that were around. Biloela seemed like an interesting place for an adventure."

Dr Barrie moved her young family to the central Queensland town in 2018 to take up a JCU GP training post. She's become a real asset to the community as a Rural Generalist with skills in obstetrics. She said a highlight so far has been helping local mums through their pregnancies and births. "I love doing rural obstetrics. I see the ladies out in the community, then at the hospital and then delivering the babies and seeing them back in the community again."

Working in a rural setting has enabled Dr Barrie to gain invaluable experience.

"I've made more decision on my own. Been more independent doing caesarean sections myself, with the help of other obstetric staff, but I'm in that role where I'm leading it and just managing those situations."

Dr Barrie reflected on the support she's had from the local staff and GP program, since working in Biloela

"We get lots of support from JCU to do workshops up in Cairns and other areas. We get a supervisor provided through JCU, the medical practice and the hospital as well. So they go through different case studies with us, any questions we have about any real life patients we are having dramas with and training towards our exams. I would love to stay in Biloela and keep the training pathway going that way."

Outside of the clinic Dr Barrie is a busy wife and mum of two. She said she's been lucky to have the support of her family to chase a career in rural medicine.

"I'm fortunate enough to have my husband as a stay at home dad at the moment. So that's been nice to have that balance of coming back to work fulltime," she said. "We've found Biloela a great little town to have a young family in. It's close enough to everything and we have enough to do here as well. Really nice people and everyone is really friendly and welcoming. We're pretty set up and happy to continue.

"One of the GPs in the community has actually been here for about 50 years. So he's delivered most of the adults here and their kids, and he's even moved onto grandkids as well. It's really nice. Maybe I'll be that doctor." She laughed.

"I think stepping up to that next level of being involved in the community as well and being that primary care doctor, but also that emergency care doctor, that ward doctor, that mental health doctor really forces you to use the skills and knowledge you have across all areas of medicine. I think that's a major benefit of being a generalist in a community like Cooktown."

Dr Ebonney van der Meer JCU GP Registrar, Cooktown

DGUL

Living the dream and making a difference in Cooktown

When Dr Ebonney van der Meer set her sights on moving to Cooktown she went with a mission in mind – to make a difference in the community.

The James Cook University (JCU) General Practice (GP) registrar was no stranger to the Cape York town, after falling in love with its vibrant lifestyle and training environment while on a medical school placement with JCU.

"I had a fantastic time. I met Dr Coventry the Med Super here, I met Dr Hill and the other local GP's. I was really attracted to the location and the varied and challenging medicine. I felt like I had to come back. So I worked really hard to complete my core clinical training, completed my advanced skill in Mental Health and here we are."

Before moving her young family to Cooktown in mid 2017, Dr van der Meer hoped to use her advanced skill to build on and expand the delivery of services in the region.

Fast forward to 2019 and she has done just that.

"We have been able to set up clinics in Hopevale, Wujul Wujul, Laura and Cooktown for GP mental health treatment and commenced local prescribing for patients on the Queensland Opiate Substitute Program. Working closely with the other medical, mental health and addictions services in the region we are seeing tangible increases in the delivery of primary mental health care provided locally which is great. The service has attracted broad support locally, including from the Northern Qld PHN who is helping develop the model and make it sustainable long term."

She has also focused on educating staff to upskill the wider health team.

"I'm working with the hospital and clinic staff, delivering dedicated education sessions and 'on the run' advice so they feel more comfortable with mental health, alcohol and other drug related presentations, with and additional focus on staff wellbeing and selfcare."

Dr van deer Meer's achievements have been intermingled with her busy work and family life. But she says the experience is making her the best possible rural generalist she can be. "On any given shift, we manage a variety of primary care, chronic disease, emergency presentations and everything in between. You never know what is going to walk through the door. You have to be confident in your clinical and consultation skills and work together with your team."

"I think stepping up to that next level of being involved in the community as well and being that primary care doctor, but also that emergency care doctor, that ward doctor, that mental health doctor really forces you to use the skills and knowledge you have across all areas of medicine. I think that's a major benefit of being a generalist in a community like Cooktown."

She said the support staff and other health professionals she has come to work with have made her experience all the richer.

"On an evening shift in the emergency department, there might only be yourself and one or two other nursing staff. You rely on those staff to help you do the things you need to treat the patient. Relationships build quickly. I am constantly in awe of the exceptional skills of our staff and I know they have my back. That kind of support as a team is invaluable."

Since moving to Cooktown, Dr van deer Meer and her husband have welcomed their second child, bought a house and immersed themselves in the far north Queensland lifestyle.

"Weekends are the best time for us. We spend that time hiking, camping, going to the beach, playing down at the water park, going fishing, exploring and doing all the things the Cooktown region has to offer. It's an amazing place with so much natural beauty and a rich cultural history."

Reflecting on her time so far, Dr van deer Meer said there is one moment that made her realise Cooktown was the place for her.

"Whilst looking after a very unwell patient in the early hours of the morning I was asked by the RFDS retrieval doctor if I'd rather be anywhere else at that moment...I reflected a while and thought... well actually no... I would not want to be anywhere else in the world, this is exactly where I'm meant to be."

"There's a whole swag of people who were necessary for this child to survive and thrive and have a normal life again. But the reality is, if there wasn't someone who could stick a tube down his throat, it didn't matter how many other specialists were available in Brisbane, the child was never going to get there."

Dr Louis Peachey Senior Medical Officer, Atherton Hospital JCU GP Senior Fellow _____



Imagine this scenario... You're living in remote western Queensland. Your young son has an accident causing extensive burns to his upper body, face and throat. He's in critical need of medical attention. You are thousands of kilometers away from the nearest city burns unit.... What happens next is entirely dependent on the abilities of your local rural doctors and health professionals.

Dr Louis Peachey, Senior Medical Officer at Atherton District Hospital, knows all too well the importance of a rural doctor in such a situation.

Dr Peachey has spent 26 years honing his skills as a GP, Rural Generalist and Anaesthetist to provide the best heath care he can in times of need.

Those skills were put to the test in that exact situation while he was working in a remote western Queensland town.

"I had been called by the guys in the Emergency Department to help with an intubation. It was a four year old child who had severe burns that virtually incinerated everything around his chest, neck and head. His airway was also badly burned, which meant we were going to have to secure his airway," said Dr Peachey.

With the nearest burns unit 1600km away in Brisbane and a two-part flight standing between him and specialist attention, Dr Peachey knew he had to act quickly to stabilize the boy for the journey.

"I was doing a nasal intubation. I went in and it really was the thing of nightmares. I had a look and everything down the back of the throat was just swollen and blistered and all the usual identifiable structures just weren't there."

Dr Peachey drew on his years of experience in paediatric dental anaesthetics to overcome the obstacles he was faced with.

"I had done this sort of an intubation at least 500 times. Even though I couldn't see the structures I knew where things should be. I was able to grab the Magill's Forceps and pop the tube forward, give it a little twizzle around the nose and it felt like it dropped into place. We connected it up to the circuit and I could see carbon dioxide coming back and forth, so we knew we were certainly in the lungs and we had this child's airways secured."

Dr Peachey said it was going to be a long road to recovery for the boy. A road that he and the rural emergency department played a big role in.

"This child absolutely needed a very good paediatric intensivist,

Lifesaving skills for the bush

absolutely needed very good paediatric surgeon, needed a whole bunch of very good paediatric burns nurses, and needed a whole bunch of paediatric occupational therapists and physio therapists. There's a whole swag of people who were necessary for this child to survive and thrive and have a normal life again," he said.

"But the reality is, if there wasn't someone who could stick a tube down his throat, it didn't matter how many other specialists were available in Brisbane, the child was never going to get there."

The Dean of James Cook University's College of Medicine and Dentistry, Professor Richard Murray, said Dr Peachey is a prime example of how the right training and experience can make a real impact on the lives of those in regional, rural and remote communities.

He said Rural Generalist, local GPs, nurses and other rural health professionals are vital when things go wrong in the bush.

"Rural communities suffer poorer health outcomes than their city counterparts but have less access to healthcare. They need high quality, affordable healthcare as close to home as possible.

"That means training local GPs and 'Rural Generalists' as well as other medical specialists who are attracted to the regional and remote work and lifestyle."

Professor Murray said attracting and training more doctors like Louis Peachey requires a shift in focus and investment.

"Universities must train fit-for-purpose medical professionals who are invested in regional, rural and remote communities. Not just mass produce doctors for cities.

"It's also vital that the government invest in joined-up regionally-based medical training," Professor Murray said.

This is something James Cook University has developed over the nearly 20 years of its medical program.

Reflecting on the intubation of the four year old, Dr Peachey said it was moments like that he was very, very grateful for his skill set.

"If I didn't have those skills this little life was just going to die and we were too far away for anyone else to help."

"I think for me and for a lot of people who train regionally, you choose it because you want a broader breadth of experience. You want to be able to engage more with the community, you want to get to know the clinicians in the area so that you can call on them and ask for advice."

Dr Ian Anderson JCU GP Registrar, Cairns



Specialising in sexual health in regional and rural communities was always on the cards for Canadian doctor, Ian Anderson.

His journey to become a General Practitioner (GP) started while working in the public health sector in Vancouver.

"I had the chance to interact with the stakeholders in the sexual health space, not only in Vancouver but in regional parts of British Columbia as well. There is an imperative need for clinicians who understand the issues at both the clinical and public health levels, especially the subspecialty of sexual health and HIV."

The experience set him on a trajectory that found him studying medicine in Australia.

After interning in Brisbane and Hervey Bay, Dr Anderson made the move north to enrol in James Cook University's (JCU) GP training program and take up a Principal House Officer position at Cairns Sexual Health.

"I knew that I wanted to be a GP but had an interest in HIV and sexual health; the job was really a perfect fit for me. I was motivated to learn about the clinical side of HIV and sexual health and know that I could take that forward into my GP training."

Dr Anderson has gone from strength to strength during his year of specialisation. He said the opportunities afforded to doctors in regional areas are a major drawcard.

"I think for me and for a lot of people who train regionally, you choose it because you want a broader breadth of experience. You want to be able to engage more with the community, you want to get to know the clinicians in the area so that you can call on them and ask for advice.

"Professionally it's been wonderful being here and able to explore this specialty; it's a fairly niche opportunity. During the year, I've had the chance to engage with Hepatitis C programs in the community with needle and syringe programs and in the custodial setting. Through this work, I've been called upon by community members to give talks and do workshops. I've loved that as part of my job as I can have a hand in creating a vibrant community and positive health workforce here.

"I know this wouldn't be the same in a bigger centre. There would be many more people in my position and we would have to share these opportunities."

Landing smack bang in the middle of a syphilis epidemic, Dr Anderson said he feels like he can make a real difference.

Sexual health in the sunshine

"That's been interesting to be in this clinic at this moment in time. Our clinic is involved in the region through outreach projects, upskilling community members, and engaging nurses and doctors. It's been quite exciting to be involved."

"I've really lucked out being here. Because we are the only public sexual health clinic in the region, so we get the chance to see a phenomenal diversity of people and presentations. Being able to learn from that has been great and something that I definitely wouldn't have gotten in a bigger centre."

In the coming years Dr Anderson will stay in the Cairns region to begin the GP component of his training in Innisfail and Tully. Dr Anderson said he is grateful for the mentorship and training he's received so far from Queensland Health and JCU.

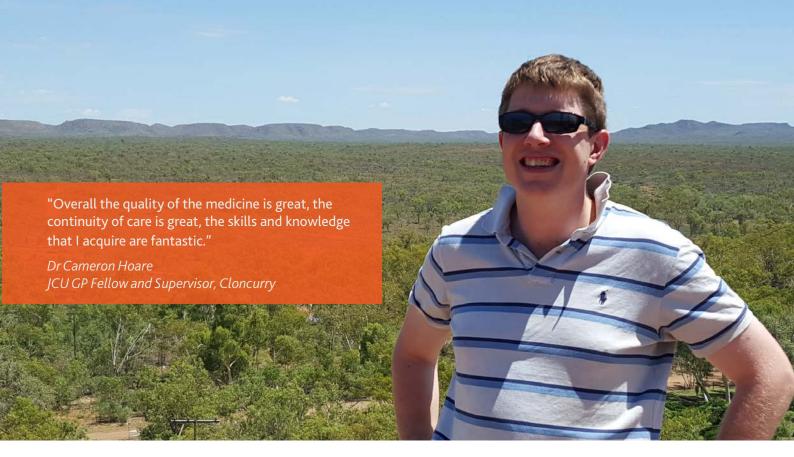
"I've met some absolutely fantastic clinicians here. The medical staff are just wonderful. They have been really exciting to learn from and watch their process, setting what I need to be learning throughout the year and what I can take into my GP training. I know those relationships will continue beyond this year and I will be able to, both professionally and personally, call on them if I need some support.

"I get a lot of external support from the GP training provider (JCU) as well. I've been well linked with the people at JCU who have helped in setting the path and identifying which check marks I have to meet throughout the year and making sure I am reaching these goals."

In his down time Dr Anderson enjoys immersing himself in all Cairns has to offer.

"Evenings and weekends, I've tried to explore the area as much as possible. You go a little bit up the coast and you get just spectacular beaches. Port Douglas is up there and some really interesting little places you can spend a day at. There's the rainforest a bit further up, so I really like doing some longer hikes during the day. Then summer hits and you want to be more in the water. I've done scuba diving and some of the other touristy things around Cairns. I'm also involved in the local production of Wicked. I've loved that because I've been able to meeting people from outside the health sector; something I haven't been able to do with a hospital roster!"

"On the drive to work every day I feel like I'm in awe of where I'm living. You've got mountains on one side and the ocean on the other side and in between you have the cane fields. It's harvest season right now so you get that whiff of that sweet smell in the air and it's magical... I love it."



GP registrar set for life in the bush

Dr Cameron Hoare is dedicated to providing good primary and hospital care to the town he now calls home.

The Cardwell raised doctor decided on a tree change after his fourth year medical placement in Cloncurry, at the Flinders Medical Centre.

He said it was his JCU medical degree that set him on his rural career path.

"When I started doing medicine I really enjoyed emergency medicine. One of my first elective placements was with the Queensland Ambulance Service in Townsville.

"I never really liked cities, but I liked the excitement of some emergency medicine and I liked pretty much everything (about medicine)," he said.

"Then I found a place (Cloncurry) where I could do proper General Practice and still do emergency medicine."

In Cloncurry, Dr Hoare met mentors Dr Bryan Conner, Dr Christopher Appleby and Dr Julie Verran at the Flinders Medical Centre. He said they showed him what General Practice was about.

"You look after patients in hospitals, you deal with a resuscitation or two, you put people's bones back into place when they fall off a horse and (look after people in) palliative care, you do pretty much everything. All the proper general parts of General Practice were done in Cloncurry," he said.

After his first placement as a medical student in the rural town, Dr Hoare returned in his sixth year of medicine and then again later to undertake GP training with JCU.

He applauded the GP training program, saying it strongly encouraged doctors to take up rural and remote posts.

"JCU definitely have an advantage there that they are providing

registrar training and trying to support registrars training out west, which is actually a great success."

Now a Fellow of the Royal Australian College of General Practitioners, Dr Hoare has his sights firmly set on a long and rewarding career in the bush.

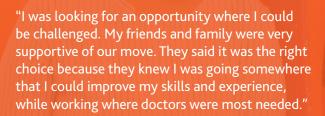
"Ideally I would probably want to end up being the practice owner of Flinders Medical Centre and the Medical Superintendent of Cloncurry and Julia Creek Hospitals at the same time. But I have to get a few more years of experience before I can do that.

"Overall the quality of the medicine is great, the continuity of care is great, the skills and knowledge that I acquire are fantastic."

Dr Hoare said he was grateful for the guidance of his mentors including Dr Leonie Fromberg.

"She started as a registrar in Cloncurry about six or seven years ago and is now one of the qualified fellowed GPs in Cloncurry. She has been a great support and a role model," he said. "Bryan Conner is probably the best mentor any registrar could ask for."

"The other person I have to thank is my boyfriend Craig. When we first started dating I told him my future is probably going to be out bush somewhere. He took the brave step of following me to Cloncurry, where he had never been before or had any friends or family or connections. He's been a really good support for me out here."



Dr Vijay Akkineni JCU GP Registrar, Blackall



Family time in the bush - just what the doctor ordered

From a bustling Emergency Department in an Adelaide Hospital to the challenges of rural General Practice, Dr Vijay Akkineni has been pleasantly surprised with what he has found in central western Queensland.

After 10 years working in Acute Emergency Medicine in South Australia, the now JCU GP registrar made the move with his young family to take on a new challenge.

Dr Akkineni said he felt like something was missing in his life.

"After I got married, and with the shift work in acute care, I realised I was missing my family time," he said. "I wanted to work in a place where I could actually utilise my acute medical skills along with general practice."

Dr Akkineni set his sights on the small rural community of Blackall, where he found so much more than he was bargaining for.

"I was looking for an opportunity where I could be challenged. My friends and family were very supportive of our move. They said it was the right choice because they knew I was going somewhere that I could improve my skills and experience, while working where doctors were most needed," he said.

"In the city if I couldn't turn up for work one day there would be 10 other doctors on the floor who could manage my cases. Whereas here, I am the only doctor on call. So it makes a lot of difference and the job satisfaction is more than I was expecting, which is working out very well."

As one of only a few doctors in town, Dr Akkineni relishes the responsibility of providing the best care possible to his community. He said it is the continuity of care that makes his job so special.

"I treat patients in the hospital then send them back into the town where I see them again in the GP clinic. That to me is job satisfaction. I've managed to make a difference in that person's life," he said.

"When I worked in acute care there was always help available, you press a button and then give the patient to someone else. But here, until the patient gets on the plane and leaves Blackall, they're my responsibility. I need to make sure I look after the patient and advocate for them. Whenever I communicate with the other teams they know the patient has a second voice who is pushing for a particular treatment." Dr Akkineni said the support provided by JCU GP training program has helped to ease his transition into rural practice.

"I've never felt like I'm in a very remote area because JCU has been fantastic in providing support with the workshops. So far this year I've attended two workshops in Cairns and it's worked out really well. It's actually good family time as well. With the last workshop we decided to turn the trip into a family holiday. They came along to Cairns and had their own fun while I attended training."

While the program staff and educators have made a difference, Dr Akkineni said his supervisor in Blackall has been an amazing support person for him.

"He's got vast experience so that gives me a confidence that yes I am alone today on my shift, but I've got a good backup. We have one hour sessions every week which are organised by JCU. We catch up and discuss the difficult cases and any professional development. I find that one hour very valuable because you don't always get time in your busy schedule to stop and take stock."

Outside of the clinic Dr Akkineni said there is plenty of time to take in the local sites with his family.

"When I finish my work it's a two minute drive home. If I'm not on call that's my free time. I play with my daughter in the park and take her to the pool on weekends. That is what we were missing all of those years in Adelaide."

Another pastime Dr Akkineni likes to fit into his day is a leisurely walk around town so he can see his patients in the community.

"You just catch up with them and you see where you've made a difference. You don't have to disclose what it is you've helped them with, but when you see a person you know, and they know, that you have done something good for them. That's when they come in (to the clinic) and start actually appreciating that this is a good skilled doctor in the town."

Dr Akkineni said that recognition has had a flow on effect, improving the health of the people in Blackall.

"The best thing is now you can do audits on the patient data and see that there has been improvements in immunisation rates here. We are doing the care plans for chronic conditions. Whenever you see that number going up, you know you are making a difference."



Community at the heart of GP training in Roma

There is so much more to a rural community than living in the middle of the bush hundreds, even thousands of kilometres away from the nearest city.

It's the people, experiences and support networks that make rural communities so special.

Roma GP and James Cook University (JCU) Medical Educator, Dr Rosie Geraghty, experienced that firsthand when she was placed in the rural town 30 years ago, as a bonded medical student.

"I'd never been west of Toowoomba so it was a new experience for me and quite scary coming to a small country town," said Dr Geraghty. "It opened my eyes to rural medicine, which I loved. It helped me to meet my husband. We left the area for a couple of years and then came back and I went into General Practice. I knew if I wanted to live in Roma I needed to be a rural GP.... And here I am 27 years later."

Dr Geraghty said it was the people that bought her back to Roma.

"We are part of a community and we get involved in that community. Being a doctor here is very special. They look after you and they appreciate you being here. That's what keeps me going.

For the past 15 years Dr Geraghty has trained rural doctors. She said she took on the role initially out of a need to attract skilled doctors to stay in the region.

"At first I became involved with the hospital doctors training. They would come to me for their GP time. Then three years ago (2016) I was approached by JCU to become a medical educator and I've been doing that ever since."

Dr Geraghty said some of the GP registrars she's trained over the years are just as nervous as she was when she started her time in Roma.

"Many of the registrars are very green. They haven't done much in the way of General Practice," she said. "I think they feel supported in the environment. Within the practice there's several senior doctors who can supervise. There's often one-on-one teaching and people love coming here. "By the time they leave, which is usually 18 months or two years down the track, they're much more confident and feel comfortable to be able to deal with anything that may confront them. We see that happen quite a lot."

The South West is the only region in JCU's training area that has a 100 per cent retention of GP registrars from 2018 to 2019. Dr Geraghty attributes that trend to the excellent support for registrars.

"My current registrar came with the idea of just staying 12 months. He was promised a position at the Sunshine Coast. So he was just coming, doing his time and then moving on. He's enjoyed it so much he's now staying another 12 months, so that's really encouraging I think."

The continuity of care is another aspect of rural medicine that keeps Dr Geraghty and her registrars coming back day-in, day-out.

"The great thing about working here is dealing with people from when they're babies through until when they're elderly," she said. "You do all sorts of things from antenatal care to neonatal care, through to procedures, skin excisions and geriatric and palliative care. So you see the whole spectrum of medicine."

Dr Geraghty spoke fondly of her oldest patient, who is 109.

"He is extremely bright. He's written a couple of books and he can tell you the history of Roma.

"He's counting down all those ones who've passed on," she laughed. "He comes and tells me 'so and so has passed away' so that's moved him up the list to being the oldest man in Australia!"

Dr Geraghty said registrars need to immerse themselves in the community to get the most out of training in the South West.

"I think we provide all-round education for people. You need to be part of that community and you'll be rewarded with patient feedback and patient loyalty," she said. "If you're the person who wants to make a difference to a rural community, this would be the post for you to come and do your training in." "I really can't imagine living anywhere else at the moment. I'm the kind of person who always strives to make the most of whatever they're doing. I really want to use my teaching and supervisory roles to make a difference. I think if, I can influence even just a handful of doctors in my area for the better, then I've achieved my goal,"

Dr Amanda Kasper JCU GP Medical Educator, Bundaberg

Medical Educator's mission to help Bundaberg

James Cook University's (JCU) GP Medical Educator is on a mission to train quality doctors for Bundaberg. Dr Amanda Kasper said, the community needs an injection of young GPs.

"We need to have young people who are trained in Bundy, who know the locals, know the community and want to stay. I don't want to see permanent positions filled with temporary doctors, our community deserves continuity of care with long-term family doctors. That is really the heart and soul of general practice," she said.

The GP's who have served the Bundaberg community for years are now retiring and there is a need for young doctors to fill these permanent roles, Dr Kasper said.

"At Linden [Medical Centre] where I'm working, we've had two full time GPs retire at the beginning of the year which, is a big loss for a practice and its patients. Similar scenarios are happening across the board in Bundaberg," she said.

"I want to be part of a quality workforce that represent the next generation of GP's in Bundaberg".

Her plan to create change is to develop strong working relationships between JCU and GP's, in order to bridge the gaps between the old and new staff.

Amanda said, she is up for the challenge and ready to continue in the footsteps of past and present experienced, exemplary doctors and educators, in the local Bundaberg community.

She said, "Although, I had big shoes to fill, I've been loving it. My big driving force is that I really want to help create and support good local doctors. Fortunately, I'm in a position now where I have the opportunity to do that."

Amanda completed her JCU Bachelor of Medicine, Bachelor of Surgery (MBBS) in 2006 and worked in various rural locations across Australia before, settling in Bundaberg.

"I really liked Bundaberg and I met my husband here. We both decided that it was time to start a family and begin general practice training. I was fortunate to receive excellent training by Bundaberg doctors," she said.

When she completed her GP training with JCU, Amanda became the second female GP specialist to work at Linden Medical Centre.

"I went straight into private practice after I completed my GP training and I found a practice that I love in Bundaberg. I work mainly with older doctors, majority of them male and one other female doctor. I could see that there was a need for another female on the team and I wanted to fill that gap," she said.

In coordination with her work at the private practice, Amanda works as a Senior Medical Officer (SMO) at the Bundaberg Base Hospital.

She said, "I work three shifts a fortnight at the hospital, to keep my acute skills going. The role in the Urgent Care Clinic, is more GP oriented. I supervise the non-urgent emergency side of the hospital which, works really well. When I am on shift I mentor the junior doctors and it also provides an opportunity to bridge gaps between the hospital and private GP systems".

Amanda credits her career opportunities to living and working in a rural location.

She said, "I don't think if I were living in Brisbane, I'd have the opportunity to be doing the variety of work that I'm doing at the moment. I have even been able to join the local symphony orchestra!"

"Bundaberg has huge potential, I think it's really undiscovered and beautiful. It's a great place to raise the kids, there are good schools and everything is close by."

Amanda said, she plans on continuing her practice in Bundaberg.

"I really can't imagine living anywhere else at the moment. I'm the kind of person who always strives to make the most of whatever they're doing. I really want to use my teaching and supervisory roles to make a difference. I think if, I can influence even just a handful of doctors in my area for the better, then I've achieved my goal," she said.



A true sea change

For Dr Natalie Fonda, one of the hardest parts of being a paramedic was having to hand over her patients.

"I loved emergency medicine, but I didn't enjoy not having continuity of care," Dr Fonda said.

"I didn't like building a relationship with my patients, being in their homes, seeing their family photos and learning everything about them, and then handing them over and never seeing them again."

After six years as an advanced life support paramedic with the Victorian Ambulance Service Dr Fonda decided if she wanted to hold on to her patients, she would have to follow in her family's footsteps, study medicine and become a GP.

"My dad, brother and sister are all doctors, and most of them are GPs. I decided to become the fourth Dr Fonda. It was a bit of a no brainer that I would specialise in General Practice."

After completing her medical degree Dr Fonda moved to Sunshine Coast where she trained as a GP through the James Cook University GP training program.

"It gives you the best of both worlds. You still get the emergency presentations to the GP clinic. Plenty of people walk in unwell and you have to look after them. That appeals to the paramedic in me. I also get that continuity of care."

JCU GP Training also opened the former Melbournians eyes to the health issues facing regional, rural and remote Queensland.

"We travelled to registrar workshops all around the north and west of the state as well. It was not just about training on the Sunshine Coast. It's about understanding the needs of regional, rural and remote Queensland."

Dr Fonda said the program has also enabled her to pursue professional development and study for a graduate certificate in sexual health. "For me being supported to get a sub-specialty in an area of interest is just fantastic."

Having Fellowed as a GP, Dr Fonda is now supervising registrars and finding fulfilment in the community aspect of general practice.

"I get to see my patients again and follow up. I get to look after their kids, their mums, their neighbours. It's all about community, which I love."

And it's a community and a lifestyle she admits she'd never dreamt of while living and working in inner-city Melbourne.

"We're avid outdoors people. We ride our bikes to work and ride on the weekends as well. We live 200 metres from the beach and get there every day. I kayak and stand-up paddleboard. We also love hiking and use the weekends to explore the amazing national parks which are plentiful around here.

"Before we came here, I'd never had any intention of moving to Queensland... but we love it here and don't have any plans to leave."

"Every single morning I puff and pant to get to the top of the hill but I get there and I get these glimpses of the ocean looking down over Alexandra beach and it just blows me away, and after three years of living there riding the same route I'm still blown away, every single day. I'm lucky."

