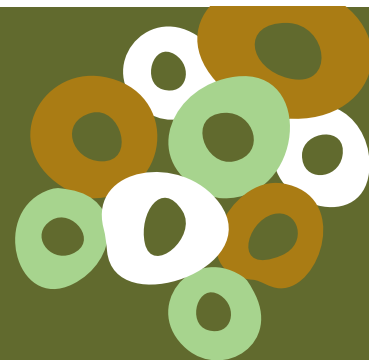


RAHC Update

REMOTE AREA HEALTH CORPS

Issue 8 - June 2010 | Funded by the Australian Government



MyRAHCExperience

Lucy Ledger | Occupational Therapist

Western Australian Occupational Therapist Lucy Ledger (pictured right on the Katherine River) has completed three placements with RAHC in Katherine since December 2009. Lucy enjoyed her experience so much that she is now a fulltime employee at the NT Department of Health and Families clinic in Katherine. Lucy shares her RAHC experience with us here:

Q1. Why did you first decide to get involved with RAHC? For a change from working in the city. I've always wanted to do rural/remote work and work with Indigenous communities - I thought it was really important to work in my own "backyard" before embarking to work overseas in developing countries, because the circumstances of many Indigenous people living in remote communities are very similar to developing countries.

Q2. What impact do you believe RAHC is having on service delivery in the NT? I believe RAHC is filling a big gap in service provision that is created by a high turnover rate in medical and allied health staff in remote communities - this will help meet the day to day health needs of people living in indigenous communities.

Q3. How will your experience with RAHC contribute to your career and professional development? My career will definitely benefit in the long term, and I can already see the short-term benefits in terms of the great depth of knowledge I've gained in clinical and cultural domains.

Q4. What was the best / most-rewarding moment during the placement? Becoming permanently employed!! And facilitating an elderly client with dementia being able to safely live at home rather than being placed in a nursing home.

Q5. Did you gain any new skills during your placement? I've learnt numerous skills since starting my first placement in December that will place me in very good stead for my future as an Occupational Therapist. I've had clients ranging from 1 year old to 96 years old which has increased my skills in paediatric occupational therapy and service provision for elderly clients.

Q6. How has this impacted you in the short and long term? In the short-term I have decided to move to the Northern Territory to continue working in the Katherine region. In the long term I believe my career will revolve a lot more around public health and community development as I've seen how these areas impact every aspect of personal health.



Good Luck Lucy!

RAHC Launches 2 New Online Clinical Training Modules

RAHC has launched another two online clinical training modules as part of *The RAHC Introduction to Remote Health Practice (Online)* program. The two new modules are: Major Incident Management and Managing Medical Emergencies.

The Major Incident Management module details the skills required by a health professional to quickly prioritise multiple trauma patients according to their need for further assessment and treatment of their injuries. It also explores the impact of working with multiple casualties in rural and remote parts of the NT where distance, access difficulties, and limited resources mean that emergency responses are often slower and retrieval times longer. The Managing Medical Emergencies module aims to enable health professionals to identify and manage a variety of medical emergencies in the context of working in rural and remote parts of the NT.

These new modules join the Communication and Education, Chronic Disease Management and the Mental Health learning modules that are already available within the RAHC online program. These training modules are available to all health professionals and other interested individuals that register with RAHC.

The RAHC program has been accredited for continuous development points with the RACGP, RCNA and ACRRM. For more information on this program visit us at: rahc.com.au



Get Involved. Visit rahc.com.au



Community Profile

Borroloola NT

Borroloola is a small town located 350 km east of the Daly Waters turnoff and south of the Gulf of Carpentaria; it is the centre of the Yanyuwa Aboriginal people and the cattle stations of the surrounding area. Considered a lawless outpost when first gazetted as a township in 1885, Borroloola is almost as famous for its unique characters as it is for its fishing.

Borroloola is a thriving community that is largely based around tourism. Borroloola is a town with a predominantly Aboriginal population. There are a few shops, a lively pub and the fishing in the Macarthur River is considered one of the best in the Northern Territory. Each year a competition is held to catch the largest barramundi.

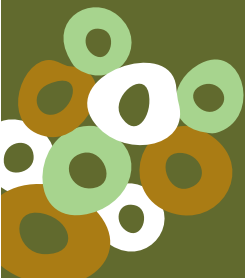
The surroundings of Borroloola are eyecatching with clear rivers and swimming holes at the Wearyan River, Batten Creek and Bone Lagoon. It is not advisable to swim in the Macarthur River as large "salties" (crocodiles) are around. Borroloola can be accessed via the Carpentaria Highway, which departs Stuart Highway at Daly Waters. It takes about 6-7 hours driving from Katherine to Borroloola.

The community health centre, managed by the NT Government Department of Health and Families, provides an essential primary health care service to the community. There are four nurses and six Aboriginal Health Workers on staff to service the needs of the locals and visitors to the community. The health centre also provides services for up to 30 outstations, communities and cattle stations in the area.

Sources:
www.barklytourism.com.au
www.ntgpe.org/communityprofiles/remotecentres/borroloola



Borroloola Health Centre



Urgent positions to be filled

RAHC has opportunities for health professionals to work in communities throughout the NT. Some of the more urgent needs at the time of printing this newsletter are below:

General Practitioners x 2

Tennant Creek

A female and a male GP are required to work within the respective women & children's and men's health teams, at the Anyinginyi Health Centre in Tennant Creek. GPs must be happy to work within a team and happy to work mobile.

Experience with population health screening programs is desirable. \$5000 per week plus Super. Accommodation is provided.

General Practitioner - Fly in Visit

Alice Springs Area

A GP is required to provide primary healthcare relief work in health centres in remote Indigenous communities in Central Australia. Based in Alice Springs and flying to the communities during the week for visits. Communities include: Epenarra, Kings Canyon, Imanpa, Ti Tree, Alcoota, Harts Range. Accommodation is provided.

Audiologists

Various Locations

Audiologists are required to fill positions in various locations throughout the Northern Territory to assist with hearing programs currently being undertaken in remote communities. Placements are available for 3-12 weeks. Accommodation is provided.

RAHC reaches 450th Placement!

RAHC reached another exciting milestone by facilitating our 450th short-term health professional placement in remote Indigenous communities in the Northern Territory.

As of 4 June 2010, 450 health professionals placements, including 272 registered nurses, 47 general practitioners, 39 allied health and 92 dental health placements have been filled by RAHC.

RAHC has also delivered more than 1500 weeks of service by health professionals to remote communities and is averaging over 4 weeks per placement. Placements filled by returning health professionals on their 2nd or greater RAHC placement contribute to approximately 45% of all placements to date.

RAHC is looking forward to hitting the 500th placement mark during July... watch this space!



Contact RAHC on 1300 MYRAHC
or apply online at rahc.com.au

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